

Africa CDC Epidemic Intelligence Report

Date of Issue: 10 Feb 2024

Events reported in
2024

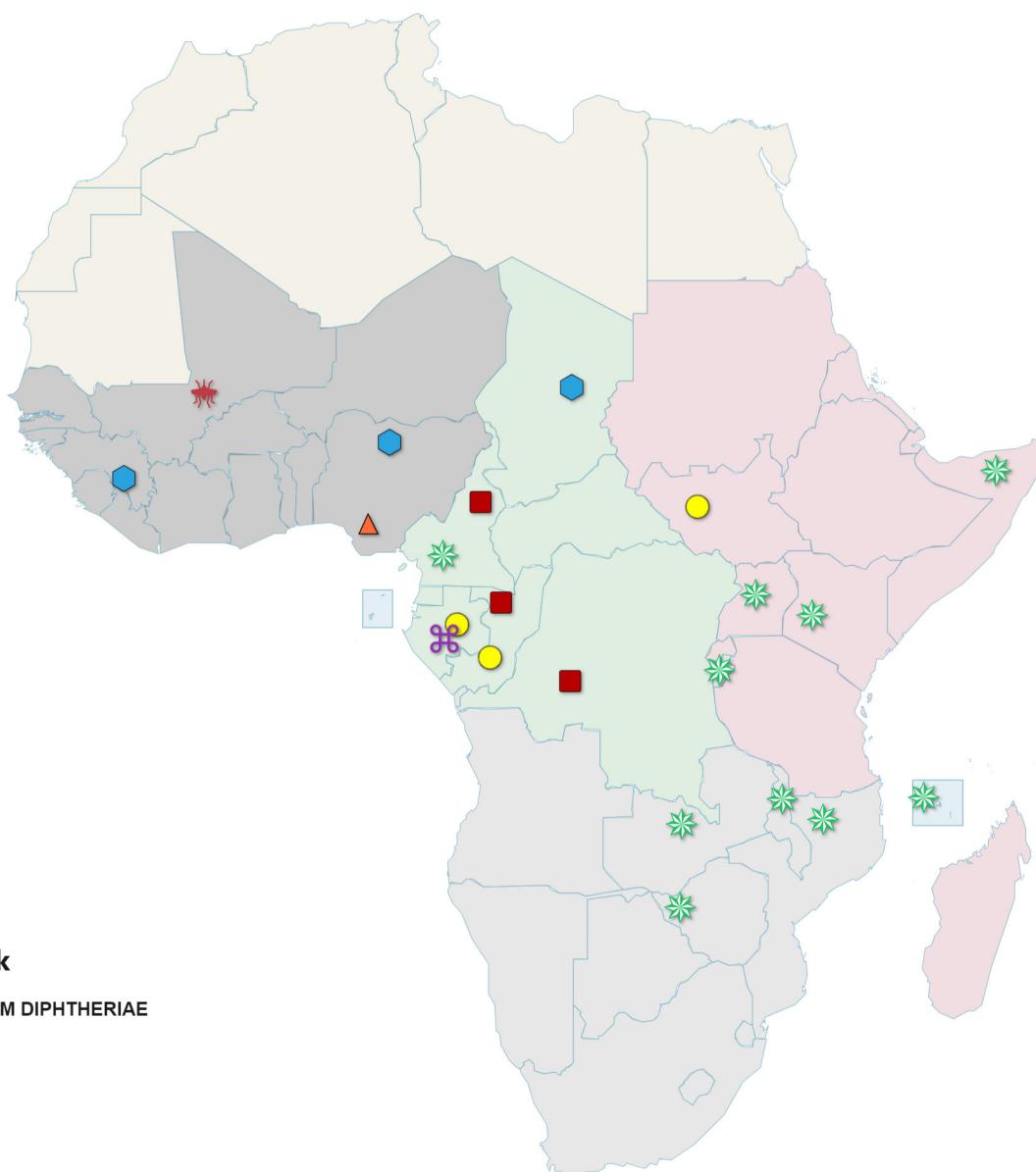
19

Events highlighted
this week

23

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)
Event Type	0	14	9 (1)
Human	0	0	0
Animal	0	0	0
Environment	0	0	0

