



SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

NCDC.GOV.NG

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TITLE:	UPDATE ON MPOX (MPX) IN NIGERIA
SERIAL NUMBER:	30
EPI-WEEK:	46
DATE:	November 20, 2022

Table 1 – Key Indicators

Key Indicators	Number
Total confirmed cases in Epi Week 46, 2022	21
Total suspected cases from January 1 st to November 20 th , 2022 (Epi week 1 to 46)	1793
Total confirmed cases from January 1 st to November 20 th , 2022 (Epi week 1 to 46)	659
Total deaths from January 1 st to November 20 th , 2022 (Epi week 1 to 46)	7
Total deaths Sept 2017 - November 20 th , 2022	15
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	34
Grand total confirmed cases (Sept 2017 – November 20 th , 2022)	885
Grand total suspected cases (Sept 2017 – November 20 th , 2022)	2305

- One hundred and eleven (111) new suspected cases were reported in Epi week 46, 2022 (14th to 20th November 2022) from nineteen (19) states Plateau (22), Bayelsa (14), Kwara (12), Cross River (10), Lagos (10), Abia (9), Imo (8), Enugu (5), Ogun (5), Anambra (3), Ondo (3), Katsina (2), Rivers (2), Delta (1), Gombe (1), Kogi (1), Nasarawa (1), Osun (1) and Zamfara (1).
- Twenty-one (21/111) new confirmed cases were recorded in Epi week 46 from ten (10) states –Abia (7), Cross River (3), Anambra (2), Bayelsa (2), Imo (2), Enugu (1), Kogi (1), Plateau (1), Rivers (1) and Zamfara (1).
- From 1st January to 20th November 2022, Nigeria has recorded 1793 suspected cases with 659 confirmed cases (437 male, 222 female) from thirty-two (32) states and FCT – Lagos (158), Abia (53), Bayelsa (42), Imo (40), Rivers (34), Ondo (32), Ogun (31), Delta (26), Edo (24), Anambra (23), FCT (19), Adamawa (16), Nasarawa (15), Kaduna (14), Plateau (14), Cross River (12), Akwa Ibom (11), Ebonyi (11), Benue (10), Oyo (10), Borno (10), Kwara (9), Katsina (8), Taraba (7), Gombe (6), Kano (6), Kogi (5), Osun (4), Enugu (4), Kebbi (2), Niger (1), Bauchi (1) and Zamfara (1).
- Seven (7) associated deaths have been recorded from 7 states in 2022 – Delta (1), Lagos (1), Ondo (1) and Akwa Ibom (1), Kogi (1), Taraba (1), and Imo (1), **CFR 1.1%**.



- Overall, since the re-emergence of Mpox in September 2017, 2305 suspected cases have been reported from 36 states and FCT in the country. Of these 2305 suspected cases, there have been 885 (39.4%) confirmed (590 male, 295 female) from 33 states and FCT - Lagos (188), Rivers (86), Bayelsa (85), Abia (56) Delta (55), Imo (48), Edo (34), Ondo (32), Ogun (32), FCT (25), Cross River (26), Anambra (25), Akwa Ibom (18), Nasarawa (17), Plateau (17), Adamawa (16), Oyo (16), Kaduna (14), Benue (12), Ebonyi (12), Borno (10), Kwara (9), Katsina (8), Enugu (8), Taraba (7), Gombe (6), Kano (6), Kogi (5), Osun (4), Ekiti (2), Niger (2), Kebbi (2), Bauchi (1) and Zamfara (1).
- Fifteen (15) deaths have been recorded since September 2017 (CFR= 1.6%) in nine (9) states - Lagos (3), Edo (2), Imo (2), Cross River (1), FCT (1), Rivers (1), Ondo (1) Delta (1), Akwa Ibom (1), Taraba (1) and Kogi (1).

