

WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 44: 24 to 30 October 2022
Data as reported by: 17:00; 30 October 2022

African Region
Emergency Preparedness and Response

0

New event

149

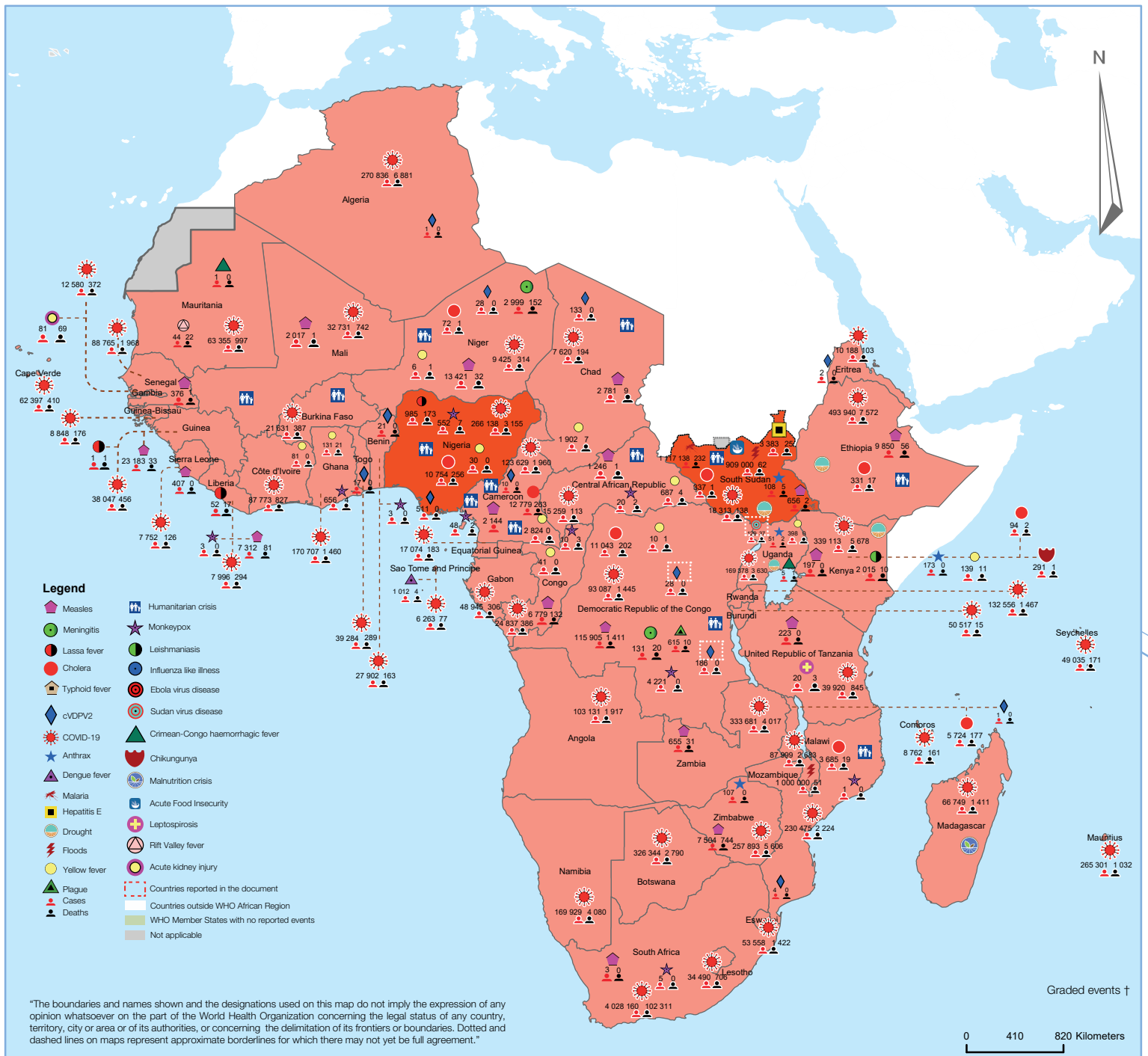
Ongoing events

128

Outbreaks

21

Humanitarian crises



"The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate borderlines for which there may not yet be full agreement."

5

Grade 3 events

26

Grade 2 events

3

Grade 1 events

2

Protracted 3 events

5

Protracted 2 events

0

Protracted 1 events

44

Ungraded events

Overview

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This Weekly Bulletin focuses on public health emergencies occurring in the WHO African region. This week's articles cover:

- Ebola disease caused by Sudan virus in Uganda
- Monkeypox in the WHO African Region
- Circulating Vaccine Derived Poliovirus 1 and 2 in the Democratic Republic of the Congo

For each of these events, a brief description, followed by public health measures implemented and an interpretation of the situation is provided.

A table is provided at the end of the bulletin with information on all new and ongoing public health events currently being monitored in the region, as well as recent events that have been controlled and closed.

Major issues and challenges include:

- The ongoing Ebola disease outbreak caused by Sudan virus in Uganda continues in the seven affected Districts with the outbreak hotspot shifting from Mubende to Kassanda. Even when the government supported by different key partners has boosted response activities, the risk of expanding to other Districts of the country and to neighbouring countries remains high. Although the number of alerts are low especially in affected areas; there is need to engage more human resources and ambulances for evacuations of suspects from communities to isolation units. Additionally, there is need to create more isolation units with adequate personnel and infection prevention and control supplies nearer to the communities. Moreover, social mobilization and community engagement remains of particular concern, as pockets of community reluctance are still observed in some of the affected communities due to persistence of myths, misconceptions, and low risk perception towards Ebola disease.
- More cases of laboratory-confirmed Monkeypox are being detected in Africa as the countries intensify surveillance and response. Three countries recorded new cases in the past week. More research is required to understand transmission dynamics and the root causes of Monkeypox in Africa. WHO AFRO supports health facilities in affected countries with diagnostic reagents and personal protective equipment to enhance Monkeypox diagnosis.
- Every year, on 24 October the world celebrates the world polio day which is an opportunity to highlight global efforts toward a polio-free world. While admirable global efforts have been made and substantial results achieved in fighting polio worldwide, some parts of the world continue to be affected by polio. In 2020 the African region was certified as free of indigenous wild polio, however some countries like the Democratic Republic of the Congo continue to be affected by the circulating vaccine-derived poliovirus (cVDPV) outbreaks with both type 1 (cVDPV1) and type 2 (cVDPV2) cases being reported this year.

Ebola disease caused by Sudan virus in Uganda

129
cases

37
Deaths

28.7%
CFR

EVENT DESCRIPTION

The Uganda Ministry of Health (MoH) continues to respond to the Sudan virus disease (SVD) which was declared on 20 September 2022. As of 30 October 2022, a cumulative 129 laboratory-confirmed and 21 probable cases have been reported. Fifty-eight (58) fatalities have been registered including 37 confirmed cases, resulting to an overall case fatality ratio of 38.7%, and 28.7% among confirmed cases. A total of 43 patients have been discharged, giving a recovery rate of 33.3%. Cumulatively, 18 healthcare workers have been affected including two probable cases, of whom seven (39.0%) have died.

A comparison between weeks 42 (17-23 October) and 43 (24-30 October) shows a 30% increase in the number of new confirmed cases (30 vs 39 cases). One new probable case validated in week 43 but who died before declaration of the outbreak on 20 September, leads to an 80% increase in the number of confirmed deaths (five vs nine deaths), and 17 new recoveries in week 43 compared to zero recoveries on week 42. Notably, all new cases over the past seven days have been linked to known cases.

The number of affected Districts remains at seven. Although Mubende is the District with the highest caseload (65 confirmed and 19 probable), the current hotspot of the outbreak has shifted to Kassanda District with a cumulative of 41 cases (39 confirmed and two probable). Nearly three-quarters (n=29, 74.4%) of new confirmed cases have been reported in Kassanda over the past seven days. At Sub-County level, Kalwana Sub-County accounts for two-thirds (n=26) of Kassanda cases.

The other affected Districts are Kampala (17 confirmed), Kyegegwa (four confirmed), Wakiso (two confirmed), Bunyangabu (one confirmed), and Kagadi (one confirmed). Of note, a confirmed case was reported in Kyegegwa on 29 October, 37 days after the last case had been reported.

A total of 3 685 contacts have been listed since the beginning of the outbreak in 13 Districts, of whom 1 795 have completed 21 days of follow-up. On 30 October 2022, 1 859 contacts were still under active follow-up in eight Districts, 82.8% of whom (n=1 540) were seen over the past 24hrs. The call centre at the National Public Health Emergency Operations Centre and the MoH continues to receive calls from across the country.

PUBLIC HEALTH ACTIONS

Coordination

- The honourable Minister for health and MoH leadership held a coordination meeting with Kampala Capital City Authority (KCCA) health officials and political leadership to gather support for SVD response in the metropolitan area.
- Daily District Task Force meetings, partners' meetings and pillar meetings continue to be held in all affected Districts.
- National Task Force meetings have now been scheduled thrice a week.

Surveillance and Laboratory

- Epidemiological investigations, contact tracing, and active case finding are ongoing in all affected Districts. On 30 October 2022, 1 859 contacts were still under active follow-up, among whom 1 540 (82.8%) were seen over the past 24hrs.
- Alert systems have been set-up in Mubende, Kassanda, Greater Kampala Metropolitan with call centre, alert desk and linkage to Emergency Medical Services (EMS) dispatch system. On 30 October, 91 alerts were received nationwide, all of whom were verified; 27 (29.7%) of them were validated as new suspected cases and 22 (81.5%) were evacuated to Ebola Treatment Units (ETUs).
- In Kyegegwa, 15 Village Health Teams (VHTs) were trained on contact tracing, listing and follow-up, conducted an in-depth case investigation for the newly confirmed case, and mapped the porous points along the Kyegegwa – Mubende border in Kasule Sub-County.
- Coordination has been strengthened between laboratory, surveillance and EMS for timely sample collection and filling of case investigation forms (CIFs). Currently, there is timely sample collection upon receipt of filled CIFs, timely sample testing and release of test results, and adequate test kits at testing laboratories. A total of 75 samples have been processed at Uganda Viral Research Institute and Mubende mobile laboratory within the past 24hrs, with one new confirmed case from Kassanda District.

Case management and psychosocial support

- Four ETUs, one each in Entebbe, Madudu, Mubende, and Mulago are fully operational. The total bed capacities are 182 beds for the isolation unit, and 103 beds for the treatment unit. On 30 October 2022, 72 suspected cases were managed in the isolation unit while 48 patients were in the treatment unit. Cumulatively, 43 (33.3%) recoveries have so far been recorded.
- EMS teams have performed 26 evacuations in Kassanda and 13 in Mubende.
- Psychosocial support continues to be offered to suspected and confirmed cases in ETUs, as well as to their family members. Pre-test (and post-test) counselling are also being offered to all patients at ETUs, and to contacts. In addition, the resettling of the discharged persons and negative suspected cases into their community continues.

Infection, prevention and control (IPC)

- Daily monitoring of IPC measures is ongoing in all ETUs.
- In Kassanda, 11 IPC district mentors were oriented on IPC ring approach in SVD response.
- IPC and WASH teams continue to participate in the hotspot integrated community engagement activities ongoing in hotspot villages, and plan to include traditional medicine practitioners.

- Safe and dignified burial teams continue to undertake safe and dignified burials in all affected Districts including Mubende and Kassanda.

Risk communication and community engagement

- RCCE interventions are ongoing in all affected Districts and beyond.
- Fifteen (15) radio spots/messages continue to be aired on five radio stations while 10 community audio towers are disseminating SVD messages in the 10 hotspots in Mubende. Three (3) mobile audio systems have been mobilized for Kitenga, Kyenda Town councils & Kalonga in Buwekula constituency in Mubende.
- SVD radio spots messages were aired on Kagadi FM radio and one talk-show was held on Paradigm radio.
- In Kyegegwa, sensitizations were organised in two churches in Kibuuba and a community engagement meeting was held in Kasule Town which involved nearly 120 people and during which SVD preventive messages were shared. In addition, VHTs in Bugogo Town Councils and Kasule Sub-County conducted house to house sensitization on SVD prevention, and mapped out schools, traditional healers and religious leaders in Kibuba parish.