Human Event Updates

High Risk Events

Cholera in Africa

4,626 confirmed human case(s), **25,183** suspected human case(s)
719 human deaths (**CFR: 2.4%**)

Agent/Pathogen	Vibrio cholerae	First Reported	31-Dec-2023	Previous Report Update	1-Feb-2024
First Occurred	31-Dec-2023	Country	Multiple Countries	Location	14 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	HIGH
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of this year, a total of 29,809 cases (4,626 confirmed; 25,183 suspected) and 719 deaths (CFR: 2.4%) of cholera were reported from 14 African Union (AU) Member States (MS): Burundi (38 cases ; 0 death), Cameroon (138; 27), Comoros (16; 2), DRC (783; 13), Ethiopia (779; 12), Kenya (149; 0), Malawi (36; 2), Mozambique (2,846; 6), Somalia (1,792; 19), South Africa (2; 0), Tanzania (164; 1), Uganda (14y; 0), Zambia (14,780; 513) and Zimbabwe (8,272, 124). This week, 3,561 new cases and 29 new deaths of cholera were reported from: Burundi, Cameroon, Comoros, Kenya, Malawi, Mozambique, Somalia, Uganda, Zambia and Zimbabwe.

Burundi: Since the last update (2 February 2024), the MoH reported five new suspected cases and no new deaths of cholera from two districts: Bujumbura Centre (1 case) and Bujumbura Nord (4). Cumulatively, 38 suspected cases and no death have been reported this year. This is a protracted outbreak that started in January 2023.

Cameroon: Since the last update (26 January 2024), the MoH reported 12 new suspected cases and no new deaths of cholera. Cumulatively 138 suspected cases and 27 deaths (CFR: 19.5%) of cholera have been reported from two regions (Centre and Littoral) in Cameroon. The outbreak is active in 10 health districts in two regions: Centre and Littoral. This is a protracted outbreak that started in January 2022.

Comoros: Since the last update (2 February 2024), the Ministry of Health Solidarity, Social Protection and Gender Promotion reported 10 new confirmed cases and one death of cholera from Ngazidja region. Cumulatively, 16 confirmed cases (13 imported; 3 local) and two deaths (CFR:13%) have been reported from Ngazidja and Moheli regions. Ninety-four percent (94%) of cases were reported from Ngazidja region.

Kenya: Since the last update (2 February 2024), the MoH reported 21 new confirmed cases and no new deaths of cholera from Lamu (10 cases) and Nairobi (11) counties. Cumulatively, 149 cases (147 confirmed; 2 suspected) and no deaths have been reported from two (Lamu and Nairobi) of 47 counties in Kenya this year. This is a protracted outbreak that started in November 2023.

Malawi: Since the last update (2 February 2024), the MoH reported 25 new confirmed cases and two new deaths (CFR: 8%) of cholera from four districts. Cumulatively, 36 confirmed cases and two deaths (CFR: 5.6%) have been reported from four of 29 districts in Malawi this year. This current outbreak started in November 2023.

Mozambique: Since the last update (2 February 2024), the MoH reported 283 new confirmed cases and no new deaths of cholera from seven provinces. This is a 55% decrease in the number of new cases compared to the last week. Cumulatively, 2,846 confirmed cases and six deaths (CFR: 0.2%) have been reported from seven of 10 provinces this year. This current outbreak started in October 2023.

Somalia: Since the last update (2 February 2024), the MoH reported 386 new cases (8 confirmed; 378 suspected) and one new death (CFR: 0.3%) from 17 districts. Cumulatively, 1,792 cases (46 confirmed; 1,746 suspected) and 19 deaths (CFR: 1.1%) of cholera have been reported from 25 El Niño flood-affected districts in Somalia. This is a protracted outbreak that started in 2022 in Afgoye, Baidoa, Jowhar, Kismayo and Merka regions. In Banadir region, the outbreak started in 2017.

Uganda: Since the last update (26 January 2024), the MoH reported one new suspected case of cholera from Adjumani district, northern Uganda. Cumulatively, 14 cases (4 confirmed; 10 suspected) and no deaths of cholera have been reported from one of 146 districts in Uganda.

