



# SITUATION REPORT

Nigeria Centre for Disease Control and Prevention

NCDC.GOV.NG

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<b>TITLE:</b>	<b>UPDATE ON MPOX (MPX) IN NIGERIA</b>
<b>SERIAL NUMBER:</b>	<b>5</b>
<b>EPI-WEEK:</b>	<b>5</b>
<b>DATE:</b>	<b>February 5, 2023</b>

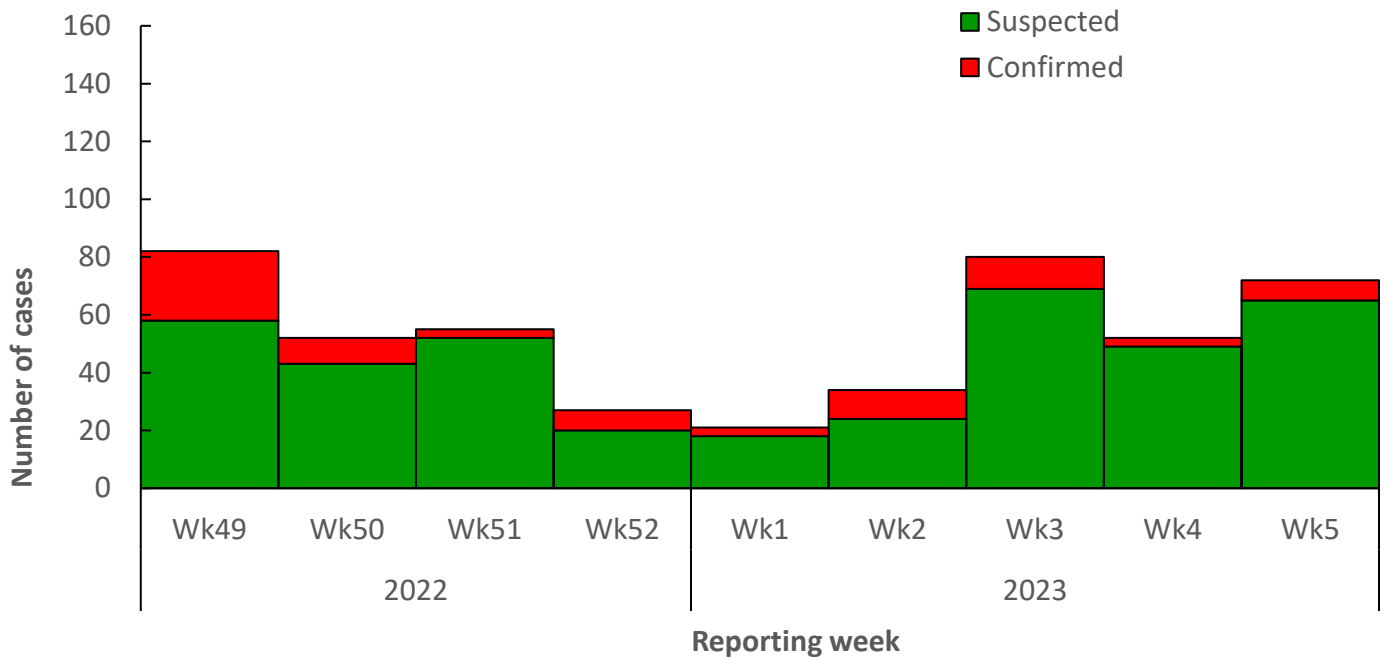
**Table 1 – Key Indicators**

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 5	72	7	0	0.0	3	5
2023 Cumulative	Week 5	258	34	1	2.9	12 +FCT	27
2022 Cumulative	Week 5	7	0	0	0.0	0	0

