

Africa CDC Epidemic Intelligence Report

Date of Issue: 14 Sep 2025

Active Events

169

New Events reported
in 2025

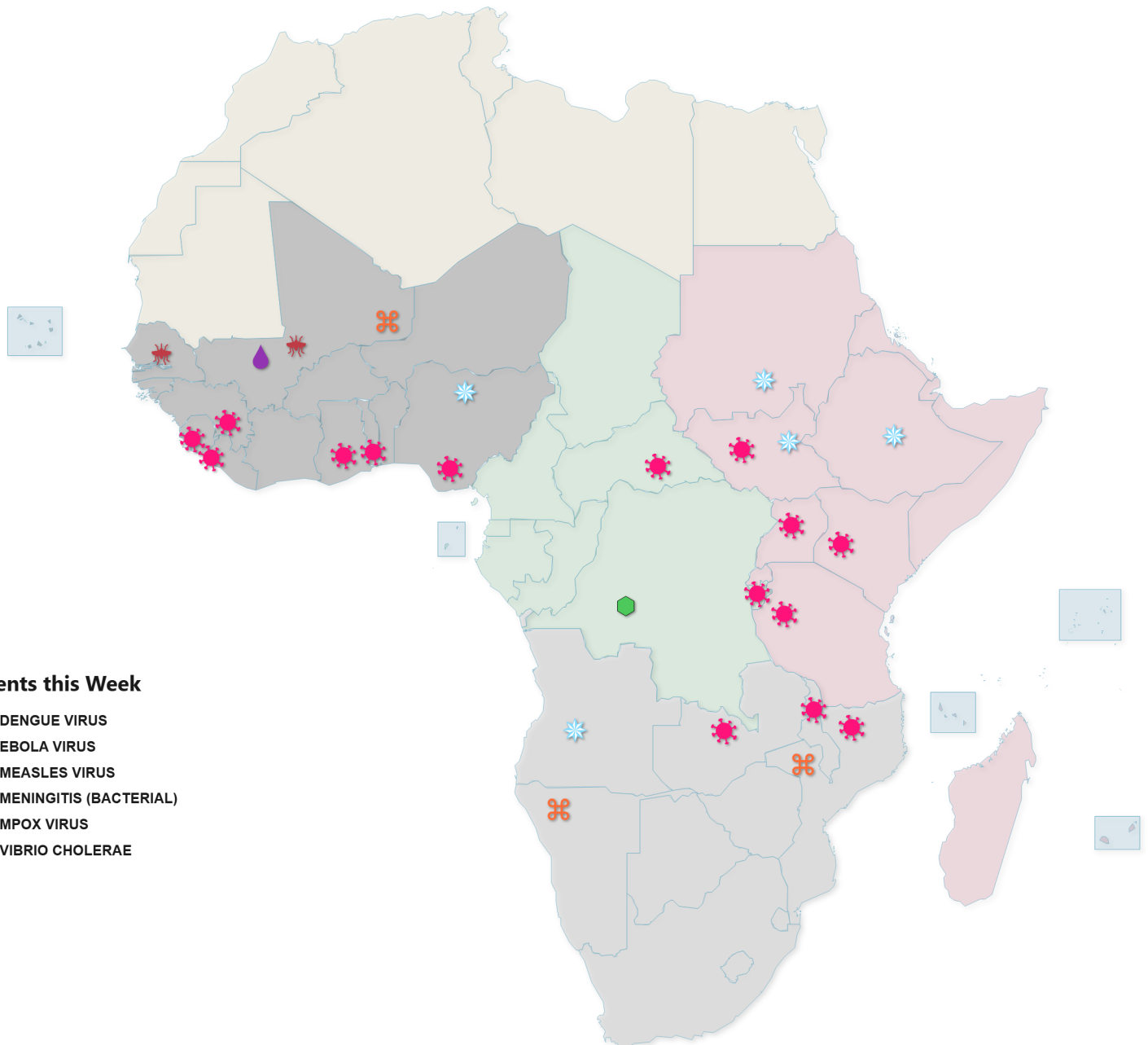
103

Events highlighted
this week

27

New events since
last issue

1





*  represent AU Member States that are islands

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	10	16 (1)
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
 Measles virus	Namibia	Moderate	N/A		11	6	0