Zambia: Since the last update (2 February 2024), the MoH reported 1,765 new suspected cases and 25 new deaths (CFR: 1.4%) from 61 districts. This is a 22% decrease in the number of new cases compared to the last week. Cumulatively, 14,780 (841 confirmed; 13,939 suspected) and 513 deaths (CFR: 3.5%) have been reported from 70 of 116 districts in Zambia. The current outbreak started in October 2023.

Zimbabwe: Since the last update (2 February 2024), the MoH reported 1,053 new cases (54 confirmed; 999 suspected) and 48 new deaths (CFR: 7.9%) of cholera from 61 districts. This is a 37% decrease in the number of new cases compared to last week. Cumulatively, 8,272 cases (688 confirmed; 7,584 suspected) and 124 deaths (CFR: 1.6%) have been reported from 61 of 64 districts this year. This is a protracted outbreak that started in February 2023.

In 2023, a total of 238,582 cases (93,457 confirmed; 145,107 suspected) and 3,767 deaths (case fatality rate (CFR: 1.6%)) of cholera were reported from 19 African Union (AU) Member States (MS): Burundi (1,343 cases; 9 deaths), Cameroon (21,269; 508), Congo (724; 14), Democratic Republic of Congo (DRC) (40,497; 344), Eswatini (2; 0), Ethiopia (29,869; 426), Kenya (8,937; 148), Malawi (43,015; 1,262), Mozambique (41,248; 164), Nigeria (2,860; 84), Somalia (18,304; 46), South Africa (1,074; 47), Sudan (8,267; 224), South Sudan (1,471; 2), Tanzania (729; 18), Togo (1; 0), Uganda (78; 10), Zambia (3,757; 128) and Zimbabwe (15,137; 333).

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS continue to conduct enhanced surveillance, case management, risk communication, targeted testing of all samples and water, sanitation and hygiene interventions in the affected areas. Zambia and Zimbabwe conducted oral cholera vaccination campaigns in hotspot areas.

Africa CDC continues to support the surveillance, risk communication, and infection control pillars of affected MS with focus on areas with active outbreaks.

Dengue fever in Africa

629 confirmed human case(s), **2,061** suspected human case(s)
2 human deaths (CFR: **0.1%**)

Agent/Pathogen	Dengue virus	First Reported	11-Jan-2024	Previous Report Update	1-Feb-2024
First Occurred	31-Dec-2023	Country	Multiple Countries	Location	4 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	HIGH
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of this year, a total of 2,690 cases (629 confirmed; 2,061 suspected) and two deaths (CFR: 0.1%) of dengue were reported from four AU MS: Ethiopia (1,561 cases; 0 deaths), Mali (622; 0), Mauritius (498; 2) and Sao Tome and Principe (9; 0). This week, 506 new cases and two new deaths were reported from Mali and Mauritius.

Mali: Since the last update (2 February 2024), the MoH reported 48 new cases (7 confirmed; 41 suspected) and no new deaths of dengue fever from the Bamako and Kayes regions. This is a 39% decrease in the number of new cases reported compared to the last week. Cumulatively, 622 cases (122 confirmed; 500 suspected) and no deaths of dengue fever have been reported from eight of 10 regions in Mali this year. The current outbreak started in September 2023. Two serotypes (VDEN- 1 and VDEN-3) have been detected among confirmed cases.

Mauritius: Since the last update (16 January 2024), the MoH reported 458 new confirmed cases and two new deaths of dengue from Mauritius. Cumulatively, 498 confirmed cases and two deaths (CFR: 0.4%) have been reported from 11 regions. Ninety-one percent (91%) of the new cases reported were from Port-Louis (317 cases) and Northern (98) regions.

In 2023, a total of 280,411 cases (21,999 confirmed; 70,433 probable; 187,979 suspected) and 808 deaths (CFR): 0.3% of dengue fever were reported in 18 AU MS: Angola (3 cases; 0 deaths), Benin (6; 1), Burkina Faso (242,425; 709); Cabo Verde (410; 0), Chad (1,581; 1), Côte d'Ivoire (3,895; 27), Egypt (578; 0), Ethiopia (21,469; 17), Ghana (18; 0), Guinea (6; 1); Mali (6,177; 34), Mauritius (265; 0), Niger (148; 0), Nigeria (84; 0), Sao Tome and Principe (1,227; 11), Senegal (254; 0), Sudan (1,664; 7) and Togo (8; 0).

