

LAKE CHAD BASIN CHOLERA OUTBREAK

Updated version as of 10th of September 2018 (Week 35)

By Cholera Platform WCAR

Situation Overview

- Over **27,000 cholera cases** and **510 deaths** have been reported as of week 35 in Lake Chad Basin (LCB). This is **10 times more** than the average cholera caseload over the past four years.
- Nigeria is the most affected country with 24,000 cases. The outbreak has spread into Cameroon and Niger (on week 27).
- Major cities or market places (Maradi, Madarounfa, Gaya, Yaounde, Douala, Maiduguri, Bauchi, Kano...) have confirmed cholera cases.
- **Cholera is an acute diarrheal disease** that can kill within hours if left untreated. It is caused by consuming food or water contaminated with the *Bacterium Vibrio Cholerae*.
- More than **6 million** people are living in outbreak areas.

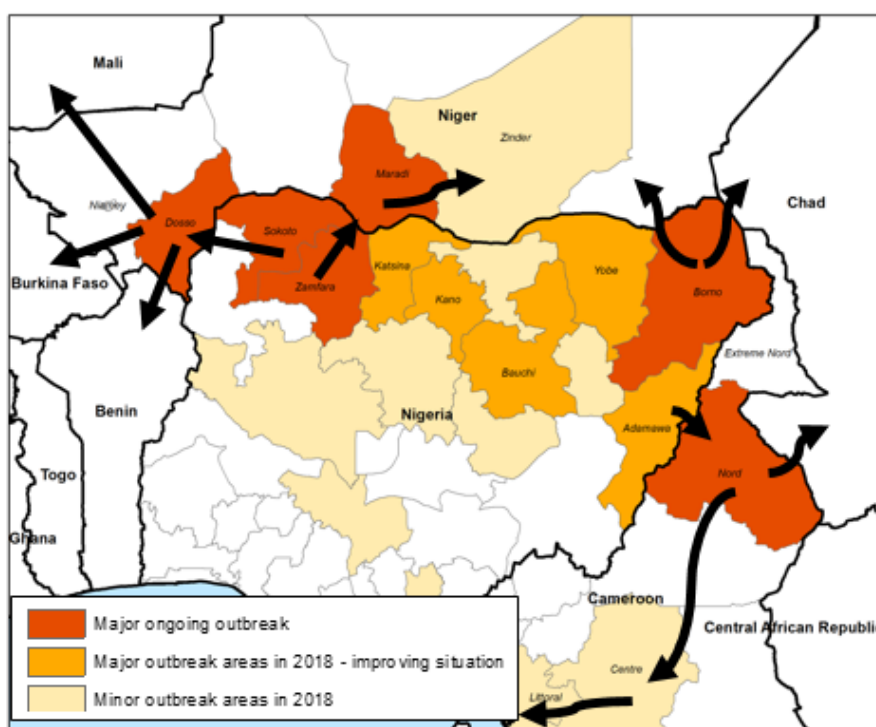
Critical concerns

- The region is facing floods and heavy rains creating an ideal environment for the outbreak to spread.
- Major cities are now impacted. In the coming weeks it is crucial to contain the outbreak.
- Cholera is often a cyclical disease. The last two major outbreaks in the region were in 2010 and 2014. An outbreak in 2018 is consistent with the 4 year cycle.
- Only vulnerable population of Borno, Bauchi and Adamawa (Nigeria) have been vaccinated recently. ICG did not approved vaccination in Maradi (Niger) but new submission is planned for Dosso.
- Many Western African countries have made real progress toward elimination of cholera and this regional outbreak could waste efforts.



Likely outbreak scenario





- The current outbreak in LCB is following the same pattern as the 2010 outbreak that took the life of 2,610 people in Nigeria, Cameroon, Niger and Chad and continued into 2011 (2,043 deaths) where over 63.000 people were directly affected (CFR: 4.1%) .
- **Nigeria:** cholera is likely to spread to Northern States and risk towards Chad.
- **Niger:** cholera is spreading to Zinder axe and seriously threatening Niamey.
- **Cameroon:** confined to northern States, risk towards Chad, risk limited toward Yaounde.
- **Mali, Burkina Faso, Chad** and especially **Benin** are at risk of propagation of the outbreak.




Map 1: Lake Chad basins countries affected by cholera in 2018 with potential spread axes

Urgent action is needed to quickly scale-up the response

The emergency cholera response is currently ongoing involving different sectors, including health, communication and WASH activities. Immediate action is needed to scale up response activities and control the outbreak.

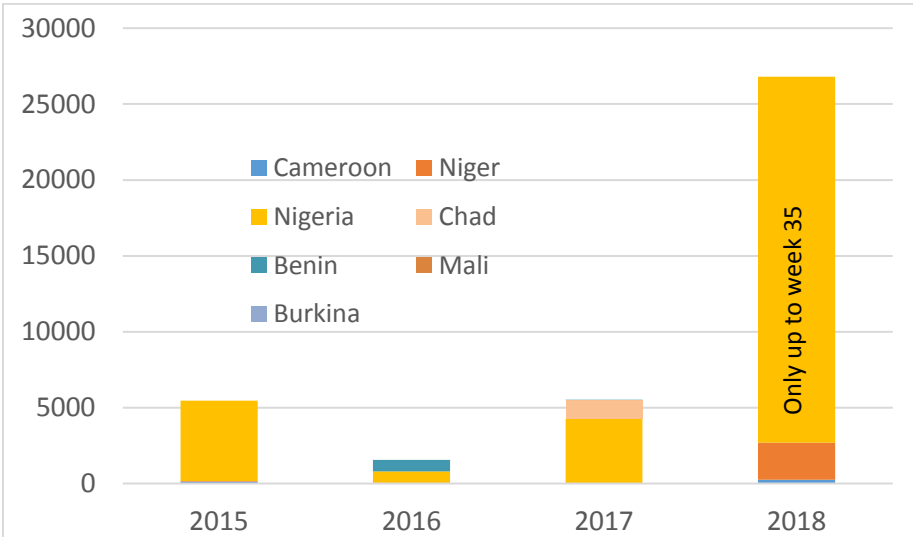
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 - Strengthen WASH activities in response plans and deploy additional response teams.
 - Provide safe water supply in the most affect areas through cholera kits, aquatabs, PUR and chlorination.
 - Promote hygiene campaigns at the community level.
 - Provide safe water supply in at risk areas to avoid the spread of cholera.
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 - Intensify community-based surveillance and early warning system in high risk areas.
 - Support Oral Rehydration Points and Cholera Treatment Centres.
 - In main outbreak areas, support the planning and implementation of Oral Cholera vaccination campaigns through social mobilization and community engagement.
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 - Implement risk communication & community engagement action plans
 - Mobilize media to share key cholera messages and support mass communication campaigns
 - Monitor behavioural change in communities and adapt messaging and programming
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 - Conduct multi-sectoral rapid needs assessments and inter-agency coordination
 - Review, update and implement cross-sectoral cholera response and contingency plans
 - Support mass communication campaign in areas not yet affected (propagation routes)

What is needed?

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 - 6 months multi-sectoral emergency response through live saving activities: **4.5 million USD**
 - Stronger involvement of financial and technical partners

Country	Requirement US\$
Nigeria	2,000,000
Niger	1,900,000
Cameroon	650,000
Contingency (Chad, Benin, Mali, Burkina)	400,000
Total	4,950,000

Table 1: Multisectorial financial needs for next 6 months



Graph 1: cholera cases per LCB countries from 2015 to 2018 (up to week 35)



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