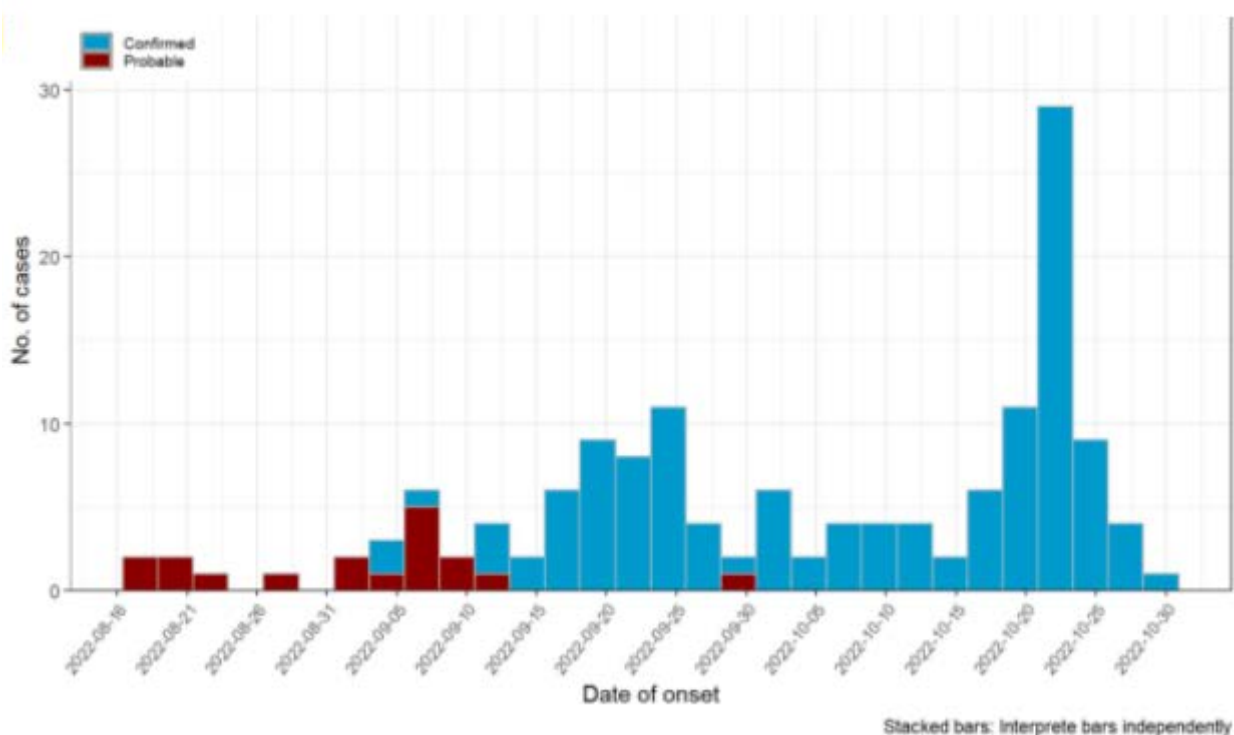
Logistics

- The distribution of supplies in healthcare facilities within all affected districts is ongoing, including personal protective equipment, spray pumps, wooden pallets, tarpaulin, essential medicines, discharge packages, fuel, vehicles, stationery, digital thermometers, infra-red thermometers from MoH and partners.

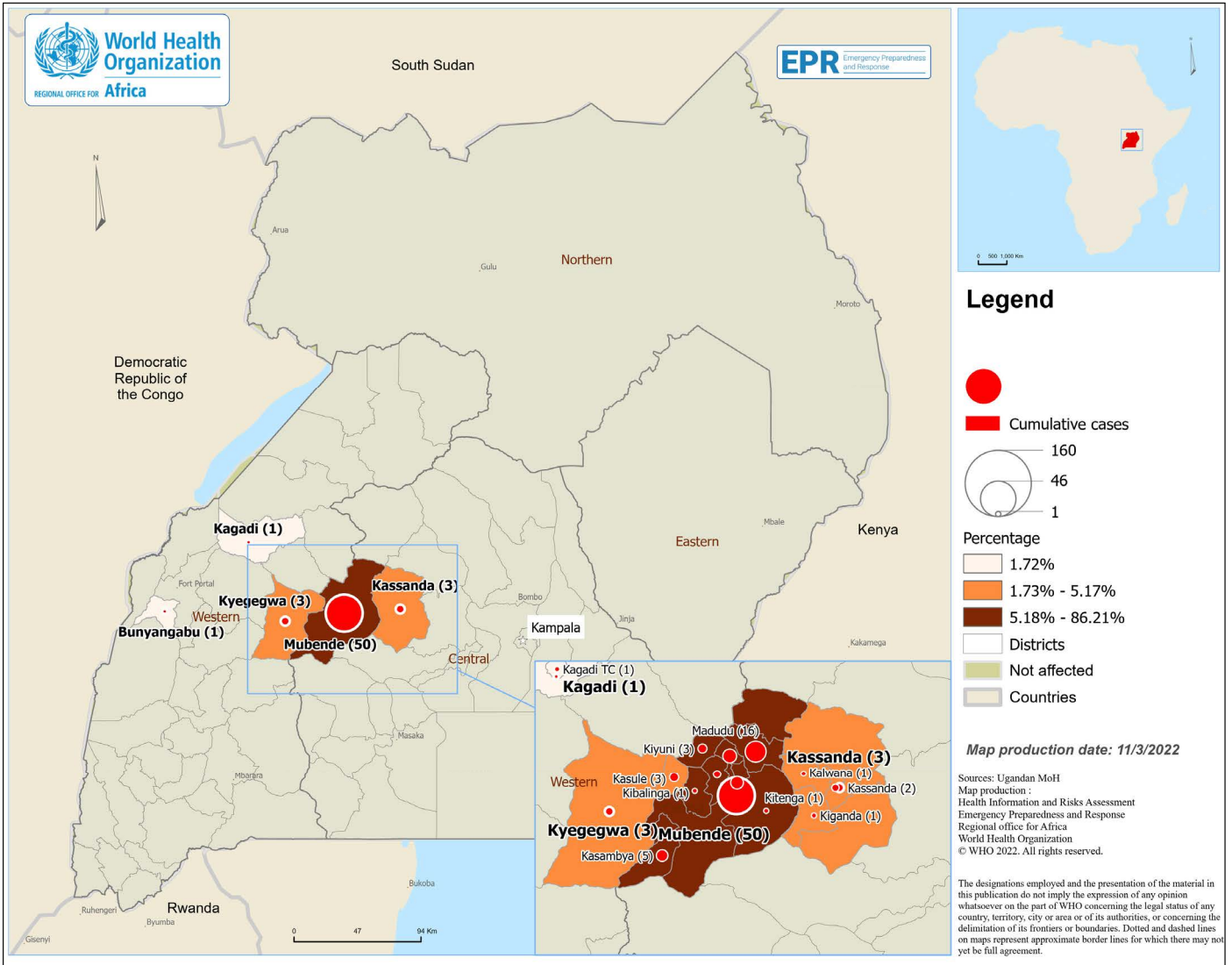
SITUATION INTERPRETATION

Over the recent days, the ongoing SVD outbreak in Uganda has been marked by a continual increase in the number of confirmed cases and deaths, highlighting the crucial need to escalate and strengthen surveillance and case management activities. It is expected that the coordination that has been strengthened between surveillance, laboratory and EMS will enable early detection, rapid evacuation/isolation, sampling and testing of suspected cases, and quick initiation of supportive care for confirmed cases. However, the long silent period before a new case was confirmed in Kyegegwa calls to reinforce active case finding and case investigations, with consequential need of further human resources to be deployed in affected Districts and beyond. Furthermore, as the hotspot has shifted to Kassanda District, there is urgent need to scale-up response activities in this affected District.

Distribution of Cases and Deaths of Ebola disease caused by Sudan virus in Uganda, as of 30 October 2022



Distribution of Ebola Virus Disease by subcounty in the affected districts in Uganda, as of 30 October 2022



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[Go to map of the outbreaks](#)

EVENT DESCRIPTION

The number of confirmed monkeypox cases in Africa increased by 3.9% to 957 in week 43 (24 Oct – 30 Oct) from 921 in week 42 (17 Oct - 23 Oct). In the past week, three countries reported 36 new cases, including Nigeria (31), Cameroon (2), and Ghana (3).

Between 1 January and 30 October 2022, 13 African countries have reported 957 monkeypox cases, including Nigeria (583), Democratic Republic of the Congo (DRC) (206), Ghana (107), Sudan (17), Central Africa Republic (CAR) (11), Cameroon (12), Congo (5), South Africa (5), Benin Republic (3), Liberia (3), Morocco (3), Egypt (1), and Mozambique (1).

Five countries have reported 15 deaths, including Nigeria (7), Ghana (4), Cameroon (2), Mozambique (1), and Sudan (1). The deaths in Nigeria and Ghana represent 46.7% and 26.7% of all Monkeypox related deaths in Africa.

Country specific updates**Ethiopia**

Suspected Monkeypox cases were reported in the past week at Mekane Selam IDP collective site in Borena Woreda in South Wollo Zone, Amhara region. A total of 12 suspected cases were identified and documented in the IDP collective site, with no deaths reported. Five samples of the 12 suspected cases were collected and sent to the Ethiopian Public Health Institute (EPHI) for confirmation.

Ghana

Ghana is one of the four African countries with a high Monkeypox burden alongside Nigeria and DRC. Ghana has reported new weekly cases in the past two weeks and three new cases between 24 to 30 October 2022. A total of 107 Monkeypox cases and four deaths have been reported in Ghana from 1 January to 30 October 2022. Males form the majority of confirmed Monkeypox cases, with more than half 65 (61.9%), and all four recorded deaths were males.

Nigeria

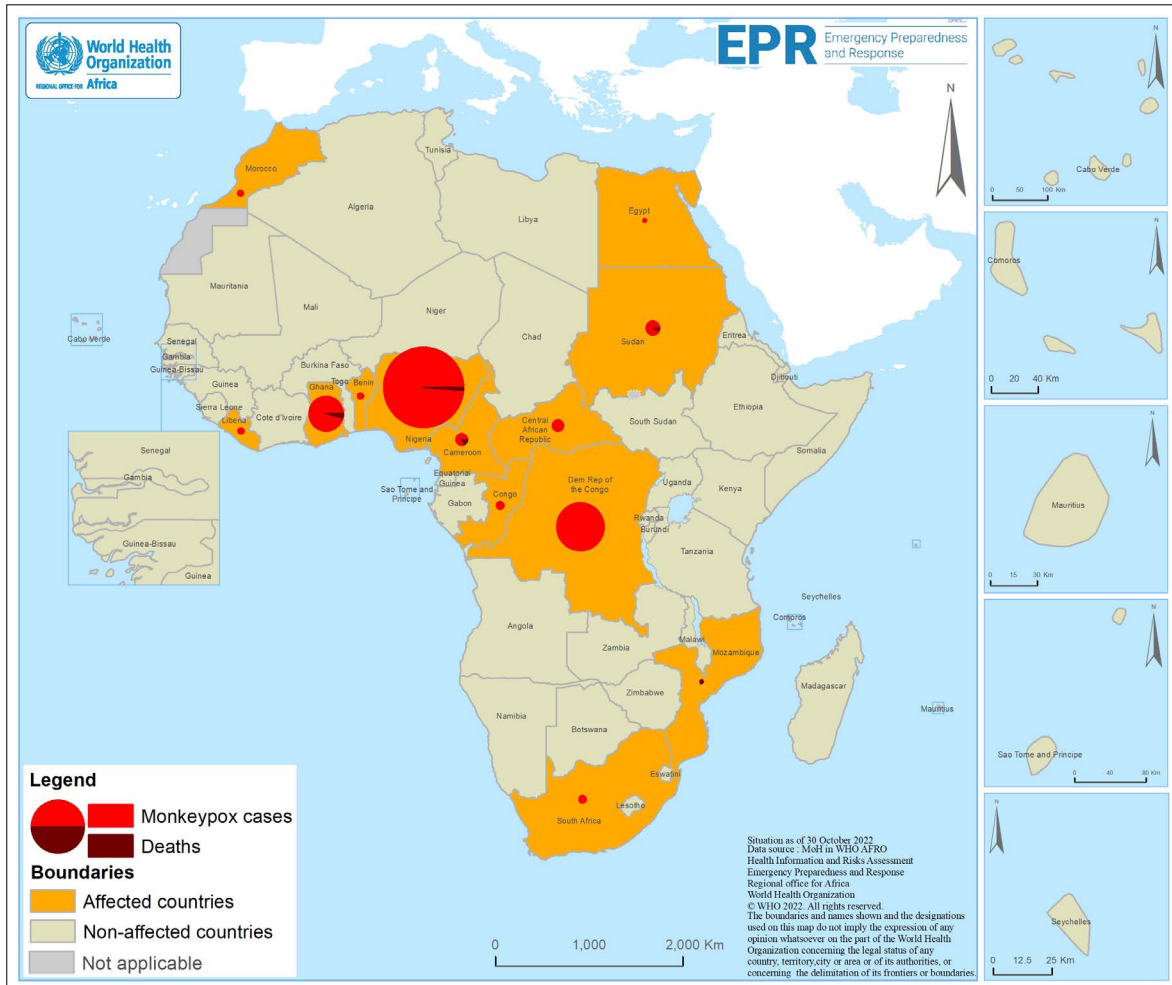
Nigeria has the highest number of Monkeypox cases in Africa (583, 61%) and has consistently reported new cases weekly since May 2022. In the past week, 31 new cases were reported in Nigeria from 13 states and the Federal Capital Territory, with no death recorded. The majority, 19 (61%) of the new cases, were males, almost similar to 66% of all cases seen in 2022 that were males. Collaboration and data harmonization between laboratories, surveillance and case management are ongoing at all levels in Nigeria to enhance surveillance.

SITUATION INTERPRETATION

Monkeypox cases continue to increase in Africa, but no new death has been reported in the past week. All cases reported in the past week were from countries that have previously recorded Monkeypox. Suspected cases in Ethiopia are being investigated. Enhanced Monkeypox surveillance collaboration between WHO and countries continues to yield results with observed improved early detection and reporting. WHO is supporting researchers to investigate the causes and characterize Monkeypox in Africa.

