WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES

Week 17: 17-23 April 2023
Data as reported by: 17:00; 23 April 2023

2
New events

155
Ongoing events

134
Outbreaks

23
Humanitarian crises

Legend

Grade 3 events
Protracted 3 events

Grade 2 events
Protracted 2 events

Grade 1 events
Protracted 1 events

Ungraded events

Health Emergency Information and Risk Assessment

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

- Marburg virus disease in Equatorial Guinea
- Coronavirus disease (COVID-19) in the WHO African region

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 report of new confirmed cases of Marburg Virus Disease (MVD) in Equatorial Guinea is concerning and indicates that the virus continues to circulate. New confirmed cases were reported in Bata district which is now the epicenter of the outbreak. There is a need to strengthen response activities to identify and break chains of transmission.

- The COVID-19 epidemiological situation in the WHO African Region has remained stable since the start of 2023. The number of cases, deaths and hospitalizations were low, compared to the past three years of the pandemic. Countries are advised to maintain response actions such as risk communication and community engagement messaging and advocacy focused on individual risk assessments, vaccination of vulnerable populations even in the absence of severe disease, and vigilance for COVID-19 related signs and symptoms.
**Equatorial Guinea**

**Marburg Virus Disease**

**EVENT DESCRIPTION**

Two new confirmed cases of Marburg Virus Disease (MVD) were reported on 18 and 20 April 2023, both from Bata district which is now the epicenter of the outbreak. The last confirmed death was reported on 21 April 2023.

The case reported on 18 April is a 29-year-old male who is a known contact and was under active follow-up. He is a healthcare worker who attended to a case on 6 April 2023. The symptom onset was around 16 April. On 17 April, he was transported to the Marburg treatment center at Mondong in Bata, and samples were collected upon admission which tested positive the same day. As the patient was identified and admitted to the treatment center in the early stages of the illness, there are few community contacts.

The most recent case, reported on 20 April 2023, is a two-year-old girl, who is a sister of the confirmed case who died on 6 April in Bata. The patient was transferred to the treatment center in Mondong where, despite intensive care interventions, she died early in the morning on 21 April 2023.

As of 23 April 2023, a total of 17 confirmed cases of MVD; including 12 deaths, three survivors, one case with unknown status and one case currently admitted, have been reported in Equatorial Guinea for the ongoing outbreak. In addition, 23 probable cases have been reported.

The number of affected districts remains five (Bata, Ebebiyin, Evinayong, Nsok Nsomo and Nsork) and the number of affected provinces is still four (Centro Sur, Kie Ntem, Litoral and Wele-Nzas). Bata is leading in number of confirmed cases and deaths with 11 cases (65%) and seven deaths (58.3%) reported respectively. Other districts reporting confirmed cases and deaths are Ebebiyin (two cases and two deaths), Evinayong (two cases and two deaths), Nsork (one case and one death). For one confirmed case, the district and outcome is unknown.

Among the confirmed cases, nine are female, seven are male and one is unknown. The most affected age group remains 30-44 years with six cases reported, followed by the 0-14 years old age group with four cases and 45-64 years old group with three cases. There have been five confirmed cases among healthcare workers, of which two have died.

A total of 1,427 contacts have been listed since the beginning of the outbreak through 18 April 2023, and a total of 116 are under active follow up as of 21 April, all in Bata district.

**PUBLIC HEALTH ACTIONS**

- The regional coordination meeting with all partners involved in the outbreak response is organized on daily basis.
- The alert cell is operating for MVD alert management.
- District epi teams are supporting training and supervision of investigators and contact tracing teams.
- Case management for suspected and confirmed cases is ongoing and Installation of two Biosecure Emergency Care Unit for Outbreaks for patient care has been completed. Evaluations and improvement plans on Infection prevention and control was completed at priority health care facilities and MOH/WHO/US CDC teams started to provide supportive supervision and mentorship.
- Ongoing monitoring/reinforcement for screening, isolation, and referral in the three main hospitals.
- Decontamination support to health facilities are ongoing and teams in the priority hospitals have been trained for them to work independently when there is indication in their facilities.
- Intensification of community engagement with Muslim and Catholics leaders, and with schools’ delegates is underway as well as continued intensive public awareness and sensitization session conducted towards Senators and parliamentarians in Malabo.
SITUATION INTERPRETATION

Among the last two new cases reported, one is a healthcare worker who was a contact under follow up, this prompted the timely isolation and limited the number of contacts. The report of a new case among healthcare workers demonstrates the need to strengthen infection prevention and control measures within health care facilities. Overall, the number of alerts generated remains relatively low compared to the current epidemiological situation, this could reflect low risk perception of the disease in the community, the risk communication and community engagement component of the outbreak response remains paramount and need to be reinforced.
As of 22 April 2023, a total of 8,984,440 laboratory-confirmed cases including 174,238 related COVID-19 deaths have been reported in the WHO African region (AFRO) since the beginning of the pandemic, resulting in an overall case fatality rate of 1.9%. It is estimated that 92% (8,270,175) of individuals infected fully recovered from the disease. Cumulatively, five countries have reported the highest number of cases: South Africa 4,072,533 (45.3%), Ethiopia 500,804 (5.6%), Zambia 343,803 (3.8%), Kenya 343,023 (3.8%), and Botswana 329,847 (3.7%).

At the same time, the following five countries have cumulatively reported the highest number of deaths: South Africa 102,595 (59.0% of all deaths), Ethiopia 7,574 (4.4%), Algeria 6,881 (4.0%), Kenya 5,688 (3.3%), and Zimbabwe 5,685 (3.3%).

In the past 28 days, over 7,608 new cases in 31 countries, including 14 new deaths from seven countries, were reported. The following five countries reported the highest number of new cases: Mauritius 2,514 (33.0%), South Africa 2,099 (27.6%), Ethiopia 420 (5.5%), Zambia 388 (5.1%), and Eswatini 263 (3.5%). During the same period, five countries reported the highest number of deaths: Zimbabwe 6 (42.9%), Sao Tome and Principe 3 (21.4%), Cameroon 1 (7.1%), Ethiopia 1 (7.1%), and Zambia 1 (7.1%).

South Africa has integrated the routine COVID-19 testing and reporting in the Influenza-Like Illness (ILI) sentinel surveillance system. In their most recent report (as of 9 April, 135 COVID-19 new cases were recorded from all surveillance public hospital since the beginning of the year. Of these, 65 were admitted in hospital and one related death was reported.

No significant change in the reported number of weekly new cases of COVID-19 has been observed in epi week 15 (ending on 16 April 2023) with a total of 1,494 confirmed cases reported in AFRO based on data submitted from 26 countries, while the same countries reported a total of 1,486 cases in epi week 14 (ending on 2 April 2023). Of the 1,494 new cases reported in epi week 15, Mauritius accounted for 962 (64.4%), followed by Chad 124 (8.3%), Madagascar 72 (4.8%), and Eswatini 66 (4.4%).

There were no new COVID-19-related deaths reported in the region in epi week 15 while four fatalities were reported in epi week 14 from Botswana, Ethiopia, Sao Tome and Principe, and Zimbabwe (one death each). It is crucial for countries to update their data for the past two weeks, including South Africa, to allow accurate figures on COVID-19 incidence and mortality in the region.

The incidence risk of COVID-19 cases has remained stable in the past two weeks when observing the 26 countries that have timely reported new weekly cases in the WHO African region and there is no country listed as being on resurgence or high alert. This is an indication that the pandemic situation is stabilizing in many African countries. While reporting requirements will change as the pandemic progresses, the World Health Organization is urging all countries to provide more reporting on COVID-19 hospitalizations, Intensive Care Unit, and mortality and to rely on these data, rather than on case-based reporting, to measure burden and impact.
Epidemiological curve of COVID-19 laboratory-confirmed cases and deaths in the AFRO region, as of 22 April 2023

Cumulative cases

- South Africa: 4,702,575
- Ethiopia: 3,393,604
- Zimbabwe: 451,055
- Kenya: 430,523
- Botswana: 289,847
- Mauritius: 209,770
- Algeria: 271,886
- Nigeria: 266,670
- Zimbabwe: 264,611
- Mozambique: 246,994
- Ghana: 177,619
- Namibia: 172,222
- Uganda: 159,667
- Rwanda: 128,106
- Cameroon: 124,895
- Angola: 108,303
- Democratic Republic of the Congo: 95,910
- Senegal: 86,079
- Malawi: 85,722
- Côte d’Ivoire: 69,216
- Eswatini: 64,185
- Madagascar: 58,177
- Mayotte: 39,962
- Cabo Verde: 36,126
- Burundi: 33,724
- Seychelles: 22,357
- Gabon: 63,881
- United Republic of Tanzania: 42,873
- Togo: 36,424
- Guinea: 34,430
- Lesotho: 34,400
- Mali: 33,644
- Benin: 28,116
- Congo: 25,198
- Burkina Faso: 22,058
- South Sudan: 16,550
- Eswatini: 17,256
- Central African Republic: 15,382
- Gambia: 12,855
- Togo: 13,180
- Niger: 11,519
- Guinea-Bissau: 8,333
- Comoros: 7,915
- Liberia: 6,840
- Chad: 7,822
- Sierra Leone: 7,742
- Sao Tome and Principe: 6,562

