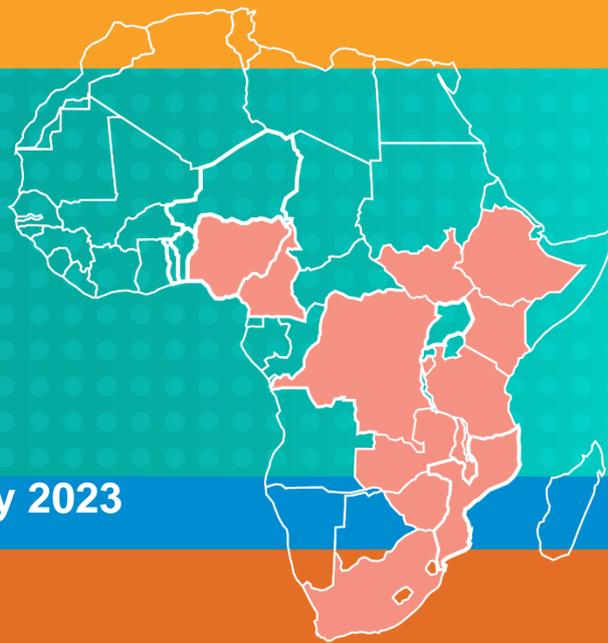


Cholera in the WHO African Region

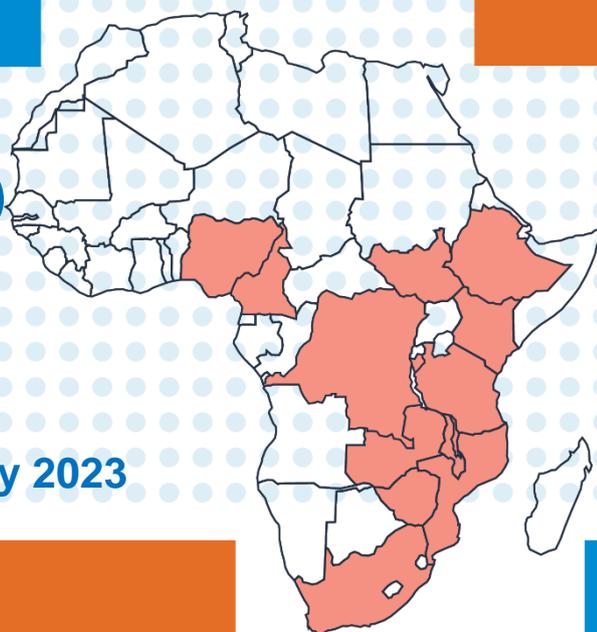


Weekly Regional Cholera Bulletin: 17 July 2023

Data reported: as of 16 July 2023



Cholera in the WHO African Region



Weekly Regional Cholera Bulletin: 17 July 2023

Data reported: as of 16 July 2023

Situation update

Regional Cholera Update

Grade 3

Cumulative Cases
 213 443

Cumulative Deaths
 3 951

CFR
1.9%

Overview

The cholera outbreak has affected 14 countries in the WHO African Region. The climate-induced natural disasters such as cyclone and flooding in the southern African region and drought in the Horn of Africa led to increase in cases of cholera in many of the affected countries. With the rainy season commencement in the west African region there is risk of more cholera outbreaks on the horizon. The trend across the region is being closely monitored and this highlights the need for Member States to enhance readiness, heighten surveillance and institute preventive and control measures in communities and around border crossings to prevent and mitigate cross border infection.

Since 1 January 2022, a cumulative number of 213 443 cholera cases has been reported to the WHO Regional Office for Africa (AFRO), including 3 951 deaths with a case fatality ratio (CFR) of 1.9% as of 16 July 2023 (Table 1). Malawi accounts for 28% (58 941) of the total cases and 45% (1 766) of all deaths reported, and together with Cameroon, Democratic Republic of the Congo, Mozambique, and Nigeria contribute to 85% (181 300) of the overall caseload and 88% (3 464) of cumulative deaths. In Epidemiologic week 28, six countries Burundi, Cameroon, Ethiopia, Kenya, Malawi and Mozambique reported a total of 667 new cases.

The cholera outbreaks in the African Region are occurring in the context of **natural disasters such as cyclones** (Mozambique, Malawi), **flooding** (Mozambique, Malawi), **drought** (Kenya and Ethiopia), **conflict** (Cameroon, Democratic Republic of the Congo, Nigeria, Ethiopia) and **multiple disease outbreaks** including Mpox, wild polio, measles, COVID-19, etc. Many countries have **limited** and strained resources, **shortage** of medical commodities, including cholera kits and Oral Cholera Vaccine (OCV). **Poor** sanitation and unreliable water supplies with increased **cross-border movements** also serve as driving factors for the outbreak across the region.

Figure 1: Distribution of cholera cases and deaths in WHO African Region, 1 January 2022— 16 July 2023

