

WEEKLY DIPHTHERIA SITUATION REPORT

As of 9th March 2025 (Epi-Week 10, 2025)



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HIGHLIGHTS

In Epi-Week 10, 2025

- A total of **23** suspected cases were reported from 2 states (Lagos 20, and Katsina 3) across 2 LGAs.
- Of the 23 suspected cases reported, **0 (0%) were confirmed cases** (*0 lab confirmed; 0 epid linked; 0 clinically compatible*), **0 (0.0%) were discarded**, **10 (43.5%) are pending classification** and **13 (56.5%) were unknown**.
- No confirmed cases were reported for epi-week 10
- A total of **0 deaths (CFR: 0%)** were recorded among the confirmed cases.

Cumulatively: Epi-Week 19, 2022 - Epi-Week 10, 2025

- A total of **42,642** suspected cases were reported from 37 states across 350 LGAs.
- **Kano** (24,239), **Yobe** (5,330), **Katsina** (4,237), **Bauchi** (3,066), **Borno** (3,058), **Kaduna** (777) & **Jigawa** (364) accounted for 96.3 of suspected cases reported.
- Of the **42,642** suspected cases reported, 25,812 (60.5%) were **confirmed cases** (*396 lab confirmed; 216 epid linked; 25,200 clinically compatible*), 7,769 (18.2%) were **discarded**, 3,591 (8.4%) are **pending** classification & 5,470 (12.8%) were **unknown**.
- The confirmed cases were distributed across 184 LGAs in 26 states.
- **Kano** (18,108), **Bauchi** (2,334), **Yobe** (2,408), **Katsina** (1,501), **Borno** (1,161) & **Jigawa** (53), **Plateau** (119) & **Kaduna** (44) accounted for 99.7 of confirmed cases reported.
- Majority [**16,234 (62.9%)**] of the confirmed cases were among children aged 1 - 14 years.
- Only **4,981 (19.3%)** out of the 25,812 confirmed cases were fully vaccinated with a diphtheria toxoid-containing vaccine.
- A total of **1,319 deaths ((CFR: 5.1%))** were recorded among confirmed cases.