Distribution of cases of COVID-19 in the WHO African Region, as of 22 April 2023

Go to overview Go to map of the outbreaks
**Update on Reporting - Epidemiological Week 15: 10 – 16 April, 2023**

Point du rapportage hebdomadaire – Semaine 15: 10 – 16 avril 2023

Please, refer to the calendar below to submit your IDSR data on a weekly basis:

Veuillez-vous référer au calendrier ci-dessous pour soumettre vos données de la SIMR sur une base hebdomadaire:

**afrooutbreak@who.int**

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**Reminder**: Upcoming deadlines for weekly data submission

**Rappel**: Dates limites prochaines de soumission des données hebdomadaires

<table>
<thead>
<tr>
<th>Week</th>
<th>Start date</th>
<th>End date</th>
<th>Deadline / Date limite</th>
</tr>
</thead>
<tbody>
<tr>
<td>Week 15</td>
<td>10-Avr. -2023</td>
<td>16-Avr. -2023</td>
<td>19-Avr. -2023</td>
</tr>
<tr>
<td>Week 16</td>
<td>17-Avr. -2023</td>
<td>23-Avr. -2023</td>
<td>26-Avr. -2023</td>
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<tr>
<td>Week 17</td>
<td>24-Avr. -2023</td>
<td>30-Avr. -2023</td>
<td>03-May -2023</td>
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<tr>
<td>Week 18</td>
<td>01-May -2023</td>
<td>07-May -2023</td>
<td>10-May -2023</td>
</tr>
</tbody>
</table>

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**35 Countries out of 47, reported for week 15**

**74% Completeness for weekly reporting**

**64% Timeliness for weekly reporting**
All events currently being monitored by WHO AFRO

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Guinea</td>
<td>Skin injury from unknown chemical exposure</td>
<td>Ungraded</td>
<td>19-Apr-23</td>
<td>12-Apr-23</td>
<td>21-Apr-23</td>
<td>250</td>
<td>250</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

On 7 April 2023, about 270 kilometers off the west coast of Conakry, several fishermen, including Guineans, Sierra Leoneans, Liberians and Ghanaians, were exposed to an unknown chemical. According to the fishermen, a boat was seen dumping a product into the open sea. The product emitted a fizzy, pungent cloud and left a yellowish substance on the surface of the water. As of 21 April, 250 cases of burns, including 0 deaths, have been reported among fishermen only. The cases were reported in the Conakry (240 cases, 96%) and Kindia (10 cases, 4%) regions. On 21 April alone, 26 new cases were reported. Only six cases were severe enough to require hospitalization. Investigations are ongoing to identify the chemical product involved.

Senegal

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
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<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Senegal</td>
<td>Crimea-Congo haemorrhagic fever (CCHF)</td>
<td>Ungraded</td>
<td>21-Apr-23</td>
<td>21-Apr-23</td>
<td>23-Apr-23</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

The Ministry of Health of Senegal has reported a confirmed case of Crimean-Congo hemorrhagic fever on 21 April 2023 in a 35-year-old male patient. He is a butcher residing in Fadia city, Guélizavaye district, Dakar region. The date of onset of symptoms was 10 April with fever and flu-like syndrome. Samples were collected on 20 April for suspected viral hemorrhagic fever after he developed a hemorrhagic syndrome and thrombocytopenia. He died on 22 April. Public health measures are being taken.

Ongoing Events

<table>
<thead>
<tr>
<th>Country</th>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Feb-20</td>
<td>25-Feb-20</td>
<td>9-Apr-23</td>
<td>271 613</td>
<td>271 613</td>
<td>6 881</td>
<td>2.5%</td>
</tr>
</tbody>
</table>

From 25 February 2020 to 9 April 2023, a total of 271 613 confirmed cases of COVID-19 with 6 881 deaths have been reported from Algeria, with 182 894 recovered.

Algeria

<table>
<thead>
<tr>
<th>Country</th>
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<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Algeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>14-Jul-22</td>
<td>11-Apr-22</td>
<td>22-Mar-23</td>
<td>2</td>
<td>2</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

According to Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains two.

Angola

<table>
<thead>
<tr>
<th>Country</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Angola</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>21-Mar-20</td>
<td>21-Mar-20</td>
<td>13-Apr-23</td>
<td>105 353</td>
<td>105 353</td>
<td>1 934</td>
<td>1.8%</td>
</tr>
</tbody>
</table>

The first COVID-19 confirmed case was reported in Angola on 21 March 2020. As of 13 April 2023, a total of 105 353 confirmed COVID-19 cases have been reported in the country with 1 934 deaths.

Benin

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
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</thead>
<tbody>
<tr>
<td>Benin</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>17-Mar-20</td>
<td>16-Mar-20</td>
<td>27-Feb-23</td>
<td>27 999</td>
<td>27 999</td>
<td>163</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

The Ministry of Health in Benin announced the first confirmed case of COVID-19 on 16 March 2020. As of 27 February 2023, a total of 27 999 cases have been reported in the country, with 163 deaths and 27 830 recoveries.

Benin

<table>
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</thead>
<tbody>
<tr>
<td>Benin</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>8-Aug-19</td>
<td>24-Aug-19</td>
<td>8-Mar-23</td>
<td>25</td>
<td>25</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

Two cVDPV2-positive environmental samples were reported this week, from Donga and Oueme provinces, collected in January and February 2023. There are 10 cases reported in 2022. Six cases were reported in 2021 and 2020, and 6 in 2019. In 2023, one cVDPV2-positive case has been reported, with onset of paralysis on 2 January 2023, from Littoral province.

Botswana

<table>
<thead>
<tr>
<th>Country</th>
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<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Botswana</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>30-Mar-20</td>
<td>30-Mar-20</td>
<td>15-Apr-23</td>
<td>329 847</td>
<td>329 847</td>
<td>2 796</td>
<td>0.9%</td>
</tr>
</tbody>
</table>

On 30 March 2020, the Minister of Health and Wellness in Botswana reported three confirmed cases of COVID-19. As of 15 March 2023, a total of 329 847 confirmed COVID-19 cases were reported in the country including 2 796 deaths.

Botswana

<table>
<thead>
<tr>
<th>Country</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Botswana</td>
<td>Measles</td>
<td>Ungraded</td>
<td>28-Mar-23</td>
<td>28-Mar-23</td>
<td>31-Mar-23</td>
<td>13</td>
<td>13</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

The Botswana Ministry of Health notified a total of 13 cases of measles and one case of rubella on 28 March 2023 in Greater Gaborone DHMT, Kweneng DHMT, Greater Francistown DHMT, Serowe/Palapye DHMT and Greater Selebi Phikwe DHMT.In collaboration with health partners, the ministry has activated its rapid response teams to investigate, manage and conduct contact tracing of confirmed cases.

Burkina Faso

<table>
<thead>
<tr>
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</thead>
<tbody>
<tr>
<td>Burkina Faso</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 2</td>
<td>1-Jan-19</td>
<td>1-Jan-19</td>
<td>15-Mar-23</td>
<td>1 094 000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

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 1 094 000 displaced persons are registered in Burkina Faso as of 31 January 2023. We observed a 3% increase in the total IDPs in January 2023 compared to December2022. It is estimated that a total of 4.7 million people will need humanitarian aid in 2023. Access to health services remains a challenge for the population in affected areas.
### Health Emergency Information and Risk Assessment

#### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 17: 17-23 APRIL 2023

**Central African Republic**

Displaced in the country. Malnutrition, respectively among under-five children and pregnant women as compared to last year projections. As of 28 Feb 2023, an estimated 483K people were internally displaced in the area.

The humanitarian crisis in the Central African Republic (CAR) continues to deteriorate. In 2023, 3.4 million people will need humanitarian assistance and protection, including 175 laboratory-confirmed cases. The most affected age group is children less than five years old (22%).

On 31 March 2020, the Minister of Health in Burundi reported the first two confirmed cases of COVID-19. As of 22 March 2023, the total number of confirmed COVID-19 cases is 53,686, including 15 deaths.

The humanitarian situation in the NWSW regions remained dire, marked by continued violent attacks on schools and children, as well as on healthcare. Continued fighting between non-State armed groups (NSAGs) and State security forces led to the killing and displacement of civilians. Humanitarian activities continue to be hampered by roadblocks, theft of humanitarian supplies, bureaucratic impediments, and risk of IEDs in public spaces and roads used by humanitarians. As of 28 Feb 2023, 628K people are internally displaced in the area.