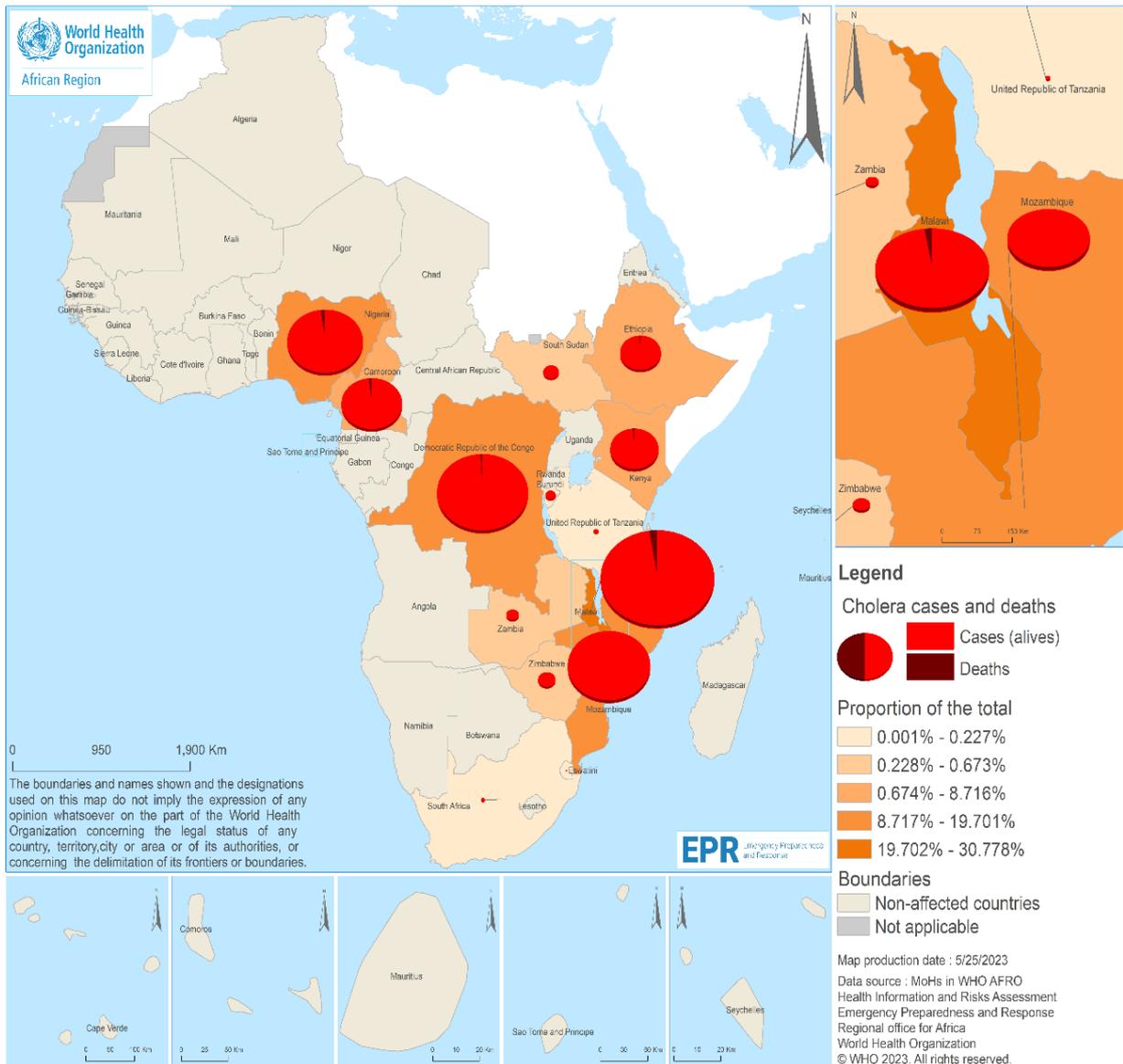


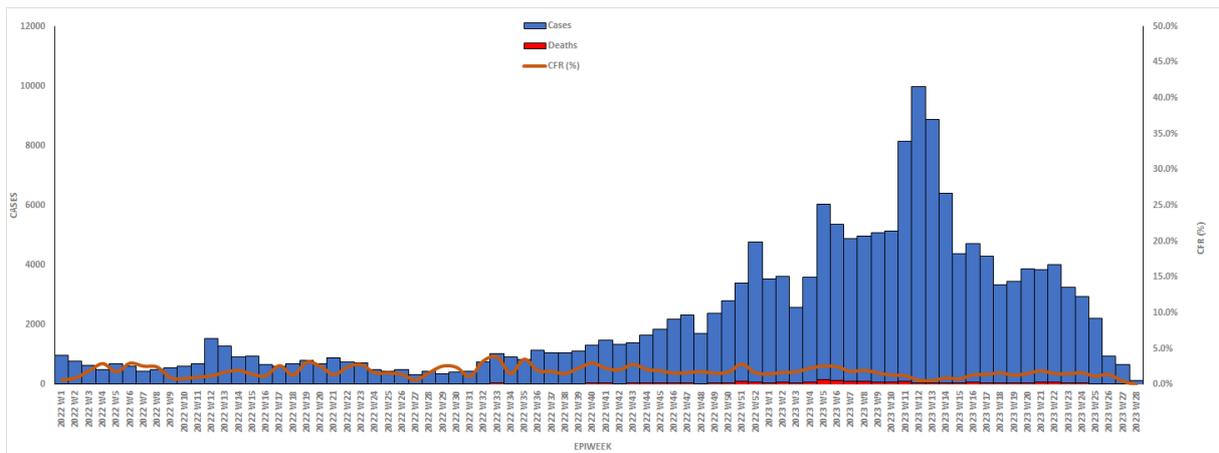
Table 1: Cholera Cases and Deaths in WHO AFRO Region, 1 January 2022 to 16 July 2023

Country	Cumulative Cases	Cumulative Deaths	CFR (%)	Date outbreak started	Last update
Malawi	58 941 [†]	1 766	3.0	Mar 2022	16 Jul 2023
Democratic Republic of Congo	44 398	463	1.0	Jan 2022	2 Jul 2023
Mozambique	33 344	141	0.4	Sep 2022	15 Jul 2023
Nigeria ^{††}	25 613	652	2.5	Jan 2022	4 Jun 2023
Cameroon	19 004	442	2.3	Jan 2022	16 Jul 2023
Ethiopia	13 322	172	1.3	Aug 2022	15 Jul 2023
Kenya	11 861	194	1.6	Oct 2022	16 Jul 2023
Zimbabwe	3 583	72	2.0	Feb 2023	16 Jul 2023
South Sudan	1 471	2	0.1	Feb 2023	16 May 2023
Zambia	757	14	1.8	Jan 2023	22 Jun 2023
Burundi	581	9	1.5	Jan 2023	15 Jul 2023
United Republic of Tanzania	368	4	1.1	Feb 2023	16 Jul 2023
South Africa	198	20	10.1	Feb 2023	9 Jul 2023
The Kingdom of Eswatini	2	0	0	Mar 2023	25 Apr 2023
TOTAL	213 443	3 951	1.9		

NB[†] Erratum: Cumulative cases of 59 027 for Malawi in the last edition was an error. The correct cumulative cases should have been **58 936**

†† Data for Nigeria was adjusted after data reconciliation in the country in the last edition

Figure 2: Epi Curve of cholera cases and deaths in WHO African Region, 1 January 2022 – 16 July 2023



Country Specific updates

Malawi

Grade 3

Cumulative Cases

 **58 941**

Cumulative Deaths

 **1 766**

CFR

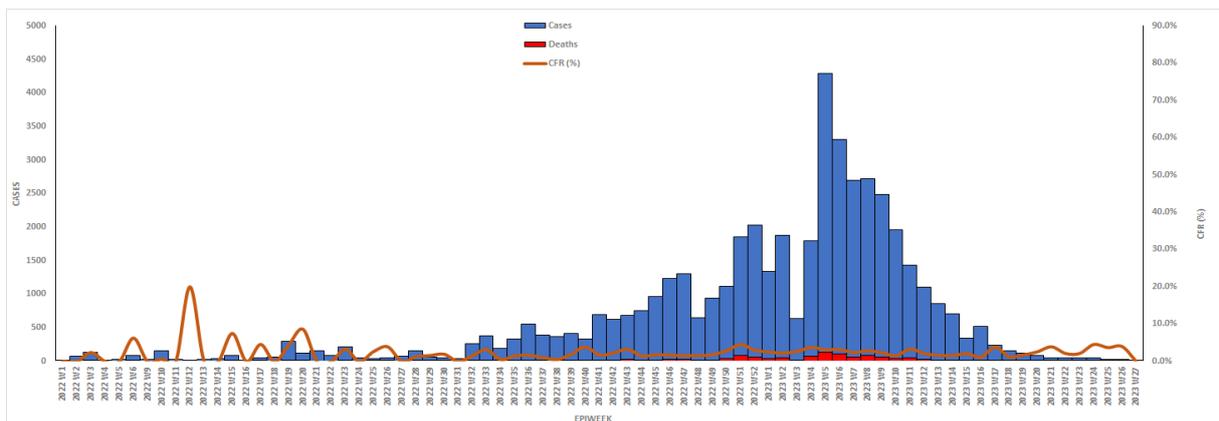
3.0%

The cholera outbreak in Malawi has continued to decline over the past two months. In Epi week 28 there were five new cases and no death reported compared to 16 new cases and three deaths in Epi week 27.

