



Cholera Situation Report

MONTHLY EPIDEMIOLOGICAL REPORT 01

Epidemiological week 1 - 4: (02 January 2023 to 29 January 2023)

Key Points

Table 1: Summary of current week (Epi week 4, 2023)

Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
145	3	2.1%	5	8

Months	Epi- Week	Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
January	1 - 4	404	17	4.2%	11	23

Table 2: Summary of monthly reported cases (Epi week 1- 4)

Table 3: Cumulative summary from Epi week 1 - 4, 2023

Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
429	17	4.0%	11	24

Week 4 Highlights

- Eleven states have reported suspected cholera cases in 2023. These are Abia, Bayelsa, Benue, Cross River, Ebonyi, Kano, Katsina, Niger, Ondo, Osun, Sokoto and Zamfara
- In the reporting month, 11 states reported 429 suspected cases – Cross River (242), Ebonyi (86), Niger (38), Abia (35), Ondo (10), Katsina (5), Sokoto (3), Zamfara (3), Osun (1) and Kano (1)
- In the reporting week, Cross River (96), Ebonyi (41), Abia (5), Zamfara (2) and Ondo (1) reported 145 suspected cases
- Cross River and Ebonyi states account for 95% of 145 suspected cases reported in week 4
- During the reporting week, Rapid Diagnostic Test (RDT) was conducted in Cross River 21(29% positive), Abia 5(20% positive) and Ondo 1(0% positive)
- Six stool culture test was conducted in Cross River 6(0% positive) in epi week 4
- Of the cases reported, there was 3 deaths with a weekly case fatality ratio (CFR) of 2.1%
- National multi-sectoral Cholera TWG continues to monitor response across states

- As of 29th January 2023, a total of 429 suspected cases including 17 deaths (CFR 4.0%) have been reported from 11 states
- Of the suspected cases since the beginning of the year, age group 0 - 5 years is the most affected age group for male and female
- Of all suspected cases, 51% are males and 49% are females
- Six states – Cross River (242 cases), Ebonyi (86 cases), Niger (38 cases), Abia (35 cases), and Ondo (10 cases) account for 96% of all cumulative cases
- Fifteen LGAs across nine states Ebonyi (4), Cross River (3), Ondo (2), Bayelsa (1), Abia (1), Katsina (1), Sokoto (1) Niger (1) and Zamfara (1), reported more than 5 cases each this year

