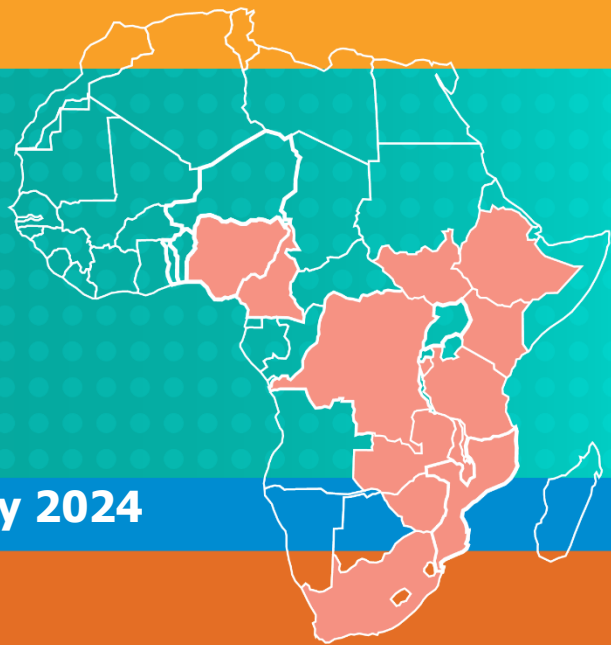


Cholera in the WHO African Region

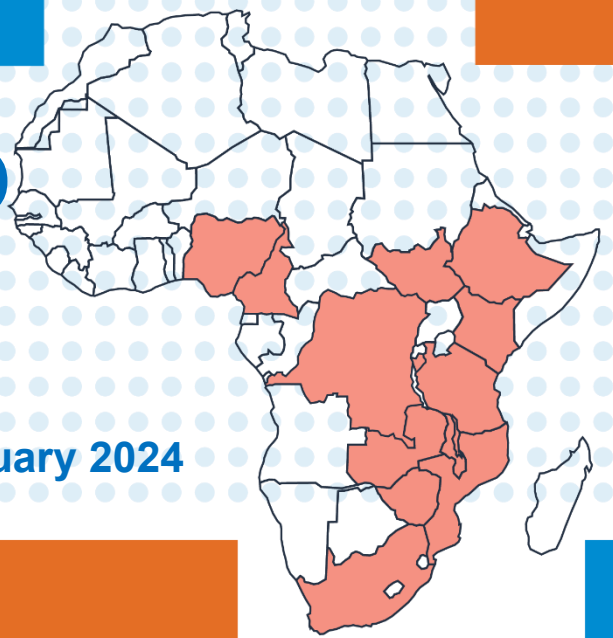


Weekly Regional Cholera Bulletin: 8 January 2024

Data reported: as of 7 January 2024



Cholera in the WHO African Region



Weekly Regional Cholera Bulletin: 8 January 2024


Data reported: as of 7 January 2024

Situation update

Regional Cholera Update

Grade 3

Cumulative Cases
 289 500

Cumulative Deaths
 5 227

CFR
1.8%

Overview

The cholera outbreak in the WHO African Region has affected 17 countries over the last two years. The two countries in crisis are Zambia and Zimbabwe with marked increase in cases. The southern region of the continent now in the rainy season with outbreaks now resurging. The increase in rainfall levels is now increasing floods in communities and landslides with increased for outbreaks in countries not reporting new confirmed cases. The seasonality of cholera outbreaks are issues for countries to consider and there is need to enhance preparedness and readiness, heighten surveillance and institute preventive and control measures in communities and around border crossings to prevent and mitigate cross border transmission.

In Epidemiologic week 01 of 2024, six countries **Burundi, Malawi, Mozambique, United Republic of Tanzania, Zambia and Zimbabwe** reported a total of 5 012 new cases. Transmission is currently active in 12 countries with no recent report of new cases from Eswatini (last case reported April 18), Republic of the Congo (last case reported 26 July), South Sudan (last case reported May 16), South Africa (last case reported 16 July) and Uganda (last case reported 1 September 2023).

Since 1 January 2022, a cumulative total of 289 500 cholera cases has been reported to the WHO Regional Office for Africa (AFRO), including 5 227 deaths with a case fatality ratio (CFR) of 1.8% as of 07 January 2024 (Table 1). Democratic Republic of the Congo, Ethiopia, Malawi, Mozambique, and Nigeria account for 78.7% (227 924) of the cumulative cases and 73.1% (3 821) of all cumulative deaths reported.

Figure 1: Distribution of cholera cases and deaths in WHO African Region, 1 January 2022— 1 January 2024`

