

Africa CDC Epidemic Intelligence Report

Date of Issue: 15 Jul 2025

Active Events

144

New Events reported
in 2025

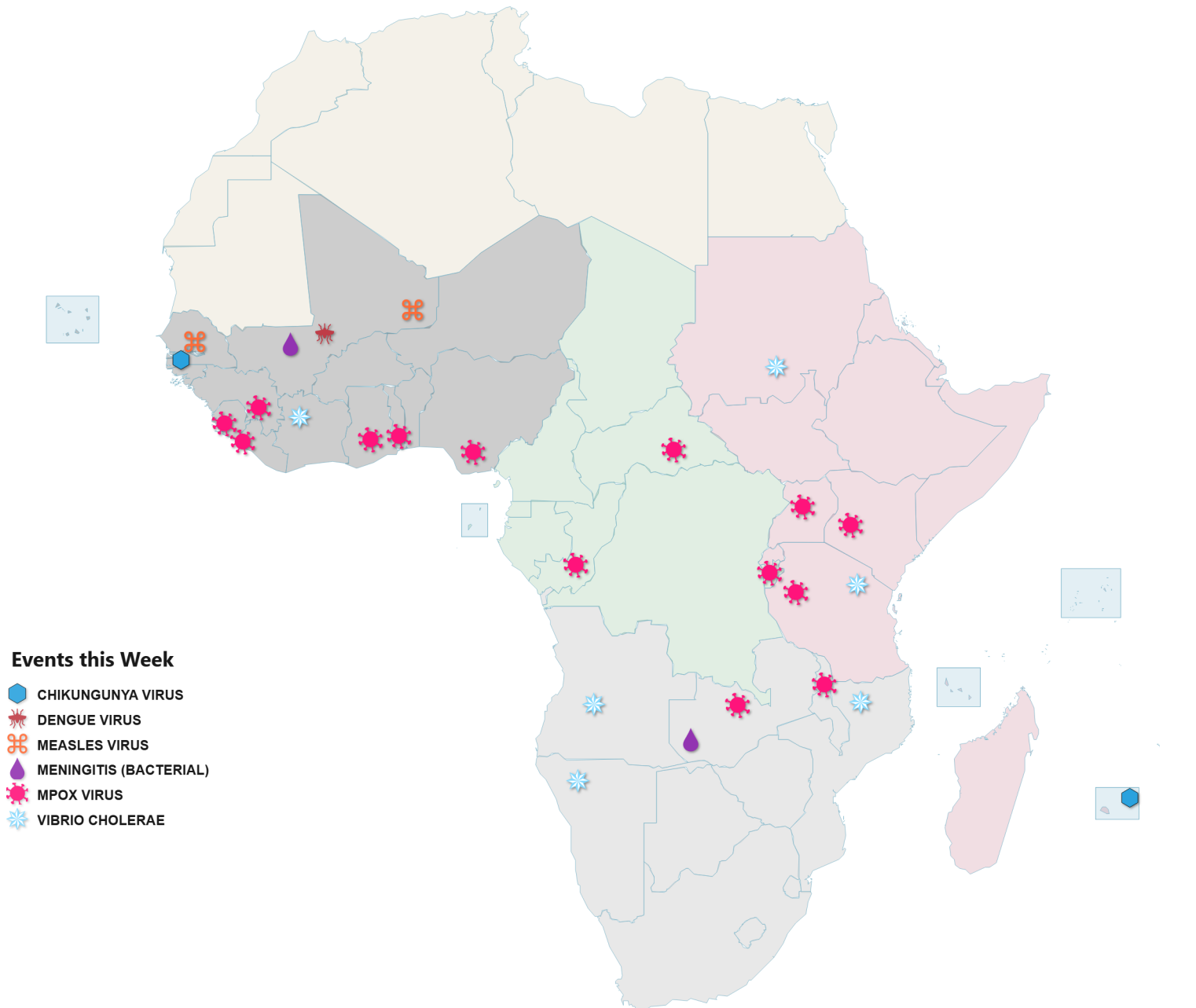
78

Events highlighted
this week

27

New events since
last issue

1





Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the African Union.

































	Risk Level		
	Very High (New)	High (New)	Moderate (New)
Human	0	12 (1)	15
Animal	0	0	0
Environment	0	0	0

Event Summary

New events since last issue

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Type	Suspected	Confirmed	Deaths
 Meningitis (Bacterial)	Zambia	High	N/A		78	5	0

