TITLE:	**UPDATE ON MPOX (MPX) IN NIGERIA**
SERIAL NUMBER:	**7**
EPI-WEEK:	**7**
DATE:	**February 19, 2023**

Table 1 – Key Indicators

Reporting Year	Reporting week	Suspected cases	Confirmed cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2023 Current	Week 7	53	5	0	0.0	3	5
2023 Cumulative	Week 1- 7	343	43	1	2.3	13 +FCT	27
2022 Cumulative	Week 1- 7	8	4	0	0.0	4	4

Highlights

- In week 7, the number of new suspected cases is 53, compared with 27 cases reported in week 6, 2023. These were reported from thirteen (13) states and FCT – Ogun (18), Lagos (8), Plateau (7), Imo (6), Borno (3), FCT (3), Abia (2), Adamawa (2), Delta (1), Ekiti (1), Ondo (1) and Oyo (1) across 26 Local Government Areas. Since week 1 of 2023, thirteen (13) states and FCT have recorded at least one confirmed Mpox case across thirty-four (34) Local Government Areas. Since 2023, the States with the highest burden are Lagos (34.8%), Abia (11.6%), Imo (9.3%), Edo (6.9%) and FCT (6.9%), contributing 69.8% of confirmed cases.
- The number of confirmed cases is five (5) in week 7, 2023, compared with six (6) confirmed cases reported in week 6, 2023.
- No death was recorded in week 7, with a CFR of 0.0% same as CFR of 0.0% that was reported in week 6, 2023.
- In the reporting week, no predominant age group for Mpox confirmed cases was noted. Since 2017, the predominant age group for Mpox confirmed cases is 21-40 years. In the reporting week, In the reporting week, the male:female ratio among confirmed cases is 5:0, only males were affected (Figure 3).
- Overall, since the re-emergence of Mpox in September 2017, 2978 suspected cases have been reported from 36 states and FCT in the country. Of these 2978 suspected cases, 1031 (34.6%) were confirmed (with males predominantly affected) from 34 states and FCT. Sixteen (16) deaths have been recorded since the re-emergence in 2017.
- The National Mpox multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels.