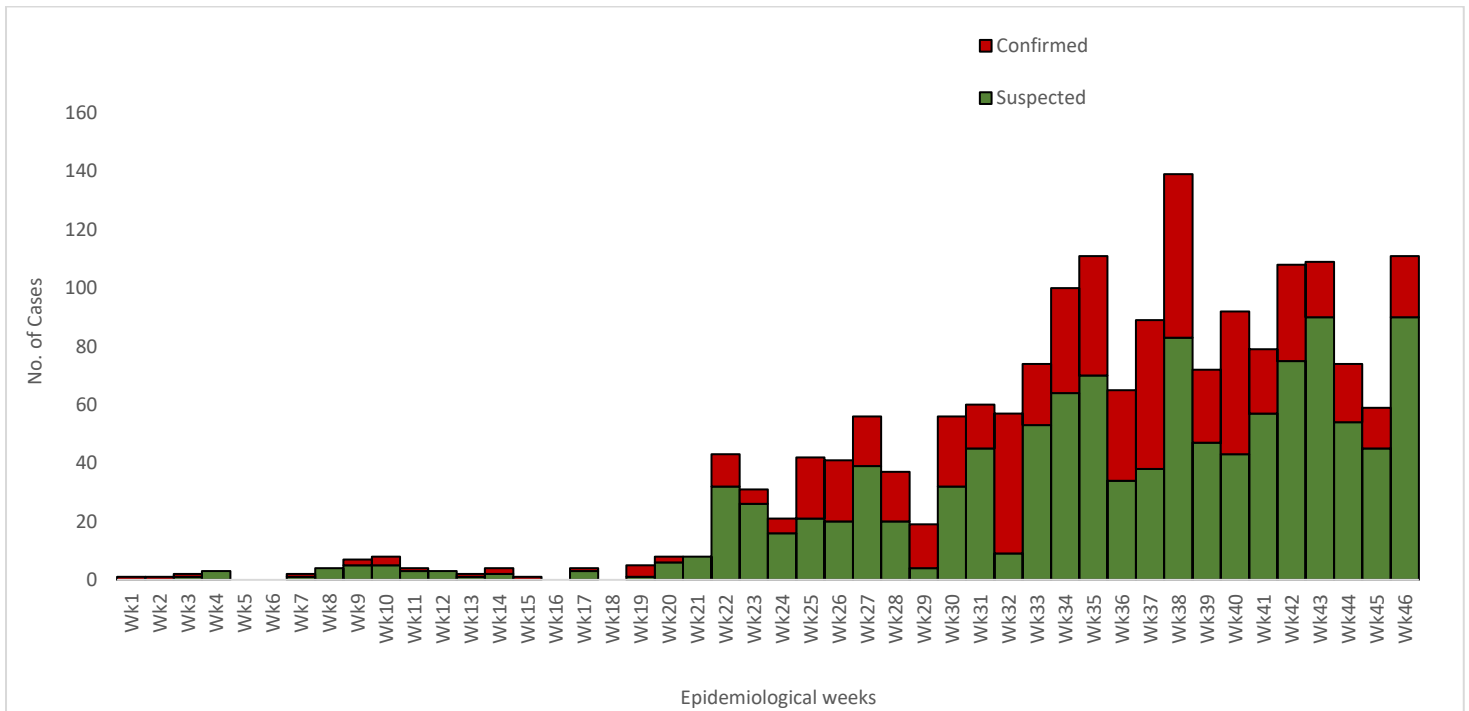


Figure 1: Epidemic Curve of Suspected & Confirmed Mpox Cases Jan. 2022 till date

