Weekly Regional Cholera Bulletin: 16 October 2023

Data reported: as of 15 October 2023

Cholera in the WHO African Region
The cholera outbreak in the WHO African Region has affected 16 countries over the last two years. The trend across the region is being closely monitored and on the decline with some countries no longer having active outbreaks. As we are getting into the last months of the year, the seasonality of cholera outbreaks are issues for countries to consider and there is need to enhance preparedness and readiness, heighten surveillance and institute preventive and control measures in communities and around border crossings to prevent and mitigate cross border transmission.

In Epidemiologic week 41, seven countries Burundi, Cameroon, Malawi, Mozambique, United Republic of Tanzania, Zambia and Zimbabwe reported a total of 533 new cases. Transmission is currently active in 13 countries with no recent report of new cases from Eswatini (last case reported April 18), Republic of the Congo (last case reported 26 July) and South Sudan (last case reported May 16).

Since 1 January 2022, a cumulative total of 246 070 cholera cases has been reported to the WHO Regional Office for Africa (AFRO), including 4 484 deaths with a case fatality ratio (CFR) of 1.8% as of 15 October 2023 (Table 1). Democratic Republic of the Congo, Ethiopia, Malawi, Mozambique, and Nigeria account for 82.4% (202 868) of the cumulative cases and 79.5% (3 567) of all cumulative deaths reported.
Figure 1: Distribution of cholera cases and deaths in WHO African Region, 1 January 2022—15 October 2023
### Table 1: Cholera Cases and Deaths in WHO African Region, 1 January 2022 to 15 October 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>59 040</td>
<td>1 768</td>
<td>3.0</td>
<td>Mar-22</td>
<td>15-Oct-23</td>
</tr>
<tr>
<td>Democratic Republic of Congo</td>
<td>57 585</td>
<td>664</td>
<td>1.2</td>
<td>Jan-22</td>
<td>01-Oct-23</td>
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<tr>
<td>Mozambique</td>
<td>34 955</td>
<td>146</td>
<td>0.4</td>
<td>Sep-22</td>
<td>15-Oct-23</td>
</tr>
<tr>
<td>Nigeria</td>
<td>26 104</td>
<td>659</td>
<td>2.5</td>
<td>Jan-22</td>
<td>24-Sep-23</td>
</tr>
<tr>
<td>Ethiopia</td>
<td>25 184</td>
<td>330</td>
<td>1.3</td>
<td>Aug-22</td>
<td>08-Oct-23</td>
</tr>
<tr>
<td>Cameroon</td>
<td>20 252</td>
<td>468</td>
<td>2.3</td>
<td>Jan-22</td>
<td>15-Oct-23</td>
</tr>
<tr>
<td>Kenya</td>
<td>12 120</td>
<td>202</td>
<td>1.7</td>
<td>Oct-22</td>
<td>08-Oct-23</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>4 974</td>
<td>147</td>
<td>3.0</td>
<td>Feb-23</td>
<td>15-Oct-23</td>
</tr>
<tr>
<td>South Sudan</td>
<td>1 471</td>
<td>2</td>
<td>0.1</td>
<td>Feb-23</td>
<td>16-May-23</td>
</tr>
<tr>
<td>South Africa</td>
<td>1 388</td>
<td>47</td>
<td>3.4</td>
<td>Feb-23</td>
<td>31-Aug-23</td>
</tr>
<tr>
<td>Burundi</td>
<td>1 195</td>
<td>9</td>
<td>0.8</td>
<td>Jan-23</td>
<td>15-Oct-23</td>
</tr>
<tr>
<td>Zambia</td>
<td>957</td>
<td>19</td>
<td>2.0</td>
<td>Jan-23</td>
<td>12-Oct-23</td>
</tr>
<tr>
<td>United Republic of Tanzania</td>
<td>699</td>
<td>13</td>
<td>1.9</td>
<td>Feb-23</td>
<td>12-Oct-23</td>
</tr>
<tr>
<td>Uganda</td>
<td>81</td>
<td>10</td>
<td>12.3</td>
<td>Jul-23</td>
<td>1-Sep-23</td>
</tr>
<tr>
<td>Republic of the Congo</td>
<td>63</td>
<td>0</td>
<td>0</td>
<td>Jul-23</td>
<td>26-Jul-23</td>
</tr>
<tr>
<td>The Kingdom of Eswatini</td>
<td>2</td>
<td>0</td>
<td>0</td>
<td>Mar-23</td>
<td>23-Jul-23</td>
</tr>
<tr>
<td><strong>TOTAL</strong></td>
<td><strong>246 070</strong></td>
<td><strong>4 484</strong></td>
<td><strong>1.8</strong></td>
<td></td>
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</tr>
</tbody>
</table>
Country Specific updates