#### Table: Outbreaks and Other Emergencies

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<tr>
<th>Country</th>
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<th>Deaths</th>
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</tr>
</thead>
<tbody>
<tr>
<td>Burkina Faso</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>10-Mar-20</td>
<td>9-Mar-20</td>
<td>23-Mar-23</td>
<td>22,056</td>
<td>22,056</td>
<td>396</td>
<td>1.8%</td>
</tr>
<tr>
<td>Burundi</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>1-Jan-23</td>
<td>1-Jan-23</td>
<td>23-Apr-23</td>
<td>327</td>
<td>175</td>
<td>3</td>
<td>0.9%</td>
</tr>
<tr>
<td>Burundi</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>31-Mar-20</td>
<td>18-Mar-20</td>
<td>22-Mar-20</td>
<td>53,686</td>
<td>53,686</td>
<td>15</td>
<td>0.0%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (North, Adamawa &amp; East)</td>
<td>Protracted 2</td>
<td>31-Dec-13</td>
<td>27-Jun-17</td>
<td>31-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (NW &amp; SW)</td>
<td>Protracted 2</td>
<td>1-Oct-16</td>
<td>27-Jun-18</td>
<td>1-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Humanitarian crisis (Sahel Region)</td>
<td>Grade 3</td>
<td>31-Dec-13</td>
<td>27-Jun-17</td>
<td>1-Mar-23</td>
<td>1,200,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>31-Aug-21</td>
<td>25-Oct-21</td>
<td>6-Apr-23</td>
<td>15,333</td>
<td>1,808</td>
<td>311</td>
<td>2.0%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>6-Mar-20</td>
<td>6-Mar-20</td>
<td>26-Mar-23</td>
<td>124,834</td>
<td>124,834</td>
<td>1,970</td>
<td>1.6%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Measles</td>
<td>Ungraded</td>
<td>2-Apr-19</td>
<td>1-Jan-23</td>
<td>9-Apr-23</td>
<td>4,461</td>
<td>1,461</td>
<td>35</td>
<td>0.8%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>24-Feb-22</td>
<td>1-Jan-22</td>
<td>9-Apr-23</td>
<td>126</td>
<td>18</td>
<td>3</td>
<td>2.4%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>23-May-19</td>
<td>1-Jan-20</td>
<td>9-Apr-23</td>
<td>13</td>
<td>13</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Cameroon</td>
<td>Yellow Fever</td>
<td>Ungraded</td>
<td>7-Feb-21</td>
<td>4-Jan-21</td>
<td>2-Apr-23</td>
<td>3,483</td>
<td>84</td>
<td>3</td>
<td>0.1%</td>
</tr>
<tr>
<td>Cape Verde</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>19-Mar-20</td>
<td>18-Mar-20</td>
<td>9-Apr-23</td>
<td>63,281</td>
<td>63,281</td>
<td>413</td>
<td>0.7%</td>
</tr>
<tr>
<td>Central African Republic</td>
<td>Humanitarian crisis</td>
<td>Protracted 2</td>
<td>11-Dec-13</td>
<td>11-Dec-13</td>
<td>28-Feb-23</td>
<td>3,400,000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The health authorities of Burundi have declared an outbreak of circulating poliovirus type 2 on 17 March 2023. The case is a 4-year-old male child with acute flaccid paralysis (AFP) with onset date of 24 November 2022 that was reported in Isale District in Buja.
**Central African Republic**

**COVID-19**  Grade 3  14-Mar-20  14-Mar-20  22-Jan-23  15 367 15 367 113 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 22 January 2023, a total of 15 367 confirmed cases, 113 deaths and 15 200 recovered were reported.

---

**Central African Republic**

**Mpox**  Grade 3  3-Mar-22  4-Mar-22  30-Mar-23  29 29 1 3.4%

From 4 March 2022 through 30 March 2023, a total of 29 confirmed cases of Mpox and one death have been reported in the country. The number of mpox cases in CAR has increased from 27 to 29 (4.8% increase) after the country reported two new cases in weeks 10 and 11. Since the start of 2023, the country has reported 12 laboratory-confirmed cases, including one death. The last case was reported on 27 March 2023 in the Msahi health district. This case was a contact being followed from a confirmed case during week 10.

---

**Central African Republic**

**Poliomyelitis (cVDPV2)**  Grade 2  24-May-19  24-May-19  9-Apr-23  30 30 0 0.0%

No new cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in week 14, 2023 (ending 9 Apr 2023). There are five cases reported in 2022. Although no new cases were reported in 2021, 4 cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.

---

**Central African Republic**

**Yellow Fever**  Ungraded  17-Aug-21  1-Apr-21  8-Jan-23  767 23 4 0.5%

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. As of 8 January 2023, 767 suspected cases of YF have been reported including 6 probable and 23 lab-confirmed cases (14 cases in 2022). Two new suspected cases were no new cases were reported in 2021, 4 cVDPV2 cases were reported in 2020 and 21 cases in 2019 from several outbreaks.

---

**Chad**

**Humanitarian crisis (Sahel region)**  Grade 2  11-Feb-22  1-Mar-16  1-Mar-23  6 100 000 - - -

The Lac Chad province is experiencing a double security and environmental crisis. Since 2015, the region is impacted by attacks of non-state armed groups which have forced local communities to flee their homes. The province experienced heavy rainfall which has affected some 229 000 people between October and December 2022, and has destroyed large surfaces of cropland, washed away more than 6 000 of cattle, and caused extensive damage to homes and schools. The floods added a new challenge to an already critical situation. As of 28 Feb 2023, Chad has 381K internally displaced persons and hosts 595K refugees.

---

**Chad**

**COVID-19**  Grade 3  19-Mar-20  19-Mar-22  26-Mar-23  7 688 7 688 194 2.5%

The first COVID-19 confirmed case was reported in Chad on 19 March 2020. As of 26 March 2023, a total of 7 688 confirmed COVID-19 cases were reported in the country including 194 deaths.

---

**Chad**

**Measles**  Ungraded  24-May-18  1-Jan-19  9-Apr-23  4 141 347 3 0.1%

As at Week 14 of 2023 (ending 9 April), 4 141 suspected cases and three measles-related deaths (CFR 0.1%) have been reported from 128 out of 150 districts in the country. A total of 347 samples tested IgM+ for measles out of 1 024 cases investigated with blood samples (33.9 %); and 124 tested IgM+ for rubella from 842 tested samples (14.7%). Only 21% of confirmed cases known to have received at least 1 dose of measles vaccine. There are 34 districts with laboratory confirmed measles outbreak since the start of 2023.

---

**Chad**

**Poliomyelitis (cVDPV2)**  Grade 2  18-Oct-19  9-Sep-19  9-Apr-23  164 164 0 0.0%

One cVDPV2 case was reported in Logone Occidental in week 13 (ending 2 Apr 2023, yielding a total of five cases reported in 2023. A total of 44 cVDPV2 cases were reported in 2022. 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**  Ungraded  13-Nov-21  1-Nov-21  2-Apr-23  2 753 31 7 0.3%

On 13 November 2021, the Institut Pasteur in Dakar confirmed two samples from Mandoul district, Chad, positive for yellow fever. As of 10 February 2022, the number of yellow fever confirmed cases reported were 2753. There are two new suspected cases were reported in week 1 (ending 8 January). In total, five regions have so far been affected including RS1, RS2, RS3, RS4 and RS6. RS3 has reported 70% of confirmed cases.

---

**Comoros**

**COVID-19**  Grade 3  30-Apr-20  30-Apr-20  16-Apr-23  9 105 9 105 161 1.8%

The first case of confirmed COVID-19 was notified on 30 April 2020 in Comoros. As of 14 April 2023, a total of 9 105 confirmed COVID-19 cases, including 161 deaths were reported in the country.

---

**Congo**

**COVID-19**  Grade 3  14-Mar-20  14-Mar-20  16-Apr-23  25 188 25 188 389 1.6%

The Government of Congo announced the confirmation of the first case of COVID-19 in Congo on 14 March 2020. As of 16 April 2023, a total of 25 188 cases including 389 deaths have been reported in the country.

---

**Congo**

**Mpox**  Grade 3  23-May-22  1-Jan-22  2-Apr-23  5 5 0 0.0%

From 1 January 2022 to 2 April 2023, the Republic of Congo has reported five laboratory-confirmed cases, with zero death (CFR 0.0%).

---

**Congo**

**Poliomyelitis (cVDPV1)**  Grade 2  21-Mar-23  1-Mar-23  25-Mar-23  1 1 - -%

A case of circulating vaccine-derived poliovirus type 1 (cVDPV1) was confirmed on 1 March 2023 in a 15-year-old child living in Dolisie, Niari Department, with onset of paralysis on 26 September 2022.

---

**Côte d’Ivoire**

**COVID-19**  Grade 3  11-Mar-20  11-Mar-20  7-Apr-23  88 308 88 308 834 0.9%

Since 11 March 2020, a total of 88 308 confirmed cases of COVID-19 have been reported from Côte d’Ivoire including 834 deaths, and a total of 87 468 recoveries.
Since the beginning of 2022, more than 1.56 million people have been in a situation of internal displacement (IDPs) in the DRC. In Ituri Province, intercommunal violence escalated in the last quarter where there is a worrying increase in attacks in the territories of Dugu and Irumu, with more than 70 civilians were killed during Feb 2023. In addition, around 380 houses had been burnt down in repeated attacks in Ituri province since Jan 2023. Humanitarian partners are also affected by access constraints linked to armed clashes, popular demonstrations, the presence of illegal barriers, but also logistical constraints and incidents of violence against them. In Feb 2023, 26 new security incidents directly affecting humanitarian workers were recorded in the DRC.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Humanitarian crisis</td>
<td>Protracted 3</td>
<td>20-Dec-16</td>
<td>17-Apr-17</td>
<td>19-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Since the beginning of 2022, more than 1.56 million people have been in a situation of internal displacement (IDPs) in the DRC. In Ituri Province, intercommunal violence escalated in the last quarter where there is a worrying increase in attacks in the territories of Dugu and Irumu, with more than 70 civilians were killed during Feb 2023. In addition, around 380 houses had been burnt down in repeated attacks in Ituri province since Jan 2023. Humanitarian partners are also affected by access constraints linked to armed clashes, popular demonstrations, the presence of illegal barriers, but also logistical constraints and incidents of violence against them. In Feb 2023, 26 new security incidents directly affecting humanitarian workers were recorded in the DRC.