Events Highlighted this week

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Dengue virus	Mali	Moderate	N/A		2,272 (59)	0 (0)	568 (9)	0 (0)
	Senegal	Moderate	N/A		0 (0)	0 (0)	43 (3)	0 (0)
 Ebola virus	Democratic Republic of the Con	Very High	N/A		40 (17)	0 (0)	25 (20)	24 (9)
 Measles virus	Mali	Moderate	N/A		412 (6)	0 (0)	157 (0)	0 (0)
	Mozambique	Moderate	N/A				103 (23)	0 (0)
 Meningitis (Bacterial)	Mali	Moderate	N/A		436 (22)	0 (0)	95 (1)	0 (0)
 Mpox virus	Burundi	High	N/A		4,495 (69)	0 (0)	1,481 (23)	0 (0)
	Central African Republic	High	N/A		392 (2)	0 (0)	28 (0)	0 (0)
	Ghana	Moderate	N/A		2,725 (201)	0 (0)	512 (45)	1 (0)
	Guinea	Moderate	N/A		2,058 (112)	0 (0)	917 (110)	1 (1)
	Kenya	Moderate	N/A		994 (61)	0 (0)	420 (23)	6 (0)
	Liberia	High	N/A		1,213 (39)	0 (0)	664 (35)	0 (0)
	Malawi	Moderate	N/A		457 (0)	0 (0)	94 (4)	1 (0)
	Mozambique	Moderate	N/A		973 (16)	0 (0)	76 (7)	0 (0)
	Nigeria	High	N/A		1,262 (35)	0 (0)	329 (14)	4 (0)
	Sierra Leone	High	Low		6,826 (51)	0 (0)	5,266 (21)	56 (0)
	South Sudan	Moderate	N/A		435 (2)	0 (0)	21 (1)	0 (0)
	Tanzania	High	N/A		657 (3)	0 (0)	151 (2)	0 (0)
	Togo	Moderate	N/A		360 (14)	0 (0)	74 (1)	0 (0)
	Uganda	Moderate	N/A		12,153 (145)	0 (0)	6,684 (26)	41 (0)
	Zambia	Moderate	N/A		975 (209)	0 (0)	233 (51)	3 (0)
 Vibrio cholerae	Angola	Moderate	N/A		28,102 (140)	0 (0)	937 (0)	786 (6)
	Ethiopia	High	N/A		6,879 (32)	0 (0)	0 (0)	62 (1)
	Nigeria	High	N/A		9,929 (5,130)	0 (0)	0 (0)	235 (121)
	South Sudan	High	N/A		72,888 (161)	0 (0)	322 (0)	1,227 (2)
	Sudan	High	N/A		58,164 (388)	0 (0)	0 (0)	1,391 (7)

Human Event Updates

Very High Risk Events

Ebola virus in Democratic Republic of the Congo

25 confirmed human case(s)
40 suspected human case(s)
24 human deaths (**CFR: 96%**)

Agent/Pathogen	Ebola virus	First Reported	5-Sep-2025	Previous Report Update	5-Sep-2025
First Occurred	20-Aug-2025	Country	Democratic Republic of the Congo	Location	Bulape Health Zone, Kasai Province
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	VERY HIGH
Animal Risk Assessment	N/A				

Update to Event:

Since the last update (5 September 2025), the Ministry of Health has reported 37 new cases (20 confirmed, 17 suspected) and nine new deaths due to Ebola Virus Disease (EVD) in Bulape Health Zone, Kasai Province. Since the beginning of this outbreak (4 September), a cumulative 65 cases (25 confirmed; 40 suspected) and 24 deaths (case fatality ratio: 36.92%) of EVD have been reported in Kasai Province. There are 2 healthcare workers among the EVD deaths. Among the total confirmed cases, women accounted for 52.17%. Of the 561 listed contacts, 530 have been followed up (94.5%) and 5 have become suspected cases (0.89%). The new Ebola virus genome isolated among the confirmed cases using a nanopore sequencing platform suggests a new zoonotic spillover; it is not directly related to the EVD outbreaks in Luebo (2007) and Mweka (2008/2009). The 2008–2009 Mweka outbreak recorded 32 cases and 15 deaths (CFR 46.87%).