Response by MS/partner/Africa CDC:

Mali: The MoH continues to conduct active case search, case management, risk communication and vector control activities in the affected communities. Additionally, the MoH is enhancing surveillance at points of entry.

Mauritius: The Ministry of Health distributed treatment guidelines to all health facilities, and continue to conduct enhanced surveillance, vector control and risk communication activities

Human Event Updates

Moderate Risk Events

COVID-19 in Africa

12,444,795 confirmed human case(s)
257,612 human deaths (**CFR: 2.1%**)

Agent/Pathogen	SARS-CoV-2	First Reported	20-Feb-2020	Previous Report Update	1-Feb-2024
First Occurred	13-Feb-2020	Country	Multiple Countries	Location	All 55 MS
Source	Ministry of Health	GeoScope	VERY HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

As of 6 p.m. East African Time (EAT) 8 February 2024, a total of 12,444,795 COVID-19 cases and 257,612 deaths (CFR: 2.1%) have been reported by the 55 AU MS. This represents 2% of all cases and 4% of all deaths reported globally. Fifty-three MS have reported COVID-19 cases infected with the Alpha (50 MS), Beta (46), Delta (53), Gamma (5) and Omicron (53) variants of concern (VOC). Additionally, 32 MS have reported the presence of the Omicron BA.2 sub-variant, 19 MS reported the Omicron sub lineage (BA.2.75), 17 MS reported the Omicron sub lineage (XBB.1.5), 13 MS have reported the Omicron sub lineage (XBB.1.16), 12 MS reported the Omicron sub lineage (BF.7 or BA.5.2.1.7), nine MS have reported the Omicron sub lineage EG.5 and five MS have reported the Omicron sub lineage (BA.2.86). On 21 November 2023, the World Health Organization classified BA.2.86 and its sub lineages (including JN.1) as a variant of interest (VOI). Up to date, there is no concrete evidence that JN.1 presents an increased risk to public health relative to other currently circulating variants. As of 9 February 2024, 11 AU MS: Algeria, Botswana, Egypt, Guinea, Kenya, Mauritius, Republic of Congo, Senegal, South Africa, Tunisia and Zambia, have reported the presence and circulation of the JN.1 variant.

Fifty-four AU MS are currently providing COVID-19 vaccination to the general population. Cumulatively, 1.1 billion doses have been administered on the continent. Of these doses administered, 570.7 million people have been partially vaccinated, and 446.9 million have been fully vaccinated. Eritrea is the only AU MS yet to start COVID-19 vaccination roll out.

For Epi week 5 (29 January – 4 February 2024), seven new COVID-19 cases and no new deaths were reported from Burkina Faso (4) and Eswatini (3). A total of 159 tests were conducted during the past week. Since February 2020, over 136 million COVID-19 tests have been conducted in Africa.

Response by MS/partner/Africa CDC:

The Public Health Emergency Operation Center (PHEOC) of the Africa CDC was activated for COVID-19 since 27 January 2020. For more information on Africa CDC's response efforts please refer to Africa CDC's website.

Measles in Africa

234 confirmed human case(s), **4,974** suspected human case(s)
108 human deaths (CFR: **2.1%**)

Agent/Pathogen	Measles virus	First Reported	31-Dec-2023	Previous Report Update	1-Feb-2024
First Occurred	31-Dec-2023	Country	Multiple Countries	Location	10 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of this year, 5,208 cases (234 confirmed; 4,974 suspected) and 108 deaths (CFR: 2.1%) of measles were reported from 10 AU MS: Burundi (346 cases; 6 deaths), Cameroon (216; 57), Congo (16; 0), DRC (2,364; 45), Ethiopia (73; 0), Gabon (13; 0), Mauritania (380; 0), Somalia (1,247; 0), Uganda (83; 0), Zambia (470; 0). This week, 585 new cases and three new deaths were reported from Cameroon, Congo, Gabon, Mauritania and Somalia.