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<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>16-Jan-15</td>
<td>1-Jan-23</td>
<td>19-Mar-23</td>
<td>7 243</td>
<td>462</td>
<td>47</td>
<td>0.6%</td>
</tr>
</tbody>
</table>

As at Week 14 of 2023 (ending 9 April), 70 628 suspected cases with 1 146 measles related deaths (CFR 1.7%) have been reported including 1 297 IgM+ for measles from 2 433 tested samples and 188 IgM+ for Rubella. A total of 84 489 people have recovered.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Measles</td>
<td>Ungraded</td>
<td>12-Oct-21</td>
<td>1-Jan-23</td>
<td>9-Apr-23</td>
<td>70 628</td>
<td>1 297</td>
<td>1 146</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

As at Week 14 of 2023 (ending 9 April), 70 628 suspected cases with 1 146 measles related deaths (CFR 1.7%) have been reported including 1 297 IgM+ for measles from 2 433 tested samples and 188 IgM+ for Rubella. A total of 84 489 people have recovered.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Meningitis</td>
<td>Ungraded</td>
<td>31-May-22</td>
<td>2-Jun-22</td>
<td>7-Apr-23</td>
<td>520</td>
<td>10</td>
<td>86</td>
<td>16.5%</td>
</tr>
</tbody>
</table>

The meningitis outbreak is ongoing in the Banalia health zone, Tshopo province in the Democratic Republic of the Congo. From 2 June 2022 to 7 April 2023, a total of 520 suspected cases with 86 deaths (CFR 16.5%) have been reported. A total of 12 out of 20 health areas are affected. The number cerebrospinal fluid (CSF) samples tested so far is 143 and 10 positive ( five for Neisseria meningitidis W ; two for Streptococcus pneumoniae; two for Hemophilus influenzae non b and one Heamophilus influenzae b )

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>30-Mar-19</td>
<td>1-Jan-22</td>
<td>13-Apr-23</td>
<td>450</td>
<td>450</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

From 1 January 2022 through 13 April 2023, the Democratic Republic of the Congo (DRC) reported 450 confirmed Mpox cases with no death among the confirmed cases. All confirmed cases belong to Clade I.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Poliomyelitis (cVDPV1)</td>
<td>Grade 2</td>
<td>27-Aug-22</td>
<td>27-Aug-22</td>
<td>19-Apr-23</td>
<td>141</td>
<td>141</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

According to the Global Polio Eradication Initiative (GPEI), this week , no cVDPV1 case was reported this week. The total number of 2023 cases stands at nine. There were 132 cVDPV1 cases in 2022.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Democratic Republic of the Congo</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>26-Feb-21</td>
<td>1-Jan-22</td>
<td>19-Apr-23</td>
<td>358</td>
<td>358</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

For this week, the Global Polio Eradication Initiative (GPEI), no cVDPV2 case was reported this week. The total number of 2023 cases stands at 14. There were 344 cVDPV2 cases reported in 2022.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equatorial Guinea</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>23-Feb-23</td>
<td>17 229</td>
<td>17 229</td>
<td>183</td>
<td>1.1%</td>
</tr>
</tbody>
</table>

The Ministry of Health and Welfare announced the first confirmed COVID-19 case on 14 March 2020. As of 23 February 2023, a total of 17 229 cases have been reported in the country with 183 deaths and 16 907 recoveries.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Equatorial Guinea</td>
<td>Marburg virus disease</td>
<td>Grade 3</td>
<td>7-Feb-23</td>
<td>8-Feb-23</td>
<td>21-Apr-23</td>
<td>17</td>
<td>17</td>
<td>12</td>
<td>-</td>
</tr>
</tbody>
</table>

A total of 17 confirmed cases and 12 deaths since the declaration of the outbreak on 13 February 2023 through 21 April 2023 have been reported. Among the 17 confirmed cases, three are survivors, 12 deaths, one is admitted and one with unknown outcome. Response activities are ongoing with the support from WHO and partners under the Government leadership.
The first COVID-19 confirmed case was reported in Eritrea on 21 March 2020. As of 30 October 2022, a total of 10 189 confirmed COVID-19 cases with 103 deaths were reported in the country. A total of 10 085 patients have recovered from the disease.

Eritrea
- **COVID-19**
  - Grade: 3
  - Date notified to WHO: 21-Mar-20
  - Start reporting period: 21-Mar-20
  - End reporting period: 30-Oct-22
  - Total cases: 10 189
  - Cases Confirmed: 10 189
  - Deaths: 103
  - CFR: 1.0%

No new case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported in week 14, 2023 (ending 9 Apr 2023). There has so far been one case reported in 2022 and another one reported in 2021. This latter one was however confirmed on 2 June 2022 by the Ethiopian National Polio laboratory.

The first COVID-19 confirmed case was reported in The Gambia on 17 March 2020. As of 4 November 2022, a total of 12 586 confirmed COVID-19 cases including 372 deaths were reported in the country.

Gambia
- **COVID-19**
  - Grade: 3
  - Date notified to WHO: 17-Mar-20
  - Start reporting period: 17-Mar-20
  - End reporting period: 4-Nov-22
  - Total cases: 12 586
  - Cases Confirmed: 12 586
  - Deaths: 372
  - CFR: 3.0%

There is an ongoing outbreak of measles in the Northern region of Ghana. From epidemiological week 1 to week 5 (ending 17 February 2023), a total of 209 suspected cases, including three confirmed, were reported in eleven districts. The attack rate per one million population is 209 (suspected cases). Cumulatively, a total of 502 suspected cases, including 123 confirmed cases of measles, were reported in the Northern region from epidemiological week 1, 2022, to epidemiological week 5, 2023.
Health Emergency Information and Risk Assessment
WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 17: 17-23 APRIL 2023

**Guinea**
- **COVID-19**: Grade 3
  - Date notified to WCO: 13-Mar-20
  - Start of reporting period: 13-Mar-20
  - End of reporting period: 19-Feb-23
  - Total cases: 38,302
  - Confirmed deaths: 38,302
  - CFR: 1.2%

**Kenya**
- **Enteric outbreak**: Ungraded
  - Date notified to WCO: 13-Apr-23
  - Start of reporting period: 13-Apr-23
  - End of reporting period: 19-Apr-23
  - Total cases: 1,046
  - Confirmed deaths: 1
  - CFR: 0.1%

**Lesotho**
- **COVID-19**: Grade 3
  - Date notified to WCO: 13-May-20
  - Start of reporting period: 13-May-20
  - End of reporting period: 12-Sep-22
  - Total cases: 34,490
  - Confirmed deaths: 34,490
  - CFR: 0.4%

**Liberia**
- **COVD-19**: Grade 3
  - Date notified to WCO: 16-Mar-20
  - Start of reporting period: 16-Mar-20
  - End of reporting period: 30-Mar-23
  - Total cases: 8,102
  - Confirmed deaths: 8,102
  - CFR: 2.1%

**Lesotho**
- **COVID-19**: Grade 3
  - Date notified to WCO: 13-May-20
  - Start of reporting period: 13-May-20
  - End of reporting period: 12-Sep-22
  - Total cases: 34,490
  - Confirmed deaths: 34,490
  - CFR: 0.4%

**Kenya**
- **Lassa Fever**: Ungraded
  - Date notified to WCO: 21-Mar-23
  - Start of reporting period: 21-Mar-23
  - End of reporting period: 25-Mar-23
  - Total cases: 1
  - Confirmed deaths: 1
  - CFR: 100.0%

**Guinea**
- **Measles**: Ungraded
  - Date notified to WCO: 9-May-18
  - Start of reporting period: 1-Jan-22
  - End of reporting period: 31-Dec-22
  - Total cases: 23,259
  - Confirmed deaths: 33
  - CFR: 0.1%

**Kenya**
- **Drought/food insecurity**: Grade 3
  - Date notified to WCO: 17-Feb-22
  - Start of reporting period: 1-Jan-22
  - End of reporting period: 26-Mar-23
  - Total cases: 4,500,000
  - Confirmed deaths: -
  - CFR: -

**Guinea**
- **Measles**: Ungraded
  - Date notified to WCO: 13-May-20
  - Start of reporting period: 13-May-20
  - End of reporting period: 12-Sep-22
  - Total cases: 34,490
  - Confirmed deaths: 34,490
  - CFR: 0.4%

**Kenya**
- **Leishmaniasis (visceral)**: Ungraded
  - Date notified to WCO: 3-Mar-22
  - Start of reporting period: 3-Mar-22
  - End of reporting period: 23-Feb-23
  - Total cases: 2,233
  - Confirmed deaths: 2,051
  - CFR: 0.4%

**Kenya**
- **Measles**: Ungraded
  - Date notified to WCO: 29-Jun-22
  - Start of reporting period: 1-Jan-23
  - End of reporting period: 2-Apr-23
  - Total cases: 31
  - Confirmed deaths: 4
  - CFR: 4.0%

**Lesotho**
- **COVID-19**: Grade 3
  - Date notified to WCO: 16-Mar-20
  - Start of reporting period: 16-Mar-20
  - End of reporting period: 30-Mar-23
  - Total cases: 8,102
  - Confirmed deaths: 8,102
  - CFR: 3.6%