Response by MS/partner/Africa CDC:

The MoH has deployed a rapid response team to Bulape Health Zone to investigate and contain the outbreak. Case investigation and contact tracing are ongoing, with samples tested at INRB confirming five positive cases, while community awareness campaigns have been launched to reinforce preventive measures.

The Ministry of Health received two stocks of chlorine, finalized the airstrip and logistics reports, collected shipping notes, set up accommodation bases, supplied IPC inputs/medicines, and oversaw construction of the pre-triage and triage areas at the ETC.

Africa CDC briefed staff (providers, hygienists/cleaners, and gravediggers), decontaminated six households, conducted two safe and dignified burials, carried out scorecard assessments (HGR 9%, community 8.3%), and supported standard patient care.

Partners (WHO/INRB and others) delivered a major consignment from Kinshasa; a WHO/INRB team arrived with MEG kits and other supplies (including cartridges), led community sensitization (105 people), trained 65 community health workers (RECOs), and listed 44 contacts.

Nearly **2,000 vaccine doses** are ready to be deployed.

Human Event Updates

Moderate Risk Events

Mpox in Africa

33,105 confirmed human case(s), **109,765** suspected human case(s)
659 human deaths (**CFR: 0.60%**)

Agent/Pathogen	Mpox virus	First Reported	3-Jan-2025	Previous Report Update	5-Sep-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	26 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 109,796 cases of mpox, of which 33,127 (30.16%) laboratory-confirmed have been reported from 26 African Union Member States (AU MS). In addition, a total of 659 deaths [Case Fatality Rate (CFR: 0.60%)] among suspected cases and 211 (deaths (CFR: 0.64%) among confirmed cases have been reported. The distribution of cases and deaths by MS is as follows: Angola (8 confirmed cases; 0 deaths), Burundi (1,481; 0), Cameroon (5; 0), Central African Republic (CAR) (28; 1), Congo (69; 1), Côte d'Ivoire (67;1), Democratic Republic of Congo (DRC) (15,940; 752), Ethiopia (28; 1), Gambia (1; 0), Ghana (512; 1), Guinea (917; 1), Kenya (420; 6), Liberia (664; 0), Malawi (94;1), Morocco (2; 0), Mozambique (76; 0), Nigeria (329; 4), Rwanda ** (45; 0), Senegal (1;0), Sierra Leone (5,266; 56), South Africa (11; 0), South Sudan (21; 0), Tanzania (151; 0), Togo (74; 0), Uganda (6,684; 41), and Zambia (233; 3).

In epidemiological week 36, 937 new cases, with 318 (33.70%) laboratory-confirmed cases, and no new death among confirmed cases were reported from 13 AU MS: Burundi, Ghana, Guinea, Kenya, Liberia, Malawi, Mozambique, Nigeria, Sierra Leone, Tanzania, Togo, Uganda and Zambia.

Burundi: Since the last update (5 September 2025) the Ministry of Health (MoH) reported 69 new cases, of which 23 were laboratory-confirmed and no new deaths of mpox from 40 health districts. This is a 14% average decrease in the confirmed cases reported in the last four weeks. This year, 4,495 cases, of which 1,481 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, 10,286 cases, of which 4,427 were laboratory confirmed and one death (CFR: 0.01%) of mpox have been reported from 46 of 49 health districts in Burundi. Clade Ib was isolated from the sequenced samples.