Cameroon: Since the last update (19 January 2024), the MoH reported 49 new suspected cases and three new deaths (CFR: 6.1%) of measles from four regions: Centre (7 cases; 0 death), Littoral (5; 0), Nord (21; 0), Ouest (16; 0). Cumulatively, 216 suspected cases and 57 deaths (CFR: 26.4%) have been reported from five (Adamaoua, Extreme-Nord, Littoral, Nord and Ouest) of 10 regions. The outbreak is active in nine health districts in five regions.

Congo: Since the last update (26 January 2024), the MoH reported 13 new suspected cases and no new deaths of measles from seven health districts: Hinda- Djiri (1), Etoumbi (1), hinda-Loango (1), Loandjili (2), Makelekele (2), Mongo-Poukou (1) and Mossaka-Loukolela (5). Cumulatively, 16 suspected cases and no deaths of measles have been reported from five of 26 provinces in Congo. This is a protracted outbreak that started in April 2022.

Gabon: Since the last update (26 January 2024), the MoH reported 11 new suspected cases of measles and no new deaths from two regions: Libreville-Owendo (6 cases) and Sud-Est (5). Cumulatively, 13 suspected cases and no deaths of measles have been reported from all of 10 regions in Gabon. This is a protracted outbreak that started in January 2022.

Mauritania: Since the last update (26 January 2024), the MoH reported 193 new cases (29 confirmed; 164 suspected) and no new deaths of measles. Cumulatively, 380 cases (159 confirmed; 221 suspected) have been reported from 15 of 63 districts in Mauritania. This is a protracted outbreak that started in March 2023.

Somalia: Since the last update (2 February 2024), the MoH reported 319 new cases (27 confirmed; 292 suspected) and no new deaths of measles. Fifty-four percent of the reported new cases were from Banadir (71 cases), Galgaduud (39), Gedo (25) and Lower Shabelle (36) districts. Sixty-seven percent of the cases are children under five years. Cumulatively, 1,247 cases (27 confirmed; 1,220 suspected) have been reported from Somalia this year.

In 2023, a total of 375,908 (21,757 confirmed; 354,151 suspected) and 5,446 deaths (CFR: 1.4%) of measles were reported from 28 AU MS: Angola (6,203 cases; 53 deaths), Botswana (13; 0), Burkina Faso (1,701; 2), Burundi (1,496; 6), Cameroon (8,504; 64), Central African Republic (CAR) (2,873; 0), Chad (9,932; 8), Congo (695; 5), DRC (313,732 ; 5,855), Ethiopia (31,103; 242), Gabon (3,108; 0), Gambia (208; 0), Ghana (212; 0), Guinea (1,011; 2), Kenya (1,551; 24), Libya (391; 2), Liberia (8,501; 9), Malawi (32; 0), Mali (1,580; 0), Mauritania (924; 8), Mozambique (1,342; 0), Niger (1,690; 0), Senegal (4,534; 0), Somalia (12,642; 0), South Africa (967; 0), South Sudan (7,470; 166), Uganda (409; 1) and Zambia (8,029; 1).

Response by MS/partner/Africa CDC:

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

Mpox in Africa

251 confirmed human case(s)

1,357 suspected human case(s)

115 human deaths (**CFR: 45.8%**)

Agent/Pathogen	Mpox virus	First Occurred	31-Dec-2023	Country	Multiple Countries
Location	3 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, 1,608 cases (251 confirmed; 1,357 suspected) and 115 confirmed deaths (CFR: 45.8%) of mpox have been reported from three endemic AU MS: Cameroon (8 cases; 1 death), Congo (2; 0), and DRC (1,598; 114). The DRC accounted for 98.4% of all confirmed cases and 99.1% of all deaths reported on the continent this year. This week, 1,177 new cases and 97 new deaths among suspected cases of mpox were reported from Cameroon, Congo and DRC .

Cameroon (Initial report): On 2 February 2024, the MoH reported eight cases (2 confirmed; 6 suspected) and one new death of mpox from three of the 10 regions in Cameroon: Centre (3cases), Littoral (2) and Nord-Ouest (1).