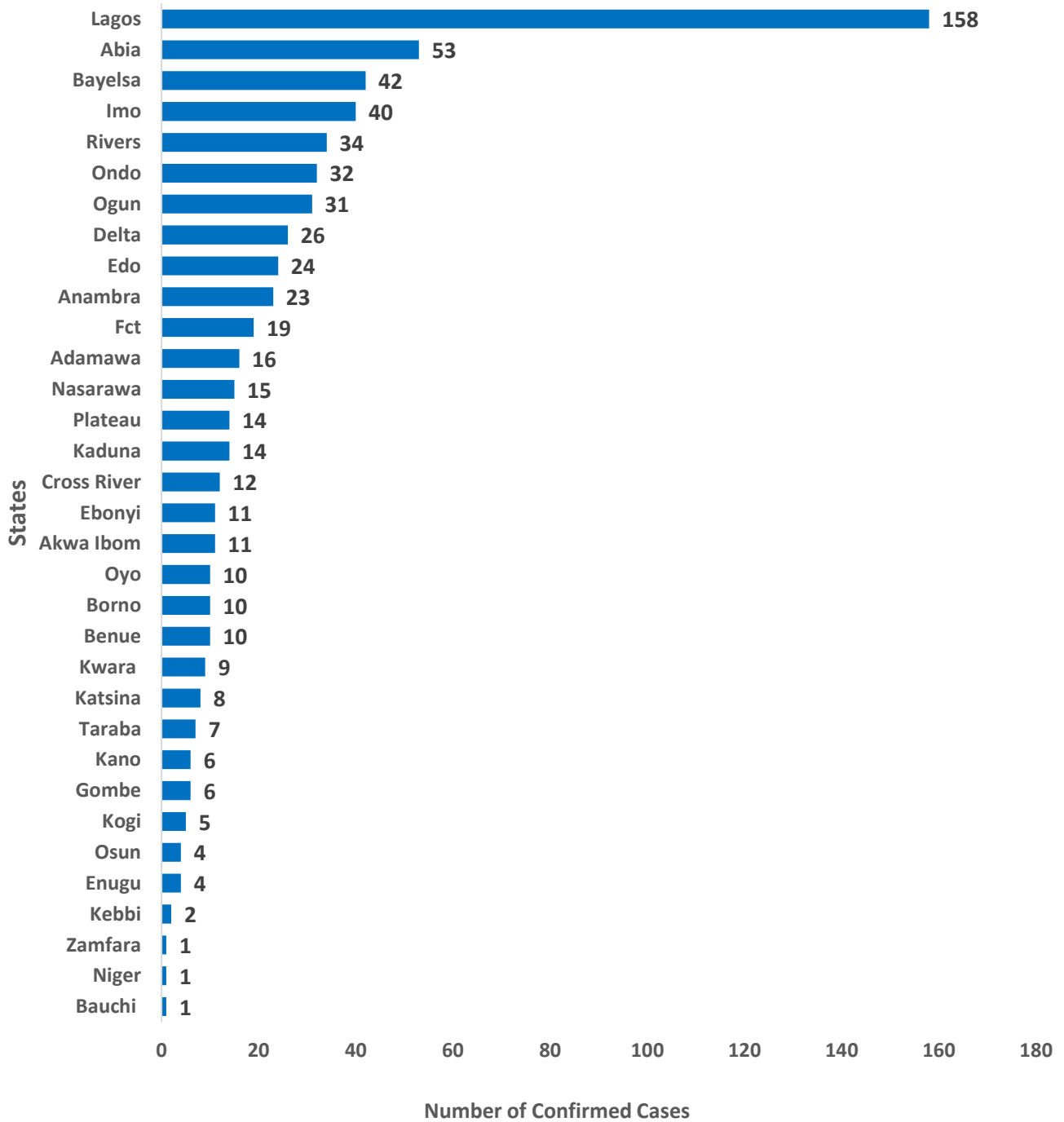


Figure 2: Bar chart Showing confirmed Mpox cases by state from January 1st – 20th November 2022