Ghana: Since the last update (5 September 2025), the Ghana Health Services reported 201 cases of which, 45 were laboratory-confirmed and no new death of mpox from all 16 regions. This represents an 12% average decrease in the confirmed cases in the last four weeks. This year, 2,725 cases of which 512 were laboratory-confirmed, and one death (CFR: 0.22%) of mpox were reported from all 16 regions in Ghana. This outbreak stated in October 2024, cumulatively of 3,165 cases, of which 512 were laboratory-confirmed, and one death (CFR: 0.21%) of mpox have been reported from all 16 regions in Ghana. A total of 3,165 samples were tested resulting in a 100% testing rate and 16% positivity rate. Clade II was isolated from undefined number of sequenced samples.

Guinea: Since the last update (5 September 2025), the MoH reported 112 new cases of which 110 were new laboratory-confirmed and no new deaths of mpox from 14 health districts. This is a 10% average increase in the confirmed cases in the past four weeks. This year, 2,058 cases of which 917 were laboratory-confirmed and no deaths of mpox have been reported from Guinea. Since the start of this outbreak (March 2024), a cumulative of 2,128 cases, of which 919 were laboratory-confirmed, and no deaths of mpox have been reported in Guinea. A total of 2,128 samples were tested resulting in a 100% testing rate and 43% positivity rate. Clade II was isolated from undefined number of sequenced samples. Clade IIb mpox was isolated from confirmed cases.

Kenya: Since the last update (5 September 2025), the MoH reported 23 new laboratory-confirmed cases and no deaths of mpox from multiple districts. This is a 4% average decrease in confirmed cases in the last four weeks. This year, 420 laboratory-confirmed cases and six deaths (CFR: 1.43%) of mpox were reported from 27 of 47 counties in Kenya. This outbreak started in July 2024. Cumulatively, 451 laboratory-confirmed and seven deaths (CFR: 1.55%) of mpox have been reported from 27 of 47 counties in Kenya. A total of 1,349 samples were tested resulting in a 100% testing rate and 33.43% positivity rate. Clade Ib was isolated from 94 sequenced samples.

Liberia: Since the last update (5 September 2025), the MoH reported 39 new cases of which 35 were laboratory-confirmed, and no new deaths of mpox from multiple counties. This is a 14% average increase in the confirmed cases in the last four weeks. This year, 1,213 cases of which 664 were laboratory-confirmed and no deaths of mpox have been reported from all the 15 counties in Liberia. Since the start of the outbreak (March 2024) a cumulative of 1,624 cases, of which 727 were laboratory-confirmed, and no deaths of mpox have been reported from all 15 counties in Liberia. A total of 1,624 samples were tested resulting in a 100% testing rate and 45% positivity rate. Clade IIb was isolated from undefined number of sequenced samples.

Malawi: Since the last update (5 September 2025) the MoH reported four new laboratory confirmed cases and no new death of mpox in Malawi. Since the beginning of this year, 457 suspected cases of which 94 were laboratory confirmed cases and one death (CFR:1.06 %) of mpox have been reported from eleven of twenty-eight health districts in Malawi; Lilongwe, Mangochi, Salima, Ntcheu, Nkhatabay, Blantyre, Likoma, Mzimba South, Ntchisi, Karonga and Zomba. The age range for male cases is 2 to 75 years.

Mozambique: Since the last update (5 September 2025), the MoH reported seven new laboratory-confirmed cases and no new deaths of mpox. Since the start of this outbreak (10 July 2025), a cumulative of 973 suspected cases, of which 76 were laboratory confirmed and no deaths of mpox have been reported from one of eleven provinces. The circulating clade has not been confirmed. The last outbreak of mpox in Mozambique occurred in 2022 with one confirmed case and one death (CFR: 100.00%) in Maputo city.

Nigeria: Since the last update (5 September 2025), the Nigeria Center for Disease Control (NCDC) reported 35 new cases, of which 14 were laboratory-confirmed, and no new deaths of mpox from seven states. This is a 23% average increase in the confirmed cases in the last four weeks. This year, 1,262 cases of which, 329 were laboratory-confirmed, and four deaths (CFR: 1.22%) 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, 7,025 cases, of which 1,605 were laboratory-confirmed, and 21 deaths (CFR: 1.32%) of mpox have been reported from all 36 states and the federal capital territory in Nigeria. A total of 7,025 samples were tested resulting in a 100% testing rate and 22.8% positivity rate. Clade IIb was isolated from undefined number of sequenced samples.