As of 16 July 2023, a cumulative total of 58 941 cases have been reported since the onset of the outbreak from all the 29 districts of the country. The cumulative number of deaths now stands at 1 766, with a case fatality ratio of 3.0%.

NB: Erratum: Cumulative cases of 59 027 for Malawi in the last edition was an error. The correct cumulative cases should have been 58 936

Figure 3: Epi Curve for cholera outbreak in Malawi, 3 March 2022 – 16 July 2023



Ongoing Public Health Actions

- Priority area for multisectoral interventions (PAMI) engagement with MOH is ongoing.
- Conducted field visit to Chipwaila cholera treatment unit (CTU) for supportive supervision with partners and Chikwawa District Health Office. This CTU reported 14 suspected cases in the past 10 days after achieving zero cholera case reporting for almost 45 days.
- Distributed cholera prevention information education and communication materials (4 000 leaflets and 2 552 posters) targeting public places in cholera hot spots districts including Chikwawa district.

Challenges/Gaps

- Scale down of activities with several partners exiting the response.
- Limited WASH facilities and funding to support the provision of safe water to affected communities by Cyclone Freddy.
- New emerging Cholera hotspots in the southern and central regions, with sporadic cases in districts that had taken more than 14 days without a new case.

Mozambique

Grade 3

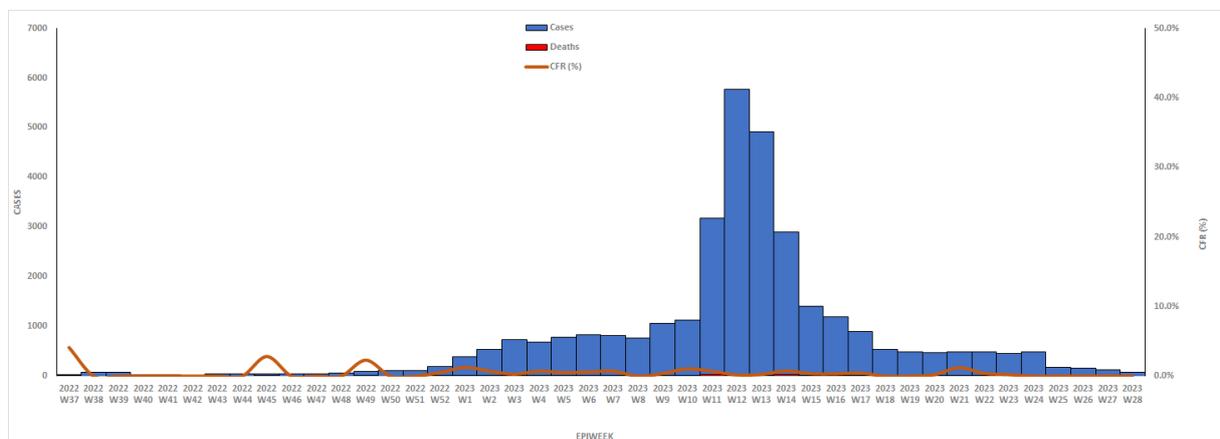
Cumulative Cases
 **33 344**

Cumulative Deaths
 **141**

CFR
0.4%

As of 16 July 2023, the country had reported a cumulative total of 33 344 cases, with 141 deaths (CFR 0.4%). Cases decreased in week 28 by 36% to 103 cases compared to 160 cases in week 27. There has been no death reported since week 24. A new outbreak was declared in Mueda district (Cabo Delgado province). In total, in the week 28, seven districts reported cases: three in Nampula (Nampula City, Meconta, and Erati), one in Sofala (Chemba), one in Zambezia (Maganja da Costa), and two in Cabo Delgado (Macomia, Mueda).

Figure 4: Epicurve of cholera outbreak in Mozambique, September 2022 to 16 July 2023



Ongoing Public Health Actions

- Ensured support in case management to the district of Mueda by allocating, four nurses, four hygienists, and four security guards.
- Strengthened access to care for patients along the border with Malawi, by supporting the set-up of one ORP in Morrumbala district hospital to reduce the movement population of cholera patients from Mozambique to Malawi.
- Replenished Mueda district with 2 cholera kits (1 peripheral kit and 1 community kit) and bulk supplies (soap, buckets, chlorine) to ensure availability of stock for rapid action.

Challenges/Gaps

- Lack of access to some affected areas in Cabo Delgado province due to insecurity is hindering the installation of ORPs and health promotion and sensitization activities at the community level.
- Exhausted cholera response team due to the extension of the cholera outbreak over 10 months and the numerous parallel other public health emergencies, impact the ongoing response.

South Africa

Grade 3



As of 9 July 2023, South Africa has reported a total of 1 076 suspected cases from the five provinces – Gauteng, Free State, North West, Limpopo and Mpumalanga. There are however 198 laboratory confirmed cholera cases with 20 laboratory confirmed deaths (CFR=10.1%) reported from the five provinces. There has been no new confirmed case since 22 June 2023.

The cholera outbreak in the country can be characterized as a combination of cases clustered within specific households or related to social gatherings and sporadic cases.

Public Health Actions

- Planning for integrated cholera readiness training to span from 17 July to 24 August 2023 in four sessions of four days each for nine provinces.
- Ongoing distribution of hygiene kits with 1 232 kits distributed.

Challenges/Gaps

- Shortage of infection prevention and control (IPC) supplies and dedicated staff for management of cholera cases in some health facilities

As of week 28, the reported cumulative Cholera cases were 3 583 with 72 deaths (CFR 2.0%). All of the ten provinces in the country have been affected. The three provinces with the highest number of cumulative cases are Harare (1 471), Manicaland (1 447) and Mat South (292) which account for 90% (3 210 cases). The outbreak in Zimbabwe started on 12 February 2023 in Chegutu town, Mashonaland West Province. WHO has provided funding to support the country response.

