

# SITUATION REPORT

## Nigeria Centre For Disease Control (NCDC)

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<b>TITLE:</b>	<b>MAY 2022 MONKEYPOX SITUATION REPORT IN NIGERIA</b>
<b>SERIAL NUMBER:</b>	<b>06</b>
<b>EPI-WEEK:</b>	<b>21</b>
<b>DATE:</b>	<b>May 31, 2021</b>

Key Indicators	Number
Total cases reported 2017-2021	446
Total Deaths 2017-2021	8
Total Confirmed cases in 2017	88
Total Confirmed cases in 2018	49
Total Confirmed cases in 2019	47
Total Confirmed cases in 2020	8
Total Confirmed cases in 2021	7

### EPIDEMIOLOGICAL

#### SUMMARY

- Since September 2017, Nigeria has continued to report sporadic cases of monkeypox. The National Technical Working Group for monkeypox has been monitoring cases and ensuring preparedness.
- This situation report details monkeypox cases and deaths from September 2017 till May 2021
- From September 2017 to May 2021, a total of 446 suspected monkeypox cases have been reported from 30 states
- Of the reported cases, 199 (44.6%) have been confirmed in 18 states – Abia (3), Akwa Ibom (7), Anambra (2), Bayelsa (39), Benue (2), Cross River (13), Delta (22), Ebonyi (1), Edo (7), Ekiti (2), Enugu (4), FCT (5), Imo (8), Lagos (25), Nasarawa (2), Oyo (6), Plateau (3) and Rivers (48).
- A total of 8 deaths have also been recorded (CFR= 4.02 %) in 6 States – Cross River (1), Edo (2), FCT (1), Imo (1), Lagos (2) and Rivers (1)
- In 2021, a total of 32 suspected cases have been reported from January and May. Of the suspected cases, 7 were confirmed from 5 states Delta (2), Bayelsa (2), Lagos (1), Edo (1), Rivers (1) and no deaths were recorded
- There has been an improvement in the awareness and knowledge of health care workers and the public about monkeypox compared to the situation in 2017



Figure 1: Epidemic curve of suspected & confirmed monkeypox (MPX) cases Jan. 2021 till date