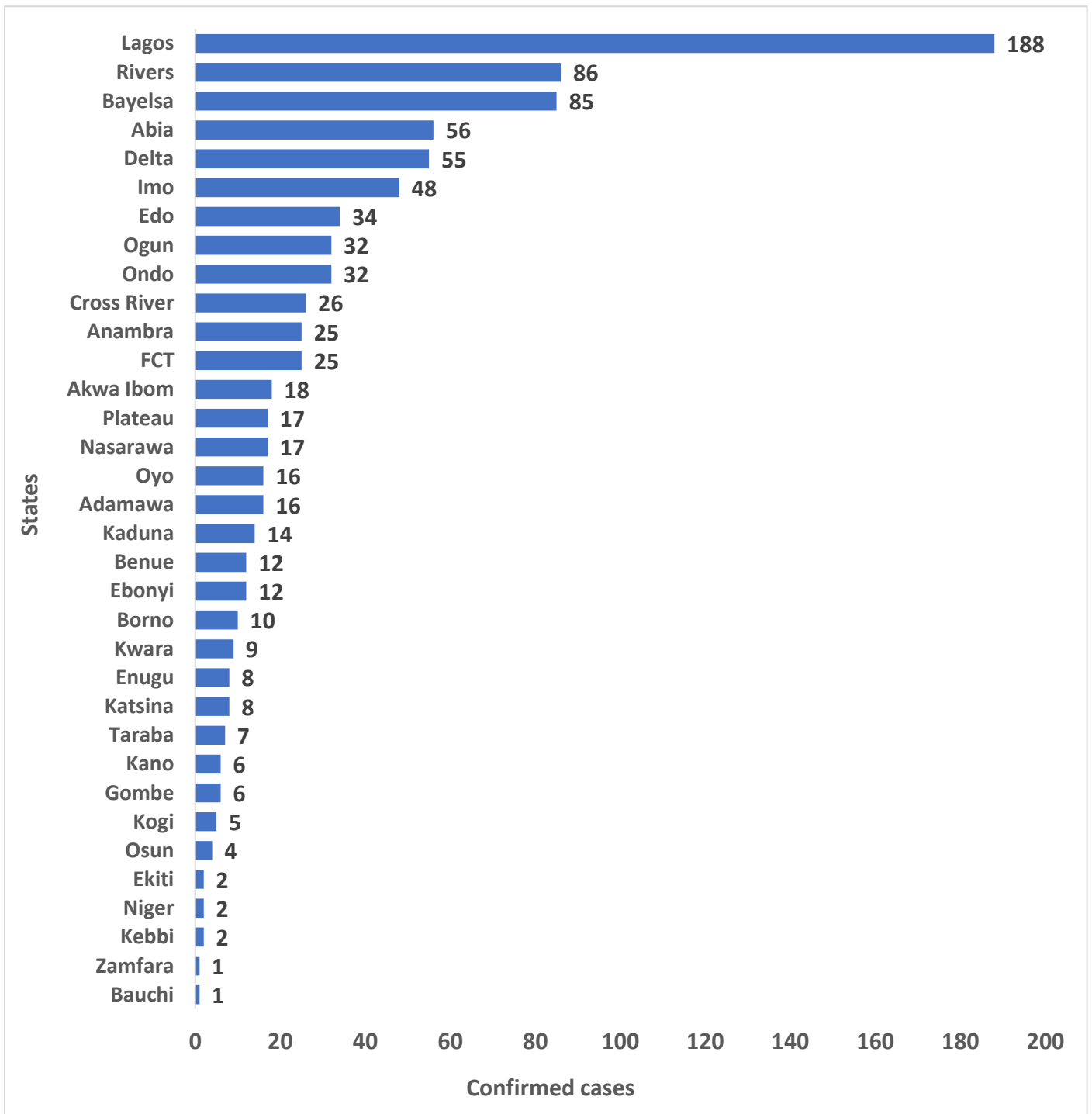


Figure 3: Bar chart Showing confirmed Mpox cases by state, September 2017 – 20th November 2022

Table 2: Nigeria confirmed Mpox cases by state, September 2017 – 20th November 2022

S/N	State	2017	2018	2019	2020	2021	2022	Total
1	Lagos	4	1	15	4	6	158	188
2	Rivers	25	14	7	1	5	34	86
3	Bayelsa	19	11	7	0	6	42	85
4	Delta	3	6	10	1	9	26	55
5	Abia	1	2	0	0	0	53	56
6	Imo	5	2	1	0	0	40	48
7	Edo	4	1	1	0	4	24	34
8	Ondo	0	0	0	0	0	32	32
9	Ogun	0	0	0	0	1	31	32
10	FCT	5	0	0	0	1	19	25
11	Anambra	0	1	1	0	0	23	25
12	Cross River	9	3	1	0	1	12	26
13	Akwa Ibom	6	0	1	0	0	11	18
14	Nasarawa	1	1	0	0	0	15	17
15	Adamawa	0	0	0	0	0	16	16
16	Plateau	0	2	0	1	0	14	17
17	Oyo	1	3	2	0	0	10	16
18	Kaduna	0	0	0	0	0	14	14
19	Ebonyi	0	0	0	1	0	11	12
20	Benue	2	0	0	0	0	10	12
21	Borno	0	0	0	0	0	10	10
22	Kwara	0	0	0	0	0	9	9
23	Katsina	0	0	0	0	0	8	8
24	Taraba	0	0	0	0	0	7	7
25	Enugu	1	2	1	0	0	4	8
26	Gombe	0	0	0	0	0	6	6
27	Kano	0	0	0	0	0	6	6
28	Kogi	0	0	0	0	0	5	5
29	Osun	0	0	0	0	0	4	4
30	Kebbi	0	0	0	0	0	2	2
31	Niger	0	0	0	0	1	1	2
32	Ekiti	2	0	0	0	0	0	2
33	Bauchi	0	0	0	0	0	1	1
34	Zamfara	0	0	0	0	0	1	1
	Grand Total	88	49	47	8	34	638	885