Burundi

As of 15 October 2023, a cumulative total of 1,195 cases and nine deaths (CFR 0.8%) were reported from Burundi. In week 41 new cases decreased by 26% from 65 new cases in week 40 to 48 new cases. There has been no death reported since week 24. The administrative areas that have recorded the most cases since the start of the epidemic are Gatumba (DS Isare), Gihosha (DS Bujumbura Nord), Rukana II (DS Cibitoke), Buterere I (DS Bujumbura Nord) and Mparambo I (DS Cibitoke) with 144, 107, 84, 81 and 63 confirmed cases respectively.

Burundi has reported cholera cases since 8 December 2022, and the outbreak was officially declared on 1 January 2023.

Figure 3: Epicurve of cases and deaths in Burundi as of 15 October 2023
In week 41 there was a 56% decrease in new cases reported with 24 new cases compared to 55 cases in week 40. There was no death in week 41. The last reported death was in week 39. Cumulatively, from 1 January 2022 to 15 October 2023, Cameroon has reported 20 252 cases with 468 deaths (CFR = 2.3%).
No report received from for week 41 in Ethiopia. As of 8 October 2023, Ethiopia reported a cumulative case total of 25 184 with 330 deaths (CFR = 1.3%). The outbreak is currently active in nine regions and 106 Woredas across the country. As of week 40, reported new cases decreased by 24% to 140 new cases from 185 new cases. There were two deaths reported in each of weeks 39 and 40.

Figure 7: Epicurve of Cholera outbreak in Ethiopia from October 2022 to 8 October 2023
As of 8 October 2023, a cumulative total of 12,120 cases have been reported since the onset of the outbreak with 202 deaths (CFR=1.7%).

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

A cumulative total of 59,040 cases have been reported since the onset of the outbreak from all the 29 districts of the country. In week 41 new cases increased by 467% from three new cases in week 40 to 17 new cases. There has been no reported deaths since week 37. The cumulative number of deaths remains at 1,768 with a case fatality ratio of 3.0%.

Figure 9: Epi Curve for cholera outbreak in Malawi, 3 March 2022 – 15 October 2023
As of 15 October 2023, the country had reported a cumulative total of 34,955 cases, with 146 deaths (CFR 0.4%). New cases increased in week 41 by 18% to 142 cases. There were two new deaths reported in week 41. The last cholera fatality reported before this was in week 32.
Figure 12: Map of Mozambique showing cholera affected areas as of 15 October 2023

Cumulatively this year, as of 12 October 2023, there have been 957 reported cases and 19 deaths (CFR = 2.0%). In week 41, new cases decreased by 92% from 13 cases in week 40 to one new case. The last death was reported in week 37. Response actions are ongoing with national stakeholder engagement to supplement provincial efforts in addressing the situation in Nsama District.

A new cholera outbreak was reported in Nsama district in the northern province on 10 August 2023. Before this, Nsama district had reported 73 cases during the previous outbreak which ended on 9 April 2023.
Figure 13: Epicurve of cholera cases and deaths in Zambia as of 12 October 2023

Figure 14: Map of cholera cases and deaths in Zambia as of 12 October 2023
As of 15 October 2023, cumulative cholera cases reported from the ten provinces of the country were 4,974 with 147 deaths (CFR 3.0%). During week 41, there was a 5% decrease in cases from 258 new cases in week 40 to 244 cases. Deaths however increased by 240% from five deaths in week 40 to 17 deaths in week 41. The three provinces with the highest number of cumulative cases are Manicaland (2,374), Harare (1,633), and Mat South (352) which account for 88% (4,359 cases). The outbreak in Zimbabwe started on 12 February 2023 in Chegutu town, Mashonaland West Province.