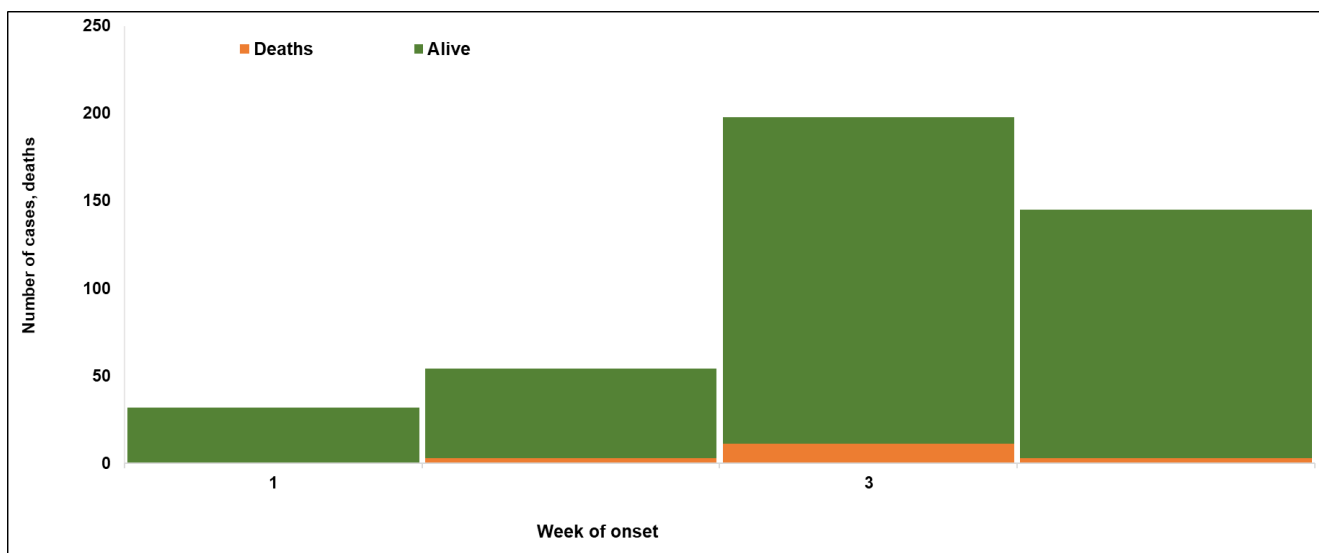


Figure 1: National Epidemic curve of weekly reported Cholera cases, week 1 to week 4, 2023