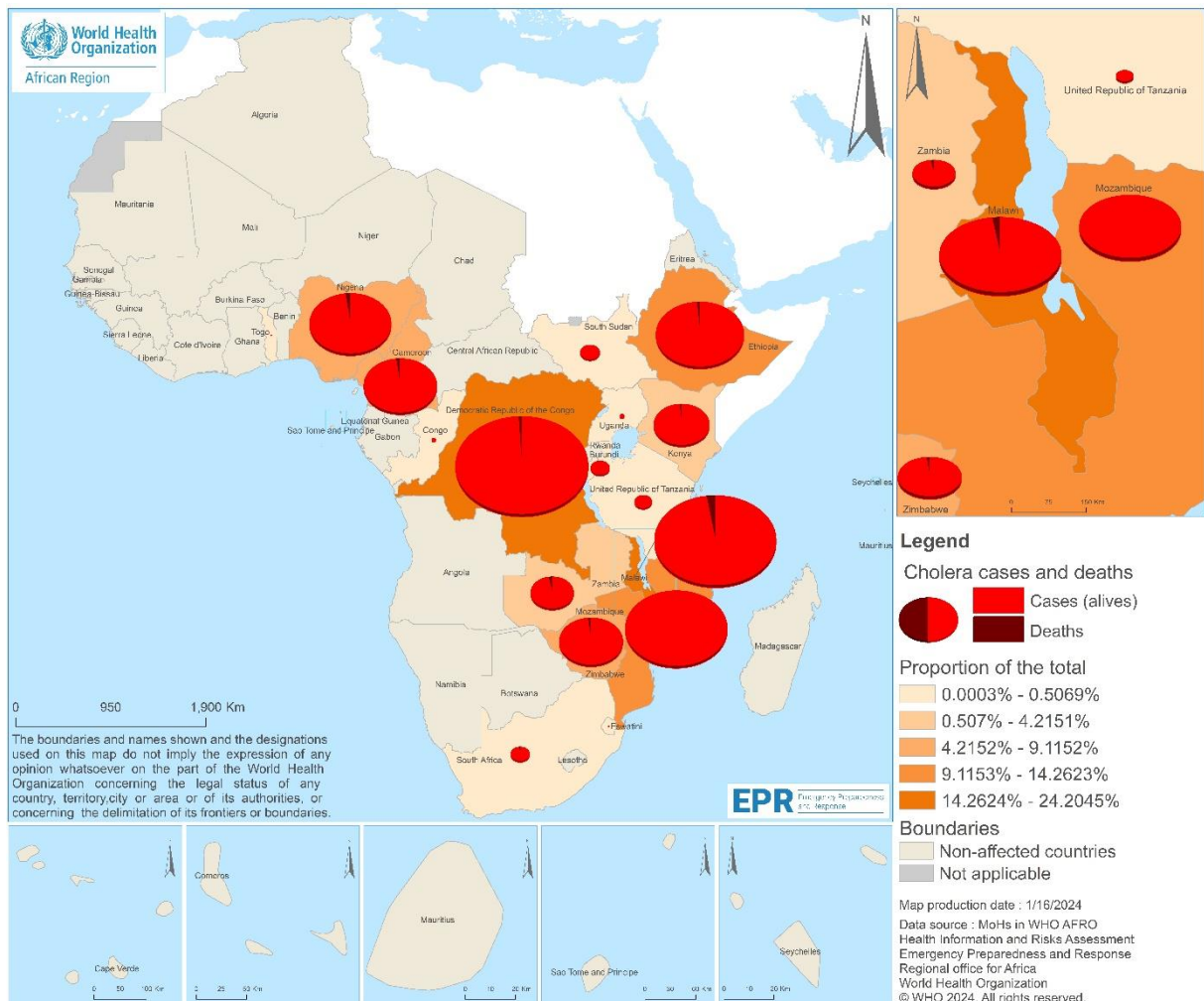
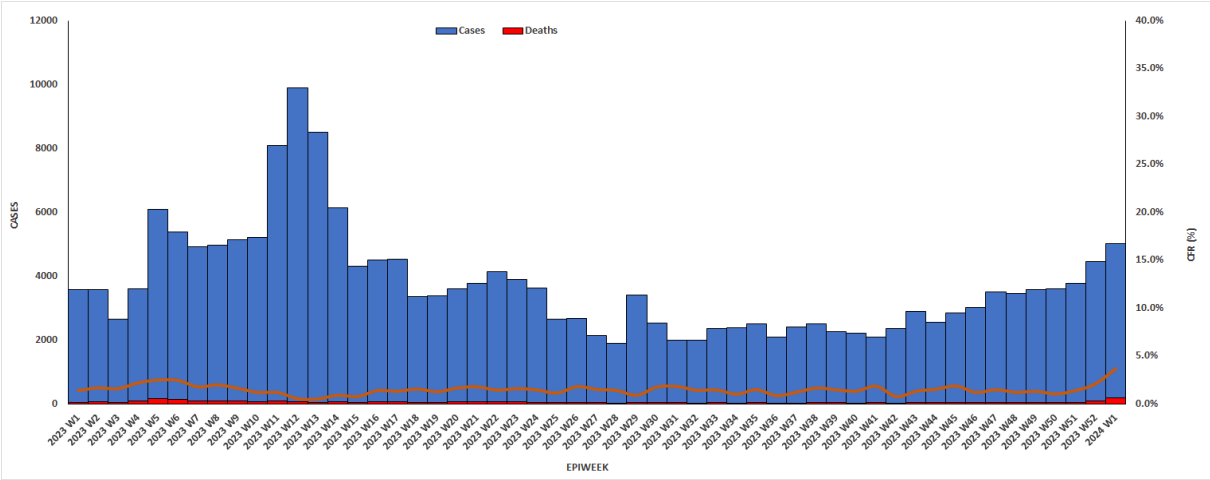


Table 1: Cholera Cases and Deaths in WHO African Region, 1 January 2022 to 7 January 2024

Country	Cumulative cases	Cumulative deaths	CFR (%)	Date outbreak started	Last update
Democratic Republic of Congo	70 241	758	1.1	Jan-22	31-Dec-23
Malawi	59 126	1 771	3.0	Mar-22	07-Jan-24
Mozambique	41 389	165	0.4	Sep-22	07-Jan-24
Ethiopia	30 716	453	1.5	Aug-22	31-Dec-23
Nigeria	26 452	674	2.5	Jan-22	29-Oct-23
Cameroon	20 554	484	2.4	Jan-22	10-Dec-23
Zimbabwe	16 015	356	2.2	Feb-23	07-Jan-24
Kenya	12 232	205	1.7	Oct-22	10-Dec-23
Zambia	7 223	268	3.7	Jan-23	07-Jan-24
South Sudan	1 471	2	0.1	Feb-23	16-May-23
South Africa	1 388	47	3.4	Feb-23	31-Aug-23
Burundi	1 372	9	0.7	Jan-23	03-Jan-24
United Republic of Tanzania	1 174	25	2.1	Feb-23	07-Jan-24
Uganda	81	10	12.3	Jul-23	1-Sep-23
Republic of the Congo	63	0	0	Jul-23	26-Jul-23
The Kingdom of Eswatini	2	0	0	Mar-23	23-Jul-23
Togo	1	0	0	Dec-23	12-Dec-23
TOTAL	289 500	5 227	1.8		

Figure 2: Epi Curve of cholera cases and deaths in WHO African Region, 1 January 2022 – 07 January 2024



Country Specific updates

Zimbabwe	Grade 3	Cumulative Cases 16 015	Cumulative Deaths 356	CFR 2.2%
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As of 7 January 2024, cumulative cholera cases reported from the ten provinces of the country were 16 015 with 356 deaths (CFR 2.2%). In week 01/2024 new cases increased by 1% from 1 487 new cases in week 52/2023 to 1 498 new cases. New deaths decrease by 3% from 37 in week 52/2023 to 36 in week 01/2024. The three provinces with the highest number of cumulative cases are Harare including Chitungwiza city (7 238), Manicaland (5 164), and Masvingo (1 721) which account for 88% (14 123 cases). The outbreak in Zimbabwe started on 12 February 2023 in Chegutu town, Mashonaland West Province.