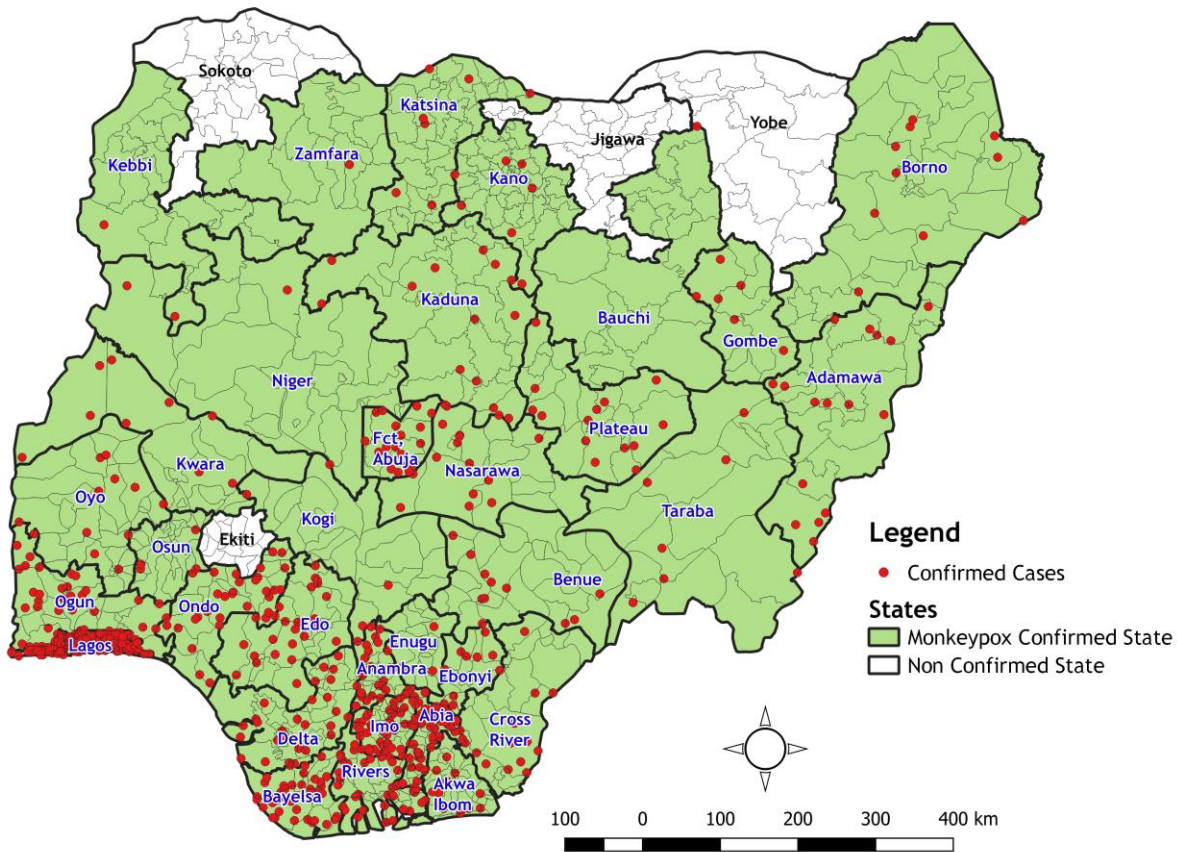


Figure 4: Map of Nigeria Showing States with Confirmed Mpox Cases from January 2022 till date (32 states and FCT)