Sierra Leone: Since the last update (5 September 2025), the MoH reported 51 new cases, of which 21 were laboratory-confirmed, and no deaths of mpox from multiple districts. This is a 9.04% average decrease in confirmed cases, in the last four weeks. Since the start of the outbreak in January 2025, a cumulative of 6,826 cases, of which 5,266 were laboratory-confirmed, and 56 deaths (CFR: 1.06%) of mpox have been reported from all the 16 districts in Sierra Leone. Of the confirmed cases, children <15 years accounted for 6.5% and 51% were males. A total of 6,826 samples were tested resulting in a 100% testing rate and 77.1% positivity rate. Clade IIb was isolated from undefined number of sequenced samples.

Tanzania: Since the last update (5 September 2025), the MoH has reported two new laboratory-confirmed cases and no deaths of mpox from Zanzibar. This is an 8% average decrease in the confirmed cases in the last four weeks. Since the start of the outbreak in March 2025, a cumulative of 151 laboratory-confirmed cases, and no deaths of mpox have been reported from Tanzania mainland and Zanzibar. Clade Ib was isolated from sequenced samples.

Togo: Since the last update (5 September 2025) the MoH reported 14 new cases, of which one were laboratory-confirmed and no new deaths of mpox from 10 health districts. This is over three-fold decrease in the new confirmed cases in the last four weeks. Since the start of the outbreak (May 2025) a cumulative of 360 cases, of which 74 were laboratory-confirmed, and no deaths of mpox were reported from 10 health districts in Togo. A total of 360 samples were tested resulting in a 100% testing rate and 21% positivity rate. Clade IIb was isolated from undefined number of sequenced samples.

Uganda: Since the last update (5 September 2025), the MoH reported 26 new laboratory-confirmed cases and no new deaths of mpox from multiple districts. This is a 54% average increase in confirmed cases in the last four weeks. This year, 6,684 laboratory-confirmed cases and 41 deaths (CFR: 0.61%) of mpox were reported in Uganda. This outbreak started in July 2024. Cumulatively, 8,012 laboratory-confirmed cases, and 48 deaths (CFR: 0.60%) of mpox have been reported from 120 of 146 districts in Uganda. A total of 16,652 cases were tested resulting in a 100% testing rate and 48.11% test positivity rate. Clade Ib was isolated from all sequenced samples.

Zambia: Since the last update (05 September 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, 975 suspected cases, of which 233 were laboratory-confirmed, and three deaths (CFR: 1.28%) of mpox were reported. This outbreak started in October 2024. Cumulatively, 1106 suspected cases, of which 235 were laboratory-confirmed, and three deaths (CFR: 1.28%) of mpox have been reported from all ten provinces in Zambia. Clade Ib was isolated from sequenced samples.

*****In epidemiological weeks 34, backlog of 21 suspected mpox cases were reported from Rwanda.**

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.

Cholera in Africa

7,452 confirmed human case(s), **47** probable human case(s), **244,304** suspected human case(s)
5,606 human deaths (**CFR: 2.23%**)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	5-Sep-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	23 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 251,803 cases (7,452 confirmed; 47 probable; 244,304 suspected) and 5,606 deaths (CFR: 2.23%) of cholera have been reported from 23 AU MS: Angola (28,102 cases; 786 deaths), Burundi (741; 5), Chad (1,858; 121), Comoros (40; 0), Congo (706; 62), Côte d'Ivoire (519; 21), DRC***** (50,748; 1,520), Ethiopia* (6,879; 62), Ghana (2,870; 14), Kenya (426; 20), Malawi (91; 3), Mozambique (4,224; 43), Namibia (18; 1), Nigeria***** (9,929; 235), Rwanda** (324; 0), Somalia*** (7,484; 9), South Sudan*** (73,210; 1,227), Sudan**** (58,164; 1,392), Tanzania (4,063; 45), Togo (165; 4), Uganda (136; 3), Zambia (505; 10), and Zimbabwe (601; 23).