Figure 3: Epicurve of Cholera outbreak in Zimbabwe as of 07 January 2024

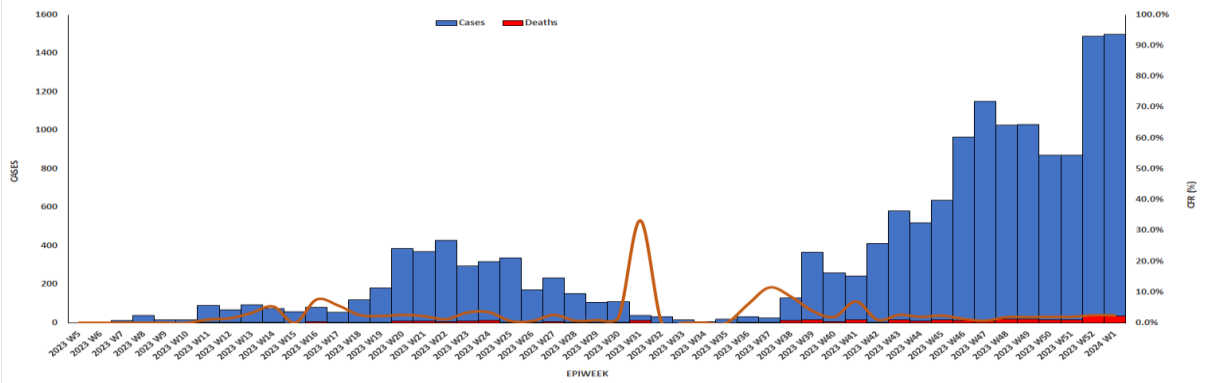
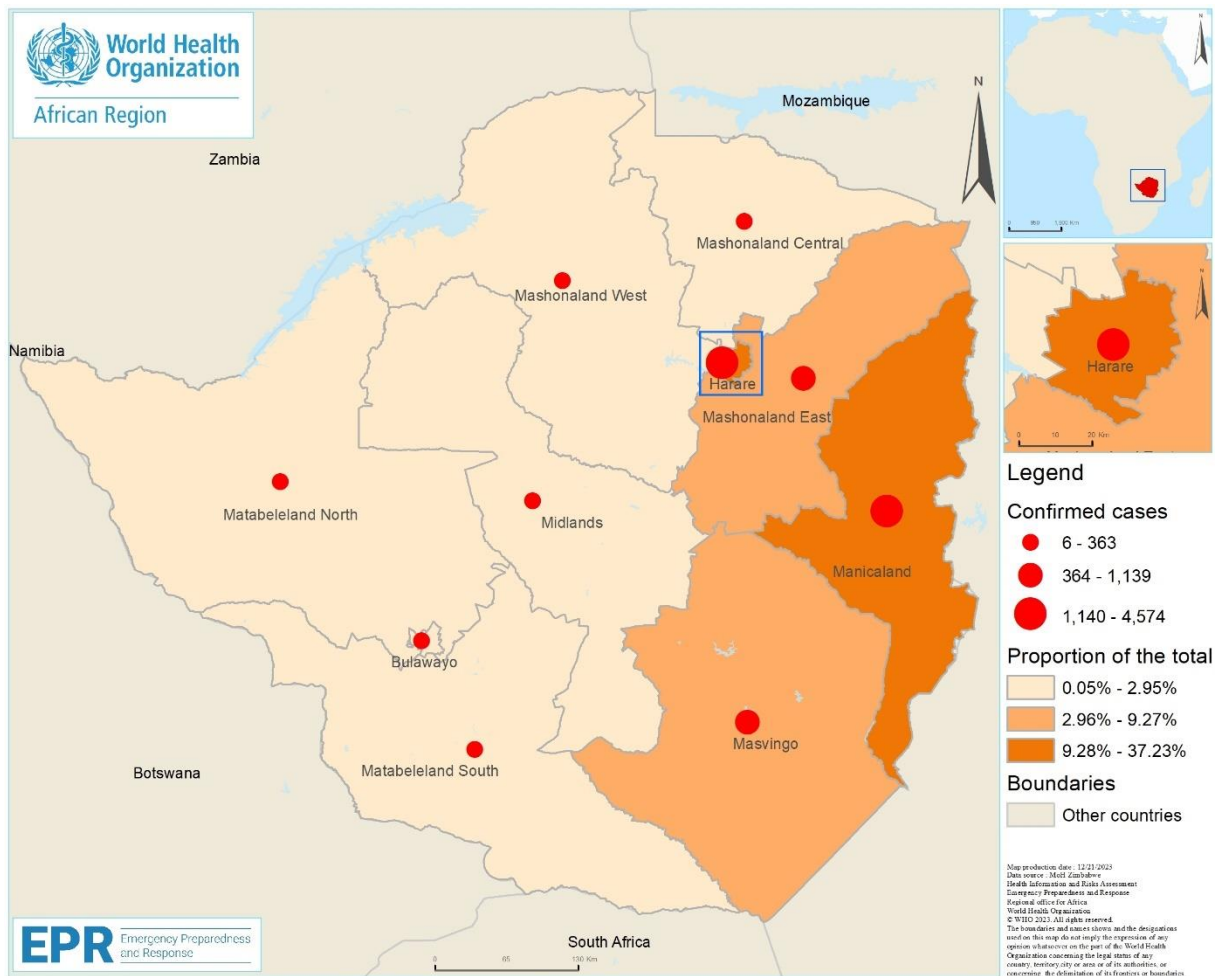


Figure 4: Map of Zimbabwe showing cholera affected provinces as of 17 December 2023



Public Health Actions

- Finalization of the Africa Public Health Emergency Fund (APHEF) proposal by the Ministry of Health and WHO during the week.
- Setting up of Highfield CTC in Harare District equipped with 10 beds and medical supplies to manage 100 cases (40 severe, 60 mild) by WHO.
- Facilitation of the ongoing shipment of cholera supplies procurement for approximately \$US 70,000 from Nairobi by WHO.

Challenges/Gaps

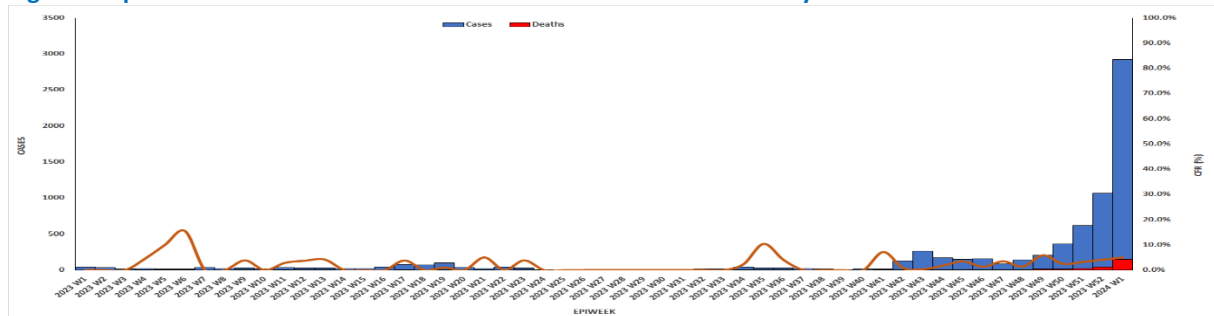
- Inadequate financial resources for the response.
- Limited human resources for effective response.
- Inadequate drugs and water purification supplies.
- Lack of consumables for water quality testing.
- Shortage of food in CTCs in Manicaland province.

Cumulatively this year, as of 7 January 2024, there have been 7 223 reported cases and 268 deaths (CFR = 3.7%). In week 01/2024, new cases increased by 174% from 1 068 cases in week 52 to 2 921 new cases. New deaths increased by 175% from 44 in week 52/2023 to 121 in week 01/2024. Thirteen districts have reported cholera outbreaks in 2023. Six districts (Chilanga, Chongwe, Luangwa, Lusaka, Kafue and Rufunsa) were currently in responding to the outbreak. In these six (6) districts, all the public health emergency response structures such as Incident Management System (IMS) and rapid response teams (RRTs) were activated to respond to the cholera outbreak.

The highest level of government response has been activated and coordinated by Disaster Management and Mitigation Unit (DMMU) under the office of the Vice President.