Events Highlighted this week

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Chikungunya virus	Mauritius	Moderate	N/A		0 (0)	0 (0)	1,440 (90)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	7 (1)	0 (0)
 Dengue virus	Mali	Moderate	N/A		1,684 (58)	0 (0)	415 (14)	0 (0)
 Measles virus	Mali	Moderate	N/A		349 (16)	0 (0)	137 (2)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	91 (2)	0 (0)
 Meningitis (Bacterial)	Mali	Moderate	N/A		318 (9)	0 (0)	82 (3)	0 (0)
 Mpox virus	Burundi	High	N/A		3,410 (137)	0 (0)	1,163 (50)	0 (0)
	Central African Republic	High	N/A		360 (4)	0 (0)	16 (1)	3 (0)
	Congo Republic	High	N/A		135 (7)	0 (0)	57 (5)	0 (0)
	Ghana	Moderate	N/A		1,281 (135)	0 (0)	170 (7)	0 (0)
	Guinea	Moderate	N/A		188 (86)	0 (0)	85 (51)	0 (0)
	Kenya	Moderate	N/A		360 (26)	0 (0)	182 (16)	3 (0)
	Liberia	High	N/A		620 (0)	0 (0)	208 (58)	0 (0)
	Malawi	Moderate	N/A		23 (0)	0 (0)	47 (5)	0 (0)
	Nigeria	High	N/A		996 (29)	0 (0)	229 (13)	3 (0)
	Sierra Leone	High	Low		5,728 (149)	0 (0)	4,610 (121)	32 (3)
	Tanzania	High	N/A		355 (22)	0 (0)	88 (5)	0 (0)
	Togo	Moderate	N/A		181 (18)	0 (0)	40 (4)	0 (0)
	Uganda	Moderate	N/A		6,051 (172)	0 (0)	6,051 (172)	37 (0)
	Zambia	Moderate	N/A		623 (54)	0 (0)	152 (7)	3 (0)
 Vibrio cholerae	Angola	Moderate	N/A		27,268 (260)	0 (0)	937 (0)	763 (4)
	Côte d'Ivoire	High	N/A		82 (29)	0 (0)	27 (27)	7 (0)
	Mozambique	High	N/A		0 (0)	0 (0)	3,959 (127)	43 (2)
	Namibia	Moderate	N/A		6 (1)	0 (0)	10 (2)	1 (0)
	Sudan	High	N/A		33,504 (131)	0 (0)	0 (0)	765 (21)
	Tanzania	High	N/A		3,829 (43)	0 (0)	0 (0)	39 (0)

Human Event Updates

Moderate Risk Events

Mpox in Africa

26,610 confirmed human case(s), **79,766** suspected human case(s)
520 human deaths (**CFR: 0.65%**)

Agent/Pathogen	Mpox virus	First Reported	3-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	22 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 79,766 cases have been reported, of which 26,610 (33.36%) laboratory-confirmed have been reported from 22 African Union Member States (AU MS). In addition, a total of 570 deaths (CFR: 0.71%) among suspected cases and 171 deaths [case fatality rate (CFR: 0.64%)] among confirmed cases have been reported from seven countries in Africa. The distribution of cases and deaths by MS is as follows: Angola (4 confirmed cases; 0 deaths), Burundi (1,163; 0), Central African Republic (CAR) (16; 0), Congo (57; 1), Côte d'Ivoire (23; 0), Democratic Republic of Congo (DRC)* (13,394; 519), Ethiopia (26;1), Ghana (170; 0), Guinea (85; 0) Kenya (182; 3), Liberia (208; 0), Malawi (47; 0), Morocco (2; 0), Nigeria (239; 3), Rwanda (40; 0), Sierra Leone (4,610; 32), South Africa (6; 0), South Sudan (17; 0), Tanzania (88; 0), Togo (40; 0), Uganda (6,051; 37), and Zambia (152; 3).

In epidemiological week 27, 14 AU MS: Burundi, CAR, Congo, Guinea, Ghana, Kenya, Liberia, Malawi, Nigeria, Sierra Leone, Tanzania, Togo, Uganda and Zambia reported a total of 975** new mpox cases, with 515 (53.84%) laboratory-confirmed, and three new deaths among confirmed cases.

Burundi: Since the last update (4 July 2025) the Ministry of Health (MoH) reported 137 new cases, of which 50 were laboratory confirmed and no new deaths of mpox from 40 health districts. This is a 43% average increase in the number of confirmed cases in the last four weeks. This year, 3,410 cases, of which 1,163 were laboratory confirmed and no deaths of mpox were reported from 46 of 49 health districts in Burundi. This outbreak started in July 2024. Cumulatively, 9,201 cases, of which 4,309 were laboratory confirmed and one death (CFR: 0.02%) of mpox have been reported from 46 of 49 health districts in Burundi.

CAR: Since the last update (27 June 2025) the MoH reported four new cases of which one was laboratory confirmed and no new deaths of mpox. Since the beginning of this year, 360 cases of which 16 were laboratory confirmed and no death of mpox have been report in CAR. This outbreak started in January 2024. Cumulatively, 873 cases of which 108 were laboratory confirmed and no death of mpox have been reported from CAR.

Congo : Since the last update (13 June 2025), the MoH reported seven new cases, of which five were laboratory-confirmed, no new deaths of mpox from two departments. Since the beginning of this year, 135 cases, of which 57 were laboratory-confirmed, and one death (CFR: 0.74%) of mpox were reported from six of twelve departments in Congo republic. This outbreak started in January 2024. Cumulatively, 420 cases, of which 81 were laboratory-confirmed, and one death (CFR: 0.27%) of mpox have been reported from six of twelve departments in Congo republic.

Ghana: Since the last update (4 July 2025), the Ghana Health Services reported 135 cases of which seven were laboratory confirmed and no deaths of mpox from all 16 regions. This represents a 243% average increase in the number of confirmed cases in the last four weeks. This year, 1,281 cases of which 170 were laboratory-confirmed, and no death of mpox were reported from all 16 regions in Ghana. Since the start of the outbreak in October 2024, a cumulative of 1,709 cases, of which 175 were laboratory-confirmed, and no deaths of mpox have been reported from all the 16 regions in Ghana. Clade II was isolated from sequenced samples.