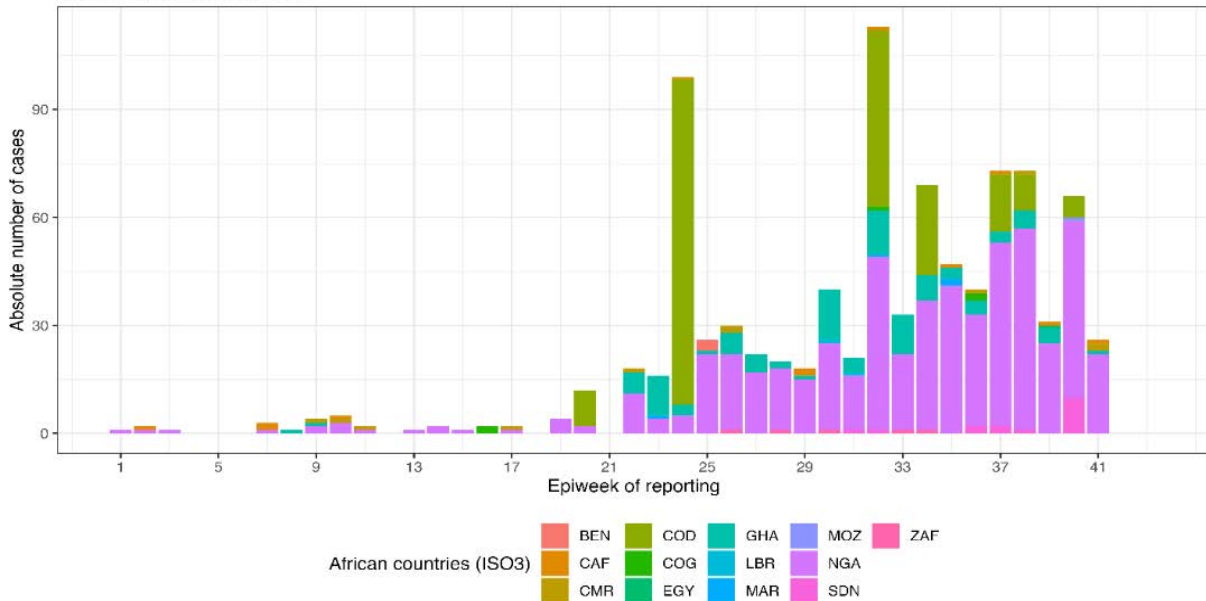
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Distribution of cases of Monkeypox in the WHO African Region, as of 30 October 2022



[▶ Monkeypox dashboard](#)

Weekly epi-curve of MPX cases in Africa
 Cases from week 1 to week 43



Circulating vaccine-derived poliovirus (cVDPV1 and cVDPV2)

Democratic Republic of the Congo

194
cases

0
Deaths

50.0%
CFR

EVENT DESCRIPTION

In 2022, from week 1 through 28 October, a total of 194 confirmed circulating vaccine-derived poliovirus (cVDPV) cases have been reported in the Democratic Republic of the Congo including 36 type 1 cases (cVDPV1) and 158 type 2 cases (cVDPV2). No death has been reported so far among confirmed cases, however three suspected polio deaths have been reported in Haut-Lomami province, two deaths in week 35 (ending 4 September) from Mulongo health zone and one death in week 39 (ending 2 October) from Malemba Nkulu health zone. Unfortunately, no sample was collected for laboratory confirmation from the suspected cases before death.

Out of the 26 provinces for the country, nine (Bas-Uele, Haut-Lomami, Haut-Katanga, Lualaba Nord Kivu, Maniema, Sud-Kivu, Tanganyika, and Tshopo and) are affected with the ongoing vaccine derived polio outbreaks with Tanganyika province having the highest case load reported (75 cases), followed by Maniema (63 cases) and Haut-Lomami provinces (38 cases).

The cVDPV1 cases have been reported from two provinces so far: Haut-Lomami province (91.6%, 33/36 cases) and Tanganyika (8.3%, 3/36 cases) whereas cVDPV2 cases have been reported from all the nine affected provinces with Tanganyika and Maniema leading in number of cases reported with 72 cases and 63 cases respectively. Three environmental samples were positive for cVDPV2, one from Haut-Katanga and two from Maniema provinces.

Regarding surveillance performances, since the beginning of this year, more than 3 221 acute flaccid paralysis (AFP) cases have been reported countrywide of which more than 194 cases were confirmed to be vaccine-derived poliovirus (VDPV) cases (6.0%) with an estimated no polio AFP rate of 6.6/100 000 populations of less than 15 years old (country target: $\geq 3/100\ 000$); the proportion of stool adequacy is 87% (target: $\geq 80\%$). The investigation rate within 48 hours of AFP notification is 96% (target: $\geq 80\%$) and the average time of the sample transportation is 13 days (target: ≤ 3 days).

Since 2017 through 28 October 2022, the Democratic Republic of the Congo has reported a total of 437 cVDPV2 cases (36 type 1 and 401 type 2) out of 18 668 Acute Flaccid Paralysis (AFP) cases reported. Seven environmental samples tested positive for cVDPV2 for the same period. The country experienced 16 outbreaks of cVDPV2 reported in 108 health zones across 22 provinces. The year, 2022 has the most cVDPV cases reported since 2017 with 194 cases (44.4%).

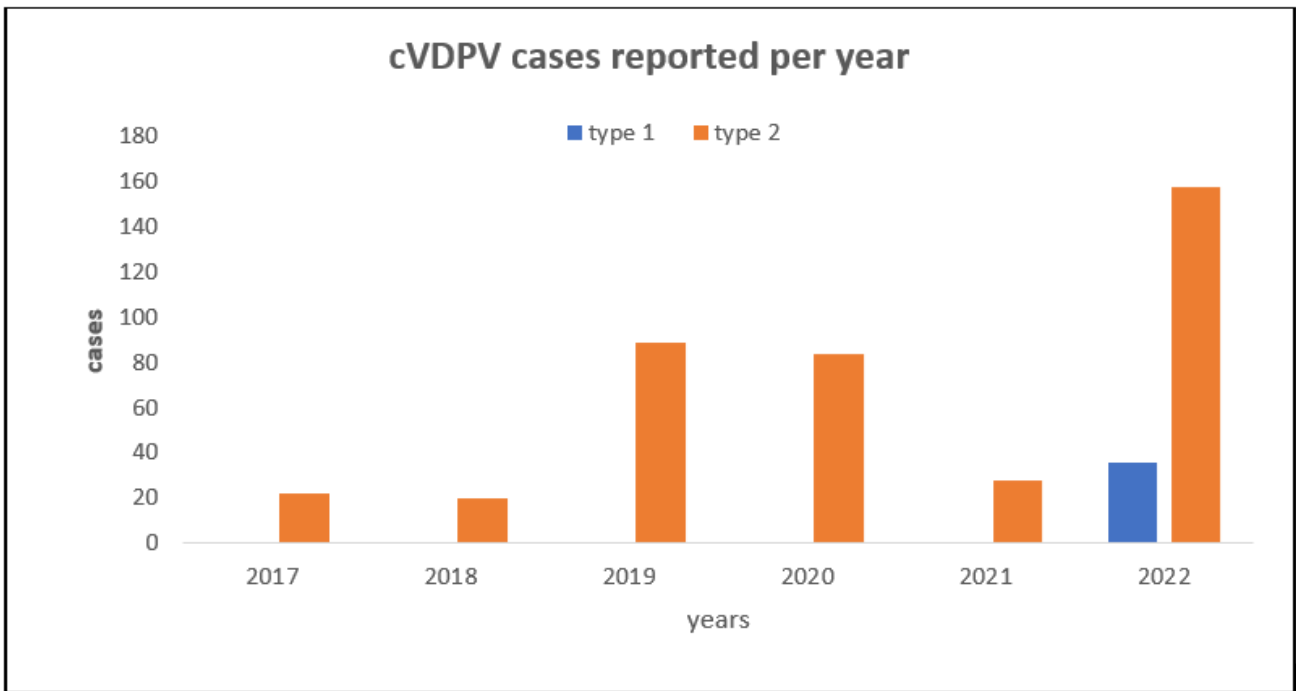
The country has not reported wild polio virus case for a while and the paralysis onset date for the last wild polio virus (WPV) case reported in the country is 20 December 2011. The Democratic Republic of the Congo has been certified as a "wild polio-free country" by the WHO since November 2015.

PUBLIC HEALTH ACTIONS

- The preparation of deployment of technical teams (national and international consultants) to the affected health districts is underway
- Active polio case search, case investigation and supportive integrated supervisions to the affected health zones are ongoing
- Partner coordination including, mapping of WHO and other partners technical support to the country during quarter 4 ,2022 is planned
- A meeting to discuss the classification of the inadequate AFP cases by the experts committee was conducted
- A mass polio vaccination campaign targeting 11 provinces is planned from 10 to 12 November 2022.

SITUATION INTERPRETATION

The Democratic Republic of the Congo is facing an upsurge in cases of type 1 and 2 vaccine-derived polioviruses with Haut-Lomami province as the epicenter of cVDPV1. This Province recorded its second and last polio outbreak in October 2019. Reinforcement of routine polio vaccination activities is required mostly in the affected health districts to slow down the outbreaks and implement as quickly as possible the mass polio vaccination campaign. Furthermore, required resources should be mobilized to achieve the national and Global polio eradication targets.