The most affected areas are all the sub-districts in Lusaka District (especially the peri-urban), fishing areas in Luangwa district, sewage compound in Chongwe district using water from the wells.

Figure 5: Epicurve of cholera cases and deaths in Zambia as of 07 January 2024



Public Health Actions

- Mobile cholera sensitization using public address system in Kanyama sub-district and the Central Business District was conducted by the Minister of Health led by a multi-disciplinary team.
- Mobilization of a total of 137 staff directed to work at heroes CTC.
- Making of floor map for Heroes CTC was supported by JICA.
- Engagement of Public Health Emergency Operations Centre (PHEOC) staff and volunteers to support data entry in the cholera tracker and clear the backlog of cases not entered in the system for surveillance.
- The cholera response was supported by 45 vehicles mobilized by the Zambia Disaster Management and Mitigation Unit (DMMU).
- Water tanks were installed and supplied with water at 36 locations in Kanyama district and eight locations in Matero sub-district.

Challenges/Gaps


- Inadequate case management support (staff, beds, chlorine).
- Cross border movement of cholera cases from Mozambique and Zimbabwe, prominent in the Luangwa district.
- Erratic supply of water in areas in the community leading to communities resorting to use of untreated shallow wells and boreholes.
- Inadequate ambulance vehicles to transport patients to designated cholera treatment centres.
- Limited number of community-based volunteers (CBVs) to support ORPs in the community

- Distribution of chlorine is on-going in Lusaka, Chongwe, Luangwa and Chilanga.
- is on-going.
- Cholera awareness campaign is underway in Zambia in both English and Nyanja, utilizing over 400 jingles across three radio stations. ZNBC TV1 and radio 2 are airing 330 jingles thrice daily, Radio Christian broadcasts 28 jingles twice daily for two weeks, and Pan African radio plays 42 jingles six times daily for one week.
- Engagement of the Commissioner of Police to provide security to two officers each from the following constituencies-Kanyama, Matero, Chawama, Mandevu and Munali during evening community sensitization that commenced on 8 January 2024.



Burundi

Grade 3

Cumulative Cases
 1 372

Cumulative Deaths
 9

CFR
0.7%

As of 3 January 2024, a cumulative total of 1 372 cases and nine deaths (CFR 0.7%) were reported from Burundi. In week 01/2024 new cases decreased by 71% from seven new cases in week 52/2023 to two new cases. 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 6: Epicurve of cases and deaths in Burundi as of 03 January 2024

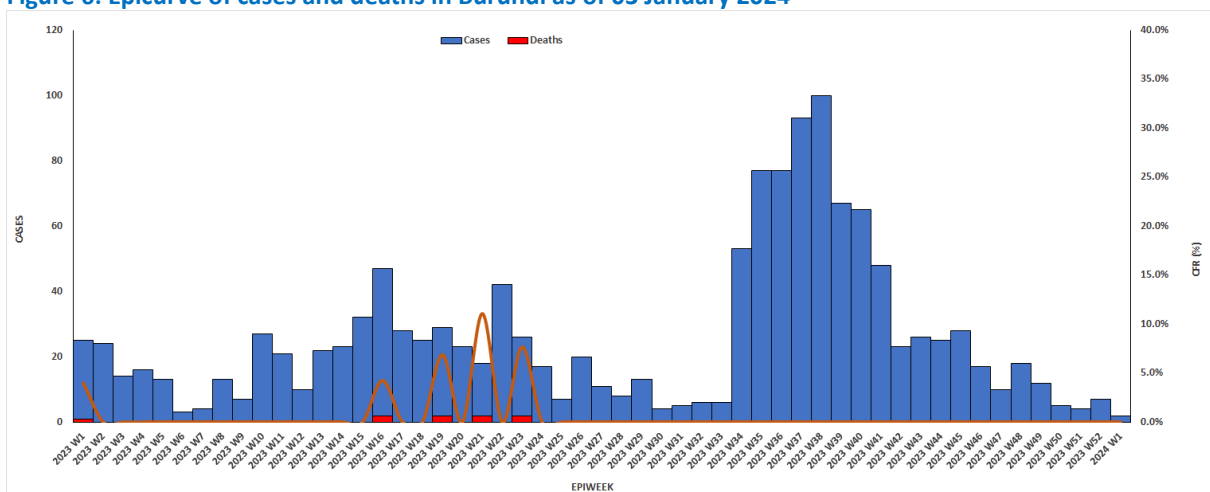
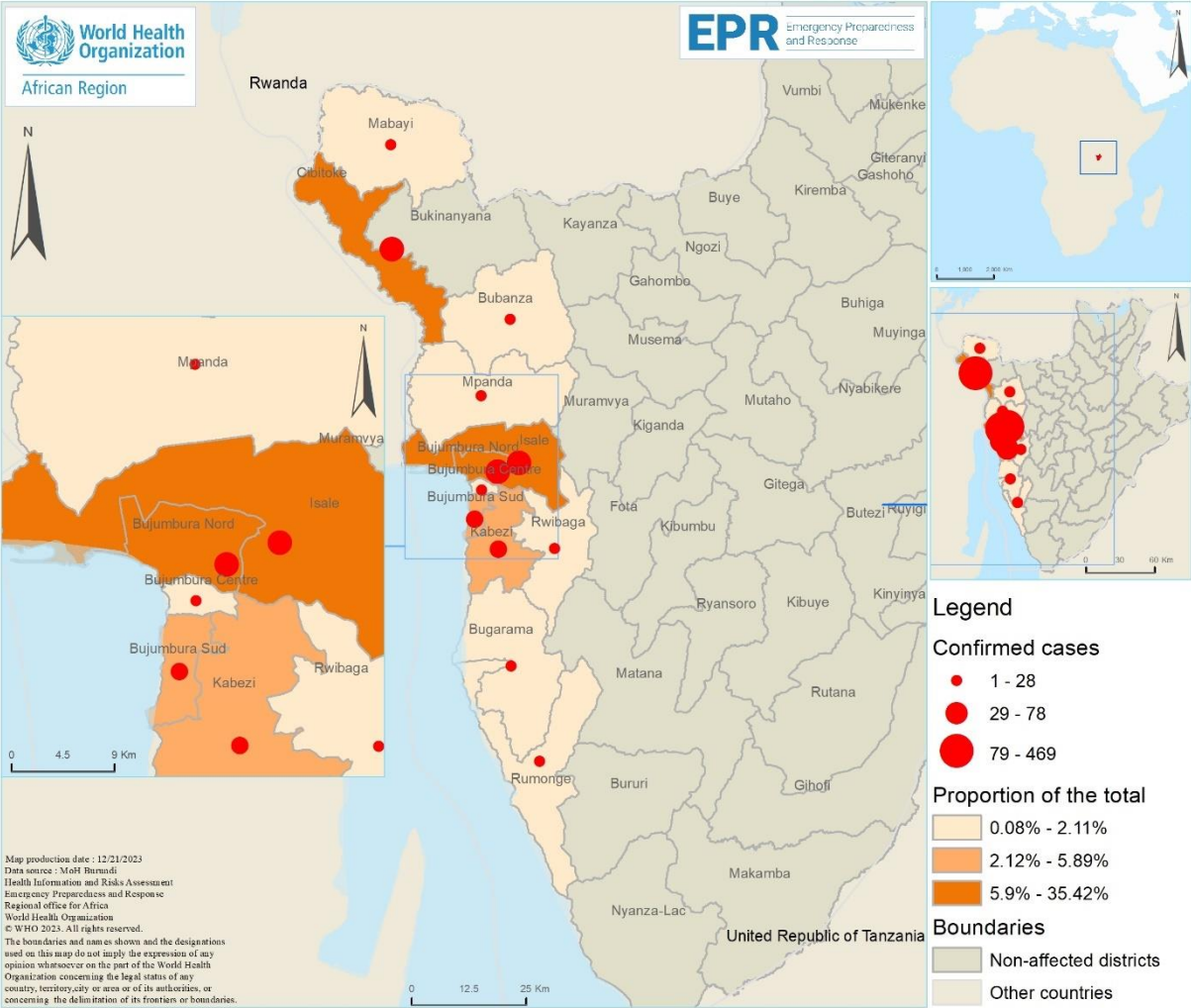
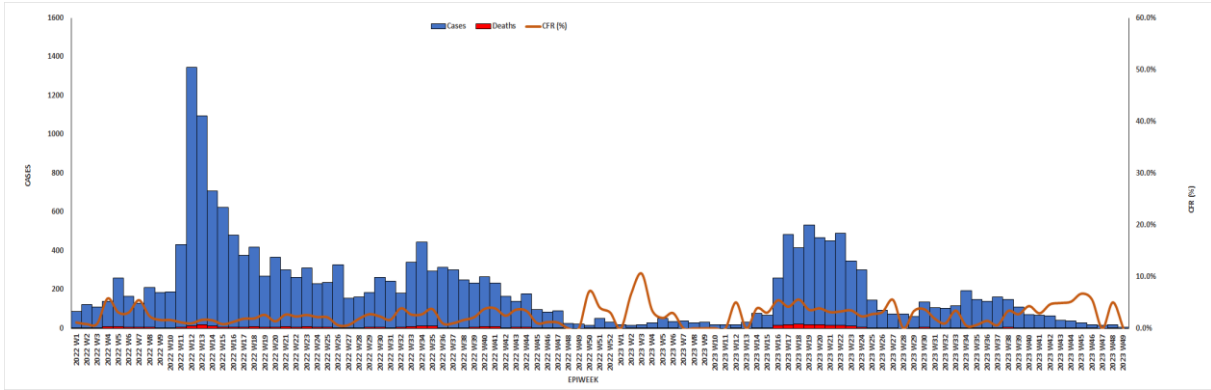