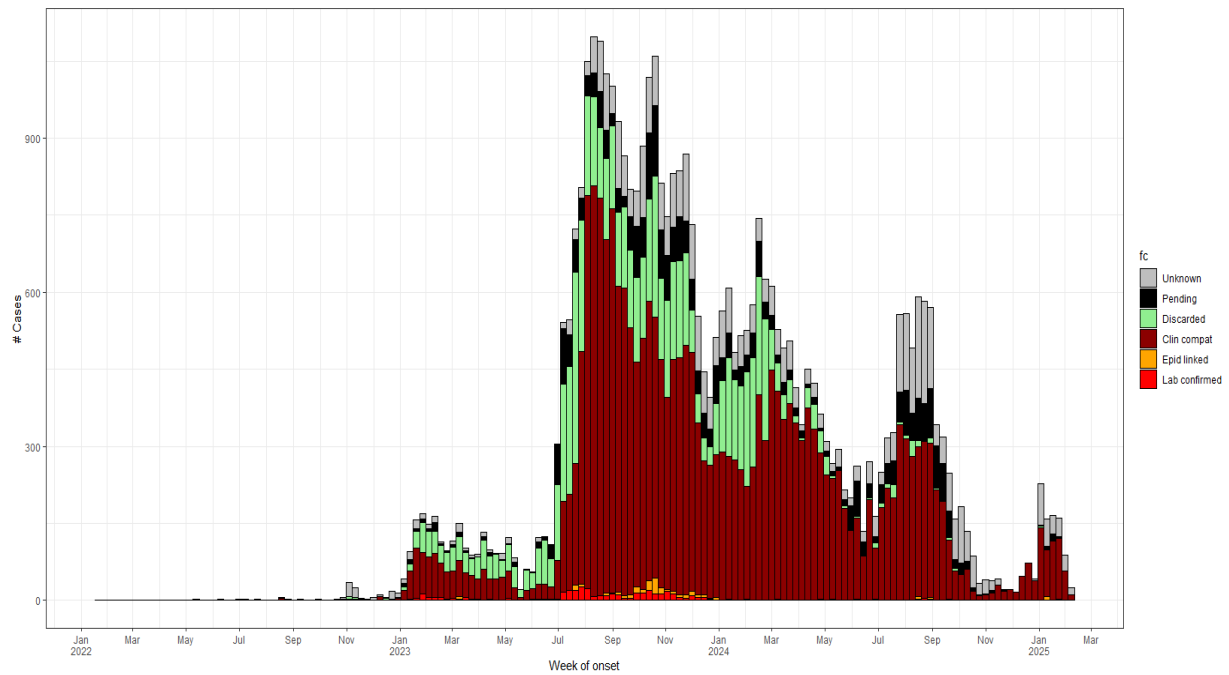


Figure 1: Epi-curve of confirmed diphtheria cases in Nigeria, epi-week 19 2022 - epi-week 10 2025

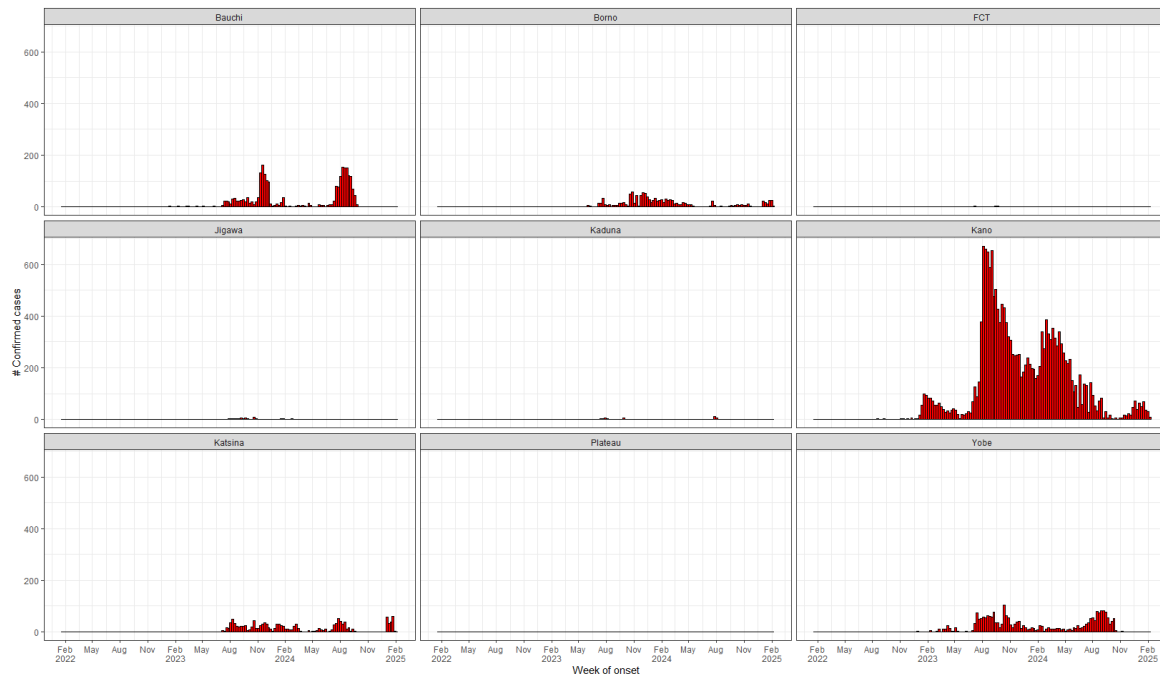


Figure 2: Epi-curve of confirmed diphtheria cases in high burden States, epi-week 19 2022 - epi-week 10 2025

Table 1: Distribution of diphtheria cases and deaths in Nigeria, epi-week 19 2022 - epi-week 10 2025