**Liberia**
- **Lassa Fever**: Ungraded
  - Date notified to WCO: 3-Mar-22
  - Start of reporting period: 3-Mar-22
  - End of reporting period: 1-Feb-23
  - Total cases: 84
  - Confirmed deaths: 26
  - CFR: 31.0%

**Kenya**
- **Drought/food insecurity**: Grade 3
  - Date notified to WCO: 17-Feb-22
  - Start of reporting period: 1-Jan-22
  - End of reporting period: 26-Mar-23
  - Total cases: 4,500,000
  - Confirmed deaths: -
  - CFR: -

**Kenya**
- **Leishmaniasis (visceral)**: Ungraded
  - Date notified to WCO: 3-Mar-22
  - Start of reporting period: 3-Mar-22
  - End of reporting period: 23-Feb-23
  - Total cases: 2,233
  - Confirmed deaths: 2,051
  - CFR: 0.4%

**Kenya**
- **Measles**: Ungraded
  - Date notified to WCO: 29-Jun-22
  - Start of reporting period: 1-Jan-23
  - End of reporting period: 2-Apr-23
  - Total cases: 31
  - Confirmed deaths: 4
  - CFR: 4.0%
WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 17: 17-23 APRIL 2023

Since the measles outbreak started on 13 December 2021 as of 5 March 2023, a total of 9 959 suspected cases, including 9 459 confirmed and 92 deaths (CFR: 1%) were reported from all the 15 counties in Liberia. Among the confirmed cases, 5.4% (452) were laboratory confirmed, 6.5% (570) clinically confirmed and 88.1% (8 407) epidemiologically linked.

Liberia confirmed a case of Monkeypox on 23 July 2022 through the National Public Health Reference Laboratory in the country. As of 8 February 2023, sept confirmed cases of monkeypox and 0 deaths were reported.

On 19 Jan 2023, the cyclonic system Cheneso landed in Madagascar north of Antalaha district, SAVA region, with an average wind speed of 90 km/h and gusts up to 120 km. Last reports provided by the National Bureau for the Management of risks and catastrophes released on 31 January 2023 indicated that 91 960 people had been affected, 52 275 displacements and 36 deaths. Cyclone Freddy made landfall in Madagascar 5 Mar 2023, and affected nearly 299 000 people, displacing 72 700, and causing at least 17 deaths. Therefore, since the beginning of 2023, a total of 391 000 people have been affected by cyclones in the country causing 53 deaths and 124 975 displacements.

Malawi responding to its worst humanitarian crisis to date in the aftermath of tropical cyclone Freddy landfall on 12 March 2023. This weather system affected more than two million people, causing 679 deaths with an additional 537 people reported as missing, as of 21 April 2023. More than 600 000 people lost their homes and have been obliged to relocate in accommodation centres set up by the Government across 14 affected districts.

A total of 29 districts have reported Cholera cases since the confirmation of the first case in March 2022 in Machinga district. As of 23 April 2023, the cumulative confirmed cases and deaths reported since the onset of the outbreak is 58 171 and 1 743 respectively, with Case Fatality Rate at 3.0%.

On 2 Apr 2020, the president of Malawi announced the first confirmed cases of COVID-19 in the country. As of 16 April 2023, the country has a total of 88 722 confirmed cases and 2 686 deaths.

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.

The humanitarian situation in Mali remains of concern in 2023, still in the northern and central regions. The humanitarian crisis is taking place amidst COVID-19 and measles outbreak, with the risk of other emerging and re-emerging diseases. The situation in the centre and north of the country is likely related to the increase in direct and indirect attacks against national and international forces and civilians. The number of internally displaced persons (IDPs) reached 1 743 respectively, with Case Fatality Rate at 3.0%.

On 25 March 2020, the Ministry of Health of Mali reported the first COVID-19 confirmed cases in the country. As of 31 March 2023, a total of 33 117 confirmed COVID-19 cases have been reported in the country including 745 deaths and 33 074 recoveries.

The Republic of Mauritius announced the first three positive COVID-19 cases in the country. As of 19 March 2020, a total of 63 562 COVID-19 cases have been reported in the country including 1 044 deaths have been reported in the country.

### Event Table

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Start of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Liberia</td>
<td>Measles</td>
<td>Ungraded</td>
<td>3-Feb-22</td>
<td>9 959</td>
<td>9 459</td>
<td>92</td>
<td>0.9%</td>
</tr>
<tr>
<td>Liberia</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>21-Jul-22</td>
<td>7</td>
<td>7</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Madagascar</td>
<td>Cyclones</td>
<td>Grade 2</td>
<td>25-Jan-23</td>
<td>391 000</td>
<td>391 000</td>
<td>53</td>
<td></td>
</tr>
<tr>
<td>Madagascar</td>
<td>Malnutrition crisis</td>
<td>Protracted 2</td>
<td>1-Jul-21</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
<tr>
<td>Malawi</td>
<td>Cyclone</td>
<td>Grade 2</td>
<td>14-Mar-23</td>
<td>2 267 458</td>
<td>2 267 458</td>
<td>679</td>
<td>0.0%</td>
</tr>
<tr>
<td>Malawi</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>31-Jan-22</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Mali</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>11-Sep-17</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Mali</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>25-Mar-20</td>
<td>33 117</td>
<td>33 117</td>
<td>743</td>
<td>2.2%</td>
</tr>
<tr>
<td>Mauritania</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>13-Mar-20</td>
<td>63 562</td>
<td>63 562</td>
<td>997</td>
<td>1.7%</td>
</tr>
<tr>
<td>Mauritius</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>18-Mar-20</td>
<td>299 776</td>
<td>299 776</td>
<td>1 044</td>
<td>0.4%</td>
</tr>
<tr>
<td>Mozambique</td>
<td>Floods</td>
<td>Grade 2</td>
<td>13-Feb-23</td>
<td>1 255 786</td>
<td>1 255 786</td>
<td>186</td>
<td></td>
</tr>
</tbody>
</table>

Between 31 Jan and 12 Mar 2023, heavy rainfall has occurred in 10/11 Provinces of Mozambique, including rains from the Freddy cyclone system which has made landfall twice. As of 31 March, 1 255 786 people have been affected by Freddy's double landfall in Mozambique, in eight provinces including Zambezia, Sofala, Inhambane, Tete, Maputo City, Niassa, Gaza, and Manica. A total of 186 deaths have been reported, including 157 deaths in Zambezia which is by far the most affected province after Freddy's second passage. Nearly 200 870 people have been displaced and relocated across accommodation centres in Zambezia, Sofala, Tete, Inhambane, and Niassa.
According to Relief web, the United Nations World Food Programme (WFP) has welcomed a US$ 1.5 million contribution from the Government of Japan to provide emergency food and nutrition assistance to more than 52,000 people affected by the conflict in northern Mozambique. The contribution will help provide emergency in-kind food assistance to more than 25,800 displaced people. The funds will also help WFP to provide nutrition support to some 15,000 children under the age of five and 12,000 pregnant and nursing women.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Humanitarian crisis in Cabo Delgado</td>
<td>Protracted</td>
<td>1-Jan-20</td>
<td>1-Jan-20</td>
<td>15-Apr-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td></td>
</tr>
</tbody>
</table>

Cholera outbreak has been reported from Sofala and Zambezia provinces of Mozambique. From 14 September 2022 to 16 April 2023, a total of 26 841 cases and 123 deaths (CFR 0.5%) have been reported from 11 provinces and 33 districts.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
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<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
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<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>14-Sep-22</td>
<td>16-Nov-22</td>
<td>17-Apr-23</td>
<td>26 841</td>
<td>26 841</td>
<td>123</td>
<td>0.5%</td>
</tr>
</tbody>
</table>

The first COVID-19 confirmed case was reported in Mozambique on 22 March 2020. As of 19 April 2023, a total of 233 334 confirmed COVID-19 cases were reported in the country including 2 242 deaths.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Mpx</td>
<td>Grade 3</td>
<td>6-Oct-22</td>
<td>7-Oct-22</td>
<td>21-Apr-23</td>
<td>1</td>
<td>1</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

The case was diagnosed Wednesday, 12 October 2022 in Maputo City in a man, Health minister Armindo Tiago said. As of 21 April 2023, no additional case has been reported.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
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<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>7-Dec-18</td>
<td>1-Jan-21</td>
<td>19-Apr-23</td>
<td>6</td>
<td>6</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

According to the Global Polio Eradication Initiative, no case of circulating vaccine-derived poliovirus type 2 (cVDPV2) was reported this week. The number of cases in 2022 remains four. There were two cases reported in 2021.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Poliomyelitis (WPV1)</td>
<td>Grade 2</td>
<td>17-May-22</td>
<td>18-May-22</td>
<td>19-Apr-23</td>
<td>22</td>
<td>22</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

According to the Global Polio Eradication Initiative, Three cVDPV1 cases were reported in Zambezia bringing the number of 2022 cases to 22. There are three cases reported this year.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Namibia</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>12-Mar-23</td>
<td>171 222</td>
<td>171 222</td>
<td>4 090</td>
<td>2.4%</td>
</tr>
</tbody>
</table>

The first case of COVID-19 was detected in Namibia on the 14 March 2020. As of 12 March 2023, a total of 171 222 confirmed cases with 4 090 deaths have been reported.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>1-Feb-15</td>
<td>1-Feb-15</td>
<td>16-Dec-22</td>
<td>580 838</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

Humanitarian access in Niger has deteriorated because of growing insecurity in Diffa, Maradi, Tahoua, and Tillabéri regions. Niger hosts 580 838 people whose situation is of concern, of which 48% are internally displaced persons (IDPs), 43% refugees, 6% returnees, 2% asylum seekers and other people whose situation is worrying (mainly Burkinabés).