In epidemiological week 36, a total of 1,243 new cases and 40 new deaths of cholera were reported from six AU MS: Angola, Burundi, Chad, Congo, Ethiopia, Sudan, and South Sudan.

Angola: Since the last update (5 September 2025), the MoH reported 140 new suspected cases and six new deaths (CFR: 4.29%) of cholera from seven provinces. This is a 46% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 28,102 cases (937 confirmed; 27,165 suspected) and 786 deaths (CFR: 2.80%) 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 32% of all deaths. Additionally, 56% of all deaths occurred at the health facilities.

Burundi: Since the last update (5 September 2025), the MoH reported 60 new confirmed cases and no deaths of cholera from multiple provinces. This year, a total of 741 cases and five deaths (CFR: 0.67%) of cholera have been reported from three of eighteen provinces in Burundi. Females accounted for 53% and children <5 years accounted for 17% of all cases. Since the beginning of the outbreak (December 2022), a cumulative of 2,957 cases (2,892 confirmed; 65 suspected) and 17 deaths (CFR: 0.57%) of cholera have been reported from 14 of 18 provinces in Burundi. In comparison to the same period in 2024 (epidemiological week 1 to 36), a total of 774 confirmed cases and four deaths (CFR:0.51%) of cholera were reported in Burundi, which is a 12% decrease in the number of cases and a 1.25-fold increase in the number of deaths.

Chad: Since the last update (5 September 2025), the MoH reported 425 new cases (7 confirmed; 418 suspected) and 29 new deaths (CFR: 6.82%) in seven health districts. This is a 7% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (13 July 2025), a cumulative of 1,858 cases (56 confirmed; 1,802 suspected) and 121 deaths (CFR: 6.51%) of cholera have been reported from two of twenty-three provinces in Chad. Of the total cases, females accounted for 66.64%, and age groups 5-44 years accounted for 64.50%. Cholera *serotype* O1 was isolated from two confirmed cases.

Congo: Since the last update (5 September 2025), the MoH reported 37 new cases (21 confirmed; 16 suspected) and no new death of cholera from six health districts. This is a 5-fold average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (21 July 2025), a cumulative of 706 cases (62 confirmed; 644 suspected) and 62 deaths (CFR: 8.78%) of cholera have been reported. Of the total cases, males accounted for 61.20% of cases and 69.80% of deaths and age groups 15– 24 years accounted for 17.80%.

Ethiopia: Since the last update (5 September 2025), the Ethiopia Public Health Institute reported 32 new suspected cases and one new death (CFR: 3.12%) of cholera from five regions. This is a 36% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 6,879 suspected cases and 62 deaths (CFR: 0.90%) of cholera have been reported from five of twelve regions in Ethiopia: Afar (120 cases; 0 deaths), Amhara (3,477; 20), Gambella (2,609; 33), Oromia (471; 3) and Tigray (202; 6).

South Sudan: Since the last update (29 August 2025), the MoH reported 161 new suspected cases and two new deaths (CFR: 1.24%) of cholera from nine states. This is a 33% average decrease in the number of cases in the past four weeks. This year, 73,210 cases (322 confirmed; 72,888 suspected) and 1,227 deaths (CFR: 1.67%) of cholera were reported from nine of ten states in South Sudan. Since the beginning of this outbreak (September 2024), a cumulative of 89,227 cases and 1,857 deaths (CFR: 2.08%) of cholera have been reported from nine of ten states in South Sudan.

Sudan: Since the last update (5 September 2025), the MoH reported 388 new suspected cases and eight new deaths (CFR: 2.06%) of cholera from all 18 states in Sudan. This is a 29% average decrease in the number of cases in the past four weeks. This year, 58,164 suspected cases and 1,392 deaths (CFR: 2.39%) of cholera were reported from 18 states in Sudan. Since the beginning of this outbreak (July 2024), a cumulative of 111,060 cases and 2,751 deaths (CFR: 2.47%) of cholera have been reported from 12 states in Sudan. The outbreak is occurring amidst a sustained complex humanitarian crisis.