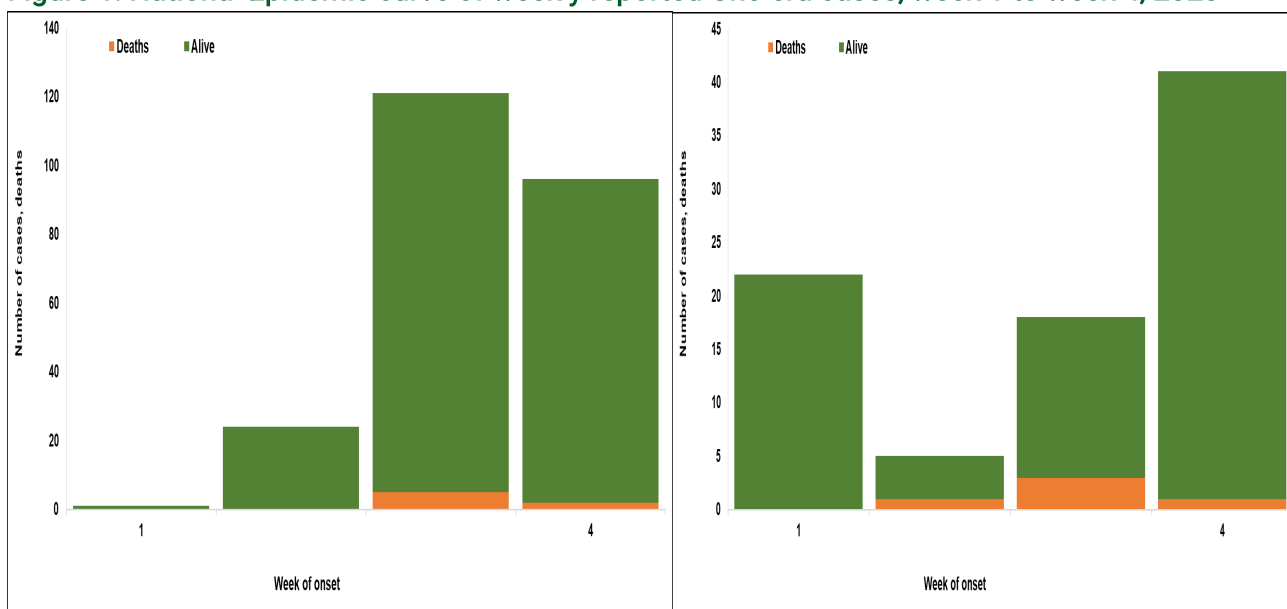


Fig 2: Cross River epidemic curve, week 1 to week 4, 2023

Fig 3: Ebonyi epidemic curve, week 1 to week 4, 2023

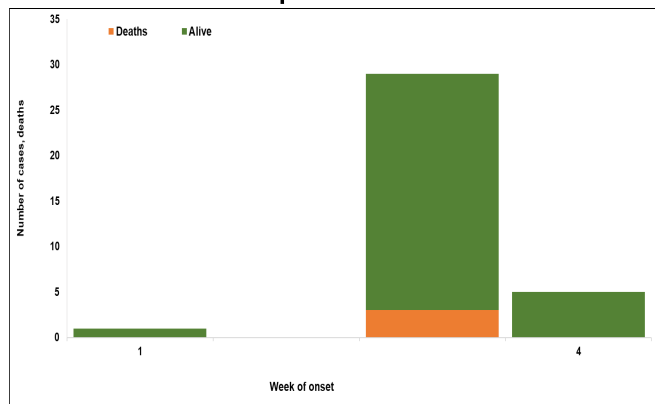


Fig 5: Zamfara epidemic curve, week 1 to week 4, 2023

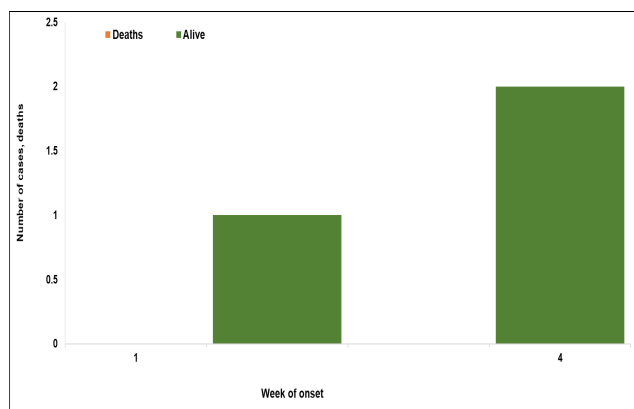


Fig 4: Abia epidemic curve, week 1 to week 4, 2023

Table 4: Top 10 states in cumulative cases

No	State	Cases	Percent of cumulative cases	Cumulative % of total cases
1	Cross River	242	56%	56%
2	Ebonyi	86	20%	76%
3	Niger	38	9%	85%
4	Abia	35	8%	93%
5	Ondo	10	2%	95%
6	Katsina	5	1%	96%
7	Bayelsa	5	1%	97%
8	Zamfara	3	1%	98%
9	Sokoto	3	1%	99%
10	Kano	1	1%	100%
Total		428	100%	

Table 5: Top 15 Local Government Areas (LGAs) in cumulative cases

No	LGA	State	Cases	% of cumulative cases	Cumulative %
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1	Obubra	Cross River	194	45%	45%
2	Ikwo	Ebonyi	49	11%	56%
3	Abi	Cross River	41	10%	66%
4	Mokwa	Niger	38	9%	75%
5	Umuahia North	Abia	34	8%	83%
6	Afikpo North	Ebonyi	19	4%	87%
7	Onicha	Ebonyi	11	3%	90%
8	Ishielu	Ebonyi	7	2%	92%
9	Biase	Cross River	7	2%	94%
10	Charanchi	Katsina	5	1%	95%
11	Akure North	Ondo	3	1%	96%
12	Yabo	Sokoto	3	1%	97%
13	Ose	Ondo	3	1%	98%
14	Southern Ijaw	Bayelsa	3	1%	99%
15	Gusau	Zamfara	2	1%	100%
Total			425	100%	