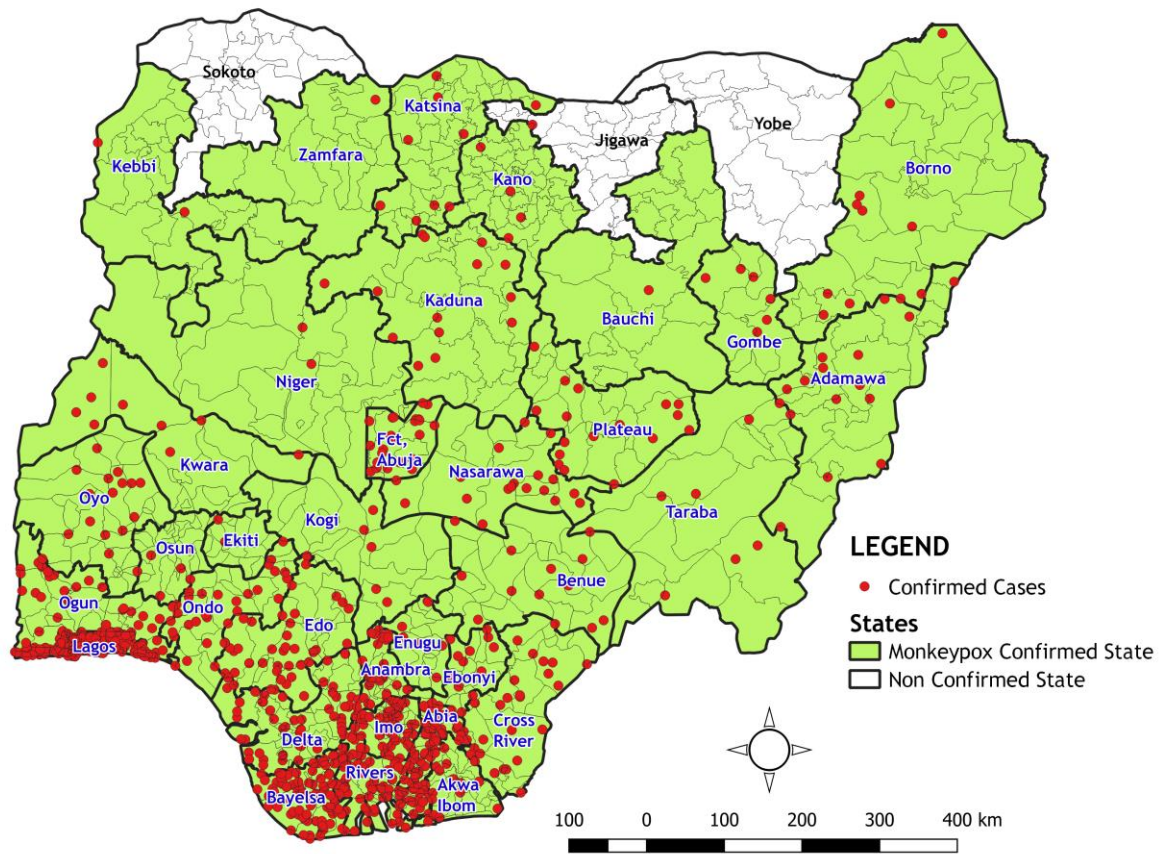


Figure 5: Map of Nigeria Showing States with Confirmed Mpox Cases from September 2017 till date (33 states and FCT)

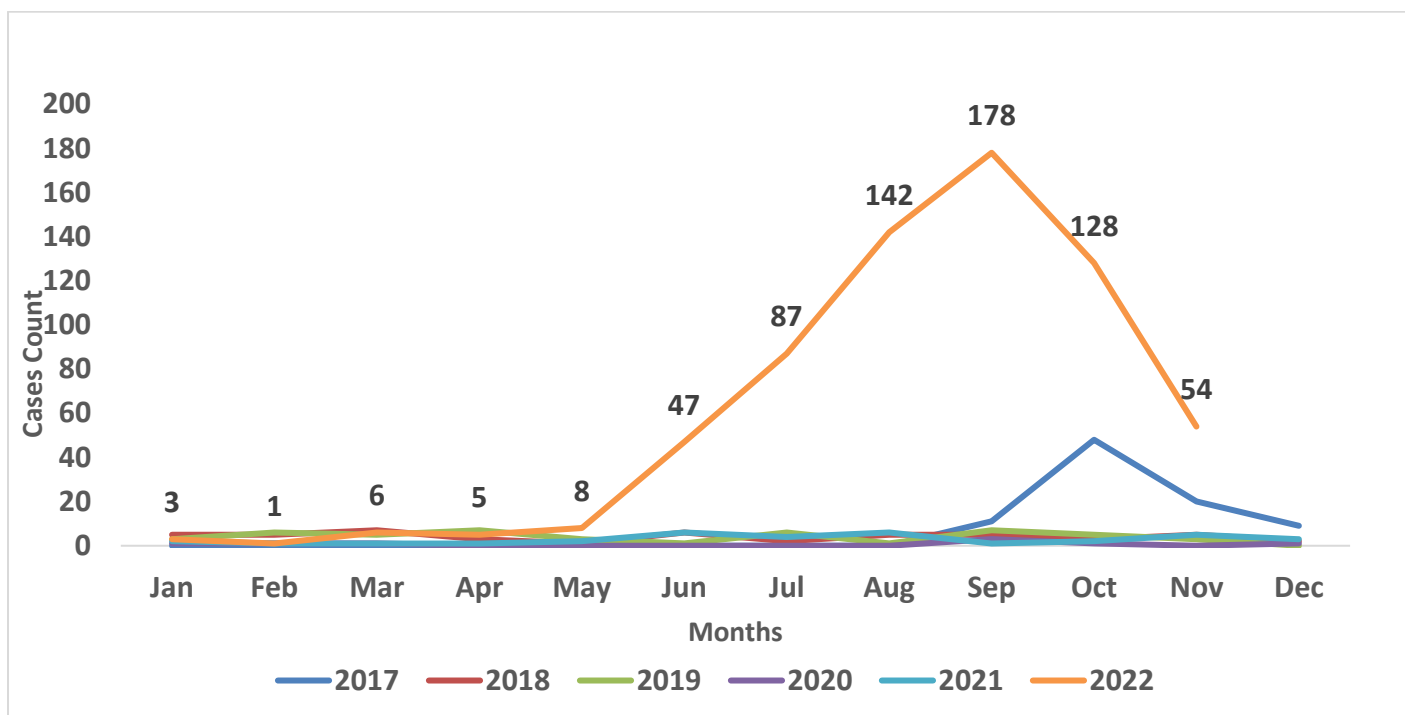


Figure 6: Nigeria confirmed Mpox cases by the year of incidence- September 2017 to 31st October 2022

Table 3: Age distribution of confirmed Mpox cases September 2017 – 20th November 2022