Guinea: Since the last update (4 July 2025), the MoH reported 86 new cases of which 51 were laboratory confirmed and no new deaths of mpox from multiple locations. This represents a 240% average increase in the number of confirmed cases in the last four weeks. This year, 188 cases of which 58 were laboratory confirmed and no death of mpox have been reported from all the 15 counties in Liberia. Since the start of this outbreak (March 2024) a cumulative of 298 cases, of which 87 were laboratory-confirmed, and no death of mpox have been reported Guinea. The clade IIb mpox were isolated from the confirmed cases.

Kenya: Since the last update (4 July 2025), the MoH reported 16 new laboratory-confirmed and no new death of mpox from multiple districts. This is an 8% average increase in the number of confirmed cases in the past four weeks. This year, 182 laboratory-confirmed and three deaths (CFR: 1.65%) of mpox were reported from 20 of 47 counties in Kenya. This outbreak started in July 2024. Cumulatively, 213 laboratory-confirmed and four deaths (CFR: 1.88%) of mpox have been reported from 20 of 47 counties in Kenya. A total of 715 samples were tested resulting in a 100% testing rate and 29.79% positivity rate. Clade Ib was isolated from 33 sequenced samples.

Liberia: Since the last update (4 July 2025), the MoH reported 58 new laboratory confirmed and no new deaths of mpox from multiple counties. This year, 620 cases of which 208 were laboratory confirmed and no death of mpox have been reported from all the 15 counties in Liberia. Since the start of this outbreak (March 2024) a cumulative of 1,040 cases, of which 271 were laboratory-confirmed, and no death of mpox have been reported from all 15 counties in Liberia. The clade IIb mpox were isolated from the confirmed cases.

Malawi: Since the last update (4 July 2025) the MoH reported five new laboratory confirmed cases and no new deaths of mpox in Malawi. Since the beginning of this year, 264 cases of which 47 laboratory confirmed cases and no deaths of mpox have been reported from seven of twenty-eight health districts in Malawi; Lilongwe (38 confirmed cases) Mangochi (2), Salima (2), Ntcheu (1), Nkhatabay (1), Blantyre (2) and Likoma(1). Thirty-one (66%) of the confirmed cases were males within the age range of 2 to 57 years.

Nigeria: Since the last update (4 July 2025), the Nigeria Center for Disease Control (NCDC) reported 29 new cases, of which 13 were laboratory-confirmed, and no new deaths of mpox from six states. This is a 7% average increase in the number of confirmed cases in the last four weeks. This year, 996 cases, of which 229 were laboratory-confirmed, and three deaths (CFR: 1.39%) of mpox were reported from 36 states and the federal capital territory. Nigeria is endemic for mpox, and cases have been reported since 2017. Cumulatively 6,760 cases, of which 1,504 were laboratory-confirmed, and 20 deaths (CFR: 1.31%) of mpox have been reported from all 36 states and the federal capital territory in Nigeria. Clade IIb was isolated from the confirmed cases.

Sierra Leone: Since the last update (4 July 2025), the MoH reported 149 new cases, of which 121 were laboratory-confirmed, and three new deaths (CFR: 2.5%) of mpox from multiple districts. This is a 21% average decrease in the number of new cases in the last four weeks. Since the start of the outbreak in January 2025, a cumulative of 5,728 cases, of which 4,610 were laboratory-confirmed, and 32 deaths (CFR: 0.69%) of mpox have been reported from all the 16 districts in Sierra Leone. Of the confirmed cases, children <15 years accounted for 5% and 51% were males. Clade IIb was isolated from sequenced samples.

Tanzania: Since the last update (4 July 2025), the MoH has reported five new laboratory-confirmed cases and no death of mpox from Tanzania and Zanzibar. This is a 25% average increase in the number of confirmed cases in the last four weeks. Since the start of the outbreak in March 2025, a cumulative of 88 laboratory-confirmed, and no deaths of mpox have been reported from Tanzania and Zanzibar. Clade Ib was isolated from sequenced samples.

Togo: Since the last update (4 July 2025) the MoH reported 18 new cases, of which four were laboratory confirmed cases and no new deaths of mpox from eight health districts. This is an 30% average increase in the number of confirmed cases in the last four weeks. Cumulatively, 181 cases, of which 40 were laboratory confirmed, and no deaths of mpox were reported from eight health districts in Togo. Of the confirmed cases, males accounted for 58% and 40% were aged 24 – 44 years.

Uganda: Since the last update (4 July 2025), the MoH reported 172 new laboratory-confirmed cases and no new death of mpox from multiple districts. This is a 18% average increase in the number of confirmed cases in the past four weeks. This year, 6,051 laboratory-confirmed cases and 37 deaths (CFR: 0.61%) of mpox were reported in Uganda. This outbreak started in July 2024. Cumulatively, 7,404 laboratory-confirmed cases, and 44 deaths (CFR: 0.59%) of mpox have been reported from 119 of 146 districts in Uganda. A total of 8,086 cases were tested resulting in a 100% testing rate and 91.57% test positivity rate. Clade Ib was isolated from all sequenced samples.