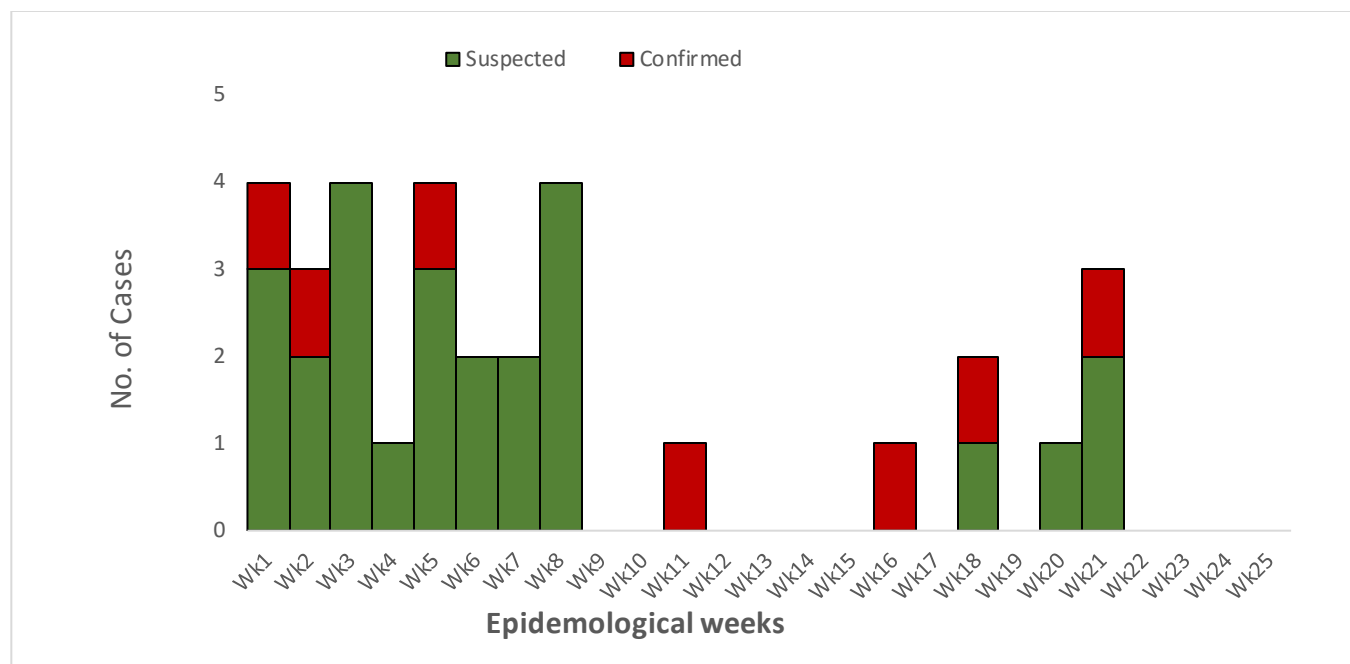


Table 2: Nigeria confirmed Monkeypox cases by state, 2017-2021

State	2017	2018	2019	2020	2021	Total
Rivers	25	14	7	1	1	48
Bayelsa	19	11	7	0	2	39
Lagos	4	1	15	4	1	25
Delta	3	6	10	1	2	22
Cross River	9	3	1	0	0	13
Imo	5	2	1	0	0	8
Akwa Ibom	6	0	1	0	0	7
Oyo	1	3	2	0	0	6
Edo	4	1	1	0	1	7
FCT	5	0	0	0	0	5
Enugu	1	2	1	0	0	4
Abia	1	2	0	0	0	3
Plateau	0	2	0	1	0	3
Nasarawa	1	1	0	0	0	2
Benue	2	0	0	0	0	2
Anambra	0	1	1	0	0	2
Ekiti	2	0	0	0	0	2
Ebonyi	0	0	0	1	0	1
<b>Grand Total</b>	<b>88</b>	<b>49</b>	<b>47</b>	<b>8</b>	<b>7</b>	<b>199</b>

Figure 2: Nigeria confirmed monkeypox cases by the year of incidence- 2017-21

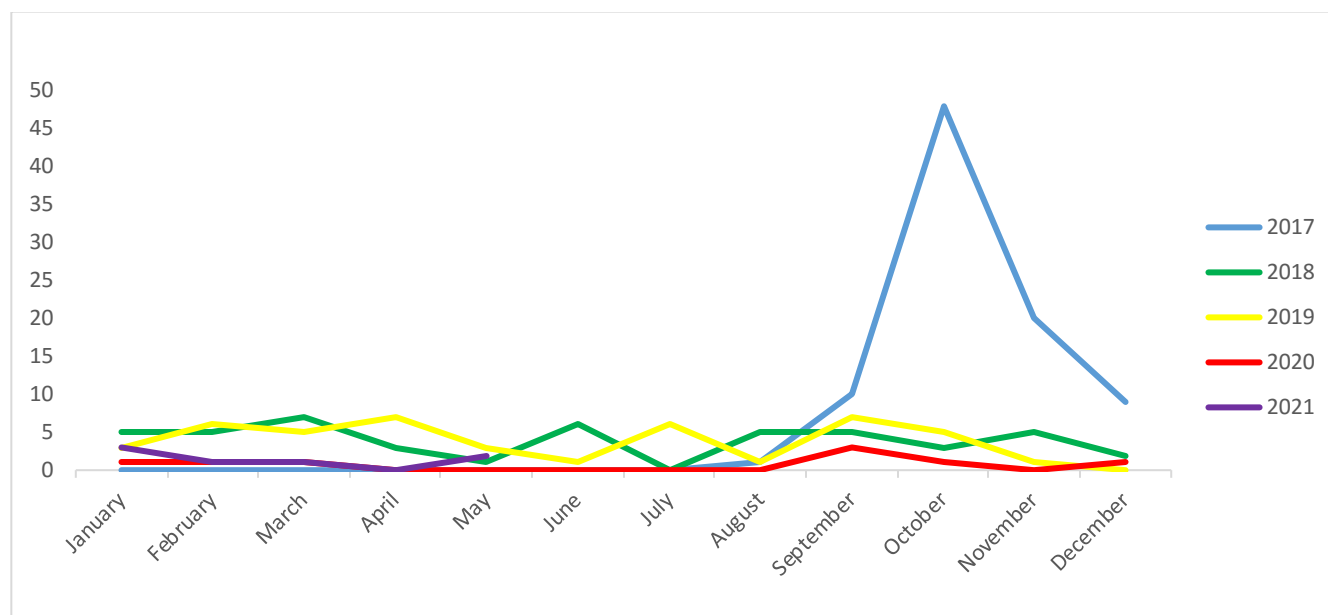
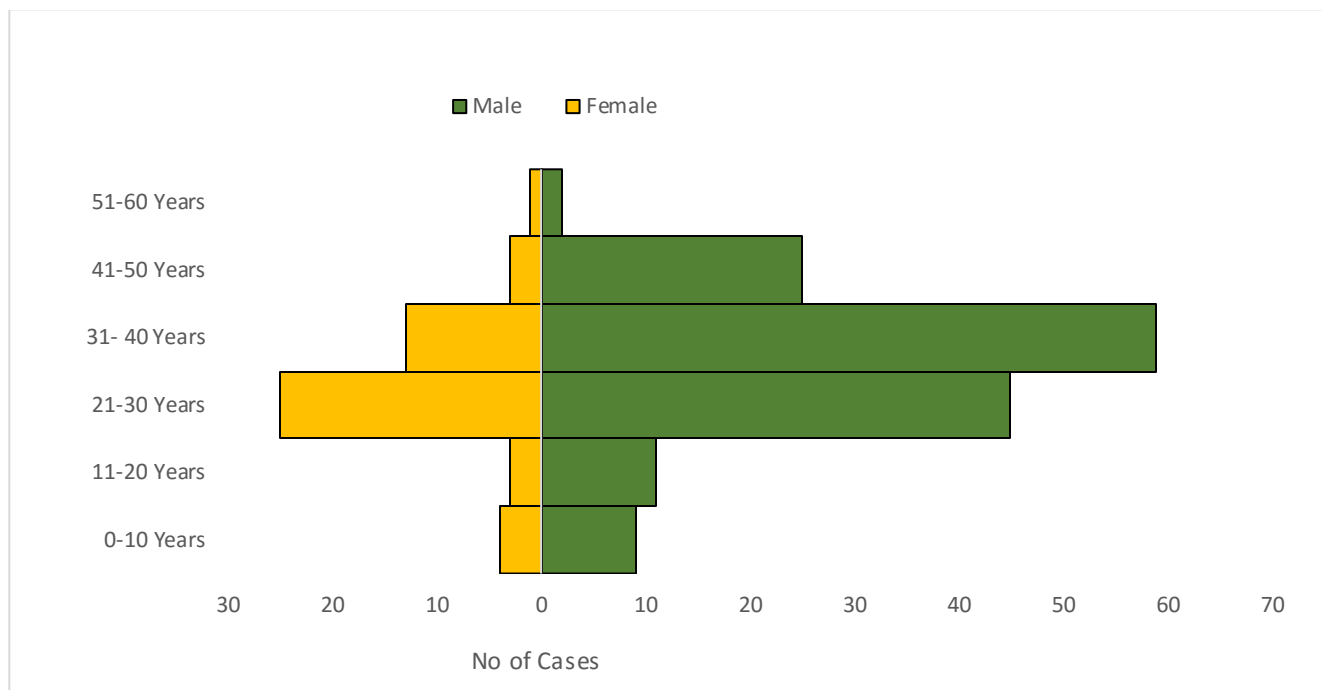