Figure 5: Epicurve of Cholera outbreak in Zimbabwe as of 16 July 2023

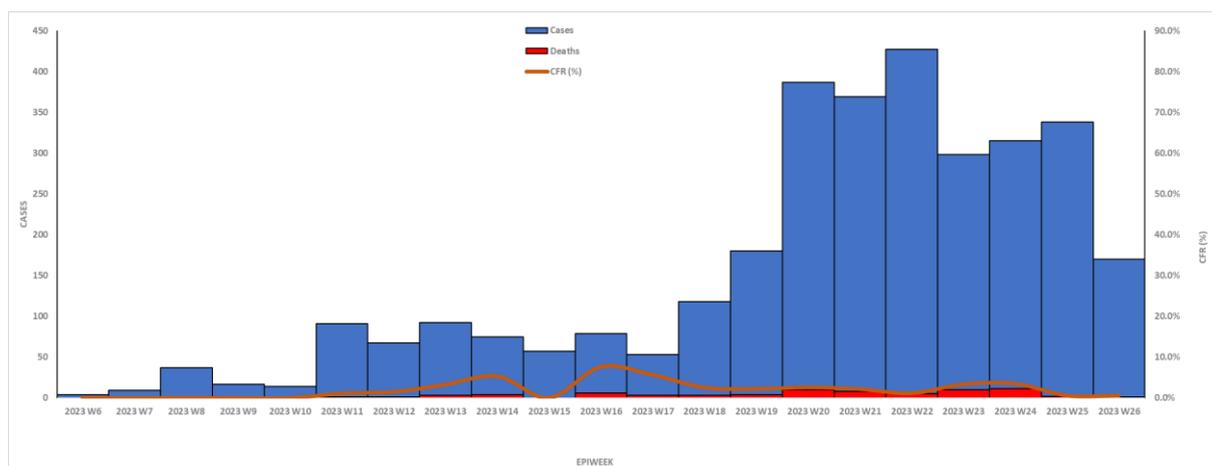
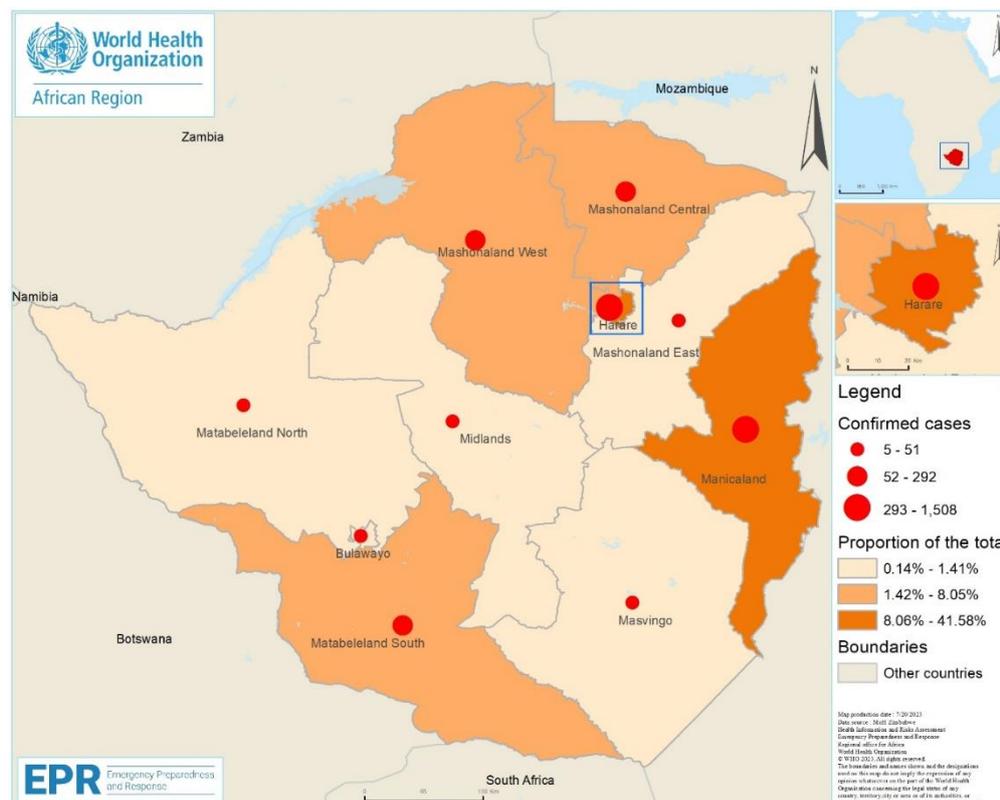


Figure 6: Map of Zimbabwe showing cholera affected provinces as of 16 July 2023



Public Health Actions

- Conducted training for 200 health promoters for the religious gathering in Manicaland.
- Conducted infection prevention control training in Harare.

Challenges/Gaps

- Weak coordination of partners and response at the national level.

Cameroon

Grade 3

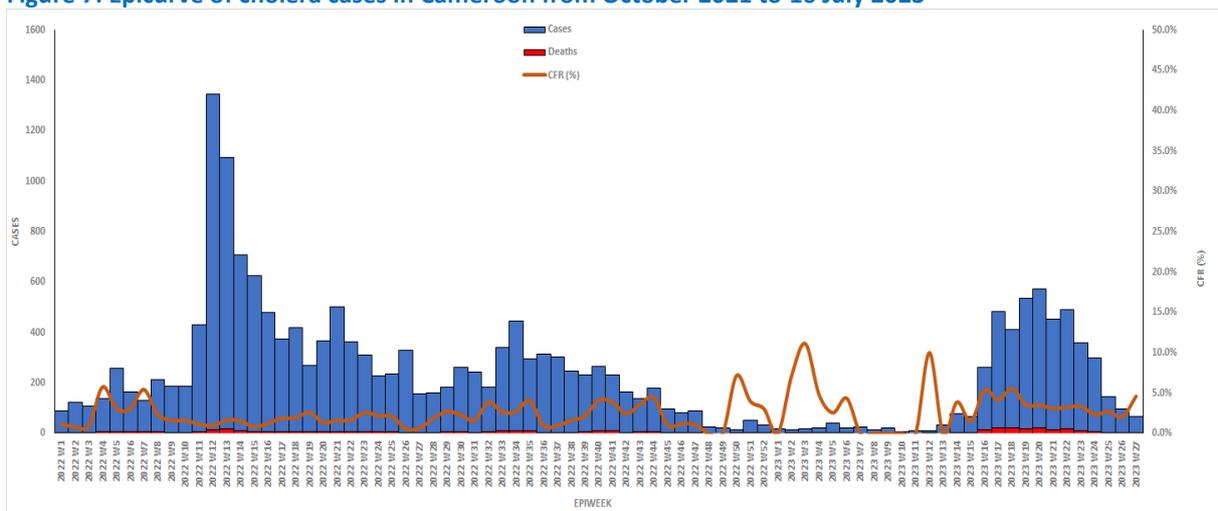
Cumulative Cases
19 004

Cumulative Deaths
442

CFR
2.3%

There was a 3% decrease in reported cases from Cameroon in week 28 with 68 new cases compared to 70 cases in week 27. There has been a decline in cases since week 22. There was no death reported in week 28, compared to three deaths reported in week 27. Cumulatively, from 1 January 2022 to 16 July 2023, Cameroon has reported 19 004 cases with 442 deaths (CFR = 2.3%). WHO continues to support response activities across all pillars. There was a training on preventing and responding to sexual exploitation, abuse and harassment (PRSEAH) for responders from the central, regional and district levels of the Ministry of Health. Preparations are also being made to conduct the fifth reactive oral cholera vaccination campaign.