Figure 7: Map of Burundi showing cholera affected areas from October 2022 to 16 December 2023



There was no report received in since week 50. However in week 49 there was a 61% decrease in new cases from 18 to seven new cases. There no deaths in weeks 48 and 49. Cumulatively, from 1 January 2022 to 10 December 2023, Cameroon has reported 20 554 cases with 484 deaths (CFR = 2.4%).

Figure 8: Epicurve of cholera cases in Cameroon from October 2021 to 10 December 2023



Ethiopia

Grade 3

Cumulative Cases



30 716

Cumulative Deaths



453

CFR

1.5%

As of 31 December 2023, Ethiopia reported a cumulative case total of 30 716 with 453 deaths (CFR = 1.5%). As of week 52, reported new cases decreased by 24% from 537 new cases in week 51 to 408 new cases. In week 52, new deaths increased by 300% from three deaths in week 51 to 12.

Figure 9: Epicurve of Cholera outbreak in Ethiopia from October 2022 to 31 December 2023

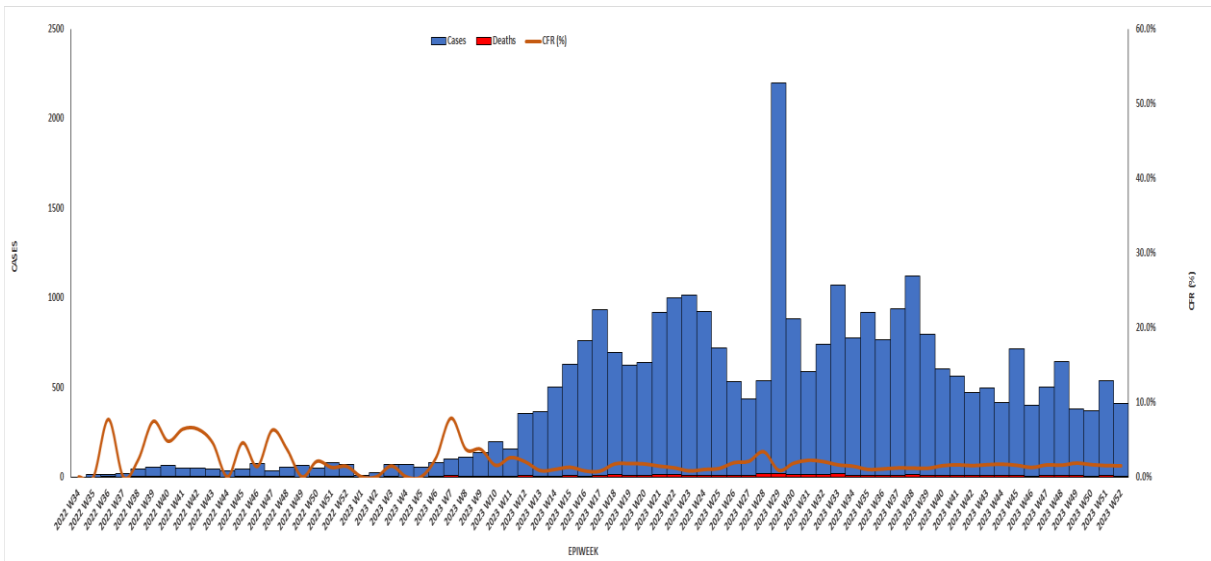
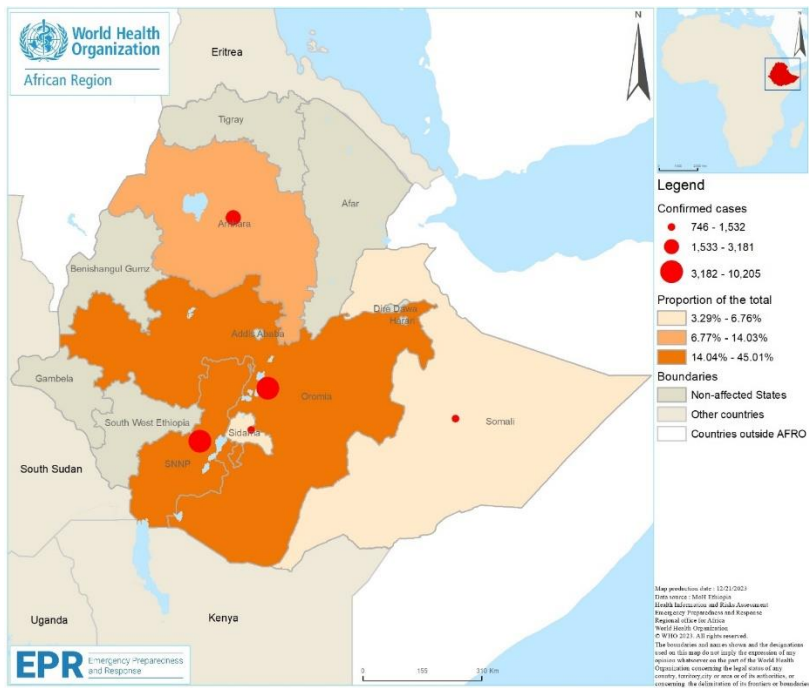