Age Group	2017	2018	2019	2020	2021	2022	Total
0-10 Years	7	5	1	0	1	106	120
11-20 Years	12	4	1	0	4	99	120
21-30 Years	34	13	13	4	10	163	237
31- 40 Years	26	17	22	4	13	187	269
41-50 Years	9	10	9	0	5	78	111
51-60 Years	0	0	1	0	1	26	28
Total	88	49	47	8	34	659	885

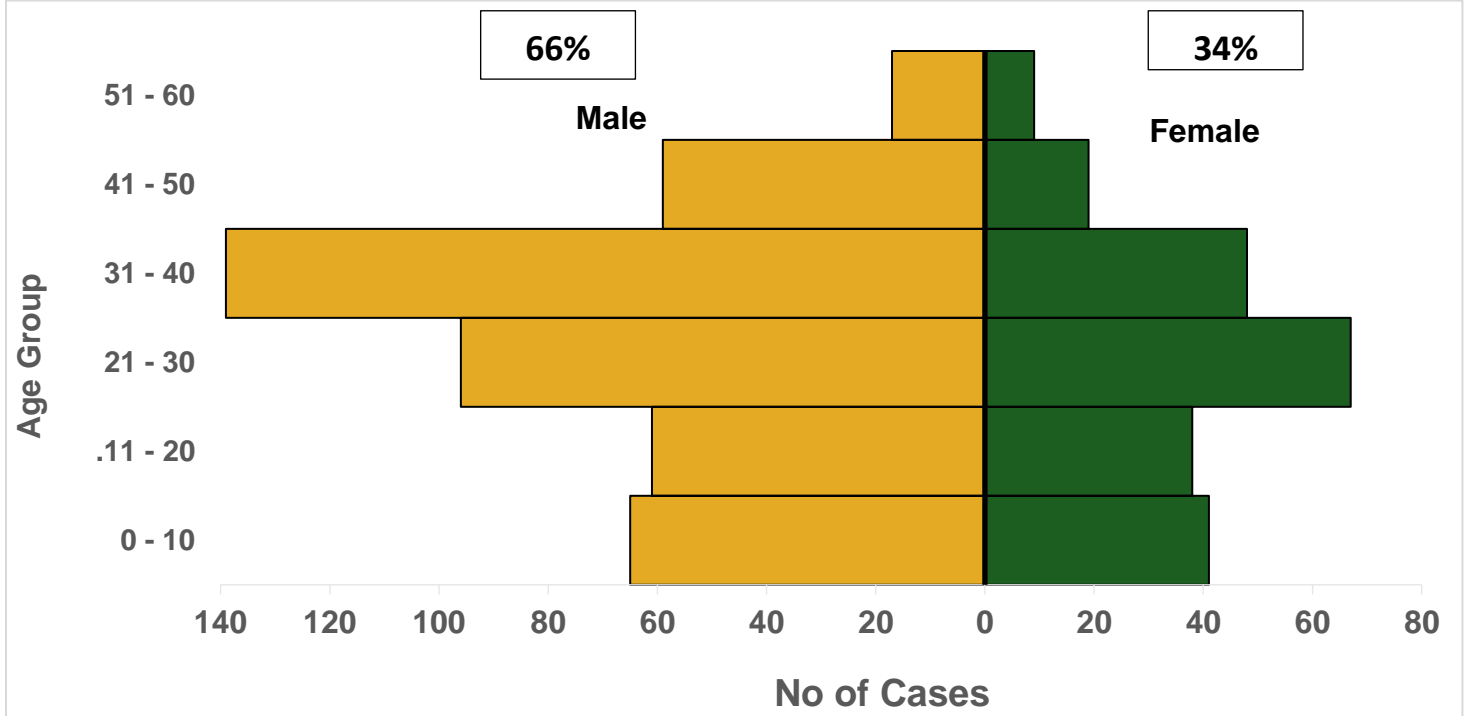


Figure 7: Age and sex distribution of Nigeria confirmed Mpox cases January 1st –20th November 2022