Zambia: Since the last update (4 July 2025), the MoH reported seven new cases which were laboratory-confirmed, and no deaths of mpox from six districts of five provinces. Since the beginning of this year, 623 suspected cases, of which 152 were laboratory-confirmed, and three deaths (CFR: 2.1%) of mpox were reported. This outbreak started in October 2024. Cumulatively, 754 suspected cases, of which 154 were laboratory-confirmed, and three deaths (CFR: 2.0%) of mpox have been reported from all ten provinces in Zambia. A total of 1,354 cases were tested resulting in a 100% testing rate and a 22% positivity rate. Clade Ib was isolated from sequenced samples.

***Between epidemiological week 23 - 26, a backlog of 6.693 cases of which 1,193 confirmed cases and 63 deaths were reported from DRC.**

**** In epidemiological week 27, 68 suspected cases from Ethiopia.**

Note: In 2024, a total of 77,945 cases of mpox, of which 16,780 were laboratory confirmed, and 1,321 deaths (CFR: 1. 78%) of mpox were reported from 20 AU MS: Angola (4 laboratory-confirmed cases; 0 deaths), Burundi (2,946; 1), Cameroon (9; 2), Central Africa Republic (CAR) (90; 3), Congo (24; 0), Côte d'Ivoire (107; 1), DRC (11 ,834; 1,304), Gabon (2; 0), Ghana (13; 0), Guinea (1; 0), Liberia (63; 0), Kenya (31; 1), Mauritius (1; 0), Morocco (2; 0), Nigeria (184; 0), Rwanda (82; 0), Sierra Leone (4; 0), South Africa (25; 3), Uganda (1,353; 7), Zambia (3; 0), and Zimbabwe (2; 0).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, mpox vaccination campaigns and community engagement activities are ongoing in DRC, Sierra Leone and Uganda. Additionally, 11 Countries received vaccines & 7 countries vaccinating with over 698k persons vaccinated.

Cholera in Africa

6,370 confirmed human case(s), **47** probable human case(s), **176,089** suspected human case(s)
3,697 human deaths (**CFR: 2.03%**)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	21 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 182,562 cases (6,370 confirmed; 47 probable; 176,089 suspected) and 3,697 deaths (CFR: 2.03%) of cholera have been reported from 21 AU MS: Angola (27,268 cases; 763 deaths), Burundi (217; 0), Comoros (40; 0), Côte d'Ivoire (109; 7), DRC* (34,190; 802), **Ethiopia (5,483; 47), Ghana (2,780; 14), Kenya (423; 20), Malawi (91; 3), (Mozambique (3,959; 43), Namibia (16; 1), Nigeria*** (2,124; 68), Rwanda**** (295; 0), Somalia***** (5,681; 8), South Sudan***** (61,170; 1,080), Sudan***** (33,504; 765), Tanzania (3,864; 39), Togo (165; 4), Uganda (99; 1), Zambia (483; 9), and Zimbabwe (601; 23).

In epidemiological week 27, a total of 1,314 new cases and 49 new deaths (CFR: 3.72%) of cholera were reported from eight AU MS: Angola, Côte d'Ivoire, Ethiopia, Mozambique, Namibia, South Sudan, Sudan, and Tanzania

Angola: Since the last update (4 July 2025), the Ministry of Health (MoH) reported 260 new suspected cases and 4 new deaths (CFR: 1.53%) of cholera from 12 provinces. This is a 16% average decrease in the number of new cases in the last four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 27,268 cases (937 confirmed; 26,331 suspected) and 763 deaths (CFR: 2.79%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 62% of all deaths. Children <15 years accounted for 38% of all cases and 33% of all deaths. Additionally, 56% of all deaths occurred at the health facilities.

Côte d'Ivoire: Since the last update (27 June 2025), the MoH reported 56 new cases (27 confirmed; 29 suspected) and no new deaths of cholera from Vridi Kobrakre village, Port Bouet Vridi health district of Abidjan. Since the beginning of this outbreak (June 2025), a cumulative of 109 cases (27 confirmed; 82 suspected) and seven deaths (CFR: 6.42%) of cholera have been reported from Vridi Kobrakre village of Abidjan, Côte d'Ivoire, which is the epicentre of the outbreak with 98% of cases. Persons aged 15 to 39 years accounted for 47% of all cases and Cholera serotype O1 was isolated from the confirmed cases.

Ethiopia*: Since the last update (4 July 2025), the Ethiopia Public Health Institute reported 58 new suspected cases and no new deaths of cholera from three regions. This is a 23% average decrease in the number of new cases in the last four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 5,483 suspected cases and 47 deaths (CFR: 0.85%) of cholera have been reported from four of twelve regions in Ethiopia.