All events currently being monitored by WHO AFRO

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ongoing Events									
Algeria	COVID-19	Grade 3	25-Feb-20	25-Feb-2020	30-Oct-22	270 836	270 836	6 881	2.5%
From 25 February 2020 to 30 October 2022, a total of 270 836 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 419 recovered.									
Algeria	Poliomyelitis (cVDPV2)	Grade 2	14-Jul-22	11-Apr-2022	7-Oct-22	1	1	-	-
Algeria IHR focal point notified WHO of a confirmed case of Circulating Vaccine-Derived Poliovirus type 2 (cVDPV2). The case is a one-year-old girl resident of Tamanrasset Wilaya (commune of Tamanrasset). She was admitted on 11 April 2022 to a district hospital, for acute flaccid paralysis of both lower limbs. The epidemiological investigation carried out on the same day showed that she had not received any dose of oral or inactivated polio vaccine and that she had no history of travel outside the city of Tamanrasset.									
Angola	COVID-19	Grade 3	21-Mar-20	21-Mar-20	29-Oct-22	103 131	103 131	1 917	-
The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 29 October 2022, a total of 103 131 confirmed COVID-19 cases have been reported in the country with 1 917 deaths and 101 155 recoveries.									
Benin	COVID-19	Grade 3	17-Mar-20	16-Mar-20	16-Oct-22	27 902	27 902	163	0.6%
The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 16 October 2022, a total of 27 902 cases have been reported in the country, with 163 deaths and 27 709 recoveries.									
Benin	Monkeypox	Grade 3		14-Jun-22	19-Oct-22	3	3	0	0.0%
Three suspected cases of Monkeypox were notified to WHO by the Benin Ministry of Health on 3 June 2022. Two of the three suspected cases were from Nigeria, and one person was from the North of the country. Laboratory samples were taken and sent to the Institute Pasteur laboratory in Dakar, which confirmed the three samples positive on 14 June 2022.									
Benin	Poliomyelitis (cVDPV2)	Grade 2	8-Aug-19	24-Aug-2019	19-Oct-22	21	21	0	0.0%
No new case of Circulating Vaccine -derived poliovirus type 2 (cVDPV2) was reported this week. One case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in Donga, bringing the number of 2022 cases to seven. Six cases were reported in 2021 and 2020, and 8 in 2019.									
Botswana	COVID-19	Grade 3	30-Mar-20	28-Mar-20	27-Oct-22	326 344	326 344	2 790	0.9%
On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 27 October 2022, a total of 326 344 confirmed COVID-19 cases were reported in the country including 2 790 deaths.									
Burkina Faso	Humanitarian crisis (Sahel Region)	Grade 2	1-Jan-19	1-Jan-19	20-Sep-22	-	-	-	-
Since 2015, the security situation in the Sahel and East of Burkina Faso has gradually deteriorated due to attacks by armed groups. A total of 1 520 012 displaced persons are registered in Burkina Faso as of April 30, 2022. Access to health services remains a challenge for the population in affected areas. There are 192 non-functional health facilities and 353 facilities that function at a minimum level of their capacity.									
Burkina Faso	COVID-19	Grade 3	10-Mar-20	9-Mar-20	12-Oct-22	21 631	21 631	387	1.8%
Between 9 March 2020 and 12 October 2022, a total of 21 631 confirmed cases of COVID-19 with 387 deaths and 21 143 recoveries have been reported from Burkina Faso.									
Burundi	COVID-19	Grade 3	31-Mar-20	18-Mar-20	30-Oct-22	50 517	50 517	15	0.0%
On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 30 October 2022, the total number of confirmed COVID-19 cases is 50 517, including 15 deaths and 50 259 recovered.									
Cameroon	Humanitarian crisis (North, Adamawa & East)	Protracted 2	31-Dec-13	27-Jun-17	4-Oct-22				-
The security situation remains unstable, characterized by incursions and attacks in the departments of Mayo-Sava, Mayo-Tsanaga and Logone & Chari bordering Nigeria. At least 23 incidents involving armed men have been recorded, with 13 civilians killed including 2 children and 1 woman, as well as 12 people injured and 10 others abducted. The incursions of NSAGs are accompanied by looting of property and livestock, and sometimes burning of houses. Around 7 653 people have been displaced in June 2022, majority of which occurred in the Mokolo Subdivision following two NSAG attacks. As of 30 June 2022, 15 000 people have returned to their homes following the intercommunal conflict that occurred in the Logone-Birni department on December 2021. Moreover, nearly 640 households have been affected by torrential rains in Mayo-Danay and Logone & Chari since mid-April 2022.									
Cameroon	Humanitarian crisis (NW & SW)	Protracted 2	1-Oct-16	27-Jun-18	4-Oct-22	-	-	-	-
The situation in the North-West and South-West regions remains tense with continued violence and targeted attacks, including abductions, kidnappings, killings, unlawful arrests, and destruction of property. Populations, as well as education and healthcare providers in particular, continue to be under high risks when accessing facilities or delivering services. They continuously face threats, direct attacks, and armed incursions. The global rise in prices of basic commodities further exacerbates suffering among already vulnerable communities.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Cameroon	Humanitarian crisis (Sahel Region)	Grade 2	31-Dec-13	27-Jun-17	4-Oct-22	-	-	-	-
The situation in the Far North Region remains characterized by the persistence of non-state armed groups' activities in the Mayo-Sava, Mayo-Tsanaga, and Logone & Chari Departments. Several security incidents have been reported during the month of July 2022. These were mainly predatory incursions, attacks on military positions, looting and kidnappings with or without ransom demands. The most striking attack was that of the Mada District Hospital in Makary Division on 2 July, with significant humanitarian consequences. Moreover, the current rainy season makes geographical access increasingly difficult in several areas across the region. Several humanitarian activities are postponed or cancelled due to the poor physical condition of the roads in addition to the risk of security incidents, and the suspension of UNHAS flights.									
Cameroon	Cholera	Grade 2	1-Jan-21	25-Oct-21	13-Oct-22	12 779	1 149	263	2.1%
Between 7 and 13 October 2022, 156 new suspected cases of cholera including six deaths have been reported from four active Regions: Littoral (115 cases, five deaths), Far North (thirty-five cases, one death), Centre (four cases), and West (two cases). As of 13 October 2022, 12 779 suspected cases including 1149 laboratory-confirmed cases and 263 deaths (CFR 2.1%) have been reported since October 2021, from eight Regions and 49 Districts of which 19 remain active. South-West (6015 cases) and Littoral (5778 cases) Regions have reported majority of cases. Patients' ages range from 2 months to 95 years with a median of 27 years, and females remain twice less affected than males.									
Cameroon	COVID-19	Grade 3	6-Mar-20	6-Mar-20	14-Sep-22	123 629	123 629	1 960	1.6%
The Cameroon Ministry of Health announced the confirmation of the first COVID-19 case on 6 March 2020. As of 14 September 2022, a total of 123 629 cases have been reported, including 1 960 deaths and 121 131 recoveries.									
Cameroon	Measles	Ungraded	2-Apr-19	1-Jan-22	2-Oct-22	2 144	2 144	-	-
As of 2 October 2022, a total of 2 144 cases of measles have been confirmed including: 506 IgM+ (out of 1272 investigated cases with blood samples); 53 clinically compatible and 1 585 epi-linked cases. A total of 21 lab confirmed cases of rubella. About 91% of the children with confirmed measles are below nine years of age; 69% are less than five years with only 29% known to be vaccinated. A total of 54 districts with confirmed epidemics since the beginning of this year.									
Cameroon	Monkeypox	Grade 3	24-Feb-22	1-Jan-22	18-Oct-22	48	10	2	4.2%
From 16 September to 18 October 2022, two new suspected cases of Monkeypox have been reported, each in Kumba and Mbonge districts of South-West region. Between 1 January and 18 October 2022, the country has notified 48 suspected cases of monkeypox from seven districts across five regions, including two deaths (CFR 4.2%). A total of 35 human samples have been collected and ten cases have been laboratory-confirmed from Centre (4), South-West (2), North-West (2), Littoral (1) and South (1) regions. Males are slightly more affected than females (sex ratio M/F 1.4). Ages range from six months to 52 years with a median of 11 years; the under-five represent the most affected age group (n=15, 31.2%), followed by the 21-30 years (n=14, 29.2%).									
Cameroon	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-20	12-Oct-22	10	10	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported during epi week 40, 2022. There were three cases reported in 2021 and seven cases reported in 2020. No case has yet been reported for 2022.									
Cameroon	Yellow fever	Grade 2	7-Feb-21	4-Jan-21	4-Oct-22	2 824	35	0	0.0%
As of 4 October 2022, a total of 2 824 suspected cases of YF have been reported since the beginning of the outbreak in 2021, including 17 probable and 35 laboratory-confirmed cases. Cumulatively, 10 PRNT+ cases are pending classification including four in West, one in Adamawa, one in Centre, one in East, one in Littoral, one in North-West and one in South-West. All ten Regions and 32 Districts have been affected since the beginning of the outbreak in 2021.									
Cape Verde	COVID-19	Grade 3	19-Mar-20	18-Mar-20	15-Oct-22	62 397	62 397	410	0.7%
The first COVID-19 confirmed case was reported in Cape Verde on 19 March 2020. As of 15 October 2022, a total of 62 397 confirmed COVID-19 cases including 410 deaths and 61 923 recoveries were reported in the country.									
Central African Republic	Humanitarian crisis	Protracted 2	11-Dec-13	11-Dec-2013	15-Sep-22	-	-	-	-
After several years of displacement, humanitarian and development actors are helping internally displaced persons and refugees to resume normal lives. As of 31 July 2022, the total number of internally displaced persons (IDPs) in CAR was estimated at 647 883 individuals, comprising 154 964 people in IDP's sites and 492 919 in host families. This represents an overall increase of 37 618 IDPs (6.2%) compared to June 2022 when the number of IDPs was estimated at 610 265. Moreover, floods continue to affect CAR. More than 22 450 people have lost their homes and have taken shelter in host families, schools and churches. At least ten people were killed, nearly 2,000 houses and a dozen bridges were destroyed, and thousands of latrines and wells were flooded.									
Central African Republic	COVID-19	Grade 3	14-Mar-20	14-Mar-20	23-Oct-22	15 259	15 259	113	0.7%
The Ministry of Health and population announced the confirmation of the first COVID-19 case in Central African Republic on 14 March 2020. As of 23 October 2022, a total of 15 259 confirmed cases, 113 deaths and 14 615 recovered were reported.									
Central African Republic	Measles	Ungraded	13-Mar-22	1-Jan-22	25-Sep-22	1 246	119	1	0.1%
As at Week 38 (ending 25 September), a total of 1 246 measles cases reported through IDSR with one related death. About 70 cases tested IgM+ for measles. In addition 49 cases of measles were confirmed through epi-link; seven districts with confirmed measles outbreaks are reported since the beginning of the year including Bangui 1, in the capital region.									
Central African Republic	Monkeypox	Grade 3	3-Mar-22	4-Mar-22	31-Aug-22	20	8	2	10.0%
As of 14 September 2022, the Central African Republic has so far recorded 20 suspected cases of monkeypox including eight confirmed cases and two deaths (CFR 10%). The confirmed cases have been reported from six health districts: Sangha-Mbaéré, Bangui 1, Alindao, Bimbo, Ouango-Gambo and Bangassou.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Central African Republic	Yellow fever	Grade 2	14-Sep-21	1-Apr-2021	4-Oct-22	687	20	4	0.6%
On 3 August 2021, an 18-month-old girl from Mala village in the Kemo district, Central African Republic, tested positive for yellow fever by plaque reduction neutralization test at the Centre Pasteur of Cameroun. As of 4 October, a total of 687 suspected cases of YF have been reported including four probable and 20 lab-confirmed cases. Four deaths have so far been recorded (CFR 0.7%). Twenty-seven suspected cases have been reported on epi week 38, 2022. Three regions still remain affected (RS3, 4 & 6), with 70% of confirmed cases being reported in RS3 (Batangafo Kabo and Nanga-Boguila districts have each reported eight and six confirmed cases, respectively).									
Chad	Humanitarian crisis (Sahel region)	Grade 2	11-Feb-22	1-Mar-16	8-Aug-22	-	-	-	-
More than 2.1 million people are in food and nutrition insecurity in Chad. The decline in agro-pastoral productivity is affecting the nutritional status of the populations. According to OCHA, more than 1.5 million of the most vulnerable people are at risk of not receiving assistance. Chad experienced flooding due to heavy rains starting from April 2022, and affected more than 340 000 people across 11 regions. The Capital, N'Djamena and the Southern region (Logone oriental and Occidental, Mayo Kebbi Est, Mayo Kebbi Ouest, Salamat and Sila) are the most affected. The affected population urgently needs food, NFIs, shelter and healthcare assistance.									
Chad	COVID-19	Grade 3	19-Mar-20	19-Mar-20	24-Oct-22	7 620	7 620	194	2.5%
The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 24 October 2022, a total of 7 620 confirmed COVID-19 cases were reported in the country including 194 deaths.									
Chad	Measles	Ungraded	24-May-18	1-Jan-22	19-Oct-22	2 781	142	9	0.3%
A total of 2 781 suspected measles cases and nine measles deaths reported from the start of the year 2022 in 127 of 139 districts; 142 of 988 tested were lab confirmed measles and 101 of 496 tested were lab confirmed rubella cases. Only 27% of confirmed cases were vaccinated and 51% of lab confirmed cases are less than five years of age, and 17% are from five to nine years old.									
Chad	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	9-Sep-19	12-Oct-22	133	133	0	0.0%
No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported on week 40, 2022. The last four cases were reported on week 35 including two in N'Djamena, and one each in Mayo Kebbi Est and Salamat Regions, bringing to 18 the number of 2022 cases of cVDPV2 in Chad. In addition, there were 106 cVDPV2 cases reported in 2020 from three different outbreaks, while nine other cases were reported in 2019.									
Chad	Yellow fever	Grade 2	13-Nov-21	1-Nov-21	4-Oct-22	1 902	30	7	0.4%
On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 4 October 2022, 1 902 suspected cases of yellow fever have been reported, including 37 probable and 30 lab-confirmed cases with seven deaths (CFR 0.4%). Twenty-eight new suspected cases were reported on week 38, and 10 new samples were received at the national laboratory. Six confirmed cases (with onset of symptoms in May and June) were reported from five Regions and six Districts including two from Logone Oriental (Bessao & Larmanaye), one from Mayo Kebbi Ouest (Lere), one from Mayo Kebbi Est (Gounou-Gaya), one from Ouaddai (Abeche), and one from Tandjile (Lai). A total of 18/126 districts in 8/23 provinces have been affected since the beginning of the outbreak.									
Comoros	COVID-19	Grade 3	30-Apr-20	30-Apr-2020	29-Oct-22	8 762	8 762	161	1.9%
The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 29 October 2022, a total of 8 762 confirmed COVID-19 cases, including 161 deaths and 8 421 recoveries were reported in the country.									
Congo	COVID-19	Grade 3	14-Mar-20	14-Mar-20	11-Aug-22	24 837	24 837	386	1.6%
The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 7 August 2022, a total of 24 837 cases including 386 deaths and 23 644 recovered cases have been reported in the country.									
Congo	Measles	Ungraded	14-Mar-22	1-Jan-22	18-Sep-22	6 779	6 779	132	1.9%
A total of 394 lab confirmed measles cases and 6 385 cases confirmed by epidemiological linkage reported in 2022 with 97 cases of confirmed rubella; 32 out of 52 districts in the country (62%) experienced outbreaks at some point this year									
Congo	Monkeypox	Grade 3	23-May-22	1-Jan-22	14-Sep-22	10	5	3	30.0%
Since the beginning of 2022, ten cases including five laboratory-confirmed and five probable cases have been reported from Impfondo District in the country's northern department of Likouala on the border with the Democratic Republic of Congo and Central Africa (7), from Sangha Department (2), and from Pointe Noire (1), as of 14 September 2022. Three of these cases have died (CFR 30.0%). Two confirmed cases have been reported on week 36, including one from Pointe Noire which has reported its first ever case of monkeypox.									
Congo	Yellow fever	Grade 2	31-Mar-22	31-Mar-22	19-Oct-22	41	4	0	0.0%
In Congo, as of 19 October 2022, a total of 41 probable cases of yellow fever and four confirmed and zero deaths have been reported.									
Côte d'Ivoire	COVID-19	Grade 3	11-Mar-20	11-Mar-20	30-Oct-22	87 773	87 773	827	0.9%
Since 11 March 2020, a total of 87 773 confirmed cases of COVID-19 have been reported from Côte d'Ivoire including 827 deaths, and a total of 86 924 recoveries.									
Côte d'Ivoire	Yellow fever	Grade 2	14-Sep-21	13-Aug-2021	19-Oct-22	81	8	0	0.0%
From 13 August 2021 to 19 October 2022, a total of 73 probable and eight confirmed cases of yellow fever were recorded in Côte d'Ivoire, with no deaths.									
Democratic Republic of the Congo	Humanitarian crisis	Protracted 3	20-Dec-16	17-Apr-2017	9-Oct-22	-	-	-	-
As of 31 July, more than 5.5 million people are internally displaced with North Kivu and Ituri provinces hosting the majority of IDPs (32% each) followed by South Kivu province (24%). The main causes of displacement are armed attacks and clashes, land and inter-community conflicts and natural disasters. In July 2022, 34 new security incidents directly affecting humanitarian personnel or goods were recorded in the DRC. In Mai Ndombe province, the resurgence of deadly inter-community violence observed in Kwamouth territory has led to the displacement of thousands of people since July 2022 and the death of more than 142 people. Since the beginning of the violence until 6 Oct 2022, approximately 27K people, most of whom are women and children, have relocated and need emergency assistance in the provinces of Kwilu and Mai Ndombe. Another 2 600 have found refuge in the Republic of Congo after crossing the Congo River.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Democratic Republic of the Congo	Cholera	Grade 3	16-Jan-15	3-Jan-22	9-Oct-22	11 043	1 156	202	1.8%
From epidemiological week 1 to 40 (ending 9 October 2022), 11 043 suspected cholera cases including 202 deaths (CFR: 1.8%) were recorded in 77 health zones across 15 provinces of the Democratic Republic of the Congo. Suspected cases have mostly been reported from South Kivu (3 840), Haut-Lomami (2 098), Tanganyika (2 020), and North Kivu (1 861). Response actions are continuing in provincial health zones with active outbreaks (Sankuru, South Kivu, Haut Lomami, Tanganyika, etc.). A total of 1 156 (29.6%) cases have been confirmed in the laboratory out of 3 906 analysed from weeks 1-40 in 2022.									
Democratic Republic of the Congo	COVID-19	Grade 3	10-Mar-20	10-Mar-20	23-Oct-22	93 087	93 085	1 445	1.6%
Since the start of the COVID-19 outbreak, declared on 10 March 2020, a total of 93 085 confirmed cases and two probable case, including 1 445 deaths have been reported. A total of 83 534 people have recovered.									
Democratic Republic of the Congo	Measles	Ungraded	12-Oct-21	1-Jan-22	9-Oct-22	115 905	5 441	1 411	1.2%
As at Epi Week 40 of 2022 (ending 9 October) : 115 905 suspected cases and 1 411 measles related deaths (CFR 1.2%) ; 5 441 cases investigated through the case-based surveillance system; 2 199 tested IgM+ for Measles and 1 168 tested IgM+ for Rubella ; 67% lab confirmed measles cases are less than five years old , and only 28% with history of vaccination									
Democratic Republic of the Congo	Monkeypox	Grade 3	30-Mar-19	1-Jan-22	9-Oct-22	4 221	206	0	0.0%
From 1 January – 9 October 2022, the Democratic Republic of the Congo reported 4 221 suspected including 206 confirmed cases from 168 health zones across 23 provinces. The most affected provinces in 2022 are Sankuru (1 767), Tshopo (622), Maniema (315), Kasai (273), and Tshuapa (241).									
Democratic Republic of the Congo	Plague	Ungraded	12-Mar-19	1-Jan-22	9-Oct-22	615	-	10	1.6%
Between epidemiological weeks 1-40 of 2022, 615 cases of suspected bubonic plague have been reported with 10 deaths (CFR 1.6%). All cases have been reported from the Rethy health zone in Ituri Province. Lokpa health area has reported the majority of suspected cases (477, 78.1%) in 2022.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV1)	Grade 2		1-Jan-22	28-Oct-22	28	28	0	0.0%
Refer to text above.									
Democratic Republic of the Congo	Poliomyelitis (cVDPV2)	Grade 2	26-Feb-21	1-Jan-21	28-Oct-22	186	186	0	0.0%
Refer to text above.									
Democratic Republic of the Congo	Suspected meningitis	Ungraded		2-Jun-22	22-Oct-22	131		20	15.3%
A suspected meningitis outbreak is ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 22 October 2022, a total of 131 suspected cases with 20 deaths (CFR 15.3%) have been reported. Three health areas are the hotspots: Mangi , Bongonza and Akuma.									
Democratic Republic of the Congo	Yellow Fever	Grade 2	21-Apr-21	1-Jan-22	19-Oct-22	10	6	1	10.0%
As of 19 October 2022, 10 probable cases and six confirmed yellow fever cases and one death have been reported in the country .									
Equatorial Guinea	COVID-19	Grade 3	14-Mar-20	14-Mar-20	26-Oct-22	17 074	17 074	183	1.1%
The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 26 October 2022, a total of 17 074 cases have been reported in the country with 183 deaths and 16 814 recoveries.									
Eritrea	COVID-19	Grade 3	21-Mar-20	21-Mar-20	28-Oct-22	10 188	10 188	103	1.0%
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 28 October 2022, a total of 10 188 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 10 082 patients have recovered from the disease.									
Eritrea	Poliomyelitis (cVDPV2)	Grade 2	2-Jun-22	7-Jun-22	12-Oct-22	2	2	0	0.0%
No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) has been reported this week 40, 2022. There has so far been one case reported in 2022 and another one reported in 2021, even though this case was confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.									
Eswatini	COVID-19	Grade 3	13-Mar-20	13-Mar-20	30-Oct-22	53 558	53 558	1 422	1.9%
The first case of COVID-19 was confirmed in the kingdom of Eswatini on 16 March 2020. As of 30 October 2022, a total of 73 558 cases have been reported with 1 422 associated deaths.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Ethiopia	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	28-Oct-22	-	-	-	-
<p>The unprecedented severe drought in southern and north-eastern Ethiopia is worsening in scope and scale. Vulnerable communities in these areas are still bracing for the projected fifth failed rainy season during October-December 2022. The humanitarian impact will therefore likely continue to worsen well into 2023. Over 24 million people are projected to be affected by drought in Ethiopia in October, at least 9.9 million of whom are in need of emergency food assistance. At least 3.5 million livestock have already perished and another 25 million are at risk. At the same time, 2.2 million children are already acutely malnourished due to the impact of drought; over 760 000 of these children are severely malnourished. The Government and humanitarian partners are collectively working to scale-up the drought response, including availing food, water and health services. Livestock feed is also being distributed to prevent further livestock deaths. Some of the drought-affected areas are equally impacted by conflict, making the humanitarian context more complex. As of 15 October 2022, more than 10 million people have received some form of humanitarian assistance across the drought-affected areas.</p>									
Ethiopia	Humanitarian crisis (Conflict in Tigray)	Grade 3	4-Nov-20	4-Nov-20	15-Oct-22	-	-	-	-
<p>Humanitarian needs in conflict, drought and flood-affected areas across Ethiopia continue increasing, not only affecting more people but also increasing the severity of needs. In northern Ethiopia, for instance, hostilities continue to escalate leading to injuries, loss of life, additional displacement, destruction of civilian infrastructure and mounting humanitarian needs. In Afar Region, close to 40 000 people were newly displaced in Aba'la and Berhale woredas. In Amhara Region, following the improvement of the security situation in North Wollo Zone, close to 100 000 people who were displaced by hostilities a few weeks ago have started returning to their hometown. In Tigray Region, civilians waiting to receive much-needed humanitarian assistance came under fire on 14 October, which caused injuries and loss of life. In Oromia Region, ongoing hostilities, particularly in the Wollega zones, continued to lead to displacements into Amhara Region. In Benishangul Gumuz Region, access to Kamashi Zone remains blocked due to ongoing hostilities in western Oromia. As of 15 October 2022, 26 humanitarian workers have lost their lives since the hostilities in northern Ethiopia began at the end of 2020. About 22 million vulnerable people across the country have received some form of humanitarian assistance between January and August 2022.</p>									
Ethiopia	Cholera	Ungraded	17-Sep-22	17-Sep-22	29-Oct-22	331	4	17	5.1%
<p>A cholera outbreak in ongoing in Ethiopia since 27 August 2022. The index case was reported from Bekay Kebele, Harana Buluk Woreda of Bale Zone, Oromia Region. As of 29 October 2022, a total of 331 suspected cases of cholera have been reported including 245 cases from Oromia region and 86 cases from Somali region. The cumulative attack rate is 63.7 per 100 000 population. Seventeen deaths have so far been reported, for a CFR of 5.1%. Five woredas have been affected: Berbere (n=152 cases), Harena Buluk (n=71 cases), and Delo Mena (n=22 cases) in Bale Zone of Oromia region, and Guradamole (n=49 cases) and Kersadula (n=37 cases) in Liben Zone of Somali region. No case has been reported from Harena Buluk in the last 20 days, and from Dolo Mena in the last 13 days.</p>									
Ethiopia	COVID-19	Grade 3	13-Mar-20	13-Mar-20	30-Oct-22	493 940	493 940	7 572	1.5%
<p>Since the confirmation of the first case on 21 March 2020, Ethiopia has confirmed a total of 493 940 cases of COVID-19 as of 23 October 2022, with 7 572 deaths and 472 088 recoveries.</p>									
Ethiopia	Measles	Ungraded	14-Jan-17	1-Jan-22	30-Sep-22	9 850	5 806	56	0.6%
<p>From January to September 2022 (30 September), a total of 9 850 suspected cases with 5 806 confirmed and 56 deaths (CFR 0.6%) have been reported in Ethiopia. A total of 16 districts(Woredas) are currently experiencing confirmed measles outbreak : Chilga; Anded;Gololcha;Gura Damole; Guchi;Babile;Deraa;Banatsemay;North Ari; Raaso; West Imey; Harawo; Jigjiga City; Gashamo; Gorabaqasa; Afdem</p>									
Gabon	COVID-19	Grade 3	12-Mar-20	12-Mar-20	26-Oct-22	48 945	48 945	306	0.6%
<p>On 12 March 2020, the Ministry of Health announced the confirmation of the first COVID-19 case in the country. As of 26 October 2022, a total of 48 945 cases including 306 deaths and 48 392 recoveries have been reported in the country.</p>									
Gambia	Acute kidney injury	Grade 2	11-Aug-22	4-Jul-22	6-Oct-22	81	-	69	85.2%
<p>On 1 August 2022, the Epidemic and Disease Control Unit of the Ministry of Health in The Gambia reported an unusual event detected at the Edward Francis Small Teaching Hospital, the main tertiary hospital in the country. A total of 81 cases with 69 deaths (CFR 85%) have been reported as of 6 October 2022. The median age is 17 years with a range of two to 84 months. The highest number of cases was among children under two years of age. The index case was traced to 4 July 2022. Patients presented with symptoms such as inability to urinate, fever, vomiting, and diarrhoea. In addition, 23 samples of medicines taken by these children were sent for toxicology testing, and four of the medicines were found to contain diethylene glycol and ethylene glycol. Further investigation is ongoing.</p>									
Gambia	COVID-19	Grade 3	17-Mar-20	17-Mar-20	30-Oct-22	12 580	12 580	372	3.0%
<p>The first COVID-19 confirmed case was reported in The Gambia on 17 March 2020. As of 30 September 2022, a total of 12 580 confirmed COVID-19 cases including 372 deaths, and 12 174 recoveries have been reported in the country.</p>									
Ghana	COVID-19	Grade 3	12-Mar-20	12-Mar-20	25-Oct-22	170 707	170 707	1 460	0.9%
<p>As of 25 October 2022, a total of 170 707 confirmed COVID-19 cases have been reported in Ghana. There have been 1 460 deaths and 169 031 recoveries reported.</p>									
Ghana	Monkeypox	Grade 3	8-Jun-22	24-May-2022	13-Oct-22	656	104	4	0.6%
<p>On 8 June 2022, the Director General of the Ghana Health Service confirmed that 5 cases of monkeypox have been detected in the country. From 24 May-13 October 2022, there have been 656 suspected cases, including 104 confirmed and four deaths reported from 13 over 16 administrative regions. Most of the positive cases were reported from the Greater Accra region (60%). Of the confirmed cases, 64 (62 %) are males. The age of confirmed cases ranges from 13 days to 67 Years (min-max).</p>									
Ghana	Yellow fever	Grade 2	3-Nov-21	15-Oct-21	19-Oct-22	131	61	21	16.0%
<p>From 15 October 2021, suspected cases of yellow fever were reported mostly among nomadic settlers in the Savannah region, northwest Ghana (bordering Côte d'Ivoire). As of 19 October 2022, a total of 70 probable and 61 confirmed cases of yellow fever were reported from 13 regions in Ghana. Of the reported cases, nine deaths were recorded among probable cases and 12 deaths among confirmed cases.</p>									
Guinea	COVID-19	Grade 3	13-Mar-20	13-Mar-20	12-Oct-22	38 047	38 047	456	1.2%
<p>The Ministry of Health in Guinea announced the first confirmed case of COVID-19 on 13 March 2020. As of 12 October 2022, a total of 38 047 cases, including 37 118 recovered cases and 456 deaths, have been reported in the country.</p>									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Guinea	Lassa fever	Ungraded	20-Sep-22	20-Sep-22	29-Sep-22	1	1	1	100.0%
As part of routine surveillance, the Prefectural Health Directorate (DPS) of N'zerékéré was alerted by the Regional Hospital Directorate on 20 September 2022 of a positive case of hemorrhagic fever from the Mohomou health area in the urban commune. This is a male patient, 45 years old, a logistician by profession. The deceased lived in the Gbangana district and shared the same household with only his wife. An investigation is ongoing to identify the source of contamination									
Guinea	Measles	Ungraded	9-May-18	1-Jan-22	30-Sep-22	23 183	418	33	0.1%
Since the beginning of 2022 up to week 40 (ending 30 September), a total of 23 183 suspected measles cases with 418 confirmed and 33 death (CFR 0.2%) have been reported in Guinea through the Integrated disease surveillance and response.									
Guinea-Bissau	COVID-19	Grade 3	25-Mar-20	25-Mar-20	2-Oct-22	8 848	8 848	176	2.0%
On 25 March 2020, the Ministry of Health of Guinea Bissau reported the first COVID-19 confirmed case in the country. As of 2 October 2022, the country has reported 8 848 confirmed cases of COVID-19 with 8 642 recoveries and 176 deaths.									
Kenya	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	24-Aug-22	-	-	-	-