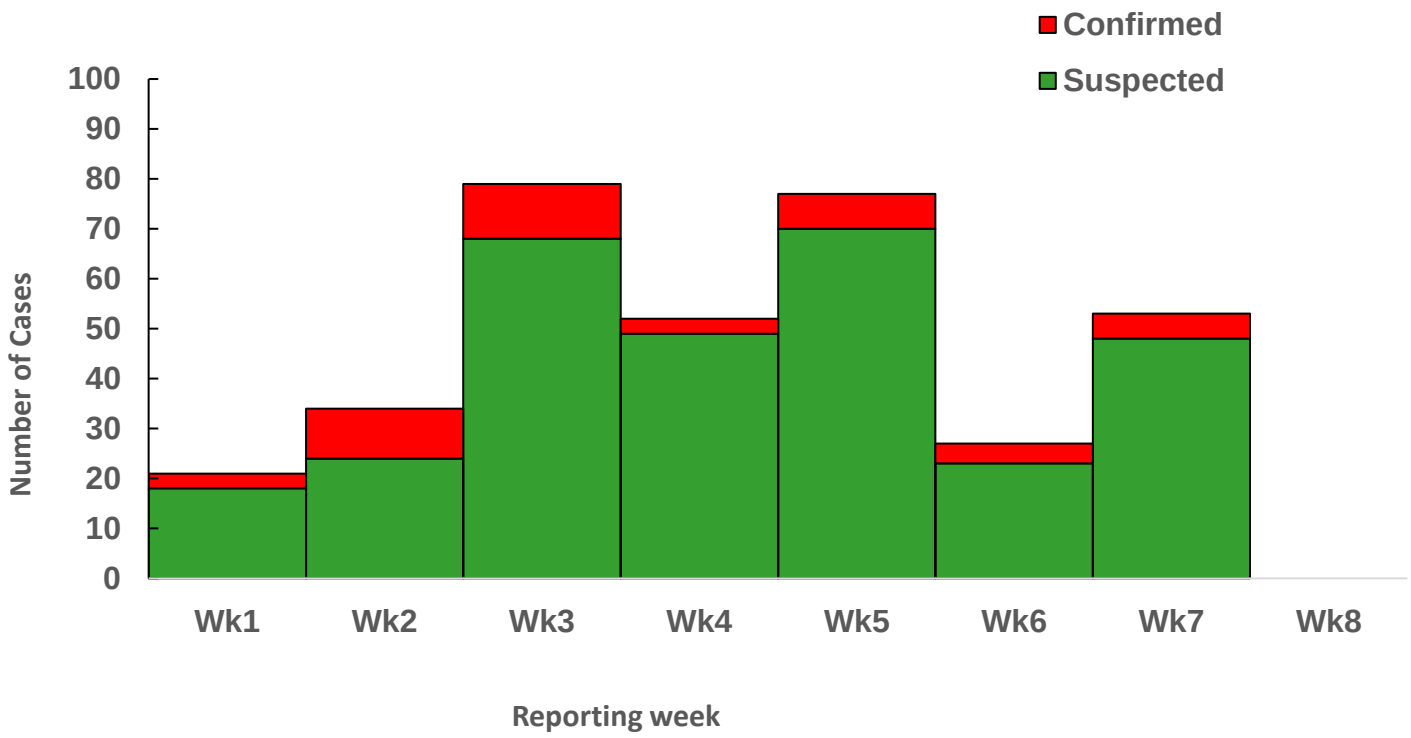


Figure 1: Epidemic curve of suspected and confirmed Mpox cases January 2023 till date.

Figure 2: Age and sex distribution of Nigeria confirmed monkeypox cases Epi week 7, 2023.