Mozambique: Since the last update (4 July 2025), the MoH reported 127 new confirmed cases and two deaths of cholera from five provinces. This is a 28% average increase in the number of new cases in the last four weeks. This year, 3,959 confirmed cases and 43 deaths (CFR: 1.09%) of cholera were reported from five of ten provinces in Mozambique. Since the beginning of the outbreak (October 2024), a cumulative of 4,262 confirmed and 64 deaths (CFR: 1.50%) of cholera have been reported from five of ten provinces in Mozambique. In comparison to the same period in 2024 (epidemiological week 1 to 27), a total of 8,136 confirmed cases and 17 deaths (CFR: 0.21%) of cholera were reported in Mozambique, which is a 49% decrease in the number of cases and a 2.5-fold increase in the number of deaths.

Namibia: Since the last update (4 July 2025), the MoH reported three new cases (2 confirmed; 1 suspected) and no new deaths of cholera from Opuwo district, Kunene region. This is a 63% decrease in the number of new cases compared to the previous week. This year, 16 cases (10 confirmed; 6 suspected) and one death (CFR: 6.25%) of cholera were reported from one of fourteen regions in Namibia.

South Sudan: Since the last update (4 July 2025), the MoH reported 138 new suspected cases and two new deaths (CFR: 1.45%) of cholera from nine states. This is a 33% average decrease in the number of cases in the last four weeks. This year, 61,170 cases (291 confirmed; 60,879 suspected) and 1,080 deaths (CFR: 1.76%) of cholera were reported from nine of ten states in South Sudan. Since the beginning of this outbreak (September 2024), a cumulative of 77,187 cases and 1,409 deaths (CFR: 1.82%) of cholera have been reported from nine of ten states in South Sudan.

Sudan: Since the last update (4 July 2025), the MoH reported 131 new suspected cases and 21 new deaths (CFR: 16.03%) of cholera from 12 states. This is a 49% average decrease in the number of new cases in the last four weeks. This year, 33,504 suspected cases and 765 deaths (CFR: 2.28%) of cholera were reported from 12 states in Sudan. Since the beginning of this outbreak (July 2024), a cumulative of 86,400 cases and 2,124 deaths (CFR: 2.46%) of cholera have been reported from 12 states in Sudan. The outbreak is occurring amid a sustained complex humanitarian crisis.

Tanzania: Since the last update (4 July 2025), the MoH reported 35 new suspected cases and no new deaths of cholera from Mbeya region. This is a 19% decrease in the number of new cases compared to the last update. This year, 3,864 suspected cases and 39 deaths (CFR: 1.01%) of cholera were reported from seven of 31 regions in Tanzania. Since the beginning of this outbreak (September 2023), a cumulative of 16,012 cases and 184 deaths (CFR: 1.15%) of cholera have been reported from 23 of 31 regions in Tanzania.

***In epidemiological week 26, DRC reported a backlog of 1,734 cases and 65 deaths of cholera.**

****Between epidemiological week 21-26, a backlog of 105 cholera cases were reported from Ethiopia.**

*****Between epidemiological week 22 – 26, a backlog of 562 suspected cases and 20 deaths of cholera were reported from Nigeria.**

******Between epidemiological week 23 – 24, a backlog of 18 suspected cases of cholera were reported from Rwanda.**

*******In epidemiological week 26, A backlog of 267 cases (7 confirmed; 260 suspected) and no deaths of cholera were reported from Somalia.**

*******Between epidemiological week 5-26, a backlog of 2,815 cases of cholera were reported from South Sudan.**

*******Between epidemiological week 19-26, a backlog of 1,143 cases of cholera were reported from Sudan.**

Note: In 2024, a total of 236,874 cases (30,597 confirmed; 689 probable; 205,588 suspected) and 4,182 deaths (CFR: 1.78%) of cholera were reported from 20 AU MS: Burundi (2,216 cases; 12 deaths), Cameroon (287; 0), Comoros (10,540; 152), DRC (30,373; 415), Ethiopia (26,052; 255), Ghana (5,653; 37), Kenya (300; 3), Malawi (476; 15), Mozambique (8,486; 38), Niger (273; 10), Nigeria (10,837; 35), Somalia (21,739; 138), South Africa (150; 1), South Sudan (16,017; 329), Sudan (52,896; 1,359), Tanzania (12,148; 145), Togo (604; 37), Uganda (58; 3), Zambia (20,076; 612), and Zimbabwe (19,646; 388).

Response by MS/partner/Africa CDC:

The ministries of health of the affected AU MS activated cholera emergency operation centres and deployed one health rapid response team to conduct enhance surveillance, risk communication, and environmental sanitation in the affected communities.

Polio (vaccine-derived) in Africa

72 confirmed human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Polio virus (vaccine-derived)	Previous Report Update	16-May-2025	First Occurred	1-Jan-2025
Country	Multiple Countries	Location	8 MS	Source	Ministry of Health
GeoScope	MODERATE	Human Risk Assessment	MODERATE	Animal Risk Assessment	N/A

Update to Event:

Since the beginning of this year, 71 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported from seven AU MS: Angola (4 cases), Chad (12), Djibouti (1), Ethiopia (37), Niger (1), Nigeria (14) and Sudan (2). One confirmed case and no death of cVDPV3 was reported from Guinea (1; 0). However, no confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) have been reported from Africa.

In epidemiological week 27, two new confirmed case of cVDPV2 were reported from Angola and Chad.