Figure 15: Epicurve of Cholera outbreak in Zimbabwe as of 15 October 2023

Figure 16: Map of Zimbabwe showing cholera affected provinces as of 15 October 2023
The last update was as of 1 October 2023, the country had reported 57,585 cumulative cases, with 664 deaths (CFR = 1.2%) across 12 affected provinces. In week 39, there were 725 new cases with five deaths reported. The Congolese government scheduled the launch of the National Cholera Plan 2023-2027 (PMSEC 2023-2027) for October 14, 2023. WHO has provided more than 15 tonnes of cholera kits for the care of patients in Tanganyika province, South and North Kivu currently in epidemic.

Figure 17: Epicurve of cases and deaths in Democratic Republic of the Congo as of 1 October 2023

The cumulative number of cases from the country since 22 January to 12 October 2023 are 699 and 13 deaths with a CFR= 1.9%. In week 41 cases decreased by 32% from 84 cases in week 40 to 57 new cases. There was no death in week 41 compared to two deaths in week 40. New cases were reported from Arusha, Mara and Kigoma regions. This new outbreak began after the last confirmed case on 25 July 2023. As part of the response activities in the Arusha region households’ inspection on water sanitation and hygiene were conducted in 124 households and 415 aqua tabs were distributed.
Figure 18: Epicurve of cases and deaths in United Republic of Tanzania as of 12 October 2023

![Epicurve of cases and deaths in United Republic of Tanzania as of 12 October 2023](image1)

Figure 19: Map of cases and deaths in United Republic of Tanzania as of 12 October 2023

![Map of cases and deaths in United Republic of Tanzania as of 12 October 2023](image2)

There have been no new cases reported since week 35. As of 1 September 2023, Uganda had reported a cumulative total of 81 suspected cases and 10 deaths (CFR=12.3%).
On 27 July 2023, the Ministry of Health had confirmed Cholera outbreak in Namayingo and Kayunga districts.

The last update was as of 31 August 2023, South Africa reported a total of 1 388 suspected cases, with 47 deaths (CFR=3.4%) from six provinces – Gauteng, Free State, North-West, Limpopo, Mpumalanga and KwaZulu-Natal. KwaZulu-Natal province recorded the third imported case of cholera as notified by the Ministry of Health on 25 July 2023. Cholera readiness training workshops have been conducted in all nine provinces. An After-Action Review Meeting was also conducted for the Kanana cholera treatment unit.

The cholera outbreak in the country has been ongoing since January 2022. As of 24 September 2023, there was a cumulative total of 26 104 with 65 deaths (CFR = 2.5%).

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

WHO ACTIVITIES
Readiness:
• 23 countries prioritized for cholera readiness.
• Collection of data using the updated web-based cholera readiness assessment tool is ongoing.
• Tracking tool for monitoring framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 has been developed and rolled out across the countries.

• Training of 524 RRTs across all the nine provinces of South Africa to build capacity for preparedness and readiness and to develop a national cholera plan for the country.

• The identification of Priority Areas for Multisectoral Interventions (PAMIs/Hotspots) in Malawi has been conducted.

• Development and mid-term review of National Cholera Plan for South Sudan and Zambia respectively is ongoing.

• Cholera readiness particularly in those countries approaching the cholera season in Southern Africa is ongoing.

• Comprehensive assessment of the implementation of the Regional Framework for the implementation of the global strategy for cholera prevention and control, 2018-2030 has been conducted.

**Response:**

• Coordination and provision of technical guidance by the Cholera Incident Management Support Team of the WHO AFRO through tele-conference meetings with all AFRO countries in response is ongoing.

• Technical and financial support to countries for cholera response interventions is ongoing.

• Cross-border collaborations on cholera surveillance has been strengthened.

• Deployment of additional staff to countries as requested by countries is ongoing.

• Provision of essential medical supplies and cholera Kits to all countries in outbreak.

• Response and technical inputs on training across all response pillars has been strengthened.

• Technical support to countries on vaccination strategies for reactive OCV campaigns is ongoing. Capacity building of country teams including through webinars is ongoing.
For additional information, please contact

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