Figure 10: Map of Cholera outbreak in Ethiopia from October 2022 to 17 December 2023



The last update was as of 10 December 2023 (epi week 49) with a cumulative total of 12 232 cases reported since the onset of the outbreak with 205 deaths (CFR=1.7%). The first wave that began in Oct of 2022 was controlled with last case reported on 19 September 2023 (epi week 38).



A cumulative total of 59 126 cases have been reported since the onset of the outbreak from all the 29 districts of the country as of 7 January 2024. In week 01/2024, there was 50% decrease in new cases from four in week 52/2023 to two new cases. No new deaths were reported in weeks 52/2023 and 01/2024. The cumulative number of deaths is now 1 771 with a case fatality ratio of 3.0%.

The 2023/2024 cholera season began on 01 November 2023 and the reporting has been adjusted to reflect the number of cholera cases reported in the current cholera season by the government.

Figure 11: Epi Curve for cholera outbreak in Malawi, 3 March 2022 – 07 January 2024

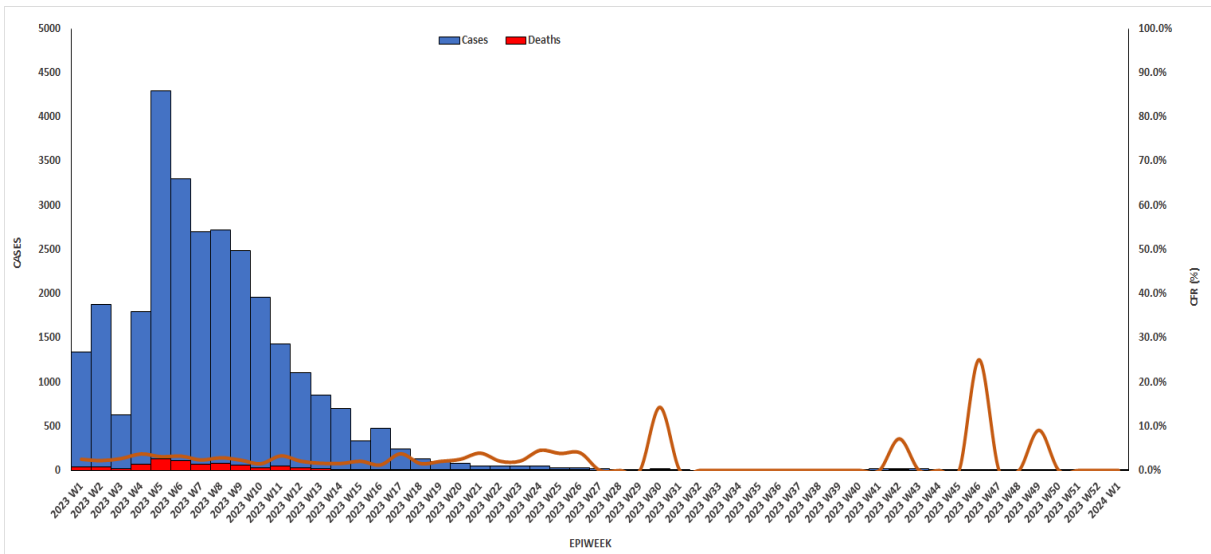
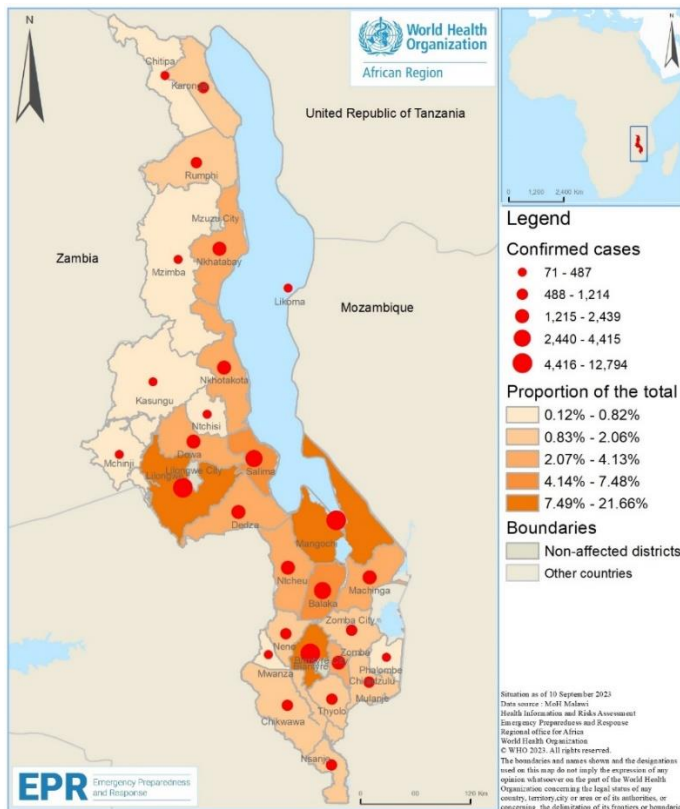