State	# Suspected Case	# Confirmed Case	% Confirmed Case	# Deaths among Confirmed Cases	CFR among Confirmed Cases (%)
Kano	24239	18108	75%	850	5%
Yobe	5,330	2,408	45%	109	5%
Bauchi	3,066	2,334	76%	104	4%
Katsina	4,237	1,501	32%	114	9%
Borno	3,035	1,139	38%	68	6%
Jigawa	364	53	15%	7	13%
Kaduna	777	44	6%	11	25%
Plateau	192	119	47%	29	48%
Sokoto	200	31	16%	5	16%
Zamfara	219	21	10%	0	0%
FCT	146	15	10%	7	47%
Gombe	216	7	3%	1	14%
Edo	20	6	30%	2	33%
Lagos	77	8	16%	6	83%
Adamawa	65	5	8%	4	80%
Nasarawa	104	3	3%	1	33%
Osun	16	3	19%	1	33%
Abia	25	2	8%	0	0%
Kebbi	70	2	3%	0	0%
Niger	11	2	18%	0	0%
Taraba	90	2	2%	0	0%
Cross River	1	1	100%	0	0%
Ekiti	36	1	3%	1	100%
Enugu	12	1	8%	0	0%
Imo	10	1	10%	0	0%
Ogun	6	1	17%	0	0%
Akwa Ibom	1	0	0%	0	
Anambra	1	0	0%	0	
Bayelsa	15	0	0%	0	
Benue	1	0	0%	0	
Delta	2	0	0%	0	
Ebonyi	1	0	0%	0	
Kogi	40	0	0%	0	
Kwara	1	0	0%	0	
Ondo	2	0	0%	0	
Oyo	16	0	0%	0	
Rivers	2	0	0%	0	