Angola: Since the last update (24 March 2025), the Global Polio Eradication Initiative (GPEI) reported four confirmed cases and no new deaths of cVDPV2. This week, one new confirmed case and no new deaths of cVDPV2 was reported from Huambo province. This year, four cases and no deaths of cVDPV2 were reported in Angola. Cumulatively, 13 confirmed cases and no deaths of cVDPV2 have been reported from Angola since the beginning of outbreak in 2024. In 2022, the national oral polio vaccination (OPV3) coverage among children <1 year in Angola was 41%.

Chad: In epidemiological week 27, the GPEI reported one new confirmed case and no deaths of cVDPV2 from Tandjile province, with onsets of paralysis on 7 May. Cumulatively, twelve confirmed cases of cVDPV2 have been reported from four of the twenty-three provinces and NDjamena capital city in Chad this year. The last outbreak of cVDPV2 in Chad was in 2023 with 55 cases and the total number of cVDPV2 in Chad was in 2024 was 39. In 2022, the national oral polio vaccination (OPV3) coverage among children <1 year in Chad was 88%.

Note: In 2024, a total of 10 confirmed cases of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from two AU MS: DRC (9 cases), Mozambique (1). Additionally, 227 cases of cVDPV2 were reported from 16 AU MS: Angola (9 cases), Benin (1), Chad (22), DRC (10), Ethiopia (44), Guinea (5), Kenya (1), Liberia (1), Mali (1), Niger (16), Nigeria (98), Senegal (1), Somalia (7), South Sudan (10), and Zimbabwe (1).

Response by MS/partner/Africa CDC:

The ministries of health continue to strengthen acute flaccid paralysis surveillance and polio supplemental vaccination campaigns in the affected areas.

Dengue fever in Africa

1,148 confirmed human case(s), **156** probable human case(s), **7,785** suspected human case(s)
18 human deaths (**CFR: 0.20%**)

Agent/Pathogen	Dengue virus	First Reported	1-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	10 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 9,089 (1,148 confirmed; 156 probable; 7,785 suspected) and 18 deaths (CFR: 0.20%) of dengue fever have been reported from 10 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,296; 1), Guinea (1; 0), Kenya (1; 0), Mali (2,099; 0), Mauritius (59; 0), Nigeria*(178; 11), Senegal (32; 0) and Sudan**(4,222; 6).

In epidemiological week 27, a total of 81 new cases and no new deaths of dengue fever were reported from Mali and Sudan.

Mali: Since the last update (4 July 2025), the MoH reported 72 new cases (14 confirmed; 58 suspected) and no new deaths of dengue fever from Bamako (59 cases; 0), Kayes (8; 0) and Sikaso (5; 0) regions. This is a 3% average increase in the number of new cases in the last four weeks. This year, a total of 415 confirmed, 1,684 suspected cases and no deaths of dengue fever were reported from all 11 regions in Mali. Since the start of this outbreak (September 2023), a cumulative of 2,023 confirmed; 15,168 suspected cases and 74 deaths (CFR: 0.43%) of dengue fever have been reported from all 11 regions in Mali.

Sudan: Since the last update (4 July 2025), the MoH reported nine new suspected cases and no new deaths of dengue fever from multiple states. This is a 44% average decrease in the number of new cases in the last four weeks. This year, 4,222 suspected cases and six deaths (CFR: 0.14%) of dengue fever were reported from ten of twelve states in Sudan. Since the start of this outbreak (July 2024), a total of 12,905 suspected cases and 21 deaths (CFR: 0.16%) of dengue fever have been reported from ten of twelve states in Sudan.

***In epidemiological week 25, a backlog of 87 confirmed, 91 suspected cases and 11 deaths were reported from Nigeria.**

****Between epidemiological week 17-26, a backlog of 78 suspected cases were reported from Sudan.**

Note: In 2024, a total of 191,717 cases (30,465 confirmed; 25,249 probable; 121,102 suspected) and 152 deaths (CFR: 0.08%) of dengue fever were reported from 15 AU MS: Burkina Faso (110,257 cases; 102 deaths), Cameroon (1; 0), Cabo Verde (43,597; 8), CAR (430; 1), Chad (983; 0), Côte d'Ivoire (39; 0), Ethiopia (3,463; 0), Ghana (1,713; 2), Kenya (88; 0), Mali (9,541; 13), Mauritius (9,166; 8), Sao Tome and Principe (9; 0), Senegal (902; 0), Sudan (8,683; 15), and Togo (2,205; 3).

Response by MS/partner/Africa CDC:

The ministries of health continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

Measles in Africa

8,246 confirmed human case(s), **94,558** suspected human case(s)
708 human deaths (**CFR: 0.69%**)

Agent/Pathogen	Measles virus	First Reported	8-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	30-Dec-2024	Country	Multiple Countries	Location	18 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 102,804 cases (8,246 confirmed; 94,558 suspected) and 708 deaths (CFR: 0.69%) of measles have been reported from 18 AU MS: Cameroon (2,054 cases; 2 deaths), Chad (926; 1), DRC* (35,880 cases; 563), Ethiopia (4,429; 22), Guinea (6,228; 6), Kenya (61; 0), Malawi (167; 0), Mali (486; 0), Mauritania (189; 0), Morocco (42,604; 92), Nigeria (739; 0), Rwanda** (155; 0), Senegal (91; 0), Somalia *** (5,249; 14), South Africa (108; 0), Sudan**** (2,505; 7), Uganda (77; 1) and Zambia (856; 0).

