



NIGERIA CENTRE FOR DISEASE CONTROL

Cholera Situation Report

MONTHLY EPIDEMIOLOGICAL REPORT 09

Epidemiological week 40 - 43: (3 October to 30 October 2022)

Key Points

Table 1: Summary of current week (Epi week 43, 2022)

| Suspected Cases | Deaths (Suspected cases) | Case Fatality Ratio (%) | States Reporting Cases | LGAs Reporting cases |
|-----------------|--------------------------|-------------------------|------------------------|----------------------|
| 516 | 1 | 0.2% | 2 | 15 |

| Months | Epi- Week | Suspected Cases | Deaths (Suspected cases) | Case Fatality Ratio (%) | States Reporting Cases | LGAs Reporting cases |
|-----------|-----------|-----------------|--------------------------|-------------------------|------------------------|----------------------|
| January | 1 - 5 | 913 | 26 | 2.9% | 20 | 69 |
| February | 6 - 9 | 671 | 7 | 1.0% | 19 | 61 |
| March | 10 - 12 | 234 | 8 | 3.4% | 13 | 42 |
| April | 13 - 17 | 478 | 29 | 6.1% | 14 | 39 |
| May | 18 - 21 | 613 | 8 | 1.3% | 20 | 67 |
| June | 22 - 26 | 667 | 16 | 2.4% | 18 | 73 |
| July | 27 - 30 | 1127 | 52 | 4.6% | 18 | 97 |
| August | 31 - 35 | 2362 | 82 | 3.5% | 15 | 89 |
| September | 36 - 39 | 6859 | 153 | 1.9% | 10 | 62 |
| October | 40 - 43 | 5304 | 85 | 1.6% | 7 | 35 |

Table 2: Summary of monthly reported cases (Epi week 1- 43)

Table 3: Cumulative summary from Epi week 1 - 43, 2022

| Suspected Cases | Deaths (Suspected cases) | Case Fatality Ratio (%) | States Reporting Cases | LGAs Reporting cases |
|-----------------|--------------------------|-------------------------|------------------------|----------------------|
| 19228 | 466 | 2.4% | 31 | 258 |

Week 43 Highlights

- Thirty-one states have reported suspected cholera cases in 2022. These are Abia, Adamawa, Akwa Ibom, Anambra, Bauchi, Bayelsa, Benue, Borno, Cross River, Delta, Ekiti, Gombe, Imo, Jigawa, Kaduna, Kano, Katsina, Kebbi, Kwara, Lagos, Nasarawa, Niger, Ondo, Osun, Oyo, Plateau, Rivers, Sokoto, Taraba, Yobe and Zamfara
- In the reporting month, 7 states reported 5304 suspected cases – Borno (4920), Yobe (191), Gombe (93), Sokoto (81), Taraba (11), Bauchi (6) and Adamawa (2)
- There was **28% increase in the number of new suspected cases** in October Epi week 40 - 43 (5304) compared with September Epi week 36 – 39 (4153)
- In the reporting week, Borno (514) and Yobe (2) reported 516 suspected cases
- Borno, and Yobe states account for 100% of 516 suspected cases reported in week 43
- During the reporting week, two Cholera Rapid Diagnostic Test (RDT) was conducted in Borno 1 (100% positive) and Yobe 1 (0% positive)
- One stool culture test was conducted from Borno state, 1 (100% positive) reporting in epi week 43
- Of the cases reported, there was 1 death with a weekly case fatality ratio (CFR) of 0.2%
- No new state reported cases in week 43
- National multi-sectoral Cholera TWG continues to monitor response across states

Cumulative Epi-Summary

- As of **30th October 2022**, a total of **19,228 suspected cases including 466 deaths (CFR 2.4%)** have been reported from 31 states in 2022
- Of the suspected cases since the beginning of the year, **age group 5 -14 years** is the most affected age group for male and female
- Of all suspected cases, **49% are males and 51% are females**
- Nine states – Borno (11218 cases), Yobe (1888 cases), Taraba (1156 cases), Katsina (768 cases), Cross River (650 cases), Gombe (649 cases), Jigawa (537 cases) and Kano (522 cases) account for 94% of all cumulative cases
- Fifteen LGAs across five states Borno (7), Yobe (4), Taraba (2), Gombe (1) and Zamfara (1), reported more than 200 cases each this year