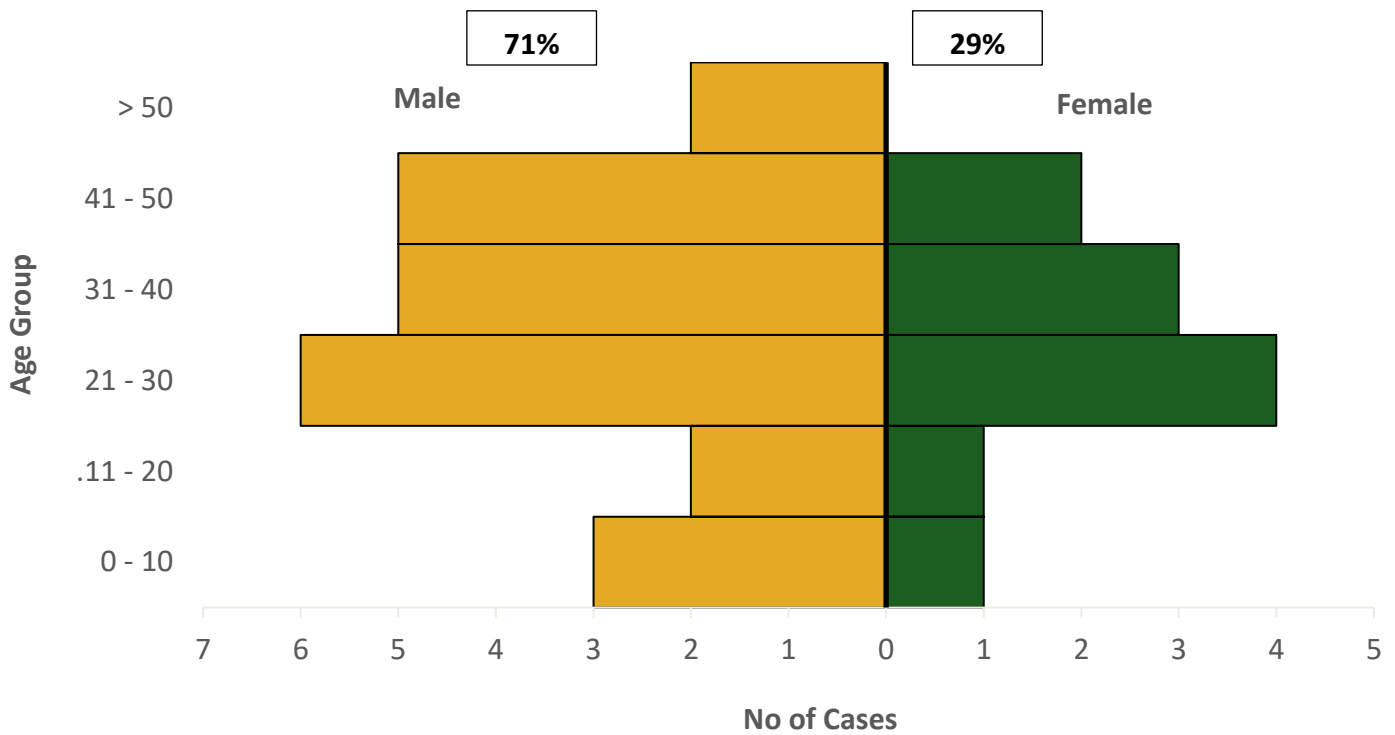
## Highlights

- In week 5, the number of new suspected cases is 72, compared with 52 cases reported in week 4, 2023. These were reported from twenty (20) states and FCT – Lagos (17), Ogun (12), Abia (9), FCT (7), Enugu (4), Akwa Ibom (2), Bayelsa (2), Edo (2), Kaduna (2), Nasarawa (2), Plateau (2), Taraba (2), Adamawa (1), Cross River (1), Delta (1), Ebonyi (1), Katsina (1), Kogi (1), Kwara (1), Ondo (1) and Rivers (1) across 41 Local Government Areas.
- Since week 1 of 2023, twelve (12) states and FCT have recorded at least one confirmed Mpox case across twenty-seven (27) Local Government Areas. In 2023, the States with the highest burden are Lagos (29.4%), Abia (14.7%), Imo (11.8%), Edo (8.8%) and FCT (8.8%), contributing 73.5% of confirmed cases.
- The number of confirmed cases is seven (7) in week 5, 2023, compared with three (3) confirmed cases reported in week 4, 2023.
- No death was recorded in week 5, with a CFR of 0.0% same as CFR of 0.0% that was reported in week 4, 2023.
- Overall, since the re-emergence of Mpox in September 2017, 2893 suspected cases have been reported from 36 states and FCT in the country. Of these 2893 suspected cases, 1022 (35.3%) 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.