***Between epidemiological week 21 and 35, a backlog of 94 cases were reported from Ethiopia.**

****In epidemiological week 34, a backlog of three suspected cases were reported from Rwanda.**

*****In epidemiological week 35, a backlog of 110 cases (2 confirmed; 108 suspected) were reported from Somalia.**

******Between epidemiological week 1 and 35, a backlog of 538 cases and five deaths were reported from South Sudan.**

******Between epidemiological week 22 and 35, a backlog of 2,831 cases and 58 deaths were reported from Sudan.**

******* Between epidemiological week 33 and 35, a backlog of 5,130 new suspected cases and 121 new deaths of cholera were reported from Nigeria.**

*******Between epidemiological week 34 and 35, a backlog of 1,419 cases and 50 deaths were reported from DRC.**

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 MS activated the emergence operation centers and deployed one health rapid response team to conduct enhance surveillance, risk communication, and environmental sanitation in the affected communities

Dengue fever in Africa

1,466 confirmed human case(s), **156** probable human case(s), **11,246** suspected human case(s)
22 human deaths (**CFR: 0.17%**)

Agent/Pathogen	Dengue virus	First Reported	1-Jan-2025	Previous Report Update	5-Sep-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	11 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 12,868 cases (1,466 confirmed; 156 probable; 11,246 suspected) and 22 deaths (CFR: 0.17%) of dengue fever have been reported from 11 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (1; 0), Kenya (1; 0), Mali (2,840; 0), Mauritius (59; 0), Mauritania* (148; 0), Nigeria (178; 11), Senegal (43; 0), and Sudan (7,077; 10). **OK**

In epidemiological week 36, a total of 71 new cases and no new deaths of dengue fever were reported from three AU MS: Mali, and Senegal. **OK**

Mali: Since the last update (5 September 2025), the MoH reported 68 cases (9 confirmed; 59 suspected) and no new deaths of dengue fever from Bamako (61 cases; 0 deaths), Mopti (2; 0) and Sikasso (5; 0) regions. This is a 2% average decrease in the number of new cases in the last four weeks. This year, a total of 2,840 cases (568 confirmed; 2,272 suspected) and no deaths of dengue fever were reported in all 11 regions in Mali. Since the start of this outbreak (September 2023), a cumulative of 17,932 cases (2,176 confirmed; 15,756 suspected) and 74 deaths (CFR: 0.41%) of dengue fever have been reported from all 11 regions in Mali.

Senegal: Since the last update (5 September 2025), the MoH reported three new confirmed cases and no new deaths of dengue fever from Fatick (1 case; 0 deaths), Kaolack (1; 0), Sedhiou (1; 0) regions. This is a 2% average decrease in the number of new cases in the last four weeks. This year, a cumulative of 43 confirmed cases and no deaths of dengue fever have been reported from 10 regions in Senegal. Of the confirmed cases, males accounted for 55% and persons aged 15 years and above accounted for 93%. Since the start of this outbreak (February 2024), a cumulative of 947 confirmed cases and no deaths of dengue fever have been reported from 28 of 47 districts in Senegal.

***Between epidemiological weeks 22 and 23 of 2025, 148 cases and no deaths of dengue fever were reported from Mauritania**

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 in the affected MS continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

Measles in Africa

9,331 confirmed human case(s), **114,508** suspected human case(s)
939 human deaths (**CFR: 0.76%**)

Agent/Pathogen	Measles virus	First Reported	8-Jan-2025	Previous Report Update	5-Sep-2025
First Occurred	30-Dec-2024	Country	Multiple Countries	Location	19 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 123,839 cases (9,331 confirmed; 114,508 suspected) and 939 deaths (CFR: 0.76%) of measles have been reported from 19 AU MS: Cameroon (2,300 cases; 4 deaths), Chad (926; 1), DRC* (51,738; 787), Ethiopia (4,429; 22), Guinea (6,228; 6), Kenya (61; 0), Malawi (167; 0), Mali (569; 0), Mauritania (189; 0), Morocco (44,372; 95), Mozambique (103; 0), Namibia (17;0), Nigeria (739; 0), Rwanda (182; 0), Senegal (96; 0), Somalia** (7,162; 14), ***South Africa (741; 0), Sudan (2,887; 9), Uganda (77; 1) and Zambia (856; 0). **OK**

In epidemiological week 36, a total of 46 new cases and no new deaths of measles were reported from three AU MS: Mali, Mozambique and Namibia.