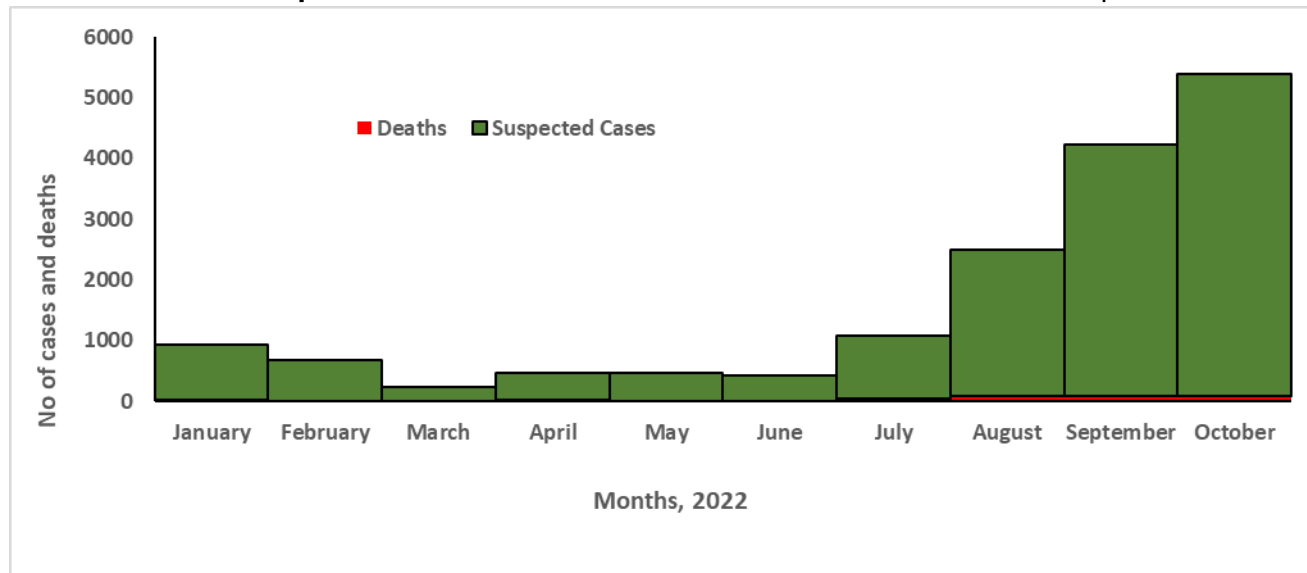


Figure 1: National Epidemic curve of monthly reported Cholera cases, January to October 2022