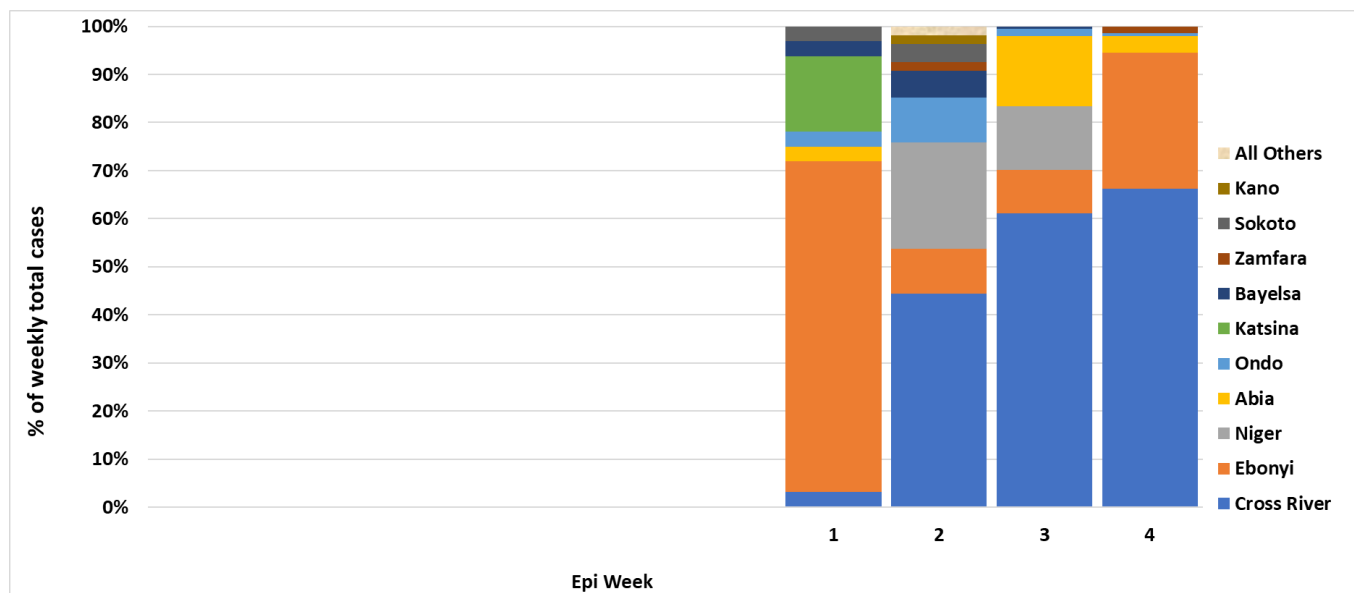


Figure 6: Percentage contribution of weekly cases by state in recent 4 weeks, week 1 - 4, 2023

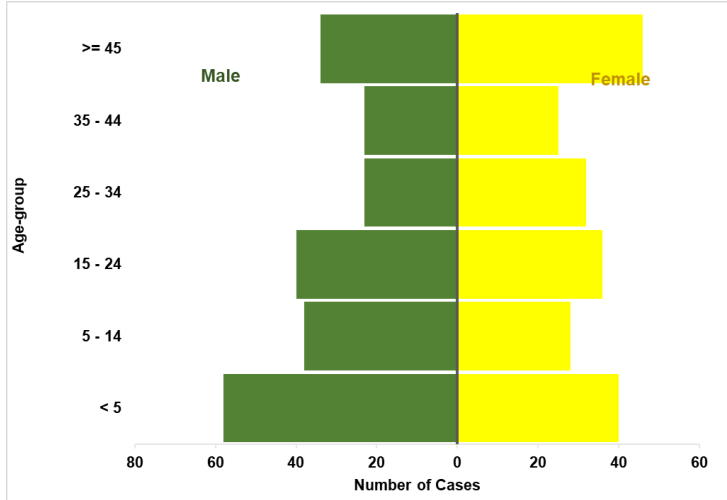


Figure 9. Age-Sex Pyramid for cumulative Cholera Cases, week 1-4 , 2023: N=429

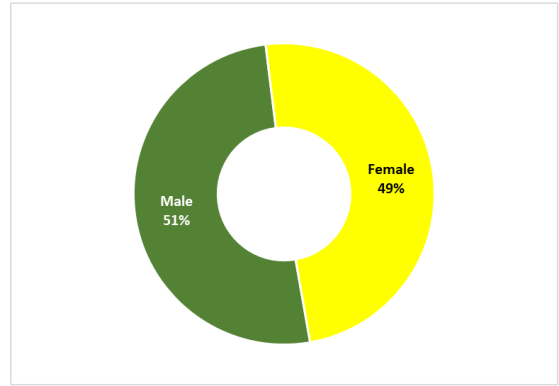


Figure 10. Sex disaggregation for cumulative Cholera cases, week 1-4 , 2023: N=429

