Cholera in the WHO African Region

Weekly Regional Cholera Bulletin: 3 July 2023

Data reported: as of 2 July 2023
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Situation update

Overview

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

Since 1 January 2022, a cumulative number of 211 643 cholera cases has been reported to the WHO Regional Office for Africa (AFRO), including 3 953 deaths with a case fatality ratio (CFR) of 1.9% as of 2 July 2023 (Table 1). Malawi accounts for 28% (59 011) of the total cases and 45% (1 766) of all deaths reported, and together with Cameroon, Democratic Republic of the Congo, Mozambique, and Nigeria contribute to 86% (181 114) of the overall caseload and 88% (3 472) of cumulative deaths. In Epidemiologic week 26, seven countries Burundi, Cameroon, Ethiopia, Kenya, Malawi, Mozambique and Zimbabwe reported a total of 808 new cases.

The cholera outbreaks in the African Region are occurring in the context of natural disasters such as cyclones (Mozambique, Malawi), flooding (Mozambique, Malawi), drought (Kenya and Ethiopia), conflict (Cameroon, Democratic Republic of the Congo, Nigeria, Ethiopia) and multiple disease outbreaks including Mpox, wild polio, measles, COVID-19, etc. Many countries have limited and strained resources, shortage of medical commodities, including cholera kits and Oral Cholera Vaccine (OCV). Poor sanitation and unreliable water supplies with increased cross-border movements also serve as driving factors for the outbreak across the region.
Figure 1: Distribution of cholera cases and deaths in WHO African Region, 1 January 2022—3 July 2023
Table 1: Cholera Cases and Deaths in WHO AFRO Region, 1 January 2022 to 2 July 2023

<table>
<thead>
<tr>
<th>Country</th>
<th>Cumulative Cases</th>
<th>Cumulative Deaths</th>
<th>CFR (%)</th>
<th>Date outbreak started</th>
<th>Last update</th>
</tr>
</thead>
<tbody>
<tr>
<td>Malawi</td>
<td>59 011</td>
<td>1 766</td>
<td>3.0</td>
<td>Mar 2022</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>44 398</td>
<td>463</td>
<td>1.0</td>
<td>Jan 2022</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>Mozambique</td>
<td>33 132</td>
<td>141</td>
<td>0.4</td>
<td>Sep 2022</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>Nigeria</td>
<td>25 678</td>
<td>662</td>
<td>2.6</td>
<td>Jan 2022</td>
<td>12 May 2023</td>
</tr>
<tr>
<td>Cameroon</td>
<td>*18 895</td>
<td>440</td>
<td>2.3</td>
<td>Jan 2022</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>12 566</td>
<td>169</td>
<td>1.3</td>
<td>Aug 2022</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>Kenya</td>
<td>11 694</td>
<td>192</td>
<td>1.6</td>
<td>Oct 2022</td>
<td>29 Jun 2023</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>3 197</td>
<td>72</td>
<td>2.3</td>
<td>Feb 2023</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>South Sudan</td>
<td>1 471</td>
<td>2</td>
<td>0.1</td>
<td>Feb 2023</td>
<td>16 May 2023</td>
</tr>
<tr>
<td>Zambia</td>
<td>757</td>
<td>14</td>
<td>1.8</td>
<td>Jan 2023</td>
<td>22 Jun 2023</td>
</tr>
<tr>
<td>Burundi</td>
<td>562</td>
<td>9</td>
<td>1.6</td>
<td>Jan 2023</td>
<td>2 Jul 2023</td>
</tr>
<tr>
<td>South Africa</td>
<td>198</td>
<td>20</td>
<td>10.1</td>
<td>Feb 2023</td>
<td>28 Jun 2023</td>
</tr>
<tr>
<td>United Republic of Tanzania</td>
<td>82</td>
<td>3</td>
<td>3.7</td>
<td>Feb 2023</td>
<td>24 Apr 2023</td>
</tr>
<tr>
<td>The Kingdom of Eswatini</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>Mar 2023</td>
<td>25 Apr 2023</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>211 643</strong></td>
<td><strong>3 953</strong></td>
<td><strong>1.9</strong></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

NB* Earlier cases stated for Cameroon were from 2021, current number are now from 1 Jan 2022
Country Specific updates

**Malawi**

<table>
<thead>
<tr>
<th>Grade</th>
<th>Cumulative Cases</th>
<th>Cumulative Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>3</td>
<td>59 011</td>
<td>1 766</td>
<td>3.0%</td>
</tr>
</tbody>
</table>

The cholera outbreak in Malawi has continued to decline over the past seven weeks. In Epi week 26 there were 25 new cases and one new death reported compared to 27 new cases and one death in Epi week 25.

As of 2 July 2023, a cumulative total of 59 011 cases have been reported since the onset of the outbreak from all the 29 districts of the country. The cumulative number of deaths now stands at 1 766, with a case fatality ratio of 3.0%.
Ongoing Public Health Actions

- Conducted filming sessions to raise awareness about cholera prevention and control in 14 primary schools in Blantyre that reached 23,899 learners.
- Cross-border surveillance and integrated intervention activities are ongoing in the districts bordering Mozambique and Zambia.