About 4.2 million people in northern and eastern Kenya have now been affected by the drought which began in October 2020, representing a significant increase from July 2022. Some 3.5 million people are severely food insecure due to the drought. Over 2.4 million livestock—which pastoralist families rely upon for sustenance and livelihoods—have died. Consequently, children have less access to milk, negatively affecting their nutrition. In Kenya, nearly 884 500 children under age 5 and 115 700 pregnant and lactating women are affected by acute malnutrition and need treatment, including 222 700 severely malnourished children. Moreover, more than 4.1 million people cannot access enough water for drinking, cooking and cleaning across Kenya.									
Kenya	Anthrax	Ungraded	15-Jul-22	30-Jun-22	9-Oct-22	173	1	-	-
Kenya is facing an anthrax outbreak with cases reported from different counties including Kakamega. Twelve cases were reported from Runyenjes (5), Tigania East (3), and Trans Mara East (4) sub counties with no deaths in the last week (week 40, ending 9 October). From January to 9 Oct 2022, a total of 173 cases have been reported through weekly Integrated Disease Surveillance and Response report									
Kenya	Chikungunya	Ungraded	3-Mar-22	13-Feb-2022	16-Oct-22	291	5	1	0.3%
Wajir County has continued to report the cases from Tarbaj sub-county in Kutulo village. A total of two hundred and ninety-one (291) cases have been reported with five confirmed cases and one death (CFR 0.3%).									
Kenya	Cholera	Ungraded	19-Oct-22	16-Oct-22	16-Oct-22	94	14	2	2.1%
Cholera outbreak has been confirmed affecting six counties as listed below: Nairobi, Kiambu, Nakuru, Uasin Gishu, Kajiado and Murang'a. The index case and majority of the first cases had attended a wedding which was held in Red hill Gardens, Limuru sub county, Kiambu county on 8 October 2022. The outbreak has then extended to the community outside the event. A total of 94 cases with 14 Confirmed by culture and two deaths (CFR 2.1%) have been reported.									
Kenya	COVID-19	Grade 3	13-Mar-20	13-Mar-20	30-Oct-22	339 113	339 113	5 678	1.7%
On 12 March 2020, the Ministry of Health announced the confirmation of one new COVID-19 case in the country. As of 30 October 2022, 339 113 confirmed COVID-19 cases including 5 678 deaths and 333 025 recoveries have been reported in the country.									
Kenya	Leishmaniasis (visceral)	Ungraded	31-Mar-19	3-Jan-20	16-Oct-22	2 015	1 834	10	0.5%
The Outbreak has been continuous since 2020. A total of 2 015 visceral leishmaniasis (suspected and confirmed) cases have been reported in Marsabit, Garissa, Kitui, Baringo, West Pokot, Mandera, Wajir and Isiolo Counties with a total of 10 deaths reported. The outbreak is active in four counties, West Pokot County in Pokot North, Pokot south and West Pokot Sub Counties, Kitui county from Mwingi North and Mwingi Central Sub-counties ,Wajir County from Wajir East,west,South and Eldas sub counties and Isiolo County. In the last week, no new cases were reported.									
Kenya	Measles	Ungraded	29-Jun-22	26-Jun-22	16-Oct-22	197	57	0	0.0%
The measles outbreak has been reported from six counties Marsabit ,Wajir,Nairobi,Turkana,Garissa and Mandera Counties.A total of 197 cases with 57 confirmed cases have been reported with zero death .A total of 55 additional cases were reported in the last one week from Wajir north(48),Wajir East(3) and Kutulo (4) sub counties									
Kenya	Yellow fever	Grade 2	3-Mar-22	12-Jan-22	22-Oct-22	139	3	11	7.9%
From 12 Jan to 22 Oct 2022, there were a total of 139 suspected cases of yellow fever including 11 deaths (CFR 7.9%) reported from 11 counties in Kenya. No new cases were reported as of week 41 (ending 22 Oct). An outbreak was reported officially in Isiolo and Garissa counties. Of the suspected cases, only three were confirmed by PCR at the Kenya Medical Research Institute.									
Lesotho	COVID-19	Grade 3	13-May-20	13-May-2020	29-Oct-22	34 490	34 490	706	2.1%
Since the first confirmed COVID-19 case was reported in Lesotho on 13 May 2020, until 29 October 2022, a total of 34 490 cases of COVID-19 have been reported, including 33 784 recoveries and 706 deaths.									
Liberia	COVID-19	Grade 3	16-Mar-20	16-Mar-20	25-Oct-22	7 996	7 996	294	3.7%
From 16 March 2020 to 25 October 2022, Liberia has recorded a total of 7 996 cases including 294 deaths and 7 694 recoveries have been reported.									
Liberia	Lassa Fever	Ungraded	3-Mar-22	6-Jan-22	23-Oct-22	52	52	17	32.7%
Since the beginning of 2022 up to 23 October 2022, a total of 156 suspected cases of Lassa fever including 52 laboratory confirmed and 17 deaths among confirmed cases (CFR 33%) have been reported in Liberia.									
Liberia	Measles	Ungraded	3-Feb-22	13-Dec-2021	26-Oct-22	7 312	7 312	81	1.1%
Since the measles outbreak started on 13 December 2021 as of 12 October 2022, a total of 7 806 suspected cases, including 7 312 confirmed and 81 deaths (CFR: 1%) were reported from 62 health districts in 15 counties.									
Liberia	Monkeypox	Grade 3	21-Jul-22	23-Jul-22	11-Oct-22	3	3	0	0.0%
Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public health Reference Laboratory in the country. The case is a 43-year-old male who resides and works in Ebokayville Une, La Côte D'Ivoire but sought treatment at the Pleabo Health centre in Maryland County, Liberia where he was detected and isolated with 4 contacts being line-listed. As of 11 October 2022, three confirmed cases of monkeypox and 0 deaths were reported.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Madagascar	Malnutrition crisis	Protracted 2	1-Jul-21	1-Jan-21	28-Oct-22	-	-	-	-
Despite humanitarian aid, from April to August 2022, 33% of the population of the Grand South is still highly food insecure, including 122,000 people in IPC Stage 4 (Emergency), and 925,000 in IPC Stage 3 (Crisis). Madagascar Health Cluster was activated in January 2022 as part of a joint intervention with the Nutrition Cluster to alleviate the ongoing crisis. An estimated 1.7 million people (32% of the total population) in Madagascar who are projected to face Integrated food security IPC projections estimate that 189 056 people are classified as emergency phase 4 and a little more than 1.5 million are classified as IPC Phase 3.									
Madagascar	COVID-19	Grade 3	20-Mar-20	20-Mar-20	30-Oct-22	66 749	66 749	1 411	2.2%
Madagascar Ministry of Health announced the confirmation of the first COVID-19 case on 20 March 2020. As of 30 October 2022, a total of 66 749 confirmed cases including 1 411 deaths have been reported in the country.									
Malawi	Floods	Grade 2	26-Jan-22	26-Jan-22	7-Oct-22	1 000 000		51	0.0%
The aftermath of the cyclone Ana and Gombe in Malawi has largely been contained. The disaster displaced a number of households, damaged household property, injuries as well as damage to infrastructure and caused several deaths in the southern part of the country. Approximately, more than 1 million people were affected, with 51 deaths recorded. The decommissioning of IDP camps in affected districts. Mulanje and Balaka districts have decommissioned all IDP camps whilst Nsanje has only six active IDP camps. Though, the cholera outbreak still persists. As of 2 October 2022, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 3 737 and 106 respectively, with Case Fatality Rate at 2.8%.									
Malawi	Cholera	Ungraded	3-Mar-22	3-Mar-22	28-Oct-22	5 724	5 724	177	3.1%
A total of 25 districts have reported Cholera cases since the confirmation of the first case in March 2022 in Machinga district. As of 28 October 2022, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 5 724 and 177 respectively, with Case Fatality Rate at 3.0%.									
Malawi	COVID-19	Grade 3	2-Apr-20	2-Apr-2020	28-Oct-22	87 999	87 999	2 683	3.0%
On 2 April 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 28 October 2022, the country has a total of 87 999 confirmed cases with 2 683 deaths.									
Malawi	Poliomyelitis	Ungraded	31-Jan-22	1-Feb-2022	26-Oct-22	1	1	0	0.0%
One positive case of wild WPV1 was detected in Lilongwe from a child with the date of onset of paralysis on 19 November 2021. No other cases have been reported. Malawi continues to participate in the multi-country, subregional outbreak response, to urgently stop the WPV1 outbreak affecting the area.									
Mali	Humanitarian crisis (Sahel region)	Grade 2	n/a	11-Sep-17	11-Oct-22	-	-	-	-
The humanitarian situation in Mali has deteriorated significantly in the first half of 2022 due to the intensification of the conflict and intercommunity clashes. The level of need is the highest it has been since the crisis began in 2012. Currently, 7.5 million people, or one in three Malians, are in need of humanitarian assistance, up from 3.8 million in 2017. In addition, 1.8 million people need food aid, a 50% increase from last year.									
Mali	COVID-19	Grade 3	25-Mar-20	25-Mar-20	30-Oct-22	32 731	32 731	742	2.3%
On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 30 October 2022, a total of 32 731 confirmed COVID-19 cases have been reported in the country including 742 deaths and 31 898 recoveries.									
Mali	Measles	Ungraded	20-Feb-18	1-Jan-22	25-Sep-22	2 017	683	1	0.0%
As of 25 September 2022, a total of 2 017 suspected cases of measles and 683 confirmed and one death have been reported in Mali through integrated disease surveillance and response (IDSR) system. In September 2022, 30 positive cases and none deaths were recorded. The most affected age group is from 0 to 59 months.									
Mauritania	COVID-19	Grade 3	13-Mar-20	13-Mar-20	30-Oct-22	63 355	63 355	997	1.7%
The government of Mauritania announced its first confirmed COVID-19 case on 13 March 2020. As of 30 October 2022, a total of 63 355 cases including 997 deaths and 62 252 recovered have been reported in the country.									
Mauritania	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	31-Aug-22	29-Aug-2022	6-Oct-22	1	1	0	0.0%
The Mauritanian Ministry of Health reported a new confirmed case of Crimean-Congo haemorrhagic fever (CCHF) on 29 August 2022. The patient was a 28-year-old pregnant woman from the locality of Diabbé located 2 kilometers from M' Bagne city in Brakna region. She presented with a febrile syndrome during the prenatal consultation on 28 August 2022 and a sample was taken the same day. CCHF was confirmed on 29 August 2022 by polymerase chain reaction at the Institut National de Recherche en Santé Publique (INRSP).									
Mauritania	Rift Valley fever	Grade 1	31-Aug-22	26-Aug-2022	10-Oct-22	44	44	22	50.0%
A new confirmed case of Rift Valley fever (RVF) was reported by the Mauritanian Ministry of Health on 29 August 2022. The index case is a 25-year-old male breeder from the Moughataa (district) of Tintane in Hodh El Gharbi region. He presented to a health facility with high fever and headache. On 26 August, he developed a haemorrhagic syndrome (epistaxis) with severe thrombocytopenia. He died on 29 August. As of 10 October 2022, a total of 44 cases have been confirmed with 22 deaths (CFR 50%). Response activities are underway including enhanced surveillance and investigations.									
Mauritius	COVID-19	Grade 3	18-Mar-20	18-Mar-20	23-Oct-22	265 301	265 301	1 032	0.4%
The Republic of Mauritius announced the first three positive cases of COVID-19 on 18 March 2020. As of 29 October 2022, a total of 265 301 confirmed COVID-19 cases including 1032 deaths have been reported in the country.									
Mozambique	Humanitarian crisis in Cabo Delgado	Protracted 2	1-Jan-20	1-Jan-20	12-Oct-22	-	-	-	-
The safety situation in Cabo Delgado remains unpredictable and volatile. As of 12 October 2022, the nationwide estimate of people in need of humanitarian assistance is 1.5 million and 946, 508 IDP population resulting from the conflict. 1.5 million still need life saving humanitarian assistance in 2022 resulting from heightened food insecurity and malnutrition.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Mozambique	Cholera	Ungraded	23-Mar-22	13-Jan-22	2-Oct-22	3 685	16	19	0.5%
Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 13 January to 8 October 2022, a total of 3 685 cases and 19 deaths (CFR 0.5%) have been reported. In Sofala province, cases have been reported from Caia (707, 21.7%), Maringue (30, 0.9%), Chemba (36, 1.1%), and Marromeu districts (274, 5.9%). In Zambezia province, cases have reported from Morrumbala (1 333, 40.9%), Mopeia (589, 18.0%), and Quelimane City (386, 5.9%) districts. A total of 63 samples have been tested, of which 41 have returned positive for cholera by rapid diagnostic test (RDT) and 16 turned positive by culture. Response activities are ongoing. Niassa province started the outbreak on August 25th in Lago district, Cobue locality. From September 14th till 2nd of October 116 cases and 2 deaths (CFR=1.7%) were reported.									
Mozambique	COVID-19	Grade 3	22-Mar-20	22-Mar-20	29-Oct-22	230 475	230 475	2 224	1.0%
The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 14 October 2022, a total of 230 475 confirmed COVID-19 cases were reported in the country including 2 224 deaths and 228 176 recoveries.									
Mozambique	Monkeypox	Grade 3	6-Oct-22	7-Oct-22	17-Oct-22	1	1	0	0.0%
The case was diagnosed Wednesday in Maputo City in a man, Health minister Armindo Tiago said.									
Mozambique	Poliomyelitis (WPV1)	Ungraded	17-May-22	18-May-2022	26-Oct-22	4	4	0	0.0%
Three new wild poliovirus type 1 (WPV1) cases are reported this week from Tete Province, including one case from a district bordering Zimbabwe. As of 26 October, there are four cases of WPV1 in the country. The Government of Mozambique continues to respond to both WPV1 and cVDPV2 in the country.									
Namibia	COVID-19	Grade 3	14-Mar-20	14-Mar-20	27-Oct-22	169 929	169 929	4 080	2.4%
The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 27 October 2022, a total of 169 929 confirmed cases with 4 080 deaths have been reported.									
Niger	Humanitarian crisis (Sahel region)	Grade 2	1-Feb-15	1-Feb-2015	30-Sep-22	-	-	-	-
Tillabéri region recorded at the end of August 2022, around 44 122 new displaced persons fleeing the insecurity in the departments near the Niger river, bordering Burkina Faso. As of 30 September 2022, eight integrated health centres (CSI), including two in Bolsi (Torodi) and Waraou (Gothèye), and 23 community health centres are non-functional due to insecurity in the region. As of 31 August 2022, a total of 580 838 refugees and asylum seekers, with 48 % Internally Displaced Persons, 43 % refugees, 6% repatriated and 2% asylum seekers, were recorded in Niger. Most refugees are from Nigeria (73%) and Mali (21%).									
Niger	Cholera	Ungraded	3-Sep-22	1-Sep-22	7-Oct-22	72	14	1	1.4%
The Direction Régionale de la Santé Publique (DRSP) of Maradi, Niger, notified 10 suspected cases of cholera, including three positive cases by rapid diagnostic test on 1 September 2022 in Madaroufa district, Maradi region. Further testing identified Vibrio cholerae O1 Ogawa. As of 7 October 2022, 72 suspected cases have been reported, of whom 14 tested positive for cholera, and one death was recorded.									
Niger	COVID-19	Grade 3	19-Mar-20	19-Mar-20	23-Oct-22	9 425	9 425	314	3.3%
From 19 March 2020 to 23 October 2022, a total of 9 425 cases with 314 deaths have been reported across the country. A total of 8 949 recoveries have been reported from the country.									
Niger	Measles	Ungraded	5-Apr-22	1-Jan-22	30-Sep-22	13 421	675	32	0.2%
From week 1 to week 39 (ending 30 September) of 2022, 13 421 cases and 32 deaths (CFR: 0.2%) have been reported. Among the eight regions of the country, Agadez has the highest attack rate (124 cases per 100 000 inhabitants), followed by Diffa (123 cases /per 100 000). 94% (68/72) of the districts of Niger have notified at least one suspect case of measles. The vaccination campaign is ongoing in nine districts of the country. According to available data, there is no district in outbreak currently.									
Niger	Meningitis	Ungraded		1-Jan-21	30-Sep-22	2 999	-	152	5.1%
From early 2021 to week 40, 2022 (ending 30 September 2022), 2999 cases have been reported with 152 deaths (CFR 5%). Neisseria meningitidis serogroup C is the predominant germ identified. Dungas and Magaria health districts in Zinder region reported the highest cumulative attack rate in 2022, 74 and 56 cases per 10 000 inhabitants, respectively.									
Niger	Poliomyelitis (cVDPV2)	Grade 2	1-Jan-20	1-Jan-21	19-Oct-22	28	28	0	0.0%
No case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. There are ten cases in 2022. There were 18 cases reported in 2021.									
Niger	Yellow fever	Grade 2	19-Oct-22	1-Sep-22	19-Oct-22	6	4	1	16.7%
In September and October 2022, the Institut Pasteur in Dakar confirmed four yellow fever cases from Niger, including one death. The cases were confirmed by plaque reduction neutralization test (PRNT) and were reported from Dosso, Zinder, Tahoua, and Adadez districts. The date of onset of symptoms for the last case was 14 August 2022. Two probable cases were reported during the same period.									
Nigeria	Humanitarian crisis (Sahel region)	Grade 2	10-Oct-16	10-Oct-16	18-Oct-22	-	-	-	-
Tens of thousands of people have been killed and millions internally displaced since Boko Haram launched its campaign in 2009, creating one of the world's worst humanitarian crises and causing a near-total breakdown in education and health services. Throughout the northeast region, the violence has destroyed schools, hospitals and other social facilities, leaving affected communities - particularly women and children - in urgent need of assistance. Overall, some 8.4 million people, primarily women and children, in Borno, Adamawa and Yobe states need humanitarian assistance, according to OCHA.									
Nigeria	Cholera	Ungraded		1-Jan-22	30-Sep-22	10 754		256	2.4%
In 2022, as of 2 October, 10 754 suspected cholera, including 256 deaths (CFR 2.4%), have been reported from 31 states, mainly in North-West and North-East. Eleven states: Borno (3663 cases), Yobe (1632 cases), Katsina (767 cases), Taraba (675 cases), Cross River (649 cases), Gombe (470 cases), Jigawa (417 cases) and Bauchi (304 cases) account for 86% of all cumulative cases. Of the suspected cases since the beginning of the year, the age group 5 -14 years are the most affected age group for males and females.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Nigeria	COVID-19	Grade 3	27-Feb-20	27-Feb-2020	28-Oct-22	266 138	266 138	3 155	1.2%
The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 28 October 2022, a total of 266 138 confirmed cases with 259 457 recovered and 3 155 deaths have been reported.									
Nigeria	Lassa fever	Grade 1	1-Jan-21	1-Jan-21	23-Oct-22	985	948	173	18.2%
From week 1 to 42 of 2022 (ending 23 October), a total of 985 Lassa fever cases including 948 confirmed, 37 probable and 173 deaths among confirmed cases have been reported with a case fatality ratio (CFR) of 18% across 26 States. In week 42, seven new confirmed cases were reported from Ondo, Edo, Ebonyi and Cross River States. In total, 7 077 cases are suspected in 2022. Of all confirmed cases, 771% are from Ondo (33%), Edo (25%), and Bauchi (13%) States.									
Nigeria	Monkeypox	Grade 3	31-Jan-22	1-Jan-22	21-Oct-22	552	552	7	1.3%
From 1 January to 21 September 2022, Nigeria has reported 552 monkeypox confirmed cases with seven deaths.									
Nigeria	Poliomyelitis (cVDPV2)	Grade 2	1-Jun-18	1-Jan-18	7-Oct-22	511	511	-	-
In 2022, 41 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported in Nigeria, including two cases in week 38 from Plateau and Zamfara States. The most recent date of onset was 10 July 2022. There were 410 cVDPV2 cases reported in 2021 and 511 cases since 1 January 2018.									
Nigeria	Yellow fever	Grade 2	12-Sep-17	1-Jan-21	19-Oct-22	30	23	0	0.0%
From January 2021 to 20 October 2022, a total of 30 yellow fever cases including seven probable and 23 confirmed cases have been reported in Nigeria.									
Rwanda	COVID-19	Grade 3	14-Mar-20	14-Mar-20	23-Oct-22	132 556	132 556	1 467	1.1%
The Rwanda Ministry of Health announced the confirmation of the first COVID-19 case on 14 March 2020. As of 23 October 2022, a total of 132 556 cases with 1 467 deaths and 131 061 recovered cases have been reported in the country.									
Sao Tome and Principe	COVID-19	Grade 3	6-Apr-20	6-Apr-2020	23-Oct-22	6 266	6 266	77	1.2%
On 6 April 2020, the Ministry of Health of Sao Tome and Principe reported the country's first case of COVID-19. As of 23 October 2022, a total of 6 266 confirmed cases of COVID-19 have been reported, including 77 deaths. A total of 6 186 cases have been reported as recoveries.									
Sao Tome And Principe	Dengue	Grade 2	11-Apr-22	15-Apr-2022	16-Oct-22	1 012	1 012	4	0.4%
Sao Tome and Principe is experiencing its first ever documented dengue outbreak. From 15 April to 16 October 2022, a total of 1 012 cases and 4 deaths (CFR 0.4%) have been confirmed via RDT from: Água Grande (686, 67.9%), Mézôchi (144, 14.2%), Lobata (93, 9.0%), Cantagalo (40, 3.9%), Caué (19, 1.8%), Lomba (16, 1.6%), and RAP (14, 1.3%). During week 41 (ending 16 Oct), there was 1 new case registered in the country. Água Grande's attack rate is by far the highest (81.3 per 10 000 inhabitants). Those aged 50-59 years are experiencing the highest attack rate at 62.9 cases per 10 000. The 3 main clinical signs are fever (926, 92%), headache (761, 75%) and myalgia (318, 32%).									
Senegal	COVID-19	Grade 3	2-Mar-20	2-Mar-20	27-Oct-22	88 765	88 765	1 968	2.2%
From 2 March 2020 to 27 October 2022, a total of 88 765 confirmed cases of COVID-19 including 1 968 deaths and 86 692 recoveries have been reported in Senegal.									
Senegal	Measles	Ungraded	4-Jul-22	1-Jan-22	23-Oct-22	376	376	1	0.3%
From epidemic week 1 to 42 of 2022 (ending 23 October), 373 confirmed cases of measles with one death were reported from 13 regions in Senegal. Dakar, Tambacounda, and Kédougou regions reported 277 confirmed cases, accounting for 74%.									
Seychelles	COVID-19	Grade 3	14-Mar-20	14-Mar-20	16-Oct-22	49 035	49 035	171	0.3%
Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 16 October 2022, a total of 49 035 cases have been confirmed, including 47 995 recoveries and 171 deaths have been reported.									
Sierra Leone	COVID-19	Grade 3	31-Mar-20	27-Mar-20	12-Oct-22	7 752	7 752	126	1.6%
On 31 March 2020, the President of Sierra Leone reported the first confirmed COVID-19 case in the country. As of 12 October 2022, a total of 7 752 confirmed COVID-19 cases were reported in the country, including 126 deaths and 4 889 recovered cases.									
Sierra Leone	Measles	Ungraded	1-Nov-21	1-Jan-22	9-Aug-22	407	407	0	0.0%
By 9 August 2022 (Week 31), 14 out of 16 districts reported 407 confirmed measles cases (134 lab-confirmed and 273 epi linked; 55 % (224) of these cases are below five years, 26 % (106) above five years and 18.7%, (77) age missing. Currently, only one (Western Urban) district continues to report measles cases. Surveillance and immunisation activities have been intensified in all districts.									
South Africa	COVID-19	Grade 3	5-Mar-20	3-Mar-20	30-Oct-22	4 028 160	4 028 160	102 311	2.5%
Since the start of the COVID-19 pandemic in South Africa through 30 October 2022, a cumulative total of 4 028 160 confirmed cases and 102 311 deaths have been reported.									
South Africa	Measles	Ungraded	17-Oct-22	13-Oct-22	13-Oct-22	3	3	0	0.0%
Measles surveillance at the National Institute for Communicable Diseases detected three cases of measles from two healthcare facilities in the Greater Sekhukhune District, Limpopo Province within 30 days. In South Africa, a measles outbreak is classified as three laboratory-confirmed measles cases reported within 30 days in a district. A public health response investigation is needed to identify new measles cases and vaccination of the contacts to prevent the spread of the disease.									
South Africa	Monkeypox	Grade 3	23-Jun-22	23-Jun-22	14-Oct-22	5	5	0	0.0%
From 22 June 2022 to 14 October 2022, there have been five unlinked laboratory-confirmed monkeypox cases in South Africa. The cases were reported from Gauteng (n = 1), Western Cape (n = 2), Limpopo (n = 1) and Johannesburg (n = 1) provinces.									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
South Sudan	Drought/food insecurity	Grade 3	18-Dec-20	5-Apr-2021	22-Sep-22	-	-	-	-
<p>From April to July 2022 an estimated 7.74 million people (63% of total population) faced crisis levels of food insecurity phase (IPC) 3 or worse. Of the total number, 87 000 are in IPC 5, 2.89 million are in IPC 4, and 4.77 million are in IPC 3. Counties expected to be in IPC phase 5 are Fangak, Canal/Pigi and Ayod counties in Jonglei State; Pibor County in Greater Pibor Administrative Area; Cueibet and Rumbek North counties in Lakes State; and Leer and Mayendit counties in Unity State. An estimated 1.3 million children under five years and 676K pregnant/lactating women are expected to suffer acute malnutrition in 2022. From January to July 2022, more than 165K were admitted with severe acute malnutrition (SAM) and more than 370K people were admitted with moderate acute malnutrition (MAM). Patients admitted for both SAM and MAM during 2022 were higher for the same reporting period than they have been since 2019. Food insecurity in South Sudan is driven by climatic shocks (floods, dry spells, and droughts), insecurity (caused by sub-national and localized violence), population displacements, persistent annual cereal deficits, diseases and pests, the economic crisis, limited access to basic services, and the cumulative effects of prolonged years of asset depletion that continue to erode households' coping capacities, and the loss of livelihoods.</p>									
South Sudan	Floods	Ungraded		7-Oct-22	11-Oct-22	909 000		62	
<p>Floods have reoccurred since last July, affecting 29 (36.3%) of the 80 counties across 9 of the 10 states of the country including Northern Bahr el Ghazel (NBeG), Western Bahr el Ghazel (WBeG), Western Equatoria (WES), Warrap, Lakes, Upper Nile, Unity, Jonglei and Eastern Equatoria. Around 909 000 people have been affected, which represent around 7.4% of the total population, out of whom more than 140 000 have been displaced from their homes. Northern Bahr el Ghazel (252 000 people) Warrap (208 000 people), Unity (118 000 people) and Western Equatoria (111 000 people) states are the four most affected states, accounting for three-quarters (75.8%) of the affected populations. Almost 62 people are reported to have died in flood-affected locations due to drowning, trauma, or snake bites from NBeG, Warrap, WBeG and Upper Nile. The affected populations have either been displaced, or cut off from basic services, while their livelihoods and homes have been destroyed by the flooding. Some 45 health facilities and 25 nutrition facilities have either been destroyed or cut-off and therefore will cease offering services to their catchment populations.</p>									
South Sudan	Humanitarian crisis	Protracted 3	15-Aug-16	15-Aug-16	29-Sep-22	-	-	-	-
<p>The long-standing and complex humanitarian crisis in South Sudan continues. In 2022, there are a total of 8.9 million people in need of humanitarian assistance and 2.23 million people internally displaced people as of 31 August 2022. Over the past three years, seasonal floods have caused thousands of people to be displaced as well as caused problems for water, sanitation, and hygiene conditions in formalized camps and informal settlements. During 2022, more than 1.46 million people have been affected by flooding. As of 10 September 2022 the government declared a national emergency due to flooding affected 24 counties in eight states.</p>									
South Sudan	Anthrax	Ungraded	25-Apr-22	13-Mar-22	24-Sep-22	108	8	5	4.6%
<p>A total of 108 suspected cases and 5 deaths (CFR 4.6%) have been reported from Gogrial West county of in Warrap state. A total of 8 samples returned positive for bacillus anthracis bacteria. Cases were reported from 13 March - 6 August 2022 from registered hospital patients where the majority of cases have been female (61%).</p>									
South Sudan	Cholera	Ungraded	21-Apr-22	21-Mar-22	24-Sep-22	337	56	1	0.3%
<p>From 19 March to 24 September 2022, 337 cases and 1 death (CFR 0.3%) have been reported from Unity State and Ruweng Administrative Area, however most cases have been reported from the Bentiu IDP camp (89% of cumulative total). A total of 56 cases have been confirmed positive by RDT for cholera and 29 tested positive for Vibrio cholerae by culture at the National Public Health Laboratory in Juba. Females account for 62% of all cases and children ages 0-4 years have been the most affected age group accounting for 32.3% of all cases. More than 1.2 million does of cholera vaccine doses have been administered in 2022 and more vaccination campaigns are being planned. Among cholera cases, 118 (35.0%) were reported to be vaccinated, 147 (43.6%) were reported to be unvaccinated, and 72 (21.4%) had unknown vaccination status.</p>									
South Sudan	COVID-19	Grade 3	5-Apr-20	5-Apr-2020	30-Oct-22	18 313	18 313	138	0.8%
<p>On 5 April 2020, the Ministry of Health of South Sudan reported the country's first case of COVID-19. As of 30 October 2022, a total of 18 313 confirmed COVID-19 cases were reported in the country including 138 deaths and 18 115 recovered cases.</p>									
South Sudan	Hepatitis E	Ungraded	3-Jan-18	1-Jan-19	24-Sep-22	3 383	104	25	0.7%
<p>The current outbreak in the Bentiu IDP camp is ongoing. As of 24 September 2022, a total of 3 383 cases of hepatitis E including 25 deaths (CFR: 0.8%) have been reported since January 2019. During week 38 (ending 24 Sept), a total of 72 cases were reported. Approximately 54% of cases are male. A vaccination campaign conducted in Bentiu IDP Camp had a 91% coverage rate during the first round, 82% coverage during the second round, and the third round is expected to commence in October 2022.</p>									
South Sudan	Malaria	Ungraded	28-Dec-21	1-Jan-22	22-May-22	1 117 138	1 117 138	232	0.0%
<p>Between weeks 1-20 of 2022 (ending 22 May), 1 117 138 malaria cases including 232 deaths (CFR 0.02%) have been reported in South Sudan. There were 3 counties exceeding third quartile malaria trends for the past five years including Aweil Centre, Torit, and Jur River counties during week 20. In 2021, a total of 3 749 210 malaria cases including 2 963 deaths were reported. Several upsurges occurred in the country in 2021 including the county of Fangak.</p>									
South Sudan	Measles	Ungraded	23-Feb-22	1-Jan-22	30-Sep-22	656		2	0.3%
<p>Measles outbreaks have been confirmed in 12 counties of Aweil Centre, Aweil East, Aweil West, Aweil South, Aweil North, Gogrial West, Maban, Raja, Tambura, Torit, Juba, and Malakal with a total of 656 measles cases including two deaths (CFR 0.3%) reported from counties with confirmed outbreak since the beginning of 2022. The outbreaks are currently active in Juba and Malakal counties where response interventions including reactive vaccination campaigns are yet to be concluded</p>									
Tanzania, United Republic of	COVID-19	Grade 3	16-Mar-20	16-Mar-20	21-Oct-22	39 920	39 920	845	2.1%
<p>The Ministry of Health, Community Health, Community Development, Gender, Elderly and Children in Tanzania reported the country's first case of COVID-19 on 16 March 2020. As of 21 October 2022, a total of 39 920 confirmed cases have been reported in Tanzania Mainland including 845 deaths.</p>									
Tanzania, United Republic of	Leptospirosis	Grade 1	14-Jul-22	5-Jul-22	9-Oct-22	20	15	3	15.0%
<p>On 14 July 2022, the Ministry of Health of Tanzania notified WHO of cases of an unknown disease in Ruangwa District, Lindi Region. On 5 and 7 July 2022, two cases of fever, nose bleeding, headache, and general body weakness were reported. As of 9 October 2022, 20 cases with three deaths were reported. No new cases have been reported since 15 July. Fifteen of the 18 human samples collected returned positive for Leptospirosis. All samples were negative for Ebola virus disease, Marburg virus disease, Influenza, Crimean-Congo haemorrhagic fever, Yellow fever, Chikungunya, West Nile virus and Rift Valley fever.</p>									