Table 3: Age distribution of confirmed Monkeypox cases 2017-21

Age Group	2017	2018	2019	2020	2021	Total
0-10 Years	7	5	1	0	0	14
11-20 Years	12	4	1	0	0	17
21-30 Years	34	13	13	4	3	64
31- 40 Years	26	17	22	4	3	68
41-50 Years	9	10	9	0	1	29
51-60 Years	0	0	1	0	0	1
<b>Total</b>	<b>88</b>	<b>49</b>	<b>47</b>	<b>8</b>	<b>7</b>	<b>199</b>

Figure 1: Age and sex distribution of Nigeria confirmed monkeypox cases 2017-21



### Challenges to MPX surveillance and possible reasons for non-reporting

1. Weakened monkeypox surveillance across the country due to COVID-19 pandemic
2. Lack of dedicated treatment centres in states
3. Low utilisation of health facilities by MPX patients due to stigmatisation, cost, and the low the mortality rate. Low sample collection rate in reporting states
4. There were reports of undocumented cases, and some were also lost to follow-up during the pandemic due to the difficulty in investigating cases and the refusal of some patients to visit the hospital due to the cost of care.

### KEY ACTIVITIES

#### Coordination

1. Monkeypox activities are being coordinated by the Multi Agency MPX Technical Working Group
2. Off-site support is being provided to states

#### Epidemiology/Surveillance

1. Phase 2 of enhanced surveillance ongoing in Rivers, Delta and Bayelsa States.
2. The 1<sup>st</sup> phase lasted for three months, and there was improved reporting

3. Engagement of community and LGA surveillance officers to support the state and LGA surveillance team

**Next steps:**

1. Continue phase 2 enhanced surveillance in the three states
2. Weekly follow-up calls/emails to states surveillance team and MPX treatment facilities
3. Continue onsite/offsite support to states