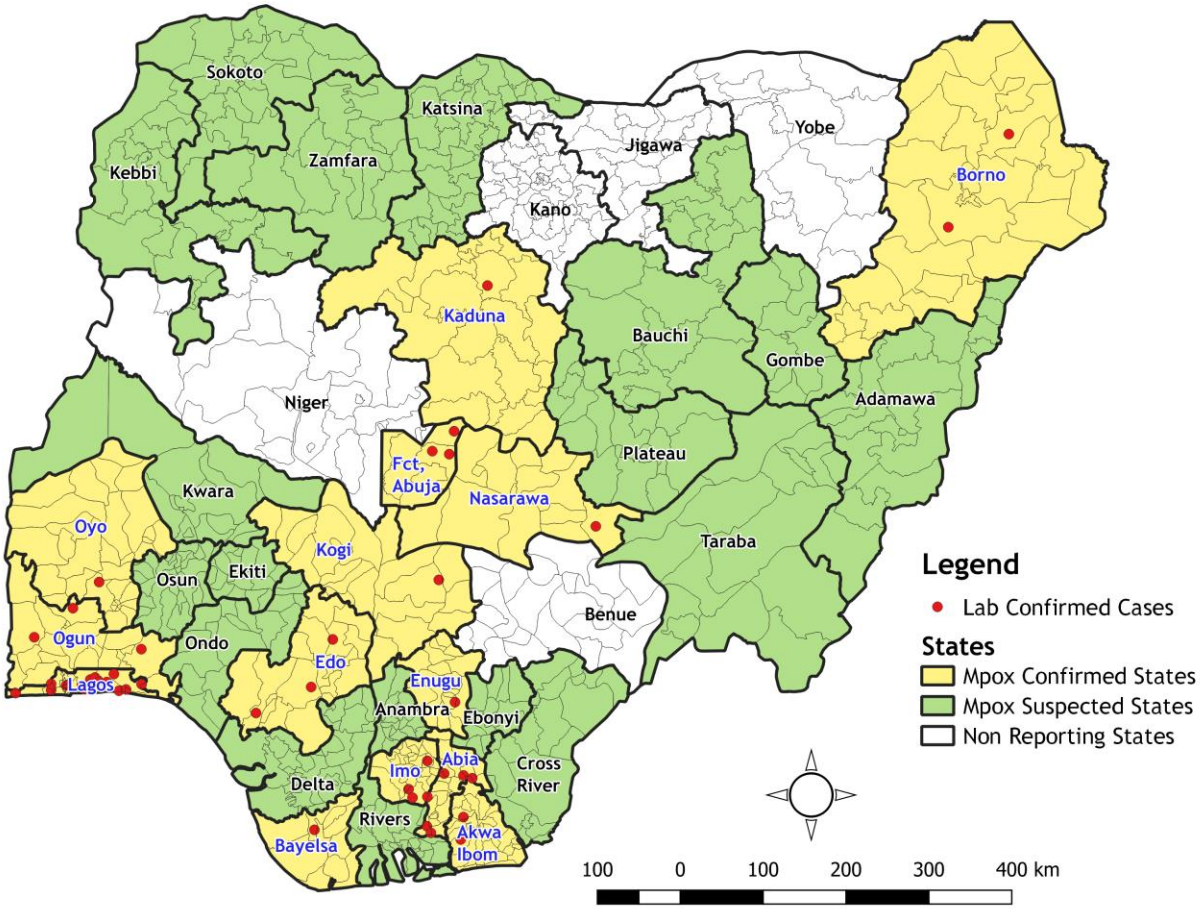