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
Tanzania, United Republic of	Measles	Ungraded		30-Jun-22	23-Aug-22	223	2	0	0.0%
A measles outbreak is ongoing in Tanzania since June 2022. As of 23 August 2022, a cumulative total of 223 suspected measles cases, with two IgM positive cases are reported since the onset of the outbreak in June 2022. A total of 88 cases were admitted to the local hospitals. About 48% (108 cases) of the suspected cases were children under five years of age. The majority of cases are reported from Magharibi B, Magharibi A and Wete districts. The Ministry of health is working on strengthening surveillance and routine vaccination activities as well as the planning for a mass measles vaccination outbreak response.									
Togo	COVID-19	Grade 3	6-Mar-20	1-Mar-20	22-Oct-22	39 284	39 284	289	0.7%
On 6 March 2020, the Ministry of Health and Public Hygiene of Togo announced the confirmation of its first case of COVID-19. As of 22 October 2022, a total of 39 284 cases, including 289 deaths and 38 953 recovered cases, have been reported in the country.									
Togo	Poliomyelitis (cVDPV2)	Grade 2	18-Oct-19	13-Sep-19	19-Oct-22	17	17	0	0.0%
No cVDPV2-positive environmental sample was reported this week. One case of cVDPV2 was notified in 2022. No cases were reported in 2021. There were nine cases in 2020, while the total number of cVDPV2 cases reported in 2019 remains at eight.									
Uganda	Drought/food insecurity	Grade 3	17-Feb-22	1-Jan-22	16-Sep-22	-	-	-	-
In Uganda, spates of insecurity due to cattle rustling have led people to leave their initial settlements in the villages and move to urban centers, disrupting their lifestyles and impacting their access to health services. Health facilities in remote areas have limited service hours and community-integrated outreach activities. An increasing trend of severe acute malnutrition (SAM) cases admission has been observed in 2022. There were 870 admissions in January, increasing to 2430 admissions in July. An assessment on 1 245 600 Ugandans over the period August 2022-February 2023 showed that 276 290 (22.2%) people are projected to be in IPC3 (Crisis) and 38 385 (3.1%) people in IPC4 (Emergency).									
Uganda	Anthrax	Ungraded	26-May-22	16-May-2022	16-Oct-22	51	5	2	3.9%
An anthrax outbreak has been confirmed in Bududa District, Uganda, in early May 2022. As of 16 October, a total of 51 suspected cases have been reported including two deaths (CFR 4%). Two Districts have so far reported human cases: Kween (31 cases and one death) and Bududa (20 cases and one death). Eleven samples have been collected in Bududa, five of which tested positive for anthrax. No new suspected cases have been reported in Kween and the last suspected case from Bududa was admitted on 1 August 2022. Of note, 65 animals have suddenly died in Bududa (40), Namisindwa (9), Manafwa (8), Kween (6) & Mbale City (2) Districts. However, no new sudden animal death has been reported. Around 10 000 doses of vaccines have been received and 1196 animals have been vaccinated in Bududa District over the past week, bringing the total to 3716.									
Uganda	COVID-19	Grade 3	21-Mar-20	21-Mar-20	23-Oct-22	169 378	169 378	3 630	2.1%
The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 23 October 2022, a total of 169 378 confirmed COVID-19 cases with 3 630 deaths were reported.									
Uganda	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	23-Oct-22	12-Jul-22	15-Oct-22	5	5	1	20.0%
From 12 July to 15 October 2022, five cases of Crimean-Congo haemorrhagic fever (CCHF) have been confirmed in Uganda from Amuru, Kaberamaido, Mubende, Rakai, and Wakiso districts with one death. Response measures such as patient isolation, contact tracing, suspect quarantine, as well as risk communication and community engagement have been taken. Districts are on high alert due to the Ebola virus disease outbreak.									
Uganda	Ebola disease caused by Sudan virus	Grade 2	19-Sep-22	19-Sep-22	30-Oct-22	129	121	37	28.7%
Refer to text above.									
Uganda	Yellow fever	Grade 2	3-Mar-21	2-Jan-22	18-Oct-22	398	2	0	0.0%
There have been 398 suspected cases reported of yellow fever during 2 January-27 August 2022 in Uganda with no deaths reported. Two cases have been confirmed: one from Wakiso District confirmed in Feb 2022 and another from Masaka District in Jun 2022.									
West and Central Africa	Floods in West and Central Africa	Ungraded		16-Aug-2022	17-Oct-22	5 000 000			
Above-average rainfall and devastating floods in West and Central Africa have affected five million people in 19 countries across the region, claiming hundreds of lives, disrupting livelihoods. These floods have displaced tens of thousands of people from their homes and decimated more than a million hectares of cropland - in a region already in the grip of an unprecedented hunger crisis. This climate-related disaster is one of the deadliest the region has seen in years. According to the WFP, these floods risk aggravating an already worrying hunger situation for millions of people									
Zambia	COVID-19	Grade 3	18-Mar-20	18-Mar-20	30-Oct-22	333 681	333 681	4 017	1.2%
The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 30 October 2022, a total of 333 681 confirmed COVID-19 cases were reported in the country including 4 017 deaths.									
Zambia	Measles	Ungraded		13-Jun-22	1-Oct-22	655	188	31	4.7%
A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 655 measles cases and 31 deaths as of 1 October 2022. WHO is supporting the Ministry of Health investing other cases with similar symptoms.									
Zimbabwe	Anthrax	Ungraded	6-May-19	1-Jan-22	2-Oct-22	107	0	0	0.0%
The anthrax outbreak is ongoing in Zimbabwe. Eight new anthrax cases and no deaths were reported this week. The cases were reported from Gokwe North District (7) and Gokwe South (1) in Midlands Province. The cumulative figures for anthrax are 107 cases and 0 deaths. The cumulative figures for anthrax are 747 cases and three deaths in 2020 and 306 cases and 0 deaths in 2021.									
Zimbabwe	COVID-19	Grade 3	20-Mar-20	20-Mar-20	29-Oct-22	257 893	257 893	5 606	-