Figure 7: Epicurve of cholera cases in Cameroon from October 2021 to 16 July 2023



Kenya

Grade 3

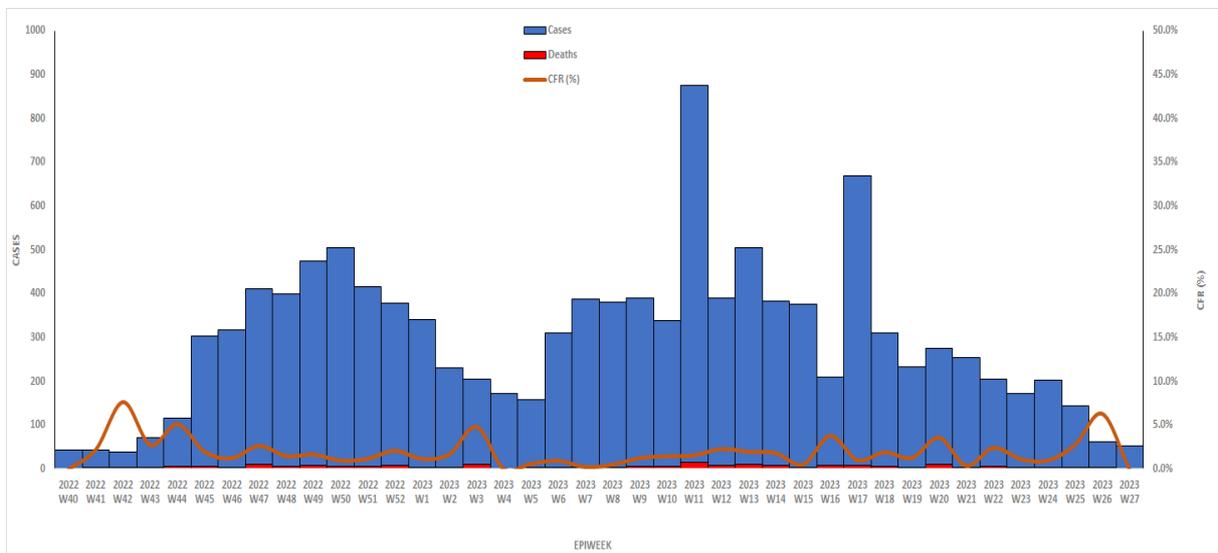
Cumulative Cases
11 861

Cumulative Deaths
194

CFR
1.6%

There were 37 cases (29% decrease) in week 28 compared with 52 cases in week 27. There was no reported death in weeks 27 and 28. As of 16 July 2023, a cumulative total of 11 861 cases has been reported since the onset of the outbreak with 194 deaths (CFR=1.6%). WHO has provided additional funds to support the response in the country.

Figure 8: Epicurve of cholera cases in Kenya from October 2021 to 16 July 2023



Public Health Actions

- Key messages continue to be aired on various radio stations across all hotspot areas.
- Received ICG approval for 1.8 Million doses of oral cholera vaccines. Plans ongoing to undertake 10 days of oral cholera vaccination reactive campaigns for six counties from 3 August 2023.
- Cholera treatment units have been activated in all affected sub counties.

Challenges/Gaps

- Need to mobilize additional resources for implementation of the response plan.

There was a 135% increase in new cases, with 448 new cases in week 28 compared to 191 new cases in week 27. Likewise, deaths increased by 50% in week 28 with two reported deaths from one death in the previous week. There was a cholera outbreak in Quara woreda, West Gonda, Amhara region at a Holy water site. A coordinated multi-sectoral response is ongoing.

As of 15 July 2023, Ethiopia has reported a cumulative case load of 13 322 with 172 deaths (CFR = 1.3%). The index case was reported on 27 August 2022 from Harana Buluk. Current water supply coverage for the cholera outbreak-affected woredas in Oromia and Somali regions remains suboptimal.

Figure 9: Epicurve of Cholera outbreak in Ethiopia from October 2022 to 8 July 2023