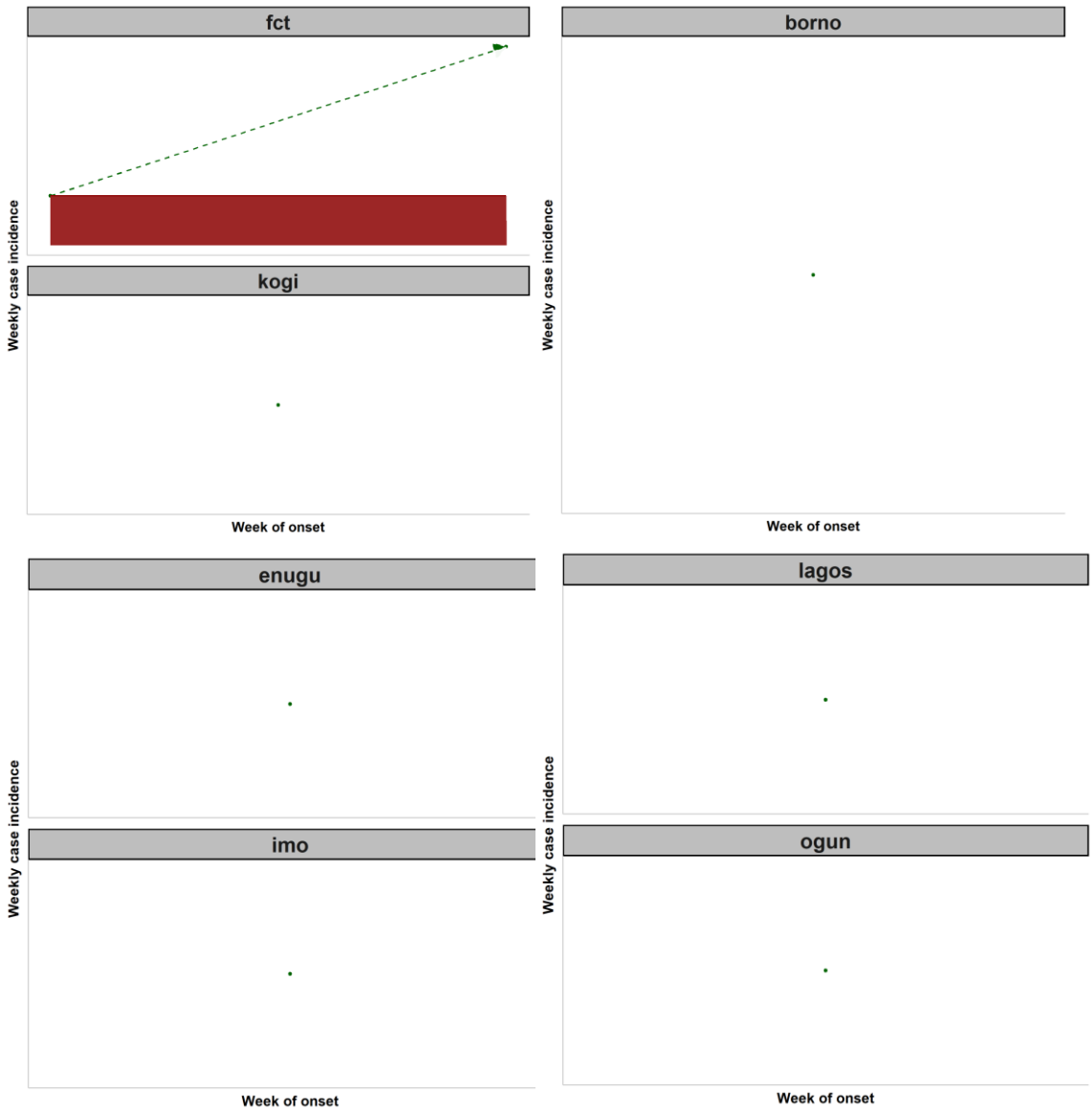