Country	Event	Grade	Date notified to WCO	Start of reporting period	End of reporting period	Total cases	Cases Confirmed	Deaths	CFR
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 29 October 2022, a total of 257 893 confirmed COVID-19 cases were reported in the country including 5 606 deaths and 251 904 cases that recovered.									
Zimbabwe	Measles	Ungraded	29-Apr-22	19-May-2022	2-Oct-22	7 504	355	744	-
A measles outbreak has been ongoing in Zimbabwe since 10 April 2022. As of 12 October 2022, A cumulative total of 7 504 Cases, 4 580 Recoveries, 355 confirmed cases and 744 Deaths have been reported since the onset of the outbreak. 865 new-suspected measles cases and zero suspected deaths were reported this week ending week 39									
Closed Events									
Democratic Republic of the Congo	Typhoid fever	Ungraded	1-Jul-21	1-Jan-22	9-Oct-22	1 481 985	-	636	0.0%
In 2022, from epidemiological week 1 to 40 (ending 9 October 2022), 1 481 985 suspected cases of typhoid fever including 636 deaths were recorded in the Democratic Republic of the Congo. In 2021, from Epi week 1 to 49, 1 380 955 suspected cases of typhoid fever have been reported including 502 deaths (CFR 0.3%).									
Senegal	Crimean-Congo haemorrhagic fever (CCHF)	Ungraded	12-Aug-22	15-Aug-2022	28-Aug-22	5	5	2	40.0%
On 12 August 2022, a confirmed outbreak of Crimean-Congo haemorrhagic fever (CCHF) was reported in Podor District, Saint-Louis region, Senegal. The index case is a 38-year-old female who presented with fever, headache, myalgia, fatigue and haemorrhagic symptoms, and was detected through the viral haemorrhagic fever surveillance system. The disease started on 20 July; she consulted on 5 August, was sampled on 6 August and died on 7 August. There is an history of travel to Mauritania on 2 July. As of 28 August, two additional cases were reported, a contact of the index case and a case with no evident epidemiological link to the first two cases.									