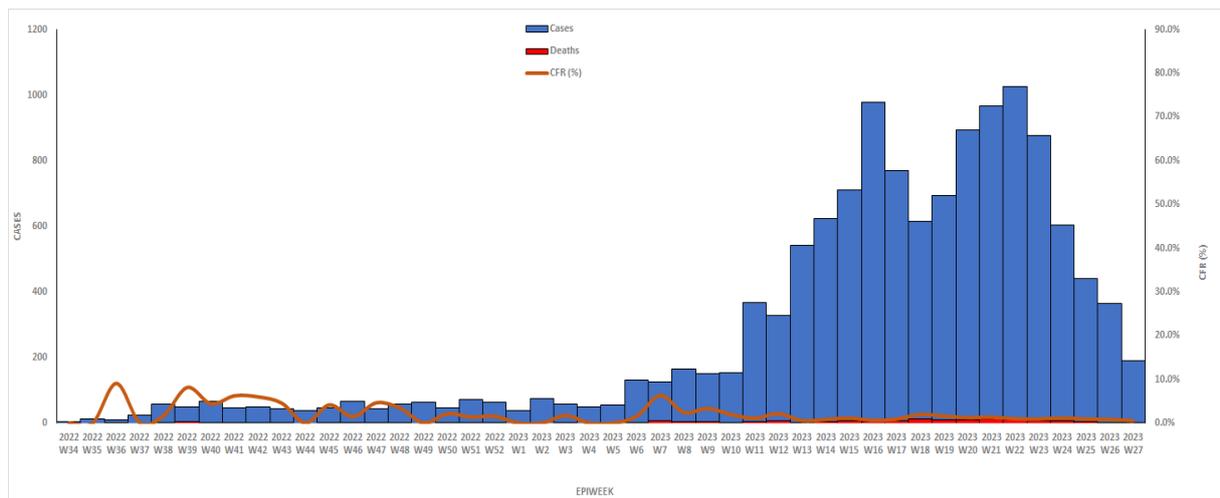
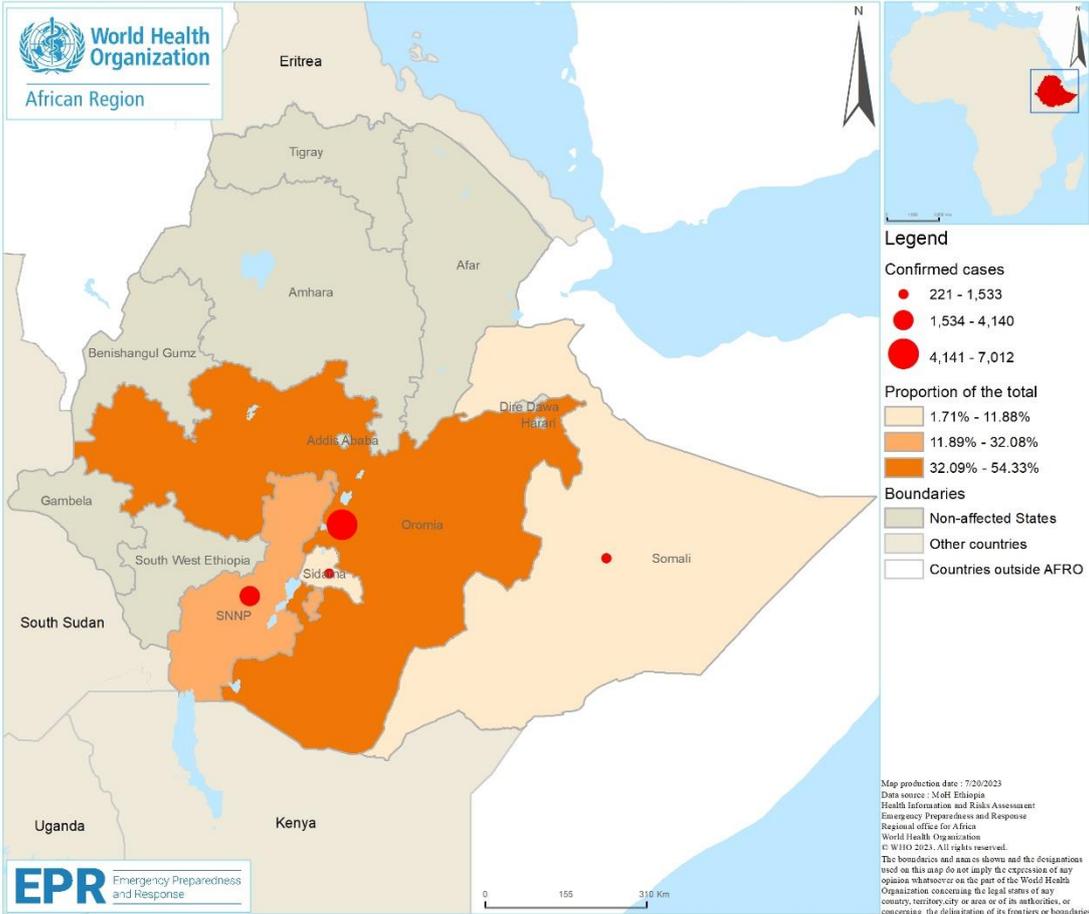
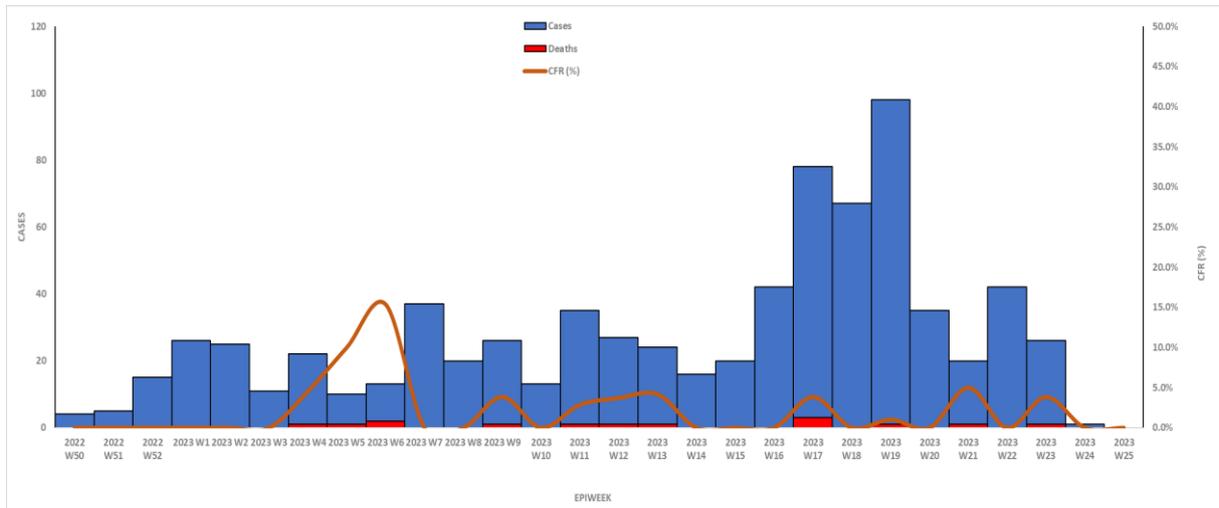


Figure 10: Map of Ethiopia showing cholera affected areas from October 2022 to 15 July 2023



There have been no new reports received from the country. Cumulatively, 757 cases and 14 deaths (CFR = 1.8%) have been reported as of 22 June 2023. Zambia reported one new case in week 24. There was no death reported in weeks 24 and 25. Currently, two districts in two provinces – Chiengi district in Luapula province and Mpulungu district in Northern Province are reporting cholera cases.

Figure 11: Epicurve of cases and deaths in Zambia as of 22 June 2023



United Republic of Tanzania

Grade 3

Cumulative Cases



368

Cumulative Deaths



4

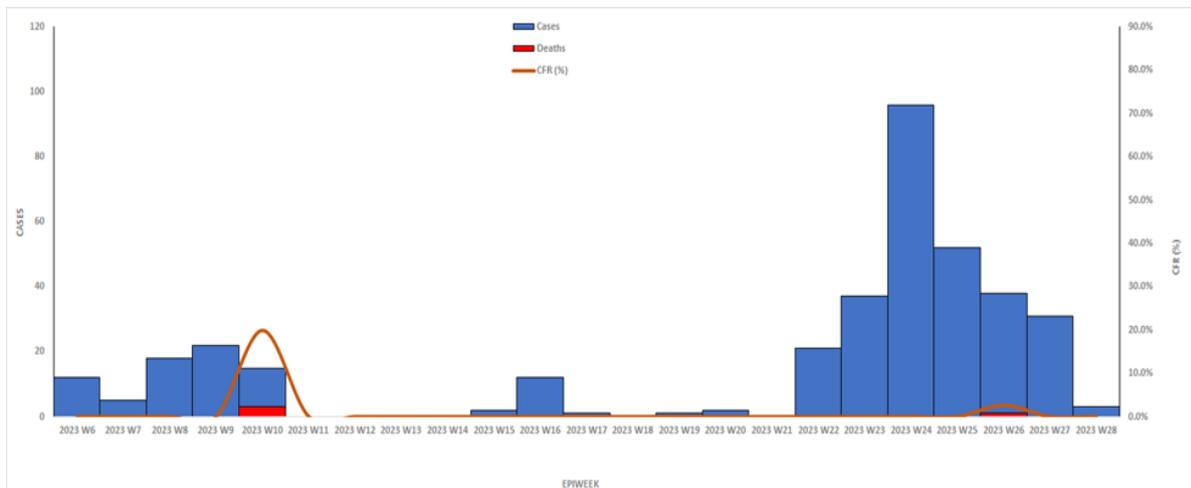
CFR

1.1%

As of 16 July 2023 there were 284 suspected cases and one death from Arusha. Cumulative number of cases in the country since 22 January to 16 July 2023 are 368 and four deaths with a CFR 1.1%. There has been response activities controlling the outbreak.