Figure 3: Map of Nigeria showing States with suspected and confirmed Mpox Cases from January 2023 till date.

Figure 4: Area chart for States showing the trend in suspected and confirmed Mpox cases in highest burden States by geopolitical zone from January 2023 till date



LEGEND

Suspected — Indicates trend: increase or decrease

Confirmed — Shows volume of confirmed cases

At least one CONFIRMED case reported

- South-West States
  - Lagos
  - Ogun
- North Central States
  - Kogi

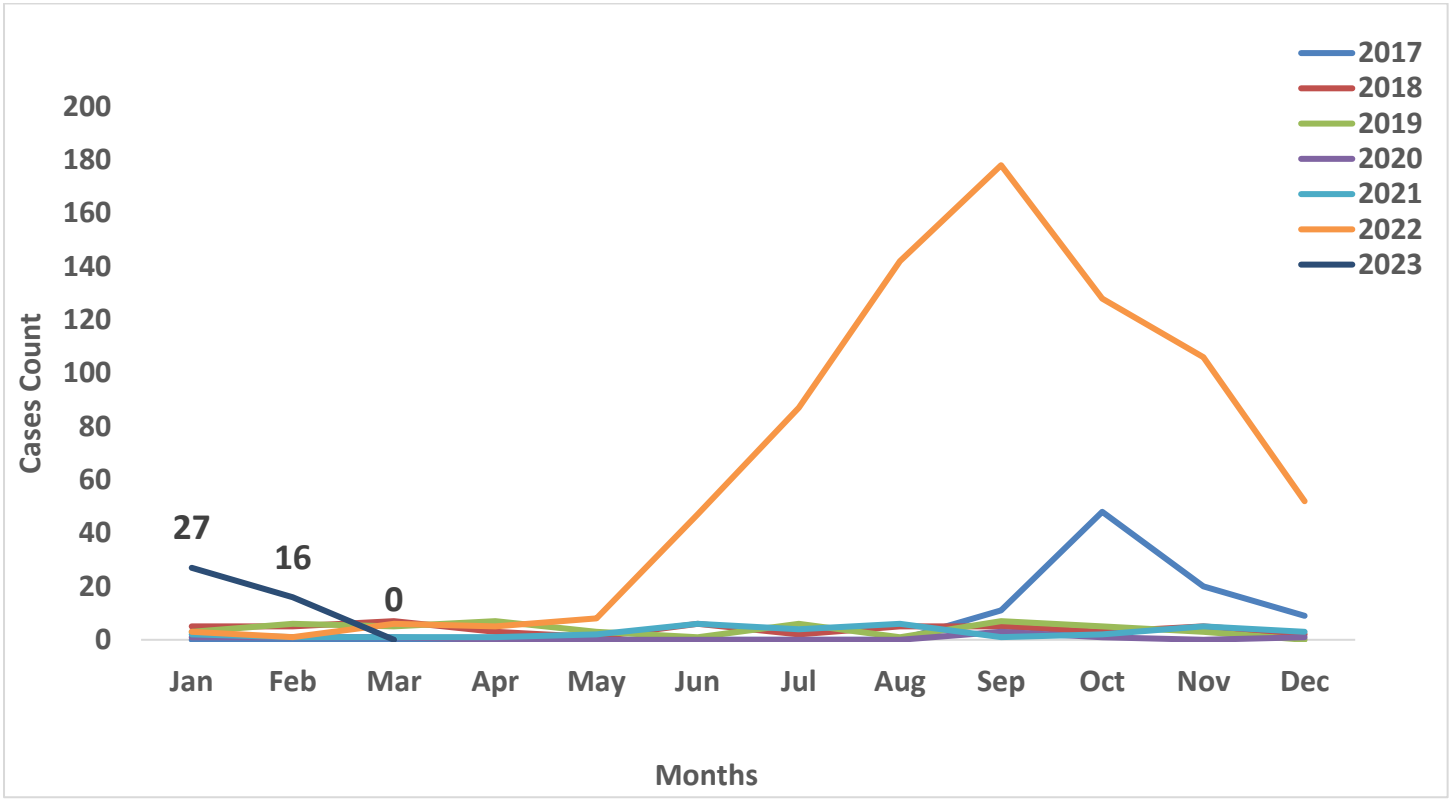


Figure 5: Nigeria confirmed Mpox cases by the year of incidence- September 2017 to 19th February 2023.

Table 2: Age distribution of cumulative number of confirmed Mpox cases September 2017 – 19th February 2023

Age Group	2017	2018	2019	2020	2021	2022	2023	Total
0-10 Years	7	5	1	0	1	125	6	145
11-20 Years	12	4	1	0	4	123	3	147
21-30 Years	34	13	13	4	10	187	12	273
31- 40 Years	26	17	22	4	13	205	11	298
41-50 Years	9	10	9	0	5	89	9	131
> 50 Years	0	0	1	0	1	33	2	37
Total	**88**	**49**	**47**	**8**	**34**	**762**	**43**	**1031**

Table 3: Nigeria confirmed Mpox cases by State, September 2017 – 19th February 2023