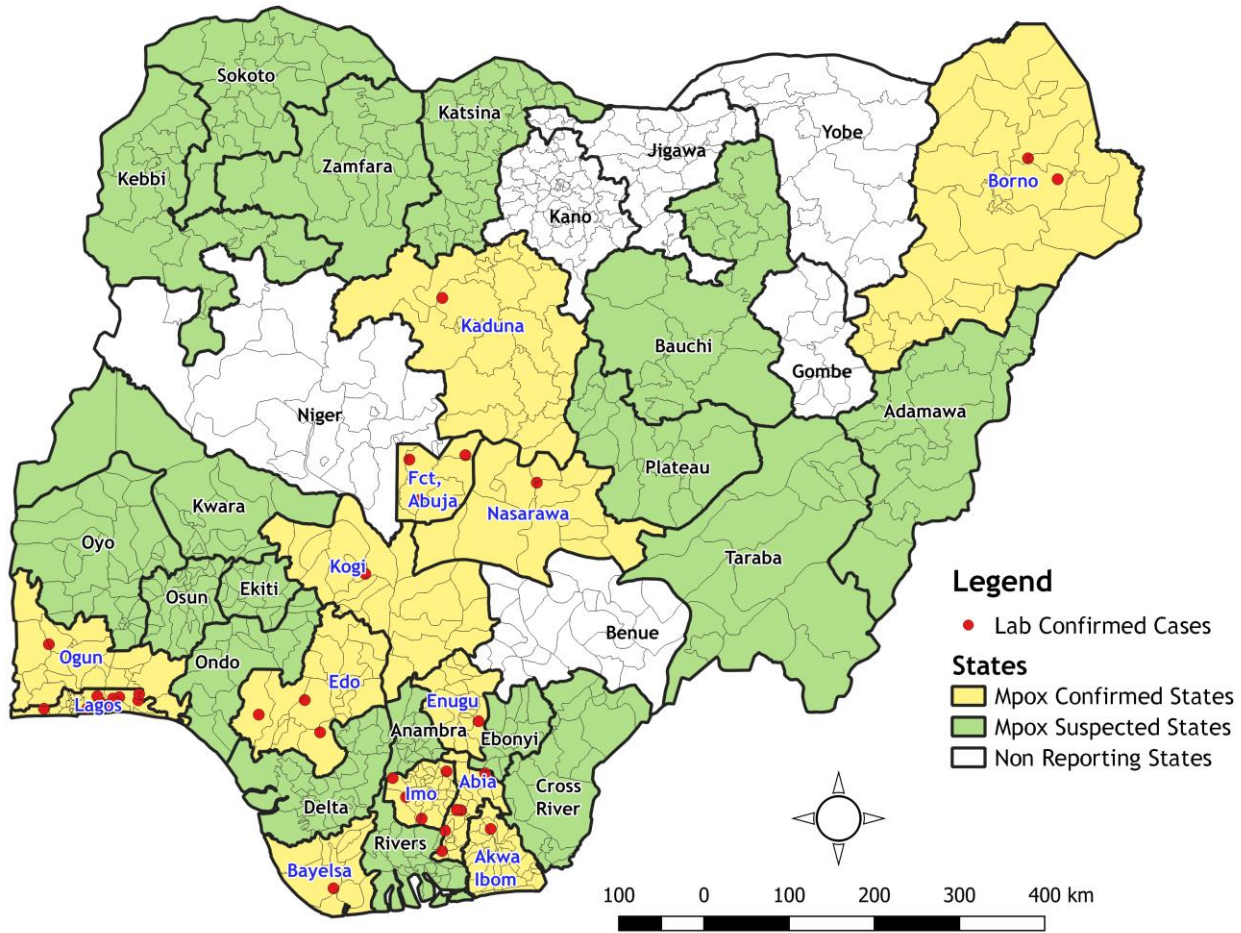




**Figure 1:** Epidemic curve of suspected and confirmed Mpox cases January 2023 till date

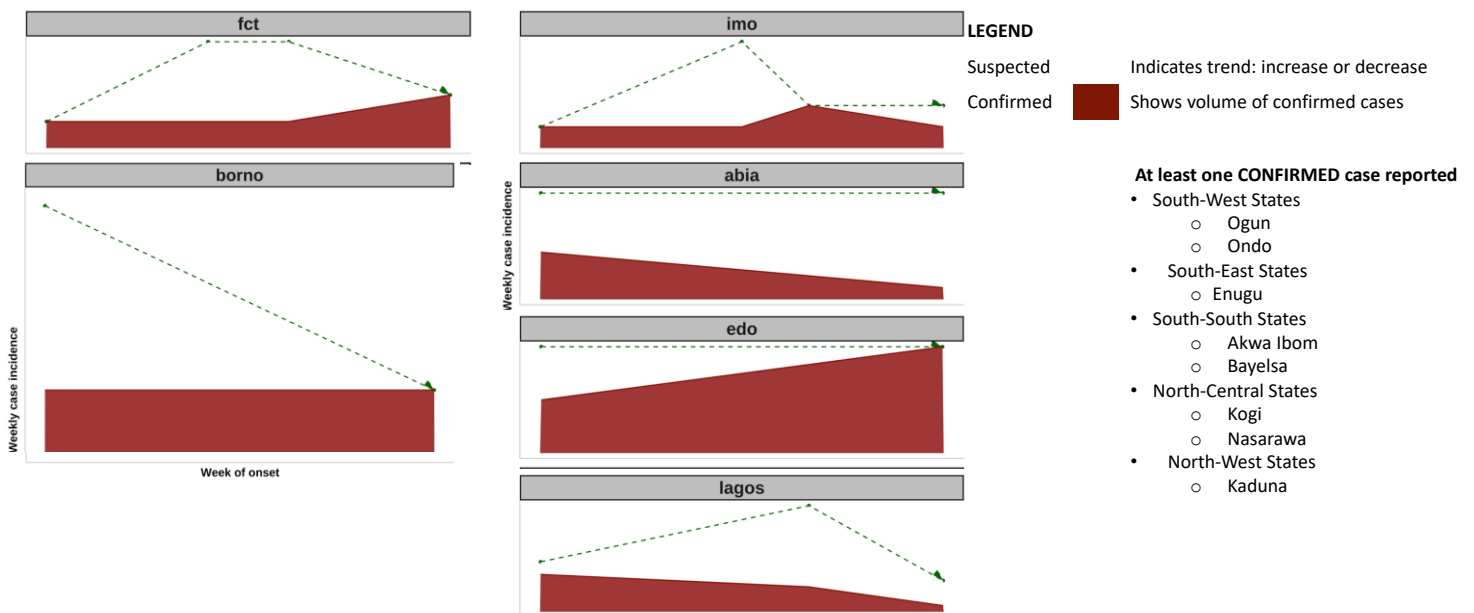


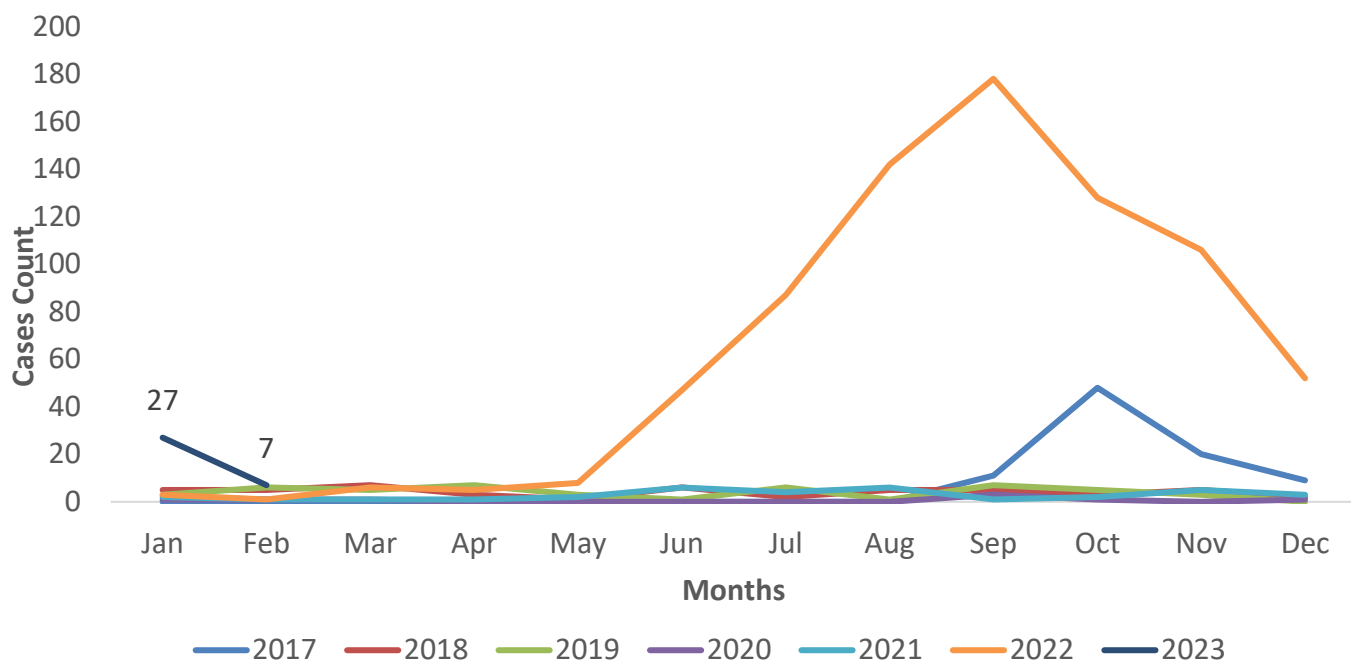
**Figure 2:** Age and sex distribution of Nigeria confirmed monkeypox cases Epi week 1 - 5, 2023



**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 from January 2023 till date





**Figure 5:** Nigeria confirmed Mpox cases by the year of incidence- September 2017 to 5<sup>th</sup> February 2023

**Table 1:** Summary statistics for annual Nigeria Mpox cases by reporting year, September 2017 – 29<sup>th</sup> January 2023

Reporting year	Suspected cases	Confirmed cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2023	258	34	1	2.9	12 + FCT	27
2022	2123	762	7	0.9	34 + FCT	238
2021	98	34	0	0.0	8 + FCT	25
2020	35	8	0	0.0	5	7
2019	65	47	1	2.1	11	26
2018	116	49	1	2.0	13	25
2017	198	88	6	6.8	14 + FCT	33