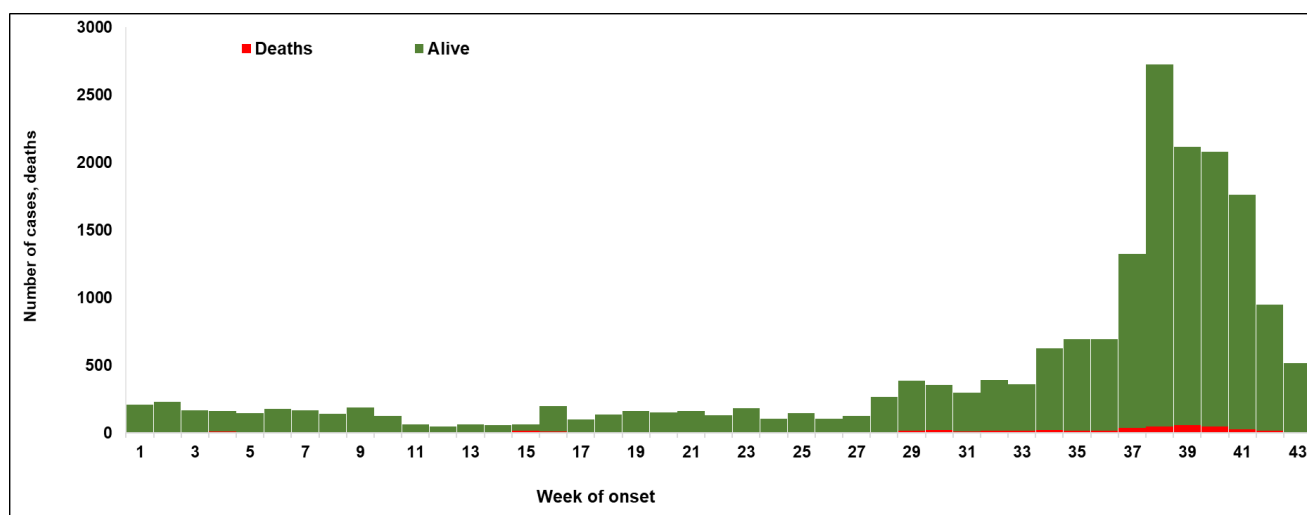


Figure 2: National Epidemic curve of weekly reported Cholera cases, week 1 to week 43, 2022

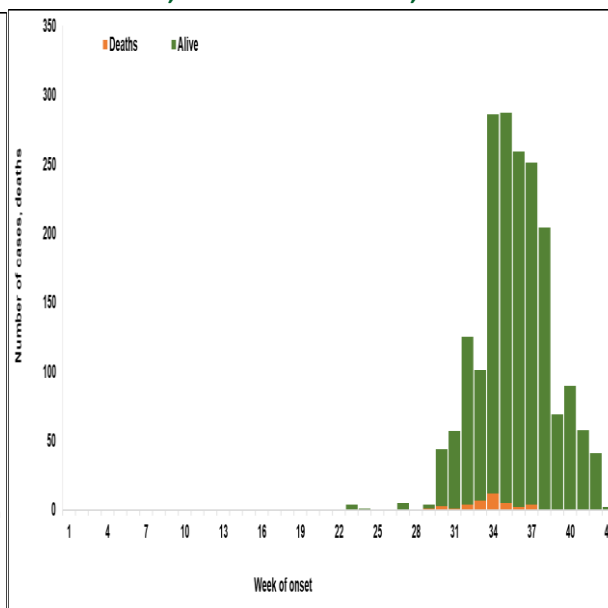
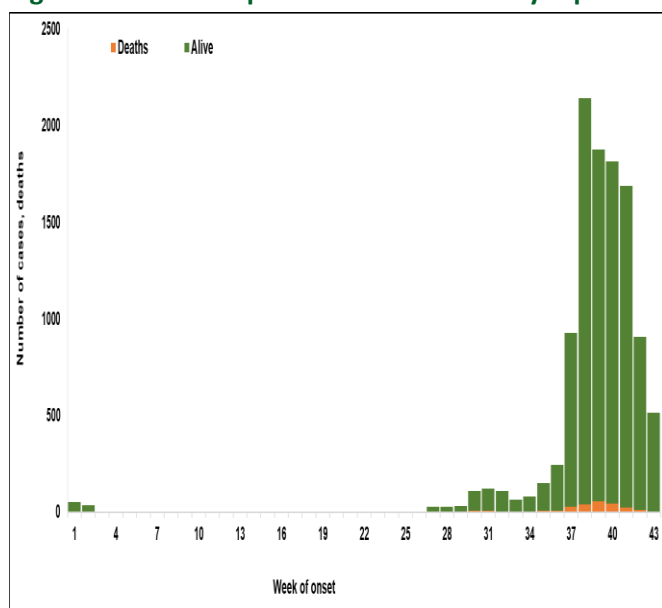


Fig 3: Borno epidemic curve, week 1 to week 43, 2022

Fig 4: Yobe epidemic curve, week 1 to week 43, 2022

Table 4: Top 10 states in cumulative cases

| No | State | Cases | Percent of cumulative cases | Cumulative % of total cases |
|-------|-------------|--------|-----------------------------|-----------------------------|
| 1 | Borno | 10,922 | 57% | 57% |
| 2 | Yobe | 1,888 | 10% | 67% |
| 3 | Taraba | 1,145 | 6% | 73% |
| 4 | Katsina | 767 | 4% | 77% |
| 5 | Cross River | 649 | 3% | 80% |
| 6 | Gombe | 643 | 3% | 83% |
| 7 | Zamfara | 630 | 3% | 87% |
| 8 | Kano | 521 | 3% | 86% |
| 9 | Jigawa | 417 | 2% | 91% |
| 10 | Sokoto | 339 | 2% | 93% |
| Total | | 17812 | 93% | |