Congo: On 8 February 2024, the Congo MoH reported two confirmed cases of mpox and no deaths from Impfondo and Gamboma health districts. The current outbreak started in August 2023. MPox, caused by an Orthopoxvirus, had already been detected in the Likouala Department in the far north of the Republic of Congo in 2003 and 2017, the current epidemic being the third of its kind in the department.

DRC: Since the last report (5 January 2024), the MoH reported 1,167 cases (224 confirmed; 943 suspected) and 96 deaths (CFR: 42.9%) of mpox from 11 regions in DRC. Cumulatively, 1,598 cases (247 confirmed; 1,351 suspected) and 114 deaths (CFR: 46.1%) of mpox were reported from 23 of the 26 regions in DRC.

In 2023, a total of 12,063 cases (1,431 confirmed; 10,632 suspected) and nine confirmed deaths (CFR: 0.6%) of mpox have been reported from seven AU MS: Cameroon [140 cases; 1 death(s)], CAR (67; 2), Congo (95; 2), DRC (14,200; 715), Ghana (11; 0), Liberia (9; 0) and Nigeria (79; 2).

Response by MS/partner/Africa CDC:

The ministries of health of the affected countries continue to intensify surveillance, active case search, risk communication and community engagement activities in the affected districts.

Africa CDC: This week, Africa CDC is organizing a high level ministerial meeting in the DRC to understand response gaps and provide support to the MoH in the control of mpox and cholera outbreaks in the country

Yellow fever in Africa

1 confirmed human case(s), **76** suspected human case(s)
6 human deaths (CFR: **7.8%**)

Agent/Pathogen	Yellow fever virus	First Reported	31-Dec-2023	Previous Report Update	25-Jan-2024
First Occurred	31-Dec-2023	Country	Multiple Countries	Location	3 MS
Source	Ministry of Health	GeoScope	Moderate	Human Risk Assessment	Moderate
Animal Risk Assessment	N/A				

Description:

Since the beginning of this year, 77 cases (1 confirmed; 76 suspected) and six deaths [case fatality rate (CFR: 7.8%)] of yellow fever were reported from three AU MS: Congo (22; 0), Gabon (5; 0) and South Sudan (50; 6). This week, 34 new cases and one new death (CFR: 2.9%) of yellow fever were reported from Congo, Gabon and South Sudan.

Congo: Since the last update (26 January 2024), the MoH reported 11 new suspected cases and no new deaths of yellow fever from: Hinda-Loango (1 suspected cases), Kindamba (1), Madingou (1), Makelekele (1), Oyo-Alima (1) and Tie-Tie (6) districts. Cumulatively, 22 suspected cases and no deaths were reported from six of 12 districts in Congo.

Gabon: Since the last update (26 January 2024), the MoH reported three new suspected cases and no new deaths of yellow fever from the Ngounie region. Cumulatively, five suspected cases and no deaths of yellow fever have been reported from Maritime (2 cases) and Ngounie (3) regions in Gabon.

South Sudan: Since the last update (26 January 2024), the MoH reported 20 new cases (1 confirmed; 19 suspected) and one new death (CFR: 5%) of yellow fever. Cumulatively, 50 cases (2 confirmed; 48 suspected) and six deaths (CFR: 12%) have been reported from six counties in Western Equatoria state: Ezo (3 cases), Ibba (3), Maridi (1), Nzara (7), Tambura (9) and Yambio (27).

In 2023, a total of 2,917 cases (147 confirmed; 2,776 suspected) and 39 deaths (CFR: 1.3%) of yellow fever were reported from seven AU MS: Cameroon (59 cases; 6 deaths), CAR (349; 6), Congo (389; 2), Gabon (128; 0), Guinea (178; 4), Nigeria (1,819; 21) and Uganda (12; 0).