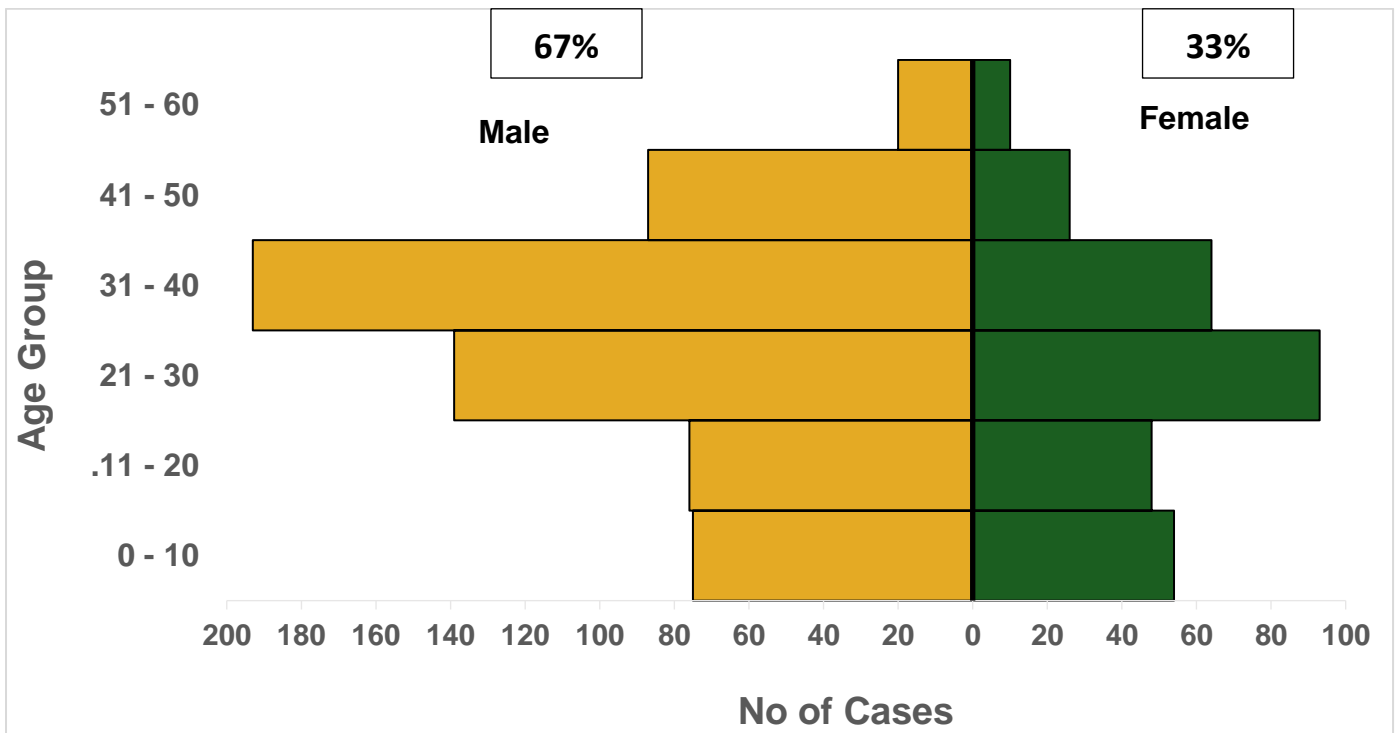


Figure 8: Age and sex distribution of Nigeria confirmed Mpox cases September 2017 – 20th November 2022

Response activities

Pillar	Activities to date	Next steps
Coordination	<ul style="list-style-type: none"> Supported the daily activities of the activated Emergency Operations Centre (EOC) 	<ul style="list-style-type: none"> Continue the coordination of response activities in the country
Surveillance	<ul style="list-style-type: none"> Provided off-site support to states on case identification, reporting, and response Conducted data harmonisation and analysis for the development of weekly sitrep Updated and validated data on SORMAS 	<ul style="list-style-type: none"> Follow-up via calls/emails to the states' surveillance teams and SORMAS SSOs to improve data completeness on both CIFs and SORMAS Engage silent States to enhance surveillance for Mpox (Jigawa, Sokoto and Yobe)
Infection Prevention & Control	<ul style="list-style-type: none"> Harmonised HCW infection investigation tool for all priority infectious diseases Developed the first draft of the MPX IPC guidelines by relevant stakeholders Held a joint meeting with the 36 state IPC Focal Persons and facility IPC structures (Orange Network) Linked State IPC structures to the IPC professionals (Orange network) closest to them to collaborate on preparedness, response and plan for surge capacity 	<ul style="list-style-type: none"> Share the developed MPX IPC guidelines with the EOC for review
Case management	<ul style="list-style-type: none"> Reached out to states' Mpox case managers to improve reporting of clinical outcomes and admission history for confirmed cases 	<ul style="list-style-type: none"> Review and adapt the WHO case management guidelines for national use
Laboratory	<ul style="list-style-type: none"> Sequencing one hundred and ninety-two Mpox samples to define xxx ongoing Received reagents for routine Mpx testing 	<ul style="list-style-type: none"> Train states on appropriate sample collection techniques, sample packaging and transport

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 $>38.3^{\circ}\text{C}$, 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