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

| No | LGA | State | Cases | % of cumulative cases | Cumulative % |
|-------|---------------|---------|-------|-----------------------|--------------|
| 1 | Jere | Borno | 4618 | 24% | 24% |
| 2 | Konduga | Borno | 1362 | 7% | 31% |
| 3 | Dikwa | Borno | 1194 | 6% | 37% |
| 4 | Ngala | Borno | 767 | 4% | 41% |
| 5 | Bama | Borno | 738 | 4% | 45% |
| 6 | Maiduguri | Borno | 628 | 3% | 48% |
| 7 | Bayo | Borno | 522 | 3% | 51% |
| 8 | Talata Mafara | Zamfara | 451 | 2% | 56% |
| 9 | Gulani | Yobe | 433 | 2% | 56% |
| 10 | Bali | Taraba | 424 | 2% | 58% |
| 11 | Gujba | Yobe | 408 | 2% | 60% |
| 12 | Fika | Yobe | 366 | 2% | 62% |
| 13 | Wukari | Taraba | 270 | 1% | 63% |
| 14 | Yamaltu/Deba | Gombe | 238 | 1% | 65% |
| 15 | Fune | Yobe | 224 | 1% | 66% |
| Total | | | 12661 | 66% | |

Cholera Situation Report

Epi Week: 43 2022

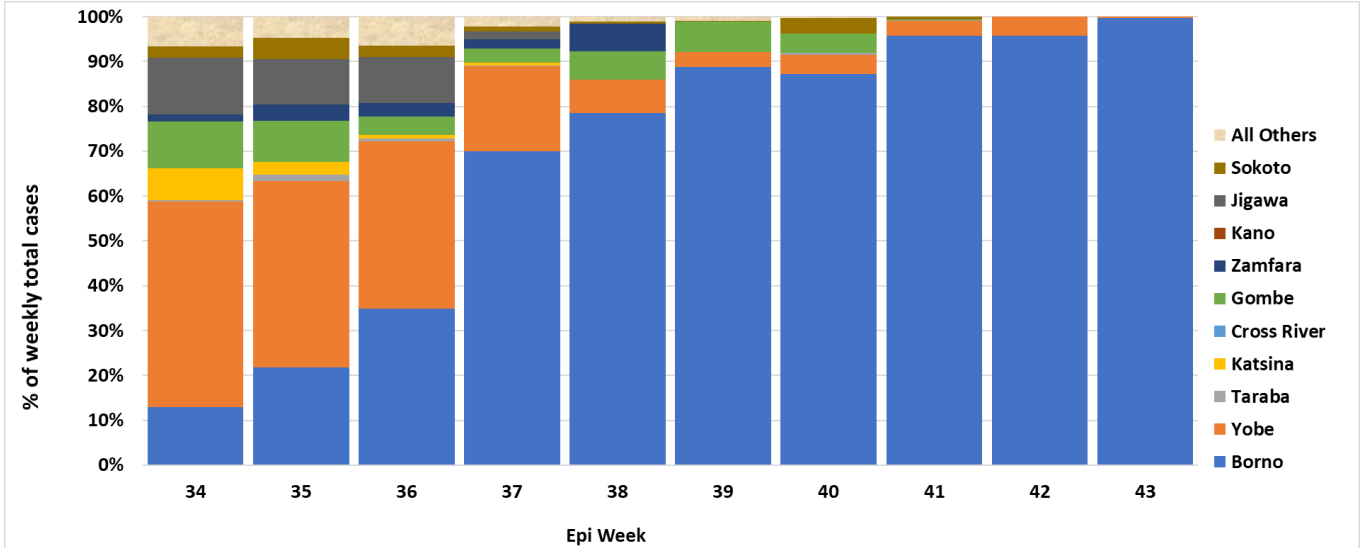


Figure 5: Percentage contribution of weekly cases by state in recent 10 weeks, week 34 - 43, 2022