Figure 7: Age – Sex Pyramid and Sex Aggregation for cholera cases week 1- 4, 2023.

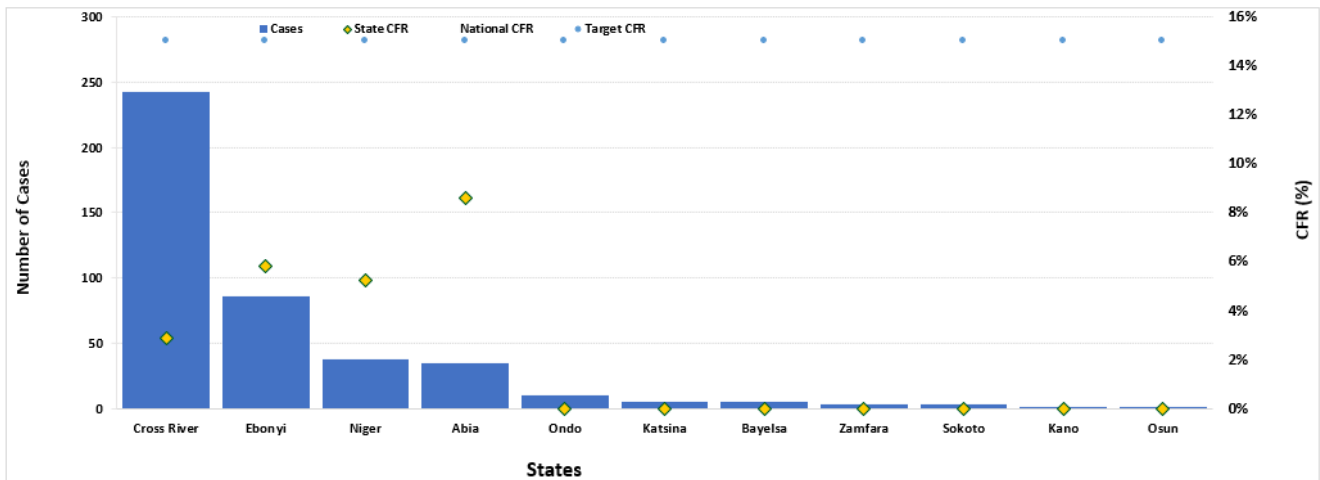


Figure 8: Number of cumulative cholera cases with case fatality ratio (CFR) by state, week 1 - 4, 2023