<table>
<thead>
<tr>
<th>Country</th>
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<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>19-Mar-20</td>
<td>19-Mar-20</td>
<td>18-Feb-23</td>
<td>9 512</td>
<td>9 512</td>
<td>315</td>
<td>3.3%</td>
</tr>
</tbody>
</table>

From 19 March 2020 to 18 February 2023, a total of 9 512 cases with 315 deaths have been reported across the country. A total of 9 082 recoveries have been reported from the country.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>Measles</td>
<td>Ungraded</td>
<td>6-Apr-22</td>
<td>1-Jan-22</td>
<td>18-Mar-23</td>
<td>423</td>
<td>0</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

From week 1 to week 11 (ending on 18 March 2023 ), 423 cases of measles including 50 confirmed cases have been reported in 30 districts from 8 regions. 8 % (6/72) of the districts of Niger notified at least one suspected case of measles during this reporting period.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>Meningitis</td>
<td>Ungraded</td>
<td>7-Dec-22</td>
<td>31-Oct-22</td>
<td>26-Mar-23</td>
<td>911</td>
<td>105</td>
<td>30</td>
<td>3.3%</td>
</tr>
</tbody>
</table>

A meningitis outbreak has been declared in the Dungass health district in the Zinder region. The first case was reported on 31 October 2022 and confirmed on 23 November 2022 with Neisseria meningitidis identified as the causative agent. As of 26 February 2023, 911 suspected cases of meningitis including 105 laboratory confirmed cases and 30 deaths (CFR 3.3%) were reported.

<table>
<thead>
<tr>
<th>Country</th>
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<th>Grade</th>
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<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Jan-20</td>
<td>1-Jan-21</td>
<td>22-Mar-23</td>
<td>31</td>
<td>33</td>
<td>0</td>
<td>0.0%</td>
</tr>
</tbody>
</table>

One cVDPV2-positive environmental sample was reported this week, collected on 23 January 2023 from Niamre. There are 15 cases reported in 2022. There were 18 cases reported in 2021.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Niger</td>
<td>Rift Valley fever</td>
<td>Ungraded</td>
<td>23-Feb-23</td>
<td>2-Feb-23</td>
<td>23-Feb-23</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>100.0%</td>
</tr>
</tbody>
</table>

Niger reported on 23 February 2023 a confirmed case of Rift Valley fever (RVF) following laboratory confirmation in a 38-year-old male resident of the village of Zangon Natsira in Zinder region.

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
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<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nigeria</td>
<td>Humanitarian crisis (Sahel region)</td>
<td>Grade 2</td>
<td>10-Oct-16</td>
<td>10-Oct-16</td>
<td>13-Jan-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The conflict in northeastern, northwestern, and north central Nigeria affects 9.3 million people, including 5.7 million children. Of these, more than 2.9 million people are internally displaced, while one million live in inaccessible areas. Humanitarian crises caused by protracted armed conflict, armed violence, and community clashes between farmers and herders have resulted in alarming food insecurity and malnutrition, compounded by epidemics and childhood illnesses in the context of deteriorating water, sanitation, and hygiene conditions.

<table>
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<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
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<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nigeria</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>1-Jan-23</td>
<td>29-Jan-23</td>
<td>429</td>
<td>17</td>
<td>4.0%</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

From 01 January to 29 January 2023, a cumulative 429 suspected cholera cases and 17 deaths (CFR 4%) have been reported from 24 Local Governmental Areas (LGAs) in 11 states, namely Cross River (242), Ebonyi (86), Niger (38), Abia (35), Ondo (10), Katsina (5), Sokoto (3), Zamfara (3), Osun (1) and Kano(1). Of the suspected cases since the beginning of the year, the age group 0 - 5 years is the most affected age group for males and females. Male represent 51% and female represents 49% of all cholera suspected cases.
The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 7 April 2023, a total of 266 675 confirmed cases with 259 953 recovered and 3 155 deaths have been reported.

Between week 19 of 2022 and week 9 of 2023, 1064 suspected cases of diphtheria were reported from 21 states in Nigeria. Kano (843), Yobe (86), Katsina (45), and Lagos (22) states reported the most cases (96%). A total of 62 deaths were recorded among all confirmed cases, with a CFR of 15.9%. Of suspected cases, 389 cases were confirmed, including 45 laboratory-confirmed and 343 clinically compatible. Both sexes are affected, and children aged 2-14 years account for the majority of confirmed cases (73%).

Since the beginning of 2023 to 26 March, 823 confirmed and four probable cases of Lassa fever with 144 deaths (CFR 17%), have been reported in 23 states and the Federal Capital Territory (FCT). Of all confirmed Lassa fever cases, 71% were reported from Ondo (32%), Edo (29%) and Bauchi (10%) States. The National Multi-sectoral Emergency Operations Centers for Lassa Fever have been activated at national level and in affected states to coordinate and strengthen the ongoing response activities.

From 1 October 2022 to 15 March 2023, 66 Local Government Areas (LGAs) from 21 out of 36 administrative states and the Federal Capital Territory (FCT) reported 628 suspected meningitis cases, including 160 confirmed cases and 52 deaths (CFR 8.3%). Males account for 62% of the suspected cases. Age group 5-14 years is the most affected age group. Neisseria meningitides serogroup C is the dominant strain among confirmed cases. 91% of all cumulative cases were from four (4) states – Jigawa (509 cases), Bauchi (232 cases), Zamfara (22 cases) and Oyo (14 cases).

From 1 January to 29 March 2023, Nigeria has reported 829 monkeypox confirmed cases with nine deaths.

According to Global Polio Eradication Initiative, four cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) were reported in Zamfara with one case being the first of 2023. There are now 47 cases detected in 2022.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 7 April 2023, a total of 266 675 confirmed cases with 259 953 recovered and 3 155 deaths have been reported.

From 15 January to 20 March 2023, 1200 confirmed cases and 11 deaths (CFR 0.9%) have been confirmed via RDT from Água Grande (818 67.3%), Mézôchi (181, 15.5%), Lobata (97, 8.3%), Cantagalo (47, 4.1%), Caué (23, 2.0%), Lemba (20, 1.6%), and RAP (14, 1.2%). During week 12, there was 10 new cases registered in the country. Água Grande's attack rate is by far the highest (95.1 per 10 000 inhabitants). Those aged 50-59 years are experiencing the highest attack rate at 78.3 cases per 10 000.

A total of 31 dengue confirmed cases including 10 males and 21 females have been reported in Thilogne (30) and Popenguine (1) districts from week 1 to week 12 of 2023. In 2022, 238 cases were recorded including 203 confirmed by PCR (85.3%) and 35 by IgM testing (14.7%). They were mostly concentrated in the first and last quarters of 2022. Eleven regions were affected. The Matam region had the highest number of cases (134 cases, 56.3%), followed by Dakar (41 cases, 17.2%), Kaffrine (17 cases, 7.1%) and Thiès (17 cases, 7.1%).

From epidemic week 1 to 12 of 2023 (ending 26 March 2023), 180 confirmed cases of COVID-19 were reported from 12 regions in Senegal, with the most affected regions being Diourbel (118 cases), Kédougou (12 cases), Tambacounda (12 cases), Louga (11 cases), and Thiès (7 cases). Most of the reported cases (151; 83.9%) were unvaccinated against measles.

Since the first COVID-19 confirmed cases were reported in Seychelles on 14 March 2020 as of 28 February 2023, a total of 50 937 cases have been confirmed, including 50 750 recoveries and 172 deaths have been reported.

From epidemic week 1 to 12 of 2023 (ending 26 March 2023), 180 confirmed cases of measles with no deaths were reported from 12 regions in Senegal, with the most affected regions being Diourbel (118 cases), Kédougou (12 cases), Tambacounda (12 cases), Louga (11 cases), and Thiès (7 cases). Most of the reported cases (151; 83.9%) were unvaccinated against measles.

The Government has declared on Monday 13 February 2023 a National State of Disaster to enable an intensive, coordinated response to the impact of floods that are affecting Mpumalanga, the Eastern Cape, Gauteng, KwaZulu-Natal, Limpopo, the Northern Cape, and Northwest provinces. Fatalities and missing people are reported. Material damages reported are ranging from flooded homes, vehicles swept away by floodwaters and overflowing dams and sewerage facilities, to the loss of basic infrastructure and damage to roads, bridges and a Limpopo hospital.