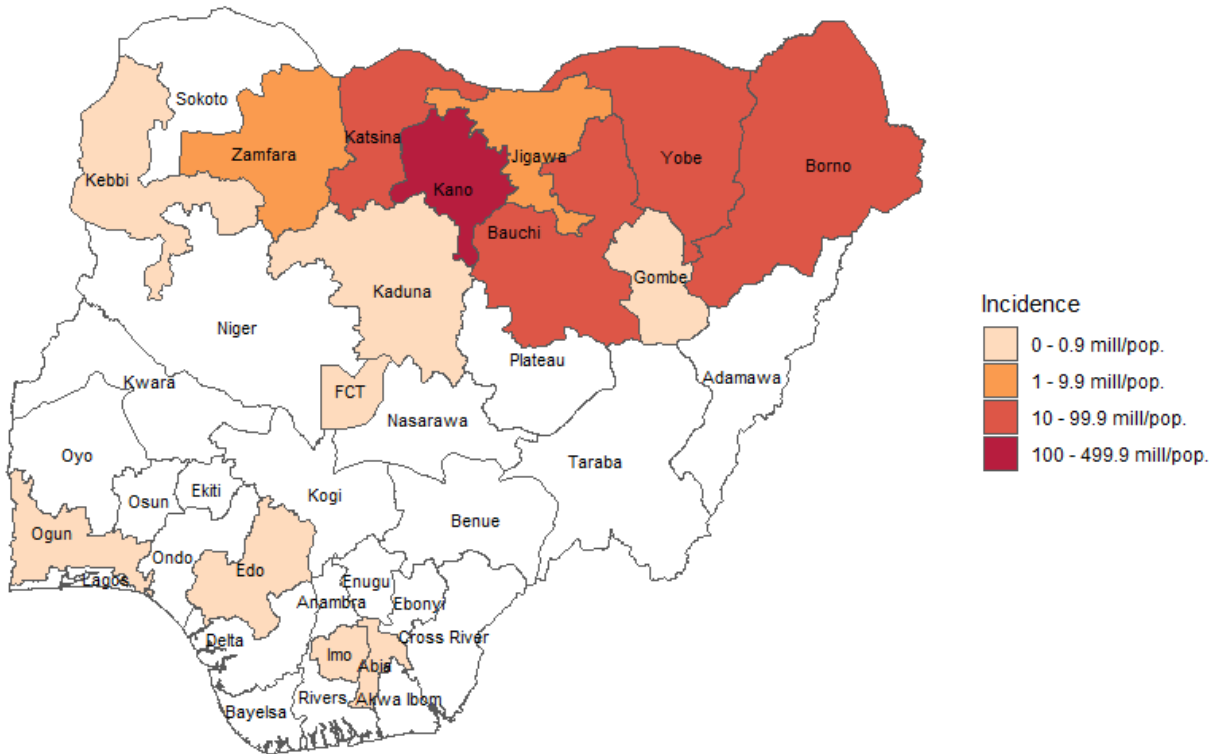


Figure 3: Incidence (per million population) of confirmed diphtheria cases in Nigeria by State, epi-week 19 2022 - epi-week 10 2025

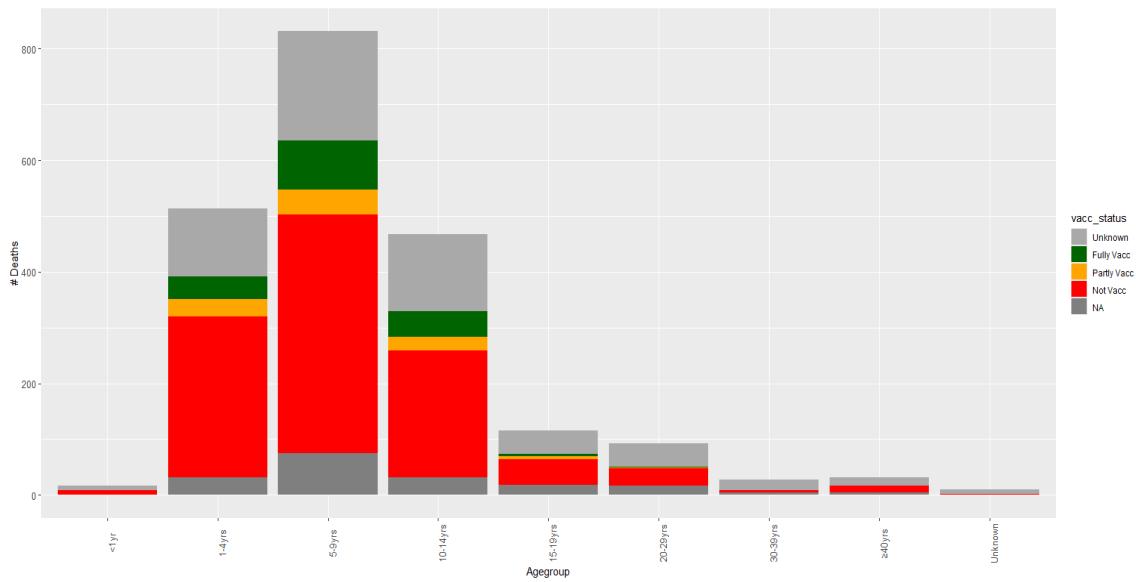
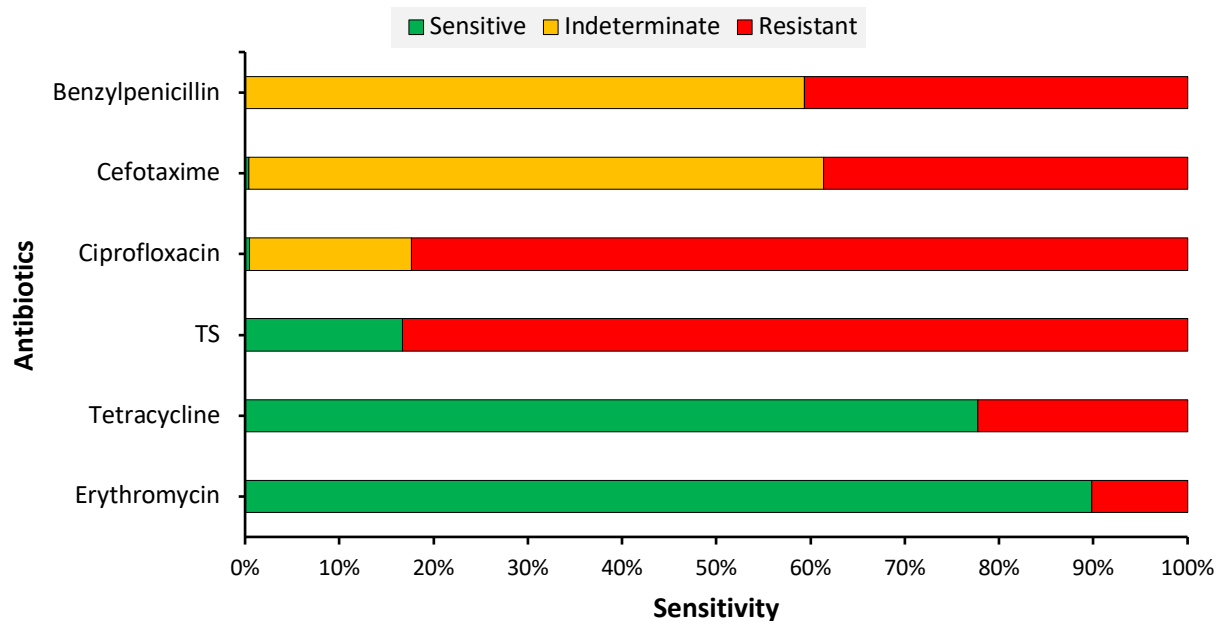