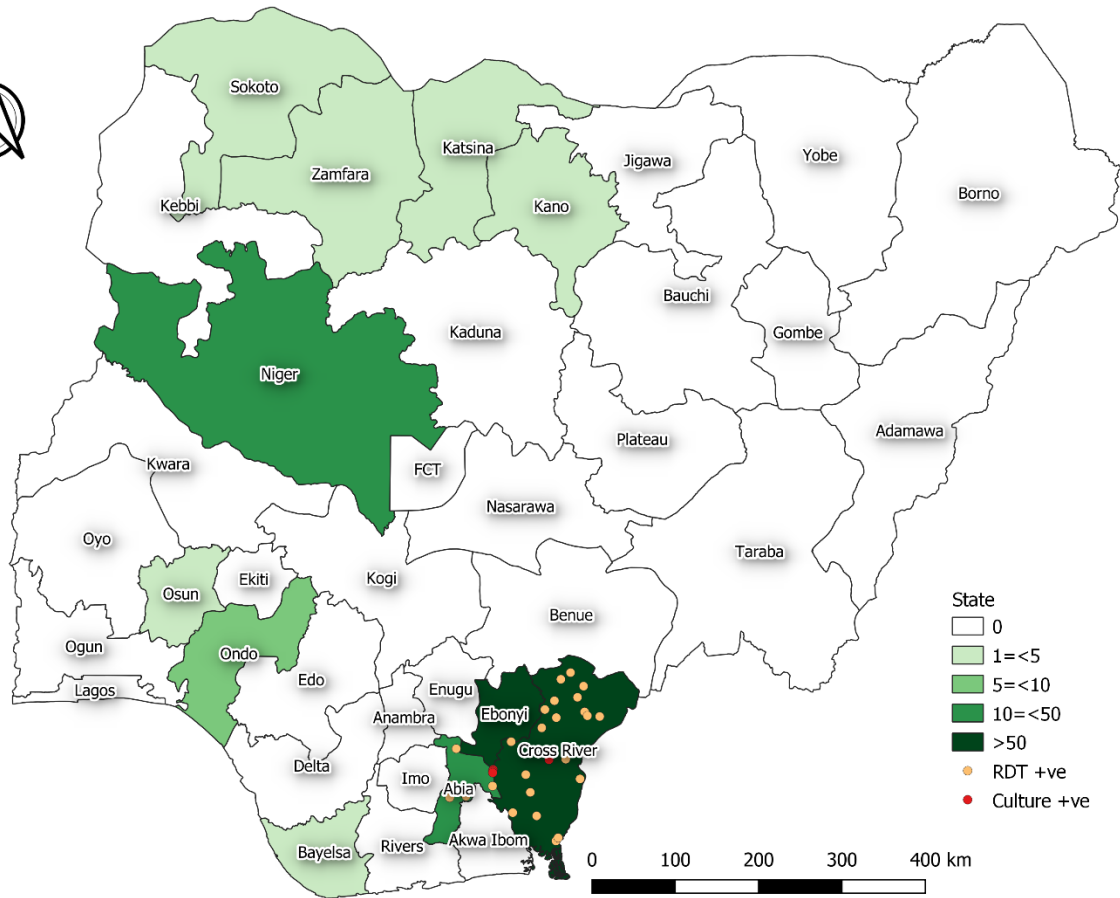


Figure 9. Map of Nigeria showing states with RDT + Culture and suspected cases, week 1 - 4, 2023