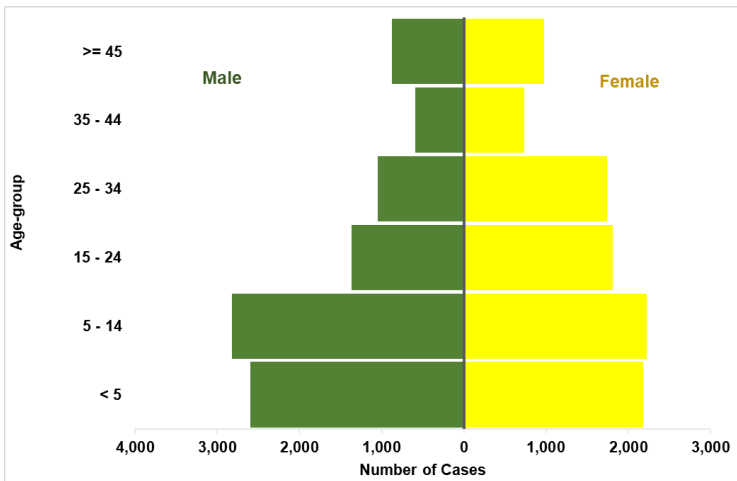


Figure 9. Age-Sex Pyramid for cumulative Cholera Cases, week 1-43 , 2022: N=19,062

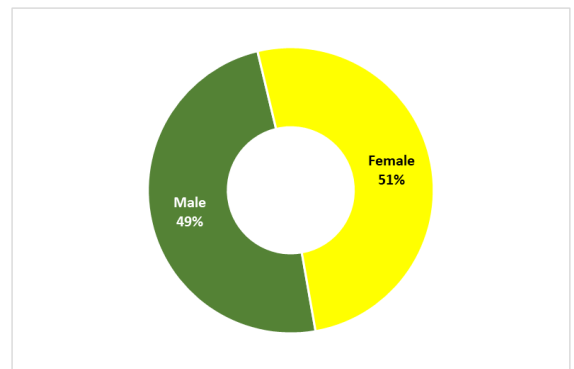


Figure 10. Sex disaggregation for cumulative Cholera cases, week 1-43 , 2022: N=19,062

Figure 6: Age – Sex Pyramid and Sex Aggregation for cholera cases week 1- 43, 2022.

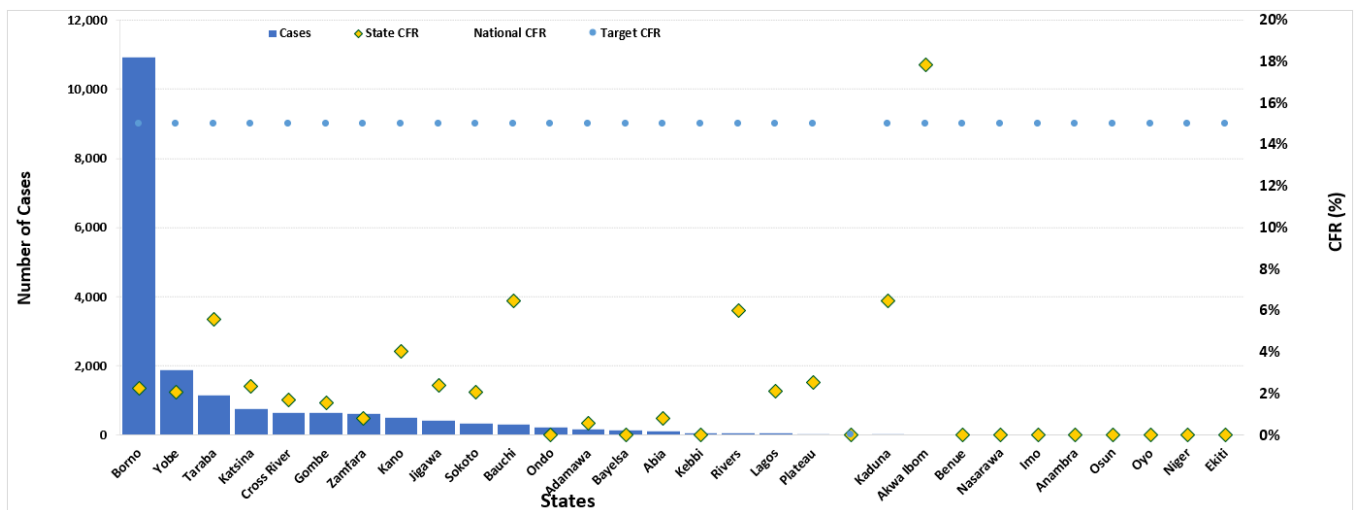


Figure 7: Number of cumulative cholera cases with case fatality ratio (CFR) by state, week 1 - 43, 2022