### Country Event Grade Date notified Start of reporting period End of reporting period Total cases Cases Confirmed Deaths CFR

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nigeria</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>27-Feb-20</td>
<td>27-Feb-20</td>
<td>7-Apr-23</td>
<td>266 675</td>
<td>266 675</td>
<td>3 155</td>
<td>1.2%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Diphtheria</td>
<td>Grade 1</td>
<td>1-Dec-22</td>
<td>1-Dec-22</td>
<td>4-Mar-23</td>
<td>1 064</td>
<td>389</td>
<td>62</td>
<td>5.8%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Lassa Fever</td>
<td>Ungraded</td>
<td>8-Jan-23</td>
<td>1-Jan-23</td>
<td>26-Mar-23</td>
<td>827</td>
<td>823</td>
<td>144</td>
<td>17.4%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Meningitis</td>
<td>Ungraded</td>
<td>1-Oct-22</td>
<td>1-Oct-22</td>
<td>5-Mar-23</td>
<td>628</td>
<td>157</td>
<td>52</td>
<td>8.3%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>31-Jan-22</td>
<td>1-Jan-22</td>
<td>29-Mar-23</td>
<td>829</td>
<td>829</td>
<td>9</td>
<td>1.1%</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Poliomyelitis (cVDPV2)</td>
<td>Grade 2</td>
<td>1-Jun-18</td>
<td>1-Jan-22</td>
<td>22-Mar-23</td>
<td>48</td>
<td>48</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>Rwanda</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>26-Feb-23</td>
<td>133 194</td>
<td>133 194</td>
<td>1 468</td>
<td>-</td>
</tr>
<tr>
<td>Senegal</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>7-Apr-20</td>
<td>6-Apr-20</td>
<td>2-Apr-23</td>
<td>6 500</td>
<td>6 500</td>
<td>79</td>
<td>1.2%</td>
</tr>
<tr>
<td>Senegal</td>
<td>Dengue</td>
<td>Grade 2</td>
<td>11-Apr-22</td>
<td>15-Apr-22</td>
<td>27-Mar-23</td>
<td>1 200</td>
<td>1 200</td>
<td>11</td>
<td>0.9%</td>
</tr>
<tr>
<td>Senegal</td>
<td>Dengue</td>
<td>Ungraded</td>
<td>14-Nov-22</td>
<td>1-Jan-23</td>
<td>26-Mar-23</td>
<td>31</td>
<td>31</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>Senegal</td>
<td>Measles</td>
<td>Ungraded</td>
<td>4-Jul-22</td>
<td>1-Jan-23</td>
<td>26-Mar-23</td>
<td>180</td>
<td>180</td>
<td>0</td>
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<tr>
<td>Seychelles</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>14-Mar-20</td>
<td>14-Mar-20</td>
<td>28-Feb-23</td>
<td>50 937</td>
<td>50 937</td>
<td>172</td>
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</tr>
<tr>
<td>Sierra Leone</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>31-Mar-20</td>
<td>27-Mar-20</td>
<td>13-Mar-23</td>
<td>7 763</td>
<td>7 763</td>
<td>125</td>
<td>1.6%</td>
</tr>
<tr>
<td>South Africa</td>
<td>Floods</td>
<td>Ungraded</td>
<td>14-Feb-23</td>
<td>13-Feb-23</td>
<td>10-Mar-23</td>
<td>-</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
</tbody>
</table>

The only event in this week is: COVID-19 in Senegal with 88 978 confirmed cases (78 %). 6 358 cases have been reported as recoveries.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 7 April 2023, a total of 266 675 confirmed cases with 259 953 recovered and 3 155 deaths have been reported.

The first case of COVID-19 was first detected in Nigeria on 27 February 2020. As of 7 April 2023, a total of 266 675 confirmed cases with 259 953 recovered and 3 155 deaths have been reported.
## Health Emergency Information and Risk Assessment

### WEEKLY BULLETIN ON OUTBREAKS AND OTHER EMERGENCIES - WEEK 17: 17-23 APRIL 2023

#### South Sudan
- **Cholera**: Grade 3 - 3-21 April 2023, 3-21 April 2023 - 11 - 11 - 1 - 9.1%
- **COVID-19**: Grade 3 - 5-21 April 2023 - 4 072 533 - 4 072 533 - 102 595 - 2.5%

#### South Africa
- **Measles**: Ungraded - 17-Oct-22 - 13-Oct-22 - 13-Apr-23 - 5 612 - 931 - 0 - 0.0%
- **Mpox**: Grade 3 - 23-Jun-22 - 23-Jun-22 - 21-Apr-23 - 5 - 5 - 0 - 0.0%

#### Tanzania
- **COVID-19**: Grade 3 - 5-21 March 2023 - 18 368 - 18 368 - 846 - 2.0%
- **Marburg virus disease**: Grade 2 - 21-Mar-23 - 21-Mar-23 - 23-Apr-23 - 9 - 9 - 6 - 66.7%

### Other Countries
- **South Sudan**: Drought/food insecurity - 18-Dec-20 - 5-Apr-21 - 16-Mar-23 - 6 310 000 - - -
- **South Sudan**: Cholera - 7-Mar-23 - 22-Feb-23 - 16-Apr-23 - 980 - 19 - 2 - 0.2%
- **South Sudan**: Measles - 15-Aug-16 - 15-Aug-16 - 23-Mar-23 - 9 400 000 - - -
- **South Sudan**: COVID-19 - 3-Feb-23 - 3-Feb-23 - 21-Apr-23 - 11 - 11 - 1 - 9.1%
- **South Sudan**: Hepatitis E - 3-Jan-19 - 1-Jan-19 - 19-Apr-23 - 4 130 - 104 - 32 - 0.8%

### Additional Information
- **South Sudan**: The food insecurity situation in South Sudan is projected to worsen during the lean season from April-Jul 2023, as some 7.8 million people (63% of the population) will likely face Crisis (IPC Phase 3) or worse acute food insecurity, with 43K people likely to be in Catastrophe (IPC Phase 5) acute food insecurity in Abyo. Food insecurity is projected to worsen in Unity State.
- **South Sudan**: Since July 2022, an estimated 1 million people were affected by severe flooding in 36 counties across South Sudan and in the southern part of the Abyei Administrative Area. Flood waters continue to block humanitarian access in Unity State, especially in the southern part of the state including Bentiu and into Jonglei State. An estimated 10 000 people are displaced by flooding in areas of Rubkona county.
- **South Sudan**: An estimated 9.4 million people including 2.2 million women, 4.9 million children, and 337K refugees are projected to need humanitarian assistance and protection services in 2023. Communities faced critical needs in January 2023 owing to the impact of multiple emergencies such as recurring subnational violence, food insecurity, flooding, inaccessibility, and public health emergencies. Floodwater levels remained high in Bentiu and Rubkona towns in Unity, and multiple locations in Jonglei and Upper Nile impeding livelihood activities, exposing people to waterborne diseases, and disrupting the provision of basic services. United Nations Mission in South Sudan brought the communities of Yorjak (Tijor in Juba County) and Jonkopp-Papaya (Rejong in Terekeka County) together for a peace and reconciliation conference resulting in nine concrete resolutions. Another peace agreement was between the Ngok Dinkas and Missirayas of the disputed Abyei Box was held from 20-23 March 2023 and was facilitated by UNISFA, IOM, FAO and partners. The main objective was to discuss challenges and expectations surrounding the movement of cattle in the area.

### Country Event Grade Date notified to WCO Start of reporting period End of reporting period Total cases Cases Confirmed Deaths CFR

<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
<th>End of reporting period</th>
<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>South Africa</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>3-Feb-23</td>
<td>3-Feb-23</td>
<td>21-Apr-23</td>
<td>11</td>
<td>11</td>
<td>1</td>
<td>9.1%</td>
</tr>
<tr>
<td>South Africa</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>5-Mar-20</td>
<td>5-Mar-20</td>
<td>7-Apr-23</td>
<td>4 072 533</td>
<td>4 072 533</td>
<td>102 595</td>
<td>2.5%</td>
</tr>
<tr>
<td>South Africa</td>
<td>Measles</td>
<td>Ungraded</td>
<td>17-Oct-22</td>
<td>13-Oct-22</td>
<td>13-Apr-23</td>
<td>5 612</td>
<td>931</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>South Africa</td>
<td>Mpox</td>
<td>Grade 3</td>
<td>23-Jun-22</td>
<td>23-Jun-22</td>
<td>21-Apr-23</td>
<td>5</td>
<td>5</td>
<td>0</td>
<td>0.0%</td>
</tr>
<tr>
<td>South Sudan</td>
<td>Drought/food insecurity</td>
<td>Grade 3</td>
<td>18-Dec-20</td>
<td>5-Apr-21</td>
<td>16-Mar-23</td>
<td>6 310 000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>South Sudan</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>7-Mar-23</td>
<td>22-Feb-23</td>
<td>16-Apr-23</td>
<td>980</td>
<td>19</td>
<td>2</td>
<td>0.2%</td>
</tr>
<tr>
<td>South Sudan</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>5-Apr-20</td>
<td>5-Apr-20</td>
<td>21-Mar-23</td>
<td>18 368</td>
<td>18 368</td>
<td>138</td>
<td>0.8%</td>
</tr>
<tr>
<td>South Sudan</td>
<td>Measles</td>
<td>Ungraded</td>
<td>15-Aug-16</td>
<td>15-Aug-16</td>
<td>23-Mar-23</td>
<td>9 400 000</td>
<td>-</td>
<td>-</td>
<td>-</td>
</tr>
<tr>
<td>South Sudan</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>5-21 March 2023</td>
<td>10-21 March 2023</td>
<td>10-21 March 2023</td>
<td>18 368</td>
<td>18 368</td>
<td>138</td>
<td>0.8%</td>
</tr>
<tr>
<td>South Sudan</td>
<td>Hepatitis E</td>
<td>Ungraded</td>
<td>3-Jan-19</td>
<td>1-Jan-19</td>
<td>19-Apr-23</td>
<td>4 130</td>
<td>104</td>
<td>32</td>
<td>0.8%</td>
</tr>
<tr>
<td>Tanzania, United Republic of</td>
<td>Cholera</td>
<td>Grade 3</td>
<td>21-Feb-23</td>
<td>15-Feb-23</td>
<td>13-Mar-23</td>
<td>72</td>
<td>23</td>
<td>3</td>
<td>4.2%</td>
</tr>
<tr>
<td>Tanzania, United Republic of</td>
<td>COVID-19</td>
<td>Grade 3</td>
<td>16-Mar-20</td>
<td>16-Mar-20</td>
<td>24-Mar-23</td>
<td>42 959</td>
<td>42 959</td>
<td>846</td>
<td>2.0%</td>
</tr>
<tr>
<td>Tanzania, United Republic of</td>
<td>Marburg virus disease</td>
<td>Grade 2</td>
<td>21-Mar-23</td>
<td>21-Mar-23</td>
<td>23-Apr-23</td>
<td>9</td>
<td>9</td>
<td>6</td>
<td>66.7%</td>
</tr>
</tbody>
</table>