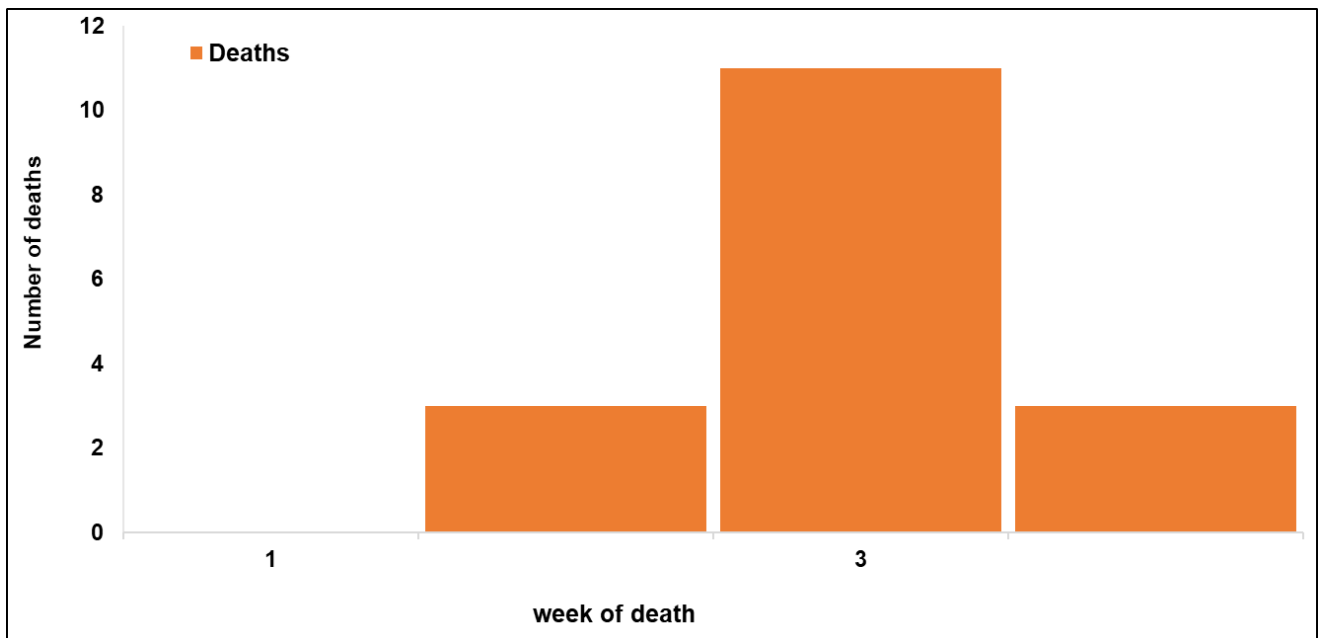


Figure 13: Trends in deaths, week 1 - 4, 2023, Nigeria

Table 6. Summary table for Weekly & Cumulative number of Cholera Cases, for 2023

	States Reporting cases in 2023	State outbreak status*	Current week: (Week 4)						Cumulative (Week 1 - 4)				
			Cases		Deaths		Tests		Cases	Deaths	CFR	Tests	
			Cases	% change	Deaths	% change	RDT (% Pos)	Culture (% pos)				RDT (% Pos)	Culture (% pos)
1	Cross River	Active	96	▼ 21%	2	▼ 60%	21 (29%)	6 (0%)	242	7	2.9%	44 (45%)	18 (6%)
2	Ebonyi	Active	41	▲ 128%	1	▼ 67%			86	5	5.8%		
3	Niger	Active		▼ 100%					38	2	5.3%	6 (0%)	2 (0%)
4	Abia	Active	5	▼ 83%		▼ 100%	5 (20%)		35	3	8.6%	20 (40%)	1 (100%)
5	Ondo	Active	1	▼ 67%			1 (0%)		10	-	0.0%	7 (0%)	
6	Katsina								5	-	0.0%		
7	Bayelsa	Active		▼ 100%					5	-	0.0%	4 (0%)	
8	Zamfara	Active	2	▲ 100%					3	-	0.0%		
9	Sokoto	Active							3	-	0.0%		
10	Kano	Active							1	-	0.0%		
11	Osun	Active							1	-	0.0%		
	National	10	145	▼ 27%	3	▼ 73%	27 (26%)	6 (0%)	429	17	4.0%	81 (35%)	21 (10%)

Table 7: Response activities

Pillar	Activities to date	Next steps
Coordination	<ul style="list-style-type: none"> Response is being coordinated by the national multi-sectoral TWG hosted at NCDC, in collaboration with Federal Ministry of Health (FMOH), Federal Ministry of Water Resources (FMWR), Federal Ministry of Environment (FMEnvrt), National Primary Health Care Development Agency (NPHCDA) and Development Partners 	<ul style="list-style-type: none"> The national multi-sectoral TWG will continue to coordinate the national response Continue sub-national level preparedness and response support Ongoing review of National Cholera Plan
Surveillance	<ul style="list-style-type: none"> Ongoing surveillance in all states through the routine Integrated Disease Surveillance and Response (IDSR) and Event Based Surveillance (EBS) 	<ul style="list-style-type: none"> Continue data collation and harmonisation Planned cholera surveillance evaluation