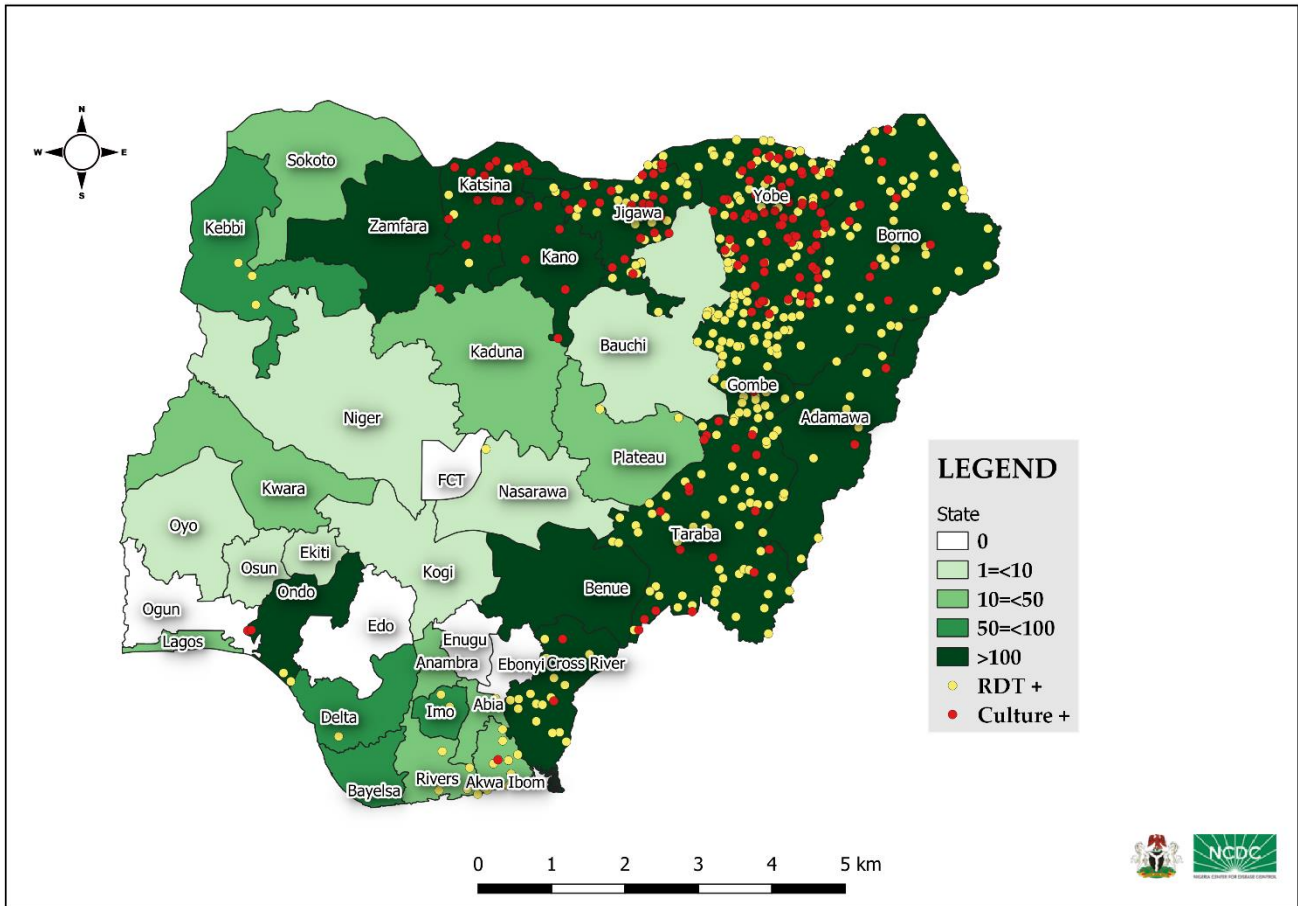


Figure 8. Map of Nigeria showing states with RDT + Culture and suspected cases, week 1 - 43, 2022