In epidemiological week 27, a total of 214 cases and no new deaths of measles were reported from four AU MS: Cameroon, Mali, Senegal and Sudan.

Cameroon: Since the last update (4 July 2025) the MoH reported 176 new cases (169 confirmed; 7 suspected) and no new deaths of measles from all 10 regions. This is a 400% average increase in the number of cases reported in the last four weeks. Since the beginning of this year, 2,054 cases (1,570 confirmed; 484 suspected) and two deaths (CFR: 0.10%) of measles have been reported from all 10 regions in Cameroon. Of the confirmed cases, 65% were unvaccinated against measles and children <5 years accounted for 55%. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%.

Mali: Since the last update (4 July 2025), the MoH reported 18 new cases (2 confirmed; 16 suspected) and no new deaths of measles from four regions. This is a 28% average increase in the number of new confirmed cases in the last four weeks. This year, a total of 486 cases (137 confirmed; 349 suspected) and no deaths of measles were reported from all eleven regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,196 cases (482 confirmed; 714 suspected) and no deaths of measles have been reported from all 11 regions in Mali. In 2023, the national measles vaccination coverage among children <1 year in Mali was 98%.

Senegal: Since the last update (20 June 2025), the MoH reported two new confirmed cases and no new deaths of measles from Kanel and Sédiou districts. This year, 91 confirmed cases and no deaths of measles have been reported from 31 of 47 districts in Senegal. Of the confirmed cases, males accounted for 55%, persons aged 15 years and above accounted for 43% and 66% were not vaccinated against measles. Since the start of the outbreak (March 2024), a total of 575 confirmed cases and no deaths of measles have been reported from all 47 districts in Senegal. In 2023, the national measles vaccination coverage of children <5 years in Senegal was 76%.

Sudan: Since the last update (4 July 2025), the MoH reported 18 new suspected cases and no new deaths of measles from multiple states. This is a 5% average decrease in the number of new cases in the last four weeks. This year, 2,505 cases and seven deaths (CFR: 0.28%) of measles have been reported from nine states. In 2023, the national measles vaccination coverage among children <1 year in Sudan was 51%. The outbreak is occurring amid a sustained complex humanitarian crisis.

***Between epidemiological week 24 –26, a backlog of 5,190 cases and 91 deaths (week 24: 1,882 cases; 16 deaths, week 25: 1,464; 20, and week 26: 1,844; 55) of measles were reported from DRC.**

****Between epidemiological week 23 - 25, a backlog of 24 suspected cases were reported from Rwanda.**

***** In epidemiological week 26, a backlog of 173 cases (53 confirmed; 120 suspected) and no deaths of measles were reported from Somalia.**

******Between epidemiological week 24-26, a backlog of 72 suspected cases were reported from Sudan.**

Note: In 2024, a total of 260,752 cases (26,432 confirmed; 234,320 suspected) and 3,220 deaths (CFR: 1.23%) of measles have been reported from 30 AU MS: Burkina Faso (10,639 cases; 46 deaths), Burundi (15,003; 149), Cameroon (2,507; 69), Central African Republic [CAR (4,550; 4)], Côte d'Ivoire (7,856; 169), Chad (8,712; 27), Congo (546; 4), DRC (95,126; 2,178), Ethiopia (28,421; 220), Gabon (347; 1), Ghana (1,398; 0), Kenya (1,953; 13), Liberia (2,891; 0), Mali (681; 0), Malawi (937; 1), Mauritania (2,881; 4), Morocco (20,435; 111), Mozambique (1,183; 31), Namibia (105; 0), Nigeria (27,517; 73), Niger (2,226; 13), Senegal (484; 0), Sierra Leone (67; 1), Somalia (12,277; 40), South Africa (626; 0), South Sudan (3,200; 41), Sudan (777; 10), Togo (628; 2), Uganda (2,011; 13), and Zambia (4,946; 0).

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to strengthen measles surveillance, case management, and supplemental immunization activities in the affected communities.

Bacterial Meningitis in Africa

143 confirmed human case(s), **826** suspected human case(s)
27 human deaths (**CFR: 2.79%**)

Agent/Pathogen	Meningitis (Bacterial)	First Reported	3-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	3-Jan-2025	Country	Multiple Countries	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 969 cases (143 confirmed; 826 suspected) and 27 deaths (CFR: 2.79%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali (400; 0), Togo (47; 7) and Zambia (83; 0).

In epidemiological week 27, a total of 95 new cases and no new deaths of bacterial meningitis were reported from Mali and Zambia.