Response by MS/partner/Africa CDC:

The Ministries of Health in these MS are implementing vector control and community engagement activities in the affected areas

Lassa virus in Nigeria

258 confirmed human case(s)

1,239 suspected human case(s)

48 human deaths (**CFR: 18.6%**)

Agent/Pathogen	Lassa virus	First Reported	18-Jan-2024	Previous Report Update	1-Feb-2024
First Occurred	6-Jan-2024	Country	Nigeria	Location	17 states
Source	Nigerian CDC	GeoScope	LOW	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the last update, the Nigeria Centre for Disease Control (NCDC) reported 394 new cases (47 confirmed; 347 suspected) and five new deaths (CFR: 10.6%) of Lassa fever from nine of 36 states and the federal capital territory. This is a 29% decrease in the number of cases and a 69% decrease in the number of deaths compared to the same period in 2023. Additionally, there is an 18% decrease in the number of new cases and a 77% decrease in the number of new deaths reported compared to the last week. Cumulatively, 1,497 cases (258 confirmed; 1,239 suspected) and 48 deaths (CFR: 18.6%) of Lassa fever have been reported from 18 of 36 states and the federal capital territory this year. Of the confirmed cases, 13 were healthcare workers.

Response by MS/partner/Africa CDC:

The NCDC activated the national Lassa fever multi-partner, multi-sectoral EOC to level-2 to coordinate the response activities at national and sub-national levels

Diphtheria in Africa

1,397 confirmed human case(s)
1,126 suspected human case(s)
19 human deaths (**CFR: 1.4%**)

Agent/Pathogen	Corynebacterium diphtheriae	First Reported	19-Jan-2023	Previous Report Update	1-Feb-2024
First Occurred	13-Dec-2022	Country	Multiple Countries	Location	3 MS
Source	Ministry of Health	GeoScope	LOW	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

Update to Event:

Since the beginning of the year, a total of 2,523 cases (1,397 confirmed; 1,126 suspected) and 19 deaths (CFR: 1.4%) of diphtheria have been reported in three AU MS: Chad (98 cases; 0 deaths), Guinea (735; 3), and Nigeria (1,690; 16). This week, 881 new cases and 15 new deaths were reported from Chad, Guinea and Nigeria.

Chad: Since the last update (26 January 2024), the MoH reported 29 new suspected cases and no new deaths of diphtheria from five health districts: Alifa (4 cases), Assinet (1), Ati (19), Fada (4) and Ndjamaa bilala (1). Cumulatively, 98 suspected cases and no deaths of diphtheria were reported from 13 of 150 health districts in Chad. This is a protracted outbreak that started in August 2023.

Guinea: Since the last update (2 February 2024), the MoH reported 251 new suspected and no new deaths of diphtheria from Siguiri region. This is a 44% increase in the number of new cases reported compared to the last week. Cumulatively, 735 suspected cases and three deaths of diphtheria were reported from two of the eight regions in Guinea. This is a protracted outbreak which started in July 2023. Persons >15 years old accounted for 31% and females accounted for 66% of all cases reported. Additionally, none of the reported cases had been fully vaccinated against diphtheria.

Nigeria: Since the last update (2 February 2024), the NCDC reported 601 new cases (493 confirmed; 108 suspected) and 15 new deaths (CFR: 3.0%) of diphtheria. Cumulatively, 1,690 cases (1,397 confirmed; 293 suspected) and 16 deaths (CR: 1.1%) of diphtheria were reported from eight of the 36 states and the federal capital territory. This is a protracted outbreak which started in December 2022. Females accounted for 59% of the total cases reported. Only 25% of all reported cases were fully vaccinated against diphtheria.

In 2023, a total of 27,346 cases (13,879 confirmed; 13,467 suspected) and 797 deaths (CFR: 5.7%) of diphtheria have been reported in six AU MS: Algeria (80 cases, 10 deaths), Guinea (2,676; 91), Mauritania (20; 6), Niger (2,198; 91) and Nigeria (22,359; 578) and South Africa (13; 1).

Response by MS/partner/Africa CDC:

Chad and Guinea: The MoH of Chad and Guinea continue to improve community surveillance and contact tracing in the affected areas.

Nigeria: The Nigeria diphtheria technical working group continues to coordinate and monitor diphtheria surveillance and response activities in the country.

- Cases in this report include confirmed, probable and suspected cases
- Case fatality rates are calculated using confirmed cases and deaths only, except for bacterial meningitis, cholera, measles, 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: event is limited to sub-national areas within one MS; Moderate: Event is affecting multiple countries within an AU region, or have been imported from/exported to 1-2 countries from another global region; High: 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 to 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 and very high depending on how they score on the above criteria.