Mali: Since the last update (5 September 2025), the MoH reported six new suspected cases and no new deaths of measles from Kayes (5 cases; 0 deaths) and Koulikoro (1; 0) regions. This is a 14% average increase in the number of new cases in the last four weeks. This year, 569 cases (157 confirmed; 412 suspected) and no deaths of measles were reported from all 11 regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,277 cases (500 confirmed; 777 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%.

Mozambique: Since the last update (5 September 2025) the MoH reported 23 new confirmed cases and no deaths of measles from four districts. Three provinces are affected; Niassa, Nampula and Zambezia. Since the start of the outbreak (July 2025), 103 confirmed cases and no deaths of measles have been reported from 6 of 129 districts, Memba (14),Chimbonila (27), Lago (13), Mocuba (31),Mogovolas (10) and Mopeia (8) in Mozambique. Between 2022 and 2023, the national measles vaccination coverage MCV1 was low, 65%, with considerable geographic differences.

Namibia (*Initial report*): On 14 August 2025, Opuwo district notified its index laboratory confirmed measles case, marking the beginning of the outbreak. The case was a nine-year-old foreign national residing in Opuwo town. The case presented with fever, generalised rash, cough and conjunctivitis. Patient had no documented history of measles vaccination and no recent travel in the four weeks preceding the onset of symptoms. Laboratory testing confirmed Measles IgM positive result. Additional 16 suspected cases were reported on 4 September 2025. Cumulatively, 17 cases (1 confirmed; 16 suspected) and no death of measles were reported from Namibia.

Measles is a highly contagious viral disease that mainly affects children but can also occur in unvaccinated teenagers and adults. It spreads through coughing, sneezing, and close contact with infected people. Symptoms of measles usually begin 10–14 days after exposure to the virus. A prominent rash is the most visible symptom. Early symptoms usually last 4–7 days.

***In epidemiological week 3, a backlog of 2,586 cases and 26 deaths of measles were reported from DRC.**

****In epidemiological week 35, a backlog of 222 cases (28 confirmed; 194 suspected) and no deaths of measles were reported from Somalia.**

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

156 confirmed human case(s), **944** suspected human case(s)
27 human deaths (**CFR: 2.45%**)

Agent/Pathogen	Meningitis (Bacterial)	First Reported	3-Jan-2025	Previous Report Update	5-Sep-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 1,100 cases (156 confirmed; 944 suspected) and 27 deaths (CFR:2.45%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali (531; 0), Togo (47; 7) and Zambia (83; 0).

In epidemiological week 36, a total of 23 new cases and no new deaths of bacterial meningitis were reported from Mali. **OK**

Mali: Since the last update (5 September 2025), the MoH reported 23 new cases (1 confirmed; 22 suspected) and no new deaths of bacterial meningitis from seven regions. This is a 19% average increase in the number of new cases in the past four weeks.. Cumulatively, 531 cases (95 confirmed; 436 suspected) and no deaths of bacterial meningitis have been reported from all 11 regions in Mali this year. The bacteria isolated from the confirmed cases include; *Streptococcus pneumoniae* (38), *Neisseria meningitidis* W135 (24), *Haemophilus influenzae non-b* (20), *Haemophilus influenzae b* (8) and *Haemophilus influenzae untyped* (5). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

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:

Mali: The MoH continues to conduct enhance surveillance, case management, Cerebro-Spinal Fluid sample collection, as well as risk communication and community engagement activities in the affected districts.

Epidemiological week 36 covers a period from 1 - 7 September 2025

-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.