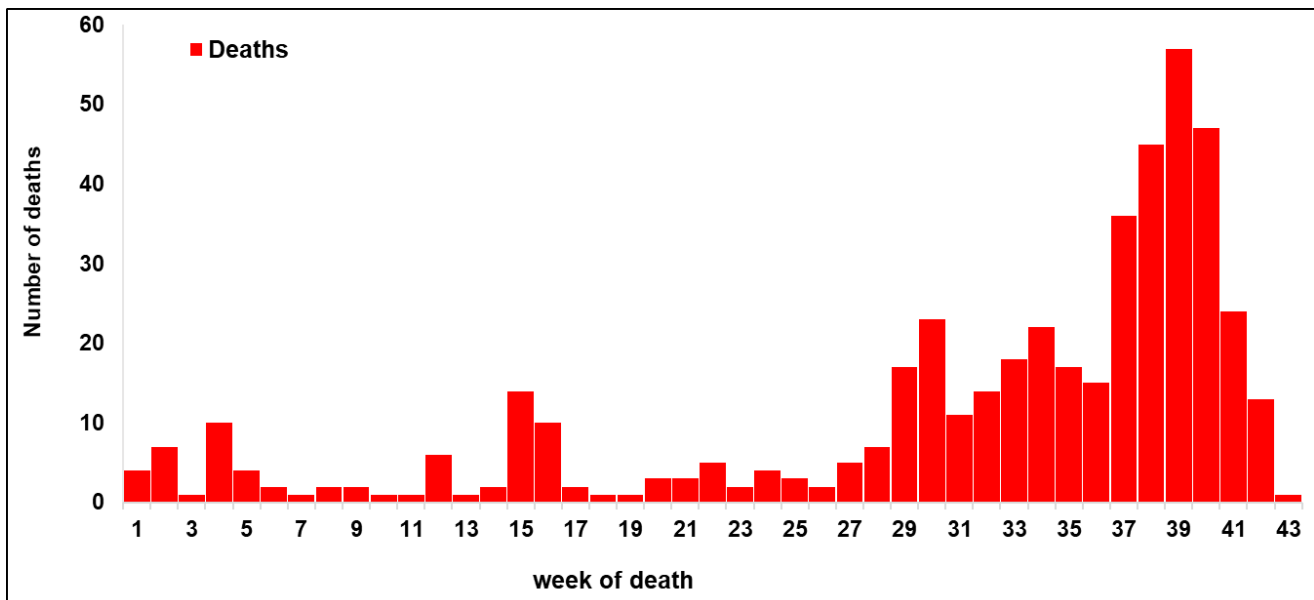


Figure 9: Trends in deaths, week 1 - 43, 2022, Nigeria

Table 6. Summary table for Weekly & Cumulative number of Cholera Cases, for 2022

| States | Reporting cases in 2022 | State outbreak status* | Current week: (Week 43) | | | | | Cumulative (Week 1 - 43) | | | | | |
|---------------|-------------------------|------------------------|--------------------------|----------|--------|-------------|------------|---------------------------|-------|------------|-----------|------------|----------------|
| | | | Cases | | Deaths | | Tests | | Cases | Deaths | CFR | Tests | |
| | | | Cases | % change | Deaths | % change | RDT (%Pos) | Culture (%pos) | | | | RDT (%Pos) | Culture (%pos) |
| 1 Abia | | | | | | | 120 | 1 | 0.8% | 3 (33%) | 23 (9%) | | |
| 2 Adamawa | | | | | | | 170 | 1 | 0.6% | 35 (54%) | 7 (29%) | | |
| 3 Akwa Ibom | | | | | | | 28 | 5 | 17.9% | 11 (91%) | 8 (25%) | | |
| 4 Anambra | | | | | | | 4 | - | 0.0% | | | | |
| 5 Bauchi | | | | | | | 310 | 20 | 6.5% | 1 (0%) | 33 (21%) | | |
| 6 Bayelsa | | | | | | | 137 | - | 0.0% | 5 (0%) | 31 (0%) | | |
| 7 Benue | | | | | | | 26 | - | 0.0% | | 8 (13%) | | |
| 8 Borno | Active | | 514 | ▼ 43% | 1 | ▼ 92% | 10,922 | 247 | 2.3% | 529 (94%) | 171 (77%) | | |
| 9 Cross River | | | | | | | 649 | 11 | 1.7% | 141 (12%) | 64 (3%) | | |
| 10 Delta | | | | | | | 1 | - | 0.0% | | 1 (0%) | | |
| 11 Ekiti | | | | | | | 1 | - | 0.0% | | 1 (0%) | | |
| 12 Gombe | Active | | | | | | 643 | 10 | 1.6% | 380 (77%) | | | |
| 13 Imo | | | | | | | 5 | - | 0.0% | | 5 (0%) | | |
| 14 Jigawa | | | | | | | 417 | 10 | 2.4% | 98 (33%) | 29 (69%) | | |
| 15 Kaduna | | | | | | | 31 | 2 | 6.5% | | 2 (0%) | | |
| 16 Kano | | | | | | | 521 | 21 | 4.0% | | 30 (17%) | | |
| 17 Katsina | | | | | | | 767 | 18 | 2.3% | 142 (26%) | 143 (14%) | | |
| 18 Kebbi | | | | | | | 54 | - | 0.0% | 13 (23%) | 1 (0%) | | |
| 19 Kwara | #N/A | | | | | | 30 | - | 0.0% | | | | |