S/N	State	2017	2018	2019	2020	2021	2022	2023	Total
1	Lagos	4	1	15	4	6	188	15	233
2	Rivers	25	14	7	1	5	37	0	89
3	Bayelsa	19	11	7	0	6	45	1	89
4	Abia	1	2	0	0	0	58	5	66
5	Delta	3	6	10	1	9	31	0	60
6	Imo	5	2	1	0	0	45	4	57
7	Ogun	0	0	0	0	1	40	3	44
8	Ondo	0	0	0	0	0	40	0	40
9	Edo	4	1	1	0	4	27	3	40
10	FCT	5	0	0	0	1	25	3	34
11	Anambra	0	1	1	0	0	25	0	27
12	Cross River	9	3	1	0	1	12	0	26
13	Kwara	0	0	0	0	0	21	0	21
14	Plateau	0	2	0	1	0	16	0	19
15	Akwa Ibom	6	0	1	0	0	12	2	21
16	Nasarawa	1	1	0	0	0	17	1	20
17	Adamawa	0	0	0	0	0	16	0	16
18	Oyo	1	3	2	0	0	10	1	17
19	Kaduna	0	0	0	0	0	15	1	16
20	Ebonyi	0	0	0	1	0	12	0	13
21	Benue	2	0	0	0	0	10	0	12
22	Borno	0	0	0	0	0	11	2	13
23	Enugu	1	2	1	0	0	4	1	9
24	Katsina	0	0	0	0	0	8	0	8
25	Taraba	0	0	0	0	0	7	0	7
26	Kano	0	0	0	0	0	7	0	7
27	Gombe	0	0	0	0	0	6	0	6
28	Kogi	0	0	0	0	0	5	1	6
29	Osun	0	0	0	0	0	5	0	5
30	Ekiti	2	0	0	0	0	1	0	3
31	Niger	0	0	0	0	1	1	0	2
32	Kebbi	0	0	0	0	0	2	0	2
33	Bauchi	0	0	0	0	0	1	0	1
34	Zamfara	0	0	0	0	0	1	0	1
35	Yobe	0	0	0	0	0	1	0	1
	Grand Total	**88**	**49**	**47**	**8**	**34**	**762**	**43**	**1031**

Response activities

Pillar	Activities to date	Next steps
Coordination	• Coordinate weekly Mpox meetings • Aid the implementation of the approved Incident Action Plan (IAP) • Reached out to eight (8) states following a gap assessment • An overview of the 2023 Mpox medical countermeasures quantification workshop was presented	• Continuous engagement with Kaduna, Imo Abia and Gombe States on incomplete case investigation forms
Surveillance	• Fifty three (53) suspected cases were reported across ten(10) states and the FCT • All confirmed cases (5) had co-infection with Varicella-zoster virus (VZV) • A key information in the case investigation forms (date of symptoms onset) was missing from two reporting states	• Liaise with all reporting states to update details of follow-up contact on SORMAS • Engage with Adamawa and Plateau States to update missing detail on the case investigation forms
Laboratory	• Sample positivity rate for Mpox is 9% and 74% for Varicella-zoster virus (VZV) • 42% of samples meet overall turnaround (time sample collected from states to time result shared to states) • Poor sample management observed from two states (Plateau and Imo)	• Train states on appropriate Mpox sample collection techniques, sample packaging and transport
Case management	• Symptoms of fatigue, general malaise, conjunctivitis, fever and vesiculopustular rash were seen in some Mpox cases • Whereas co-infection with VZV, fever, rashes and liver failure were reported from the preliminary mortality report.	• Follow up with states on clinical presentation of Mpox cases
Risk communication	• Ongoing dissemination of Mpox SBCC materials • Airing of Mpox jingles in Lagos and FCT with the support of BA-N • Mpox content development for the animal sector with the support of BA-N and FAO	• Continue to engage with the public via NCDC social media with key messages on Mpox
Research	• Planning a workshop to finalise the protocol development for an Mpox clinical trial	•

Notes on this report

Data Source

Information for this disease was case-based data retrieved from the National Mpox Emergency Operations Centre.

Case definitions

Suspected case

- An acute illness with fever >38.3°C, intense headache, lymphadenopathy, back pain, myalgia, and intense asthenia followed one to three days later by a progressively developing rash often beginning on the face (most dense) and then spreading elsewhere on the body, including soles of feet and palms of the hand

Probable case

- A case that meets the clinical case definition is not laboratory-confirmed but has an epidemiological link to a confirmed case

Confirmed case

- A clinically compatible case that is laboratory confirmed

Contact

- Any person who has been in direct or indirect contact with a confirmed case since the onset of symptoms, i.e., contact with skin lesions, oral secretions, urine, faeces, vomitus, blood, sexual contact, sharing a common space (anyone who has been in proximity with or without physical contact with a confirmed case)

Calculations

- Case Fatality Rate (CFR) for this disease is reported for confirmed cases only.