Mali: Since the last update (4 July 2025), the MoH reported 12 new cases (9 suspected, 3 confirmed) and no new deaths of bacterial meningitis from three regions. This is a 23% average increase in the number of new cases in the last four weeks. This year, 318 suspected cases; 82 confirmed and no deaths of bacterial meningitis have been reported from all 11 regions in Mali. The bacteria isolated from the confirmed cases include *Streptococcus pneumoniae* (isolated from 30 confirmed cases), *Neisseria meningitidis* W135 (24), *Haemophilus influenzae non-b* (20) and *Haemophilus influenzae b* (5) *Haemophilus influenzae* (3). Since the start of the outbreak (January 2024), a total of 1,107 cases (182 confirmed; 925 suspected) and no deaths of bacterial meningitis have been reported in Mali. In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

Since the last update (20 June 2025), the MoH reported two new confirmed cases and no new deaths of measles from Kanel and Sédhiou districts. This year, 91 confirmed cases and no deaths of measles have been reported from 31 of 47 districts in Senegal. Of the confirmed cases, males accounted for 55%, persons aged 15 years and above accounted for 43% and 66% were not vaccinated against measles. Since the start of the outbreak (March 2024), a total of 575 confirmed cases and no deaths of measles have been reported from all 47 districts in Senegal. In 2023, the national measles vaccination coverage of children <5 years in Senegal was 76%.

Zambia (initial report): On 3 July 2025, the MoH reported an outbreak of meningitis with 83 cases (5 confirmed; 78 suspected) and no deaths from Mwense district, Luapula province. *Streptococcus pneumoniae* was isolated from all confirmed cases. The index case is a 15-year-old pupil from Mwense secondary school who was referred from Mwense stage II to Mwense district hospital after presenting with symptoms including fever, photophobia, neck stiffness, and altered speech. Further laboratory testing is still ongoing using Polymerase chain reaction (PCR). Of the total cases, persons aged 13 to 19 and males accounted for 66%. Meningococcal A conjugate vaccine (MenA) vaccine is not routinely scheduled among children <5 years in Zambia.

Meningitis is an infection that causes inflammation of the meninges, the thin protective membranes surrounding the brain and spinal cord. It can be caused by bacteria, viruses, fungi, parasites, amoebas, or occur in non-infectious forms. The disease is transmitted through respiratory droplets from infected individuals. Common symptoms include fever, headache, and neck stiffness, though additional symptoms may vary depending on the underlying cause. Vaccines to prevent meningitis are widely available and are included in the routine immunization schedules of most Member States. The last outbreak of bacterial meningitis in Zambia was reported on 6 July 2015 from the Kabompo district, North-Western province, with six suspected cases and three deaths among school children.

Note: In 2024, a total of 7,118 cases (1,473 confirmed; 5,645 suspected) and 492 deaths (CFR: 7.07%) of bacterial meningitis have been reported from four AU MS: CAR (296 cases; 25 deaths), Mali (735; 0), Niger (2,781; 202), and Nigeria (3,302; 265)

Response by MS/partner/Africa CDC:

The ministries of health continue to conduct enhance surveillance, case management, sample collection, as well as risk communication and community engagement activities in the affected regions.

Chikungunya in Africa

1,735 confirmed human case(s), **1,030** suspected human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Chikungunya virus	First Reported	1-Jan-2025	Previous Report Update	27-Jun-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	4 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of 2025, a total of 2,765 cases (1,735 confirmed; 1,030 suspected) and no deaths of bacterial meningitis have been reported from four AU MS: Comoros (4 cases; 0 deaths), Kenya (607; 0), Mauritius (1,540; 0), and Senegal (7; 0).

In epidemiological week 27, a total of 101 new cases and no new deaths of chikungunya were reported from Mauritius and Senegal.

Mauritius: Since the last update (4 July 2025), the MoH reported 100 new confirmed cases and no new deaths of chikungunya from Mauritius (95 cases) and Rodrigues (5) islands. This is a 13% average decrease in the number of new cases in the past four weeks. Since the beginning of 2025, a total 1,540 confirmed cases (47 imported cases; 1,493 local cases) and no deaths of chikungunya have been reported from the two Islands in Mauritius; Mauritius (1,473 cases; 0 deaths) and Rodrigues (67; 0) islands. Fifty-five percent of the cases are males and persons aged 40-59 years account for 35% of the cases.

Senegal: Since the last update (15 June 2025), the MoH reported one new confirmed case and no new deaths of chikungunya from Sangalkam district. Since the beginning of 2025, a total of seven confirmed cases and no deaths of chikungunya have been reported from five districts in Senegal. Of the confirmed cases, males accounted for 71% and the age group 15 years and above accounted for 43%.

Response by MS/partner/Africa CDC:

The ministries of health continue to conduct active case search at public and private health facilities, case management and to intensify vector control activities.

- Mpox cases include all persons who have presented with symptoms consistent with the suspected case definition for mpox.
- The cases in this report include confirmed, probable, and suspected cases.
- Deaths among mpox suspected cases are all reported from DRC.
- CFR are calculated using confirmed cases and deaths only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever where CFR is calculated using all cases and deaths.
- The GeoScope level is determined by where the event is currently occurring on the continent. Low: the event is limited to sub-national areas within one MS; Moderate: The event is affecting multiple countries within an AU region or has been imported from/exported to 1-2 countries from another global region; High: The event is affecting several multinational AU regions, or have been imported from/exported to >2 countries from another global region; Very High: Event is considered a pandemic, affecting multiple continents or worldwide. The risk level is determined by evaluating the following criteria: morbidity and mortality of the disease, probability of spread within and to the other MSs, and availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high or very high depending on how they score on the above criteria.