	<ul style="list-style-type: none"> • Providing offsite/onsite support to states and follow up for daily reporting and progress with response activities 	across states
Case Management & IPC	<ul style="list-style-type: none"> • Provided technical support and response commodities to affected states • Finalization workshop held on cholera case management guideline, treatment protocol and SOP harmonization 	<ul style="list-style-type: none"> • Continue providing technical support on case management and IPC to states • Continue training of Health Care Workers (HCW) on management of cholera • Continuous follow up with states for updates and support
Laboratory	<ul style="list-style-type: none"> • Supported ongoing testing across state-level laboratories at NCDC National Reference Laboratory (NRL), Abuja and CPHL Yaba-Lagos 	<ul style="list-style-type: none"> • Planned sub-national level training of Laboratory Scientists on sample collection and analysis • Planned finalization of cholera diagnostics guidelines and SOP
WASH	<ul style="list-style-type: none"> • Hygiene promotion, provision of safe water, water chlorination, household disinfection and sensitisation on dangers of open defecation ongoing in high-risk communities by WASH sector partners and Community Health Volunteers in the affected states • Continuous construction of sanitation and hygiene facilities with boreholes in cholera hotspots • Conducted WASH Sector review workshop 	<ul style="list-style-type: none"> • Continue distribution of hygiene kits to affected states
Logistics	<ul style="list-style-type: none"> • Essential response commodities are being distributed to all cholera affected states 	<ul style="list-style-type: none"> • Continue supporting affected states with essential response commodities
Vaccination (led by NPHCDA)	<ul style="list-style-type: none"> • Epidemiological trend is being monitored to guide ICG request for planned vaccination campaigns 	<ul style="list-style-type: none"> • Continue monitoring epidemiological trend to guide ICG request for planned vaccination campaigns
Risk communication	<ul style="list-style-type: none"> • Cholera jingles are being aired in English and local languages • Community social mobilisation, media interviews, distribution of Information, Education and Communication (IEC) materials and awareness campaigns ongoing in affected communities • Cholera advisory developed and circulated 	<ul style="list-style-type: none"> • Continue airing of cholera jingles and distribution of IEC materials • Continue media engagement meetings and training of journalist, other media professionals • Continued follow-up with

		states for update on risk communication
State Response	Multi-sectoral State-level Emergency Operation Centres (EOCs) activated in Cross River and Ebonyi States	Continue supporting state response activities

Challenges

- Difficulty in accessing some communities due to security concerns
- Open defecation in affected communities
- Lack of potable drinking water in some rural areas and urban slums
- Poor hygiene practice in most cholera affected communities
- Inadequate health facility infrastructure and cholera commodities for management of patients (Ringer's lactate and ORS)
- Inadequate trained personnel in states for case management
- Poor and inconsistent reporting from states

Next Steps

- Continue training on cholera surveillance, hotspot mapping and develop state level preparedness and response plans
- Maintain communication with and support to states for data reporting and response
- Continue advocacy to State Governments to increase funding in WASH infrastructure
- Continue distributing response commodities across states
- Build capacity for sample collection, transportation and laboratory diagnosis
- Planned cholera surveillance evaluation across states
- Scale up risk communications
- Continue review of the National Cholera Plan

Notes on this report

Data Source

Information for this disease was from routine case-based data and outbreak line-lists retrieved by the National Cholera Technical Working Group

Case definitions

Suspected Case:

- Any patient aged ≥ 2 years with acute watery diarrhoea and severe dehydration or dying from acute watery diarrhoea with or without vomiting
- In areas where a Cholera outbreak is declared, any person presenting with or dying from acute

watery diarrhoea with or without vomiting

Confirmed Case: A suspected case in which *Vibrio cholerae* O1 or O139 has been isolated in the stool by culture

DATA AS REPORTED AND ACCURATE BY NCDC AS AT MIDNIGHT 29th January 2023