Figure 4: Age distribution and vaccination status of deaths among confirmed diphtheria cases in Nigeria, epi-week 19 2022 - epi-week 10 2025



*TS: Trimethoprim-sulfamethaxole

Figure 5: Drug sensitivity results of toxigenic *Corynebacterium diphtheriae* isolated in Nigeria, epi-week 19 2022 – epi-week 10 2025 (n = 226)

RESPONSE ACTIVITIES

- **COORDINATION**
 - Provides technical and offsite support to states on case identification, reporting and response especially non-reporting and low burden states.
 - Data harmonization with laboratory and case management pillars.
- **SURVEILLANCE**
 - Provides technical and offsite support to states on case identification, reporting and response especially non-reporting and low burden states.
 - Data harmonization with laboratory and case management pillars.
- **LABORATORY**
 - Preliminary and confirmatory testing at sub-national and national level, respectively.
 - Analysis of sequenced *Corynebacterium diphtheriae* isolates.
 - Discussions on validation of PCR on clinical samples.
 - Ongoing Diphtheria Proficiency Testing for Laboratories.
- **CASE MANAGEMENT**
 - Prepositioning of DAT across states and facilities.
 - Data harmonization with states and other pillars.
 - Collection of case management data across high burden states.
 - Remote technical support to states and treatment centres.
- **RCCE**
 - Continues engagement with key influencers (Religious and Traditional) in affected states and community. This is done by leveraging on National traditional and religious leaders' platform.
- **VACCINATION**
 - Conducted 3rd round of the reactive vaccination in the remaining states.

CHALLENGES

- Very low-test positivity rate as all the cases in 2024 were confirmed by clinical compatibility.
- Inadequate reagents and consumables for commencement of PCR directly on clinical samples.

NEXT STEPS

- Continue case management data harmonization and follow-up with states.
- Continue data collection by case managers across DTCs.
- Offsite/onsite support, collaboration, and supervision of state diphtheria RCCE activities.
- Continue engagement of social media channels with comics and interview videos of survivors.
- Continue whole genomic sequencing (WGS) for confirmed isolates.
- Optimize protocol for PCR on clinical samples and metagenomics.
- Capacity building on laboratory diagnosis of diphtheria using PCR directly on clinical samples.
- Support testing sites with reagents and consumables.