**Table 2:** Age distribution of cumulative number of confirmed Mpox cases September 2017 – 5<sup>th</sup> February 2023

Age Group	2017	2018	2019	2020	2021	2022	2023	Total
0-10 Years	7	5	1	0	1	125	4	143
11-20 Years	12	4	1	0	4	123	3	147
21-30 Years	34	13	13	4	10	187	10	271
31- 40 Years	26	17	22	4	13	205	8	295
41-50 Years	9	10	9	0	5	89	7	129
> 50 Years	0	0	1	0	1	33	2	37
<b>Total</b>	<b>88</b>	<b>49</b>	<b>47</b>	<b>8</b>	<b>34</b>	<b>762</b>	<b>34</b>	<b>1022</b>

**Table 3:** Nigeria confirmed Mpox cases by State, September 2017 – 5<sup>th</sup> February 2023

S/N	State	2017	2018	2019	2020	2021	2022	2023	Total
1	Lagos	4	1	15	4	6	188	10	228
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	1	42
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	1	20
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	0	16
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
	<b>Grand Total</b>	<b>88</b>	<b>49</b>	<b>47</b>	<b>8</b>	<b>34</b>	<b>762</b>	<b>34</b>	<b>1022</b>

## Response activities

Pillar	Activities to date	Next steps
<b>Coordination</b>	<ul style="list-style-type: none"> <li>• Contacted twelve (12) states (Oyo, Bauchi, Kogi, Kwara, Ogun, Ondo, FCT, Imo, Lagos, Nasarawa, Abia and Borno) to understand state-specific challenges for Mpox response</li> <li>• Six (6) states have logistical challenges with accessing contacts of Mpox cases</li> <li>• Kogi state is currently tracing contacts</li> </ul>	<ul style="list-style-type: none"> <li>• Continue to encourage states to leverage current surveillance activities for Mpox</li> <li>• Commence on-site enhanced surveillance activities at the 6 states</li> </ul>
<b>Surveillance</b>	<ul style="list-style-type: none"> <li>• Key variables in the case investigation forms (sex, age, and date of symptoms onset) were missing from some reporting states (Cross River, Kogi, Akwa Ibom and FCT)</li> <li>• Lagos, Edo, Borno, Akwa Ibom recorded at least one confirmed case but are yet to report on the SORMAS platform</li> </ul>	<ul style="list-style-type: none"> <li>• Sub-national department to follow-up on states with confirmed cases missing data on SORMAS</li> </ul>
<b>Laboratory</b>	<ul style="list-style-type: none"> <li>• 70% of samples met overall turnaround (time sample collected from states to time result shared to states)</li> <li>• The sample positivity rate for Mpox is 10% and 82% for Varicella-zoster virus (VZV)</li> <li>• 100 Mpox samples shipped to ACEGID laboratory for sequencing</li> </ul>	<ul style="list-style-type: none"> <li>• Obtain sequencing results from ACEGID laboratory</li> </ul>
<b>Case management</b>	<ul style="list-style-type: none"> <li>• Provide offsite support to states on Mpox management.</li> <li>• Follow-up on morbidity and mortality reports from states</li> </ul>	<ul style="list-style-type: none"> <li>• Data harmonization support</li> <li>• Continuous support on Mpox case management</li> <li>• Obtain more details of cases from states and update on SORMAS</li> </ul>
<b>IPC</b>	<ul style="list-style-type: none"> <li>• Reviewed healthcare investigation form for all priority diseases by the IPC TWG</li> <li>• Review of IPC IEC materials co-developed with Risk Comms pillar, BA-N and USAID-MTaPS</li> </ul>	
<b>Research and logistics</b>	<ul style="list-style-type: none"> <li>• Nigeria has the highest number of confirmed Mpox cases and the 4<sup>th</sup> highest case fatality ratio (0.9%)</li> <li>• Developing protocols defining vaccine use; draft guidance developed</li> <li>• Procured 504 doses of Tecoviramat, World Bank funded through REDISSE grant</li> </ul>	<ul style="list-style-type: none"> <li>• Plan for a meeting with stakeholders to discuss modes for administering vaccines and therapeutics</li> <li>• Finalise guidelines for medical management of Mpox cases</li> </ul>

## **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.