| 20 Lagos | | | | | | | 47 | 1 | 2.1% | | 8 (0%) | | |
| 21 Nasarawa | | | | | | | 12 | - | 0.0% | 2 (50%) | 7 (0%) | | |
| 22 Niger | | | | | | | 1 | - | 0.0% | | | | |
| 23 Ondo | | | | | | | 236 | - | 0.0% | 88 (1%) | 156 (3%) | | |
| 24 Osun | | | | | | | 3 | - | 0.0% | | 2 (0%) | | |
| 25 Oyo | | | | | | | 2 | - | 0.0% | | | | |
| 26 Plateau | | | | | | | 39 | 1 | 2.6% | | 9 (22%) | | |
| 27 Rivers | | | | | | | 50 | 3 | 6.0% | 5 (100%) | 1 (0%) | | |
| 28 Sokoto | Active | | | | | | 339 | 7 | 2.1% | 54 (26%) | 4 (25%) | | |
| 29 Taraba | Active | | | | | | 1,145 | 64 | 5.6% | 207 (40%) | 84 (46%) | | |
| 30 Yobe | Active | | 2 | ▼ 95% | | 1 (0%) | 1,888 | 39 | 2.1% | 207 (50%) | 104 (68%) | | |
| 31 Zamfara | | | | | | | 630 | 5 | 0.8% | 37 (57%) | | | |
| National | 5 | | 516 | ▼ 45% | 1 | ▼ 92% (86%) | 19,228 | 466 | 2.4% | 1958 (58%) | 932 (33%) | | |

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 (FMEvrt), 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) Providing offsite/onsite support to states and follow up for daily reporting and progress with response activities | <ul style="list-style-type: none"> Continue data collation and harmonisation Planned cholera surveillance evaluation 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 | <ul style="list-style-type: none"> Continue distribution of hygiene kits to affected states |

Cholera Situation Report**Epi Week: 43 2022**

| | | |
|------------------------------------|--|--|
| 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) were activated in Cross River, Taraba, Borno, Adamawa, Bauchi, Gombe, Yobe and Katsina | 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

Erratum

- *A backlog of 2706 cases were added to the 4153 cases for the month of September and makes a total of 6859 cases*
- *A backlog of 73 deaths were added to the 80 deaths for the month of September and makes a total of 153 deaths*

DATA AS REPORTED AND ACCURATE BY NCDC AS AT MIDNIGHT 30th OCTOBER 2022