Figure 12: Map for cholera outbreak in Malawi, 3 March 2022 – 17 December 2023



Mozambique

Grade 3

Cumulative Cases



41 389

Cumulative Deaths



165

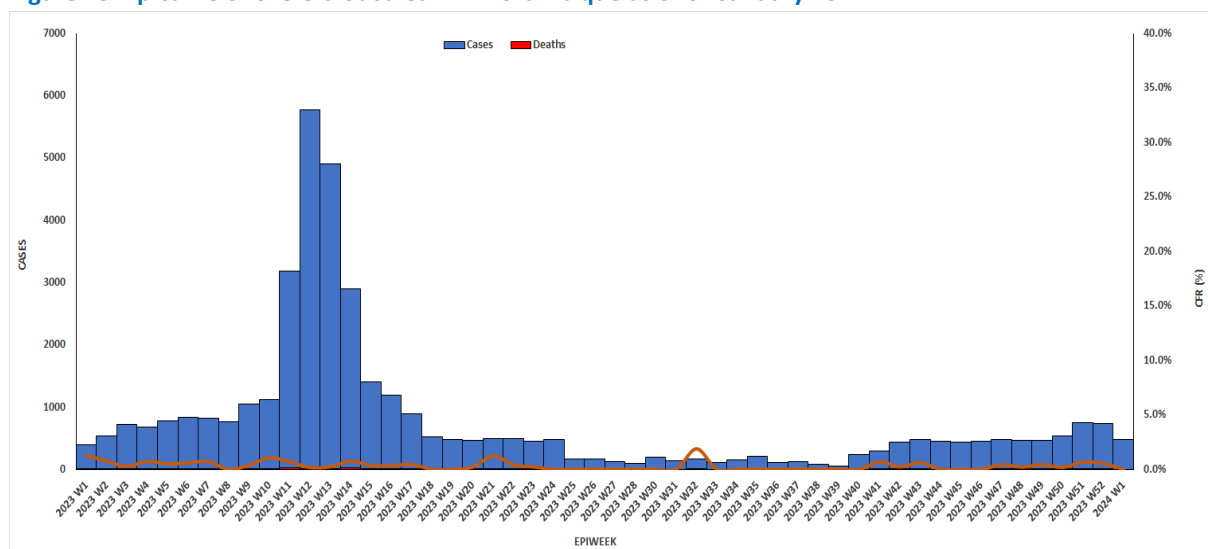
CFR

0.4%

The country had reported a cumulative total of 41 389 cases, with 165 deaths (CFR 0.4%) as of 7 January 2024. In week 01/2023, new cases decreased by 34% from 740 new cases in week 52/2023 to 485 new cases. There were four new deaths reported in week 01/2024 compared to no death in week 52/2023.

The Ministry of Health decided to restart the counting of cholera cases starting on 1st October 2023, which corresponds with the beginning of the rainy season. Thus, starting from week 47, data from the MOH consider two periods: 1st cholera outbreak from 14 September 2022 until 30 September 2023; and 2nd cholera outbreak from 1st October 2023-ongoing.

Figure 13: Epicurve of cholera outbreak in Mozambique as of 07 January 2024



United Republic of Tanzania

Grade 3

Cumulative Cases



1 174

Cumulative Deaths



25

CFR

2.1%

The cumulative number of cases from the country since 22 January 2023 to 7 January 2024 are 1 174 and 25 deaths with a CFR= 2.1%. In week 01/2024, new cases increased by 593% from 15 new cases in week 52/2023 to 104 new cases. In each week 52/2023 and 01/2024, there was one new death reported. This new outbreak began after the last confirmed case on 25 July 2023. Regions currently affected are Ruvuma, Shinyanga, Simiyu and Tabora. Out of the recent 176 cases, Simiyu region accounted for 147 cases (84%). On 29th November 2023, the Ministry of Health received the report of suspected cases of cholera from Kagera region.

Figure 14: Epicurve of cases and deaths in United Republic of Tanzania as of 07 January 2024

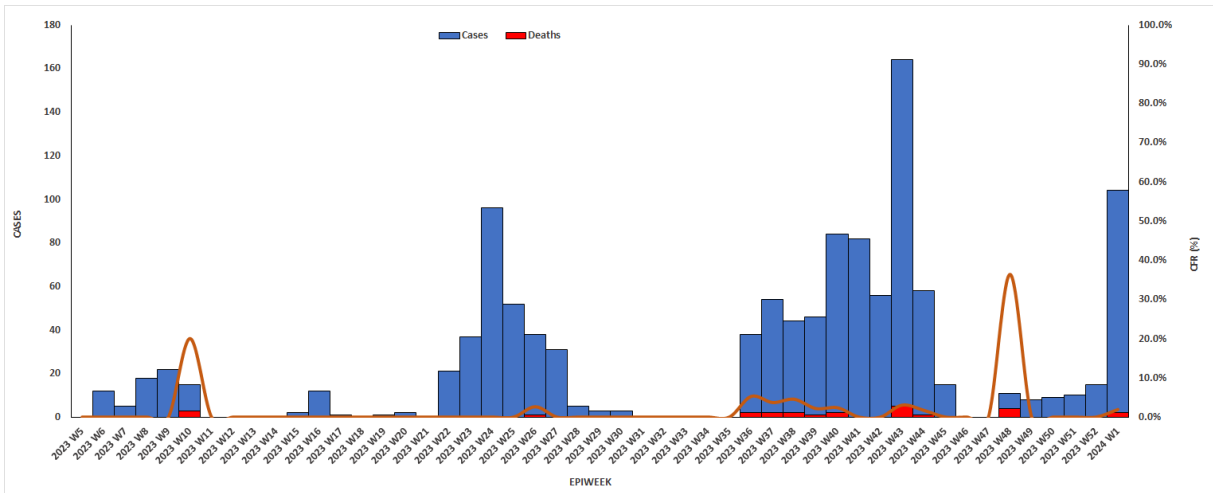
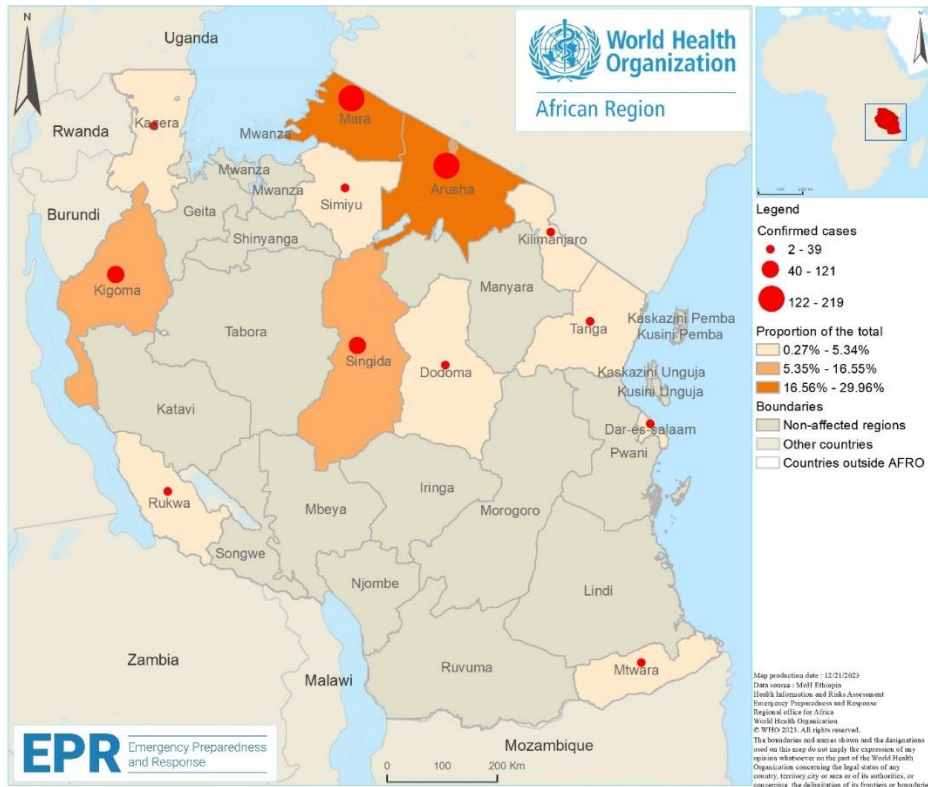