Challenges/Gaps

- Continuous importation of cases from Mozambique.
- Scale down of activities with several partners exiting the response.

As of 2 July 2023, the country had reported a cumulative total of 33,132 cases, with 141 deaths (CFR 0.4%). Cases decreased in week 26 by 28% to 160 cases compared to 223 cases in week 25. There was no death reported since week 24.

The cholera outbreak in Mozambique which started on 14 September 2022 has been impacted by the two Tropical Cyclones Freddy on 22 February 2023 and 11 March 2023.

Figure 4: Epicurve of cholera outbreak in Mozambique, September 2022 to 2 July 2023
Figure 5: Mozambique showing geographical distribution of cases as of 2 July 2023

Ongoing Public Health Actions
- A cross-border meeting between Malawi and Mozambique teams was held to reinforce the cross-border surveillance.
- Continued the process of decommissioning of ORPs in Nhamatanda district. In total six ORPs were decommissioned.

Challenges/Gaps
- Underestimation of cholera cases in health facilities as well as at the community level and notably cases moving from Murumbala district to seek treatment in Malawi.
- Limited access to some areas in Cabo Delgado due to conflict and/or insecurity which impact the dynamic of the response.

As of 28 June 2023, South Africa has reported 198 laboratory confirmed cholera cases with 20 laboratory confirmed deaths (CFR=10.1%). Five provinces (Gauteng-176; Free State-11; North West-6; and Limpopo-4 and Mpumalanga-1) have reported confirmed cases. However, a total of 1 068 suspected cases have been reported from the five provinces.
Figure 6: Epicurve of laboratory confirmed cholera cases in South Africa as of 28 June 2023

Figure 7: Map of South Africa showing geographical distribution of cases as of 28 June 2023

Public Health Actions
- Health talks are being conducted through the radio stations in different districts.
- Conducted public health screening for 78,887 travellers from 23 – 26 June 2023 at all the seven points of entry

Challenges/Gaps
- Absence of cholera screening in some health facilities in affected areas.
- Shortage of IPC supplies and dedicated staff for management of cholera cases in some health facilities
In week 26, reported Cholera cases from Zimbabwe decreased by 50% from 338 cases in week 25 to 170 cases. Deaths also decreased by 50% from two deaths reported in week 25 to one death in week 26. Cumulatively, there are 3,197 cholera cases with 72 deaths (CFR 2.3%) as of 2 July 2023. All of the ten provinces in the country have been affected with 88% (2,826) of the cases reported from Manicaland (1,324), Harare (1,219), and Mash South (283) provinces. The outbreak in Zimbabwe started on 12 February 2023 in Chegutu town, Mashonaland West Province. WHO has provided funding to support the country response.

Figure 8: Epicurve of Cholera outbreak in Zimbabwe as of 2 July 2023
Public Health Actions

- Field support visits to four provinces conducted by the WHO country representative 12 – 21 June 2023.
- Pre-positioned commodities to cholera hotspots districts.

Challenges/Gaps

- Weak coordination of partners and response at the national level.
- Inadequate resources for RRTs to conduct surveillance and response activities.

Cameroon

Grade 3

<table>
<thead>
<tr>
<th>Cumulative Cases</th>
<th>Cumulative Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>18,895</td>
<td>440</td>
<td>2.3%</td>
</tr>
</tbody>
</table>

There was a 35% decrease in reported cases from Cameroon in week 26 with 88 new cases compared to 136 cases in week 25. Of the 88 new cases reported in week 26, Centre region accounted for 99% of cases reported. There was no death reported in week 26, compared to four deaths reported in week 25. Cumulatively, from 1 January 2022 to 2 July 2023, Cameroon had reported 18,895 cases with 440 deaths (CFR = 2.3%). WHO continues to support response activities across all pillars.
Figure 10: Epicurve of cholera cases in Cameroon from October 2021 to 2 July 2023

Figure 11: Map of Cameroon showing districts affected by cholera as of 2 July 2023
There were 63 cases (56% decrease) in week 26 compared with 143 cases in week 25. Reported deaths decreased by 50% with two reported in week 26 compared to four deaths in week 25. As of 29 June 2023, a cumulative total of 11 694 cases has been reported since the onset of the outbreak with 192 deaths (CFR=1.6%).

Figure 12: Epicurve of cholera cases in Kenya from October 2021 to 29 June 2023

Figure 13: Map of Kenya showing cholera affected states as of 29 June 2023
Cholera cases and deaths in Ethiopia continue to decrease. There was a 35% decrease in new cases, with 282 new cases in week 26 from 431 new cases in week 25. Likewise, deaths decreased by 25% in week 26 with three reported deaths from four deaths in previous week.

As of 2 July 2023, Ethiopia has reported a cumulative case load of 12,566 with 169 deaths (CFR = 1.3%). The index case was reported on 27 August 2022 from Harana Buluk. Current water supply coverage for the cholera outbreak-affected woredas in Oromia and Somali regions remains suboptimal.