On 21 March 2023, the Ministry of Health in Tanzania declared an outbreak of Marburg virus disease. As of 23 Apr 2023, nine cases and six deaths (CFR 66.7%) have been reported. All surviving cases have been discharged following recovery from the disease. All cases were reported from the Bukoba Rural district in Kagera Region. The majority of cases (66.7%) were male with an average age of 35 years. A total of 212 contacts, of which 208 have completed their monitoring period.
<table>
<thead>
<tr>
<th>Country</th>
<th>Event</th>
<th>Grade</th>
<th>Date notified to WCO</th>
<th>Start of reporting period</th>
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<th>Total cases</th>
<th>Cases Confirmed</th>
<th>Deaths</th>
<th>CFR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Tanzania, United Republic of</td>
<td>Measles</td>
<td>Ungraded</td>
<td>18-Aug-22</td>
<td>30-Jun-22</td>
<td>21-Feb-23</td>
<td>3,811</td>
<td>710</td>
<td>11</td>
<td>0.3%</td>
</tr>
</tbody>
</table>

Since June 2022, Tanzania is experiencing measles outbreak, cumulatively 3,811 suspected measles cases have been tested, resulting in cumulative 710 laboratory confirmed measles cases and 11 deaths (CFR 0.3%) and 313 laboratory confirmed rubella cases. Currently measles outbreak is ongoing in 12 councils of the following districts : Muleba, Tabora, Bagamoyo, Sumbawanga, Ngama, Chakechake, Sumbawanga, Chunya, Mtwara, Uvinza, Mpimbwe and Malinyi.

| Togo                         | COVID-19               | Grade 3 | 6-Mar-20            | 1-Mar-20                  | 26-Mar-23               | 39,443      | 39,443         | 290    | 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 26 March 2023, a total of 39,443 cases, including 290 deaths and 39,127 recovered cases, have been reported in the country.

| Togo                         | Meningitis            | Grade 2 | 15-Feb-23          | 15-Feb-23                 | 2-Apr-23                | 141         | 22             | 12     | 8.5%   |

On 15 February 2023, an outbreak of meningitis was officially declared by the Ministry of Health of Togo, in Otj South district of Savana region in the northern part of the country. The epidemic threshold has been crossed in week 6 (ending 12 February), with a cumulative of 105 suspected cases with 10 deaths (CFR 9.5%) reported between week 51 of 2022 (ending 25 December) and week 13 of 2023 (ending 2 April 2023). Twenty-two (22) cases have been laboratory-confirmed for Streptococcus pneumoniae. More than 80% of cases are aged above 10 years.

| Uganda                       | Poliomyelitis (cVDPV2) | Grade 2 | 18-Oct-19          | 13-Sep-19                 | 22-Feb-23               | 19          | 19             | 0      | 0.0%   |

No case was reported this week. There were 2 cases of circulating vaccine-derived poliovirus type 2 (cVDPV2) reported 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.

According to the Famine Early Warning Systems Network report covering projections from Oct 2022 to May 2023, below-average crop production and high food and non-food inflation are to drive acute food insecurity in Uganda. In Karamoja, significantly below-average crop production (estimated to be only around half of normal levels) for a third consecutive season and localized insecurity continue to disrupt typical livelihoods and reduce income-earning. According to the Integrated Food Security Phase Classification (IPC) initiative, Adjumani district is expected to be in IPC Phase 2 during the Aug 2022-Jan 2023 period. In the refugee hosting districts, all of them were classified in IPC Phase 1.

| Uganda                       | Drought/food insecurity | Grade 3 | 17-Feb-22          | 1-Jan-22                  | 31-Jan-23               | -           | -              | -      | -      |

The first COVID-19 confirmed case was reported in Uganda on 21 March 2020. As of 25 March 2023, a total of 170,510 confirmed COVID-19 cases with 3,632 deaths were reported.

| Uganda                       | Measles                | Ungraded | 8-Dec-22           | 2-Feb-23                  | 1-Feb-23                | 144         | 12             | 0      | 0.0%   |

A measles outbreak has been ongoing in Bunyoro Region of Uganda since 7 December 2022. As of 1 February 2023, a cumulative total of 144 suspect cases, 12 confirmed cases and no deaths have been reported since the onset of the outbreak.

| Uganda                       | Rift Valley fever      | Ungraded | 1-Mar-23           | 2-Mar-23                  | 17-Mar-23               | 20          | 19             | 4      | 20.0%  |

A total of 20 cases of Rift Valley Fever including 19 confirmed, one probable and four deaths have been reported for the ongoing outbreak in Uganda since January this year. Among deaths, one is probable and three confirmed. The affected District are two : Mbarara district and City.

| Uganda                       | Yellow Fever           | Ungraded | 7-Mar-22           | 2-Jan-22                  | 18-Apr-23               | 1,053       | 4              | 0      | 0.0%   |

From 1 January to 18 April 2023, a total of 1,053 have been reported. Four cases have been confirmed from the following districts Kasese (1), Buikwe (2), and Buvuma (1) classified by having positive PRNT results and no record of yellow fever vaccination.

| Zambia                      | Cholera                | Grade 3 | 24-Jan-23          | 20-Jan-23                 | 16-Apr-23               | 334         | 103            | 8      | 2.4%   |

Zambia’s index case was confirmed in Vubwi district on 21 January 2023 and was linked to the Mozambique outbreak. Cumulatively, 334 cases and eight deaths (CFR = 2.4%) have reported as of 16 April 2023. There are three districts in three provinces currently reporting cases; Chipata in Eastern Province, Nchelenge district in Luapula Province and Nsama and Mpulungu districts, the cholera hotspot area in Northern Province.

| Zambia                      | COVID-19               | Grade 3 | 18-Mar-20          | 18-Mar-20                 | 18-Mar-20               | 343,803     | 343,803         | 4,058  | 1.2%   |

The first COVID-19 confirmed case was reported in Zambia on 18 March 2020. As of 21 April 2023, a total of 343,803 confirmed COVID-19 cases were reported in the country including 4,058 deaths.

| Zambia                      | Measles                | Ungraded | 13-Jun-22          | 13-Jun-22                 | 16-Apr-23               | 2,137       | 557            | 31     | 1.5%   |

A measles outbreak continues to evolve in Lusaka, North-western and Southern provinces affecting several districts. Cumulatively, the provinces have recorded 2,137 measles cases and 31 deaths as of 5 February 2023. WHO is supporting the Ministry of Health investing other cases with similar symptoms.

| Zimbabwe                    | Anthrax                | Ungraded | 20-Jan-20          | 1-Jan-22                  | 19-Mar-23               | 491         | 88             | 0      | 0.0%   |

The anthrax outbreak is ongoing in Zimbabwe. In February 2023, four new cases have been reported from Gokwe North district. As of 5 March 2023, the cumulative figures for anthrax are 481 suspected cases and 0 deaths.

| Zimbabwe                    | Cholera                | Grade 3 | 23-Feb-23          | 12-Feb-23                 | 27-Mar-23               | 237         | 27             | 2      | 0.8%   |

Since the beginning of the outbreak on 12 February 2023 and as of 27 March, 237 suspected cases and 27 confirmed cases have been reported from eight of the country’s ten provinces, with two associated deaths (CFR 0.8%).
The first COVID-19 confirmed case was reported in Zimbabwe on 20 March 2020. As of 14 April 2023, a total of 264,613 confirmed COVID-19 cases were reported in the country including 5,685 deaths.

Zimbabwe has recorded 384 suspected cases of typhoid since 17 October 2022. Of these, 69 cases were reported in the last epi week. The cases have been reported mainly from Harare Province and Bulawayo (6 cases) which are the largest cities in the country. Harare has heightened surveillance and has responded to the outbreak by rolling out TCV vaccine to the affected areas/suburbs.

From 23 June 2022 to 17 January 2023, eight cases of Crimean-Congo haemorrhagic fever (CCHF) have been confirmed in Uganda from Kanungu (2), Masaka (2), Amuru (1), Kaberamaido (1), Nakasongola (1) and Rakai (1) districts with three deaths. The last confirmed case was registered on 4 December 2022.
Health Emergency Information and Risk Assessment

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Data sources
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.