Figure 15: Map of cases and deaths in United Republic of Tanzania as of 15 December 2023



Public Health Actions in Simiyu region

- Sensitization meeting with 110 community leaders on cholera and set strategies to fight cholera was conducted by the coordination team.
- Daily incidence management meetings were conducted, chaired by incident manager at regional level, with attendance of heads of pillars and members.
- House to house inspections with legal notice were conducted in 419 households of which a total of 31 households had no toilets.
- 103 shallow wells were treated with chlorine granules by the WASH pillar, adding up to a total of 354 shallow wells, 25% of the total shallow wells in the council that have been treated with chlorine granules.
- Health education on Cholera outbreak was conducted by the RCCE team.
- Construction and use of improved toilets was conducted.
- Hand washing facilities and soap were provided to 921 households in five villages.

Challenges/Gaps

- Inadequate fund to support the response interventions.
- Shortage of rapid test kits for cholera.
- Inadequate IEC materials for Health education
- Lack of improved toilets and a segment of household had no toilet in the majority of inspected households.
- Lack of hand washing facilities at households and public facilities.
- Lack of water quality monitoring equipment at region and council level.

Democratic Republic of the Congo

Grade 3

Cumulative Cases

 70 241

Cumulative Deaths

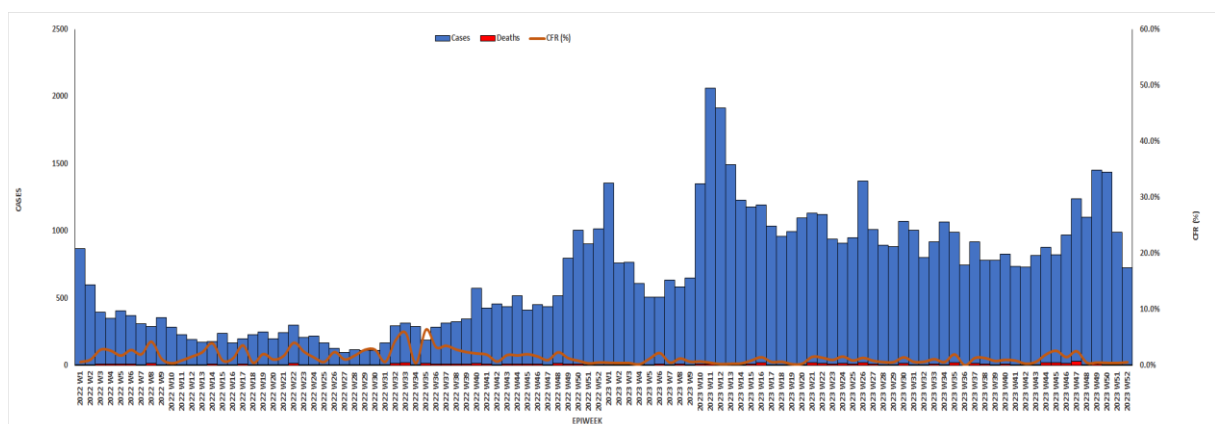
 758

CFR

1.1%

As of 31 December 2023, the country had reported 70 241 cumulative cases, with 758 deaths (CFR = 1.1%) across 12 affected provinces. In week 52, new cases decreased by 27% from 988 new cases in week 51 to 723 new cases. New deaths increased by 20% in week 52 from five in week 52 to six.

Figure 16: Epicurve of cases and deaths in Democratic Republic of the Congo as of 31 December 2023





The cholera outbreak in the country has been ongoing since January 2022. As of 29 October 2023, there was a cumulative total of 26 452 with 674 deaths (CFR = 2.5%).



On 09 December 2023, the Gulf district management team was alerted by the SIMR officer from the CMS ADAKPAME, to the suspicion of cholera in a person presenting with diarrhoea, vomiting, abdominal pain and dehydration. This was confirmed on 11 December by the INH laboratory, with culture identification of vibrio cholerae ogawa, and an investigation was carried out on the same date. A sample was taken during the investigation and found to be positive by the rapid cholera test.

The investigation revealed that the exposure factor was the consumption of untreated borehole water. As of 12 December 2023, there was a cumulative total of one with zero death.

Figure 17: Map of cases and deaths in Togo as of 12 December 2023





There have been no new cases reported since week 35. As of 1 September 2023, Uganda had reported a cumulative total of 81 suspected cases and 10 deaths (CFR=12.3%).

On 27 July 2023, the Ministry of Health had confirmed Cholera outbreak in Namayingo and Kayunga districts.



The last update was as of 31 August 2023, South Africa reported a total of 1 388 suspected cases, with 47 deaths (CFR=3.4%) from six provinces – Gauteng, Free State, North-West, Limpopo, Mpumalanga and KwaZulu-Natal. KwaZulu-Natal province recorded the third imported case of cholera as notified by the Ministry of Health on 25 July 2023.

Conclusion

The cholera outbreaks in the African Region have occurred in the context of **natural disasters such as 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** continue to serve as driving factors for the outbreak across the region. The new year 2024 poses another challenge with El nino and the cyclone season commencing.

WHO ACTIVITIES

Readiness:

- 22 countries prioritized for cholera readiness.
- Collection of data using the updated web-based cholera readiness assessment tool is ongoing.
- A tracking tool for monitoring framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 across the countries has been developed and rolled out.
- Capacity building on preparedness and readiness for 524 RRTs across all the nine provinces of South Africa and development of a national cholera plan for the country is ongoing.
- The identification of Priority Areas for Multisectoral Interventions (PAMIs/Hotspots) was conducted in Malawi, supported by WHO.
- Development and mid-term review of National Cholera Plan for South Sudan and Zambia respectively is ongoing, supported by WHO.
- Cholera readiness for countries particularly those approaching the cholera season in Southern Africa is ongoing, supported by WHO.
- Comprehensive assessment of the implementation of the Regional Framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 was conducted.

Response:

- Coordination and provision of technical guidance by the Cholera Incident Management Support Team of the WHO AFRO through tele-conference meetings with all AFRO countries in response.
- Technical and financial support to countries for cholera response interventions is ongoing.
- Cross-border collaborations on cholera surveillance has been strengthened.
- Deployment of staff to countries as requested by countries is ongoing (currently to Zambia)
- Provision of essential medical supplies and cholera kits to all countries in outbreak is ongoing.
- Response and technical inputs on training across all response pillars has been strengthened.
- Technical support to countries on vaccination strategies for reactive OCV campaigns is ongoing.
- Capacity building for country teams including through webinars is ongoing.



World Health
Organization

African Region

**For additional information, please
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Photo: WHO Ethiopia Cholera Response Surge Team, demonstrating household water treatment chemicals use for local communities in Lagahida #Somali region

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