The last reported case was on 8 May 2023. The Ministry of health declared the end of the outbreak in Dar es Salaam over on 5 June 2023.

Figure 12: Epicurve of cases and deaths in the United Republic of Tanzania as of 16 July 2023



Burundi

Grade 3

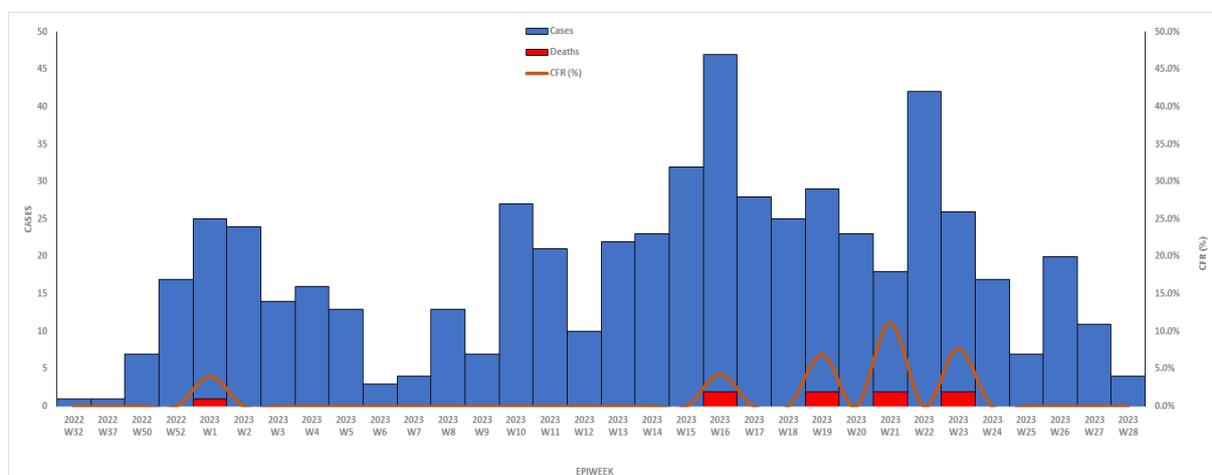
Cumulative Cases
581

Cumulative Deaths
9

CFR
1.5%

As of 15 July 2023, a cumulative of 581 cases and nine deaths (CFR 1.5%) were reported from Burundi. There was a 45% decrease in cases from 11 cases in week 27 to six cases in week 28. There has been no death reported since week 24. Burundi has reported cholera cases since 8 December 2022, and the outbreak was officially declared on 1 January 2023.

Figure 13: Epicurve of cases and deaths in Burundi as of 15 July 2023



Democratic Republic of the Congo

Grade 3

Cumulative Cases
44 398

Cumulative Deaths
463

CFR
1.0%

As of 2 July 2023, the country had reported 44 398 cumulative cases, with 463 deaths (CFR = 1.0%) across 12 affected provinces. There has been deployment of nine cholera kits to Tanganyika province which experienced a recent spike in new cases.

Figure 14: Epicurve of cases and deaths in Democratic Republic of the Congo as of 2 July 2023

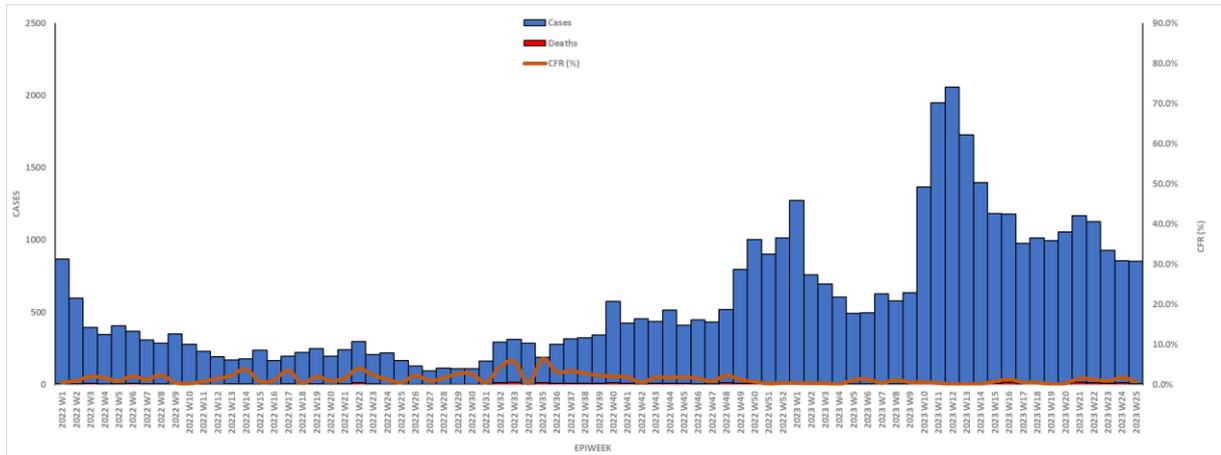
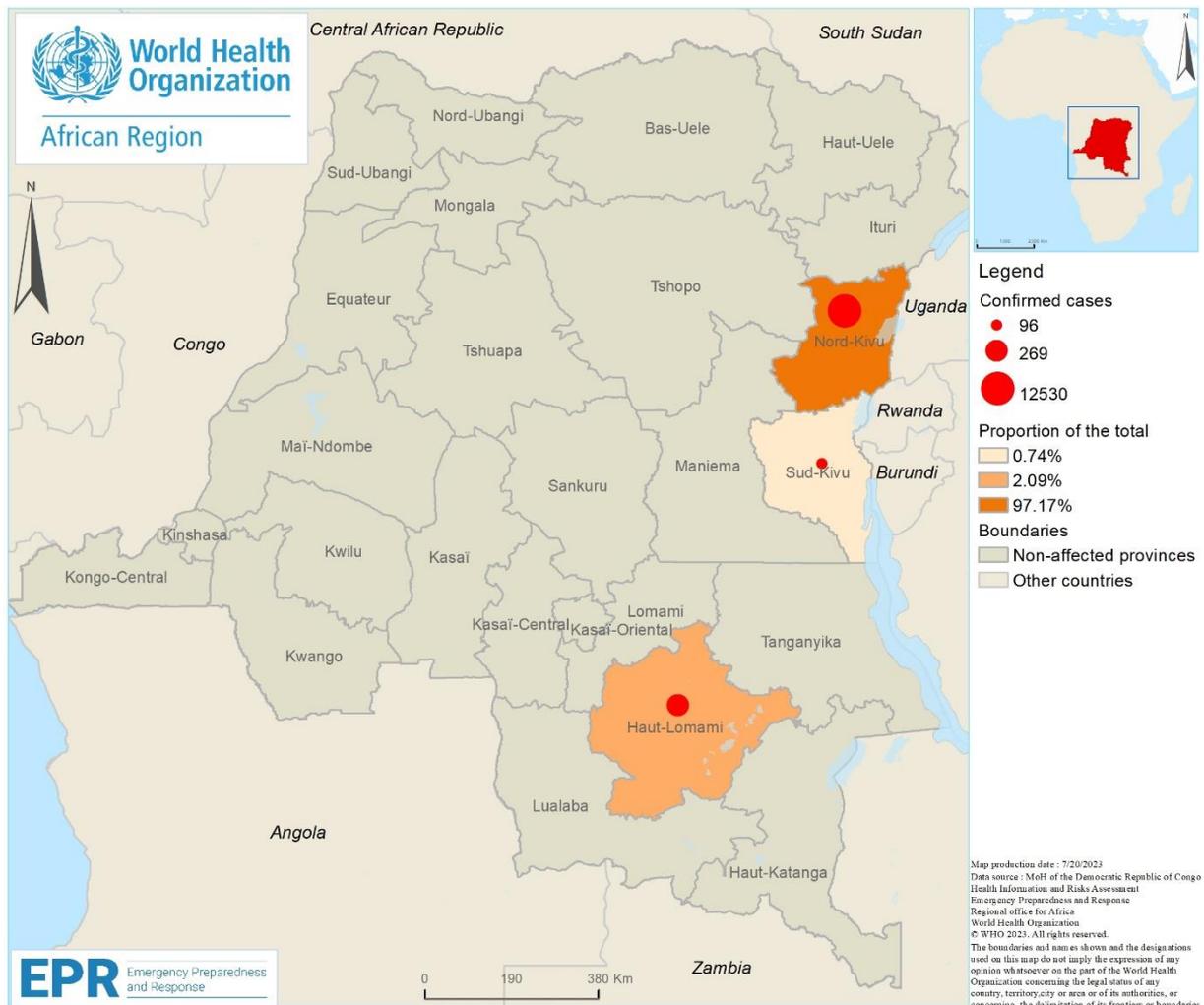