**Figure 14: Epicurve of Cholera outbreak in Ethiopia from October 2022 to 2 July 2023**

**Figure 15: Map of Ethiopia showing cholera affected states as of 25 June 2023**
Cumulatively, 757 cases and 14 deaths (CFR = 1.8%) have been reported as of 22 June 2023. Zambia reported one new case in week 24. There was no death reported in weeks 24 and 25. Currently, two districts in two provinces – Chiengi district in Luapula province and Mpulungu district in Northern Province - of Zambia are reporting cholera cases.

Figure 16: Epicurve of cases and deaths in Zambia as of 22 June 2023

As of 2 July 2023, a cumulative of 562 cases and nine deaths (CFR 1.6%) were reported from Burundi. There was an increase in cases from seven cases in week 25 to 20 cases in week 26. There has been no death reported since week 24. Burundi has reported cholera cases since 8 December 2022, and the outbreak was officially declared on 1 January 2023.

Figure 17: Epicurve of cases and deaths in Burundi as of 2 July 2023
The cholera outbreak in the Democratic Republic of the Congo started in January 2022. As of 2 July 2023, the country had reported 44,398 cumulative cases, with 463 deaths (CFR = 1.0%) across 12 affected provinces. There has been deployment of nine cholera kits to Tanganyika province which has experienced a recent spike in new cases.

**Figure 19: Epicurve of cases and deaths in Democratic Republic of the Congo as of 25 June 2023**
South Sudan does not currently have an active cholera outbreak. The last PCR positive case was reported on 7 March and since then repeat cultures tested in both Juba and South Africa have not shown any *Vibrio cholerae* growth, but rather *E.coli*, *Salmonella* and *Enterobacter spp*. WHO is supporting the country to strengthen its testing capacities and to redirect the response to improving WASH and management of the acute watery diarrhoea cases based on the identified pathogens.

Cumulatively, as of 16 May, South Sudan had reported a total of 1,471 suspected case and two related deaths (CFR=0.1%) from Malakal Upper Nile State on the side bordering Sudan. However, with ongoing crises in Sudan, preparedness and readiness activities are ongoing in border districts.

**South Sudan**  
**Grade 3**  
**Cumulative Cases**: 1,471  
**Cumulative Deaths**: 2  
**CFR**: 0.1%

Cholera was first reported on 22 January 2023 in Nyasa District Council in Ruvuma Region. By 31 May 2023, the region had reported a total of 16 cases – from Ilala district (14) and from Kinondoni district two (2) with no deaths. The last reported case was on 8 May 2023. Cumulative number of cases are 82 and deaths three in the country with CFR 3.7%. The Ministry of health declared the end of the outbreak in Dar es Salaam over on 5 June 2023.

**United Republic of Tanzania**  
**Grade 3**  
**Cumulative Cases**: 82  
**Cumulative Deaths**: 3  
**CFR**: 3.7%

The Kingdom of Eswatini reported the first confirmed case of cholera on 29 March 2023 in Manzini Region. The second confirmed case was a 14-year-old male from Shiselweni region without any travel history or epi-link to the first case. Samples from both patients were positive for *Vibrio cholerae* and serotypes 01 Ogawa.

As of 7 May 2023, the country has reported a total of two confirmed cases with no death. The current farming/harvest period increases the likelihood of cross border movements between Eswatini and Mozambique thereby increasing the likelihood of imported cases.

**The kingdom of Eswatini**  
**Grade 3**  
**Cumulative Cases**: 2  
**Cumulative Deaths**: 0  
**CFR**: 0%

There are no recent updates from Nigeria. The cholera outbreak in the country has been ongoing since January 2022. Cumulative cases from 271 Local Government Areas across 33 states and the Federal
Capital territory reported to WHO as of 12 May 2023 were 25,678 with 662 deaths (CFR = 2.6%). In 2023, there have been 1,336 reported cases, 37 deaths, CFR 2.8%, from 12 states.

### WHO ACTIVITIES

#### Readiness:
- 23 countries prioritized for cholera readiness
- Ongoing collection of data using the updated web-based cholera readiness assessment tool
- Developed and rolled out a tracking tool for monitoring framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 across the countries.
- Supported Zambia to conduct National Cholera Plan (NCP) mid-term review and development of an NCP M&E framework.
- Engaged all high-risk countries in west Africa to estimate their cholera logistical needs for prepositioning in view of the rainy season that has started.
- Engaged with WHO headquarters and Global Task Force on Cholera Control (GTFCC) for more support to cholera preparedness and readiness. GTFCC has promised to support training of Member States in PAMIs in late September 2023.

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

### Summary

![Fig20: Readiness capacity of 16 of 23 countries](image)

![Fig 21: Rating of areas of assessment – lowest ratings from Vaccination, WASH & Food safety and Ports of Entry](image)
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Dr RAMADAN Otim Patrick:

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

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