†Grading is an internal WHO process, based on the Emergency Response Framework. For further information, please see the Emergency Response Framework: <http://www.who.int/hac/about/erf/en/>.

Data are taken from the most recently available situation reports sent to WHO AFRO. Numbers are subject to change as the situations are dynamic.

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Correspondence on this publication may be directed to:

Dr Etien Luc Koua

Programme Area Manager, Health Emergency Information and Risk Assessment Programme.

WHO Emergency Preparedness and Response

WHO Regional Office for Africa

P O Box. 06 Cité du Djoué, Brazzaville, Congo

Email: afrooutbreak@who.int

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WCO Contributors

Amédée Prosper DJIGUIMDE (WR
Democratic Republic of the Congo)
Amadou Mouctar DIALLO (Democratic
Republic of the Congo)
Yonas Woldemariam TEGEGN (Uganda)
Charles NJUGUNA (Uganda)

A. Moussongo

Editorial Team

G. Sie Williams
J. Nguna
J. Kimenyi
O. Ogundiran
F. Kambale
R. Mangosa Zaza
J. Njingang Nansseu
V. Mize
C. Okot

Production Team

T. Mlanda
R. Ngom
F. Moussana

Editorial Advisory Group

Dr. Salam Gueye, *Regional Emergency
Director*
E. Koua
D. Chamla
F. Braka

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Data and information is provided by Member States through WHO Country Offices via regular situation reports, teleconferences and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.