Figure 15: Map of Democratic Republic of the Congo showing affected districts as of 2 July 2023





South Sudan does not currently have an active cholera outbreak. The last PCR positive case was reported on 7 March and since then repeat cultures tested in both Juba and South Africa have not shown any *Vibrio cholerae* growth, but rather *E.coli*, *Salmonella* and *Enterobacter spp.* WHO is supporting the country to strengthen its testing capacities and to redirect the response to improving WASH and management of the acute watery diarrhoea cases based on identified pathogens. Cumulatively, as of 16 May, South Sudan had reported a total of 1 471 suspected case and two related deaths (CFR=0.1%) from Malakal Upper Nile State on the side bordering Sudan. However, with ongoing crises in Sudan, preparedness and readiness activities are ongoing in border districts.



The Kingdom of Eswatini reported the first confirmed case of cholera on 29 March 2023 in the Manzini Region.

As of 7 May 2023, the country has reported a total of two confirmed cases with no death. Readiness activities are ongoing with pre-positioning of detection and response supplies and building the capacity of health workers through trainings.



The cholera outbreak in the country has been ongoing since January 2022. Updated data from Nigeria following data reconciliation puts the cumulative cases at from 271 Local Government Areas across 33 states and the Federal Capital territory as of 4 June 2023 was 25 613 with 652 deaths (CFR = 2.5%).

WHO ACTIVITIES

Readiness:

- 23 countries prioritized for cholera readiness
- Ongoing collection of data using the updated web-based cholera readiness assessment tool
- Developed and rolled out a tracking tool for monitoring framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 across the countries.
- Support to the hotspot mapping process in Malawi using the Priority Areas for Multisectoral Interventions (PAMIs)
- Supported Zambia to conduct National Cholera Plan (NCP) mid-term review and development of an NCP M&E framework.
- Conducted cholera readiness risk assessment for Chad, Burkina Faso and Benin.
- Worked with South Africa WHO country office to develop plan for cholera readiness capacity building in the provinces at highest risk of potential cholera spread.
- Engaged all high-risk countries in west Africa to estimate their cholera logistical needs for prepositioning in view of the rainy season that has started.
- Engaged with WHO headquarters and Global Task Force on Cholera Control (GTFCC) for more support to cholera preparedness and readiness. GTFCC has promised to support training of Member States in PAMIs in late September 2023.

Response:

- Resource mobilisation for cholera strategic readiness and response ongoing.
- Ongoing tele-conference meetings with all countries in response.
- Strengthening cross-border collaborations on cholera surveillance.
- Ongoing deployments to countries as requested by countries.
- Provision of essential medical supplies and cholera Kits to all countries in outbreak
- Combined response efforts to both cholera and cyclone aftermath in Malawi and Mozambique.
- Technical inputs on training across all response pillars.
- Strengthening surveillance activities including community-based surveillance.
- Intensified risk communication and community engagement using all media types as well as community influencers.
- Technical support to countries on vaccination strategies for reactive OCV campaigns.

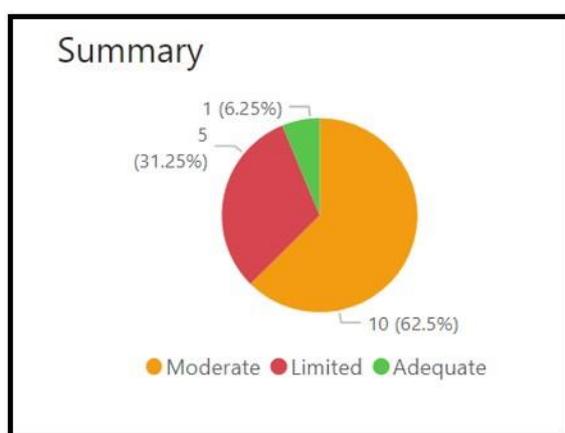


Fig 16: Readiness capacity of 16 of 23 countries

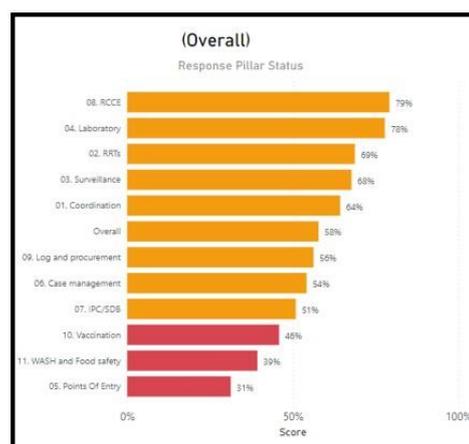


Fig 17: Rating of areas of assessment – lowest ratings from Vaccination, WASH & Food safety and Ports of Entry



World Health
Organization

African Region

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Photo Credit: Malawi Cholera response team 2023 (WHO supporting MOH to facilitate a local leaders community engagement meeting)

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