

FUATION REPORT

Nigeria Centre For Disease Control and Prevention (NCDC)

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TITLE:	UPDATE ON MPOX IN NIGERIA
SERIAL NUMBER:	10
EPI-WEEK:	34
DATE:	August 25, 2024

Key Indicators

Reporting Year	Reporting week	Confirmed (Suspected) cases	Death (Confirmed cases)	Case Fatality Rate %(CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2024 Current	Week 34	8(57)	0	0.0	5	6
2024 Cumulative	Week 1-34	48(868)	0	0.0	20 + FCT	35
2023 Cumulative	Week 1- 52	98(1182)	2	2.0	25 +FCT	65

Highlights

- 57 new suspected cases were reported in Epi week 34, 2024, compared with 25 cases reported in the previous week (Epi week 33)
- Eight (8) confirmed cases were reported in week 34 compared with one (1) confirmed case reported in week 33, 2024.
- Twenty (20) States + FCT have recorded at least one confirmed case across thirty-five (35) Local Government Areas in 2024
- Since September 2017, 4685 suspected cases have been reported from 36 states and FCT, with 1134 confirmed cases (24.2%) from 35 States and FCT with seventeen (17) deaths. Males (~70%) are predominantly affected.
- The National Mpox multi-sectoral & multi-partner Emergency Operation Center (EOC) continues to coordinate the response.

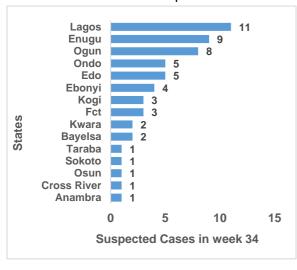


Table 2: Confirmed cases in week 34

States	Confirmed Cases in Epi weeks 34					
Enugu	4					
Bayelsa	1					
Cross River	1					
Edo	1					
Osun	1					
TOTAL	8					

Fig 1: Suspected cases recorded in Week 34 TECTING THE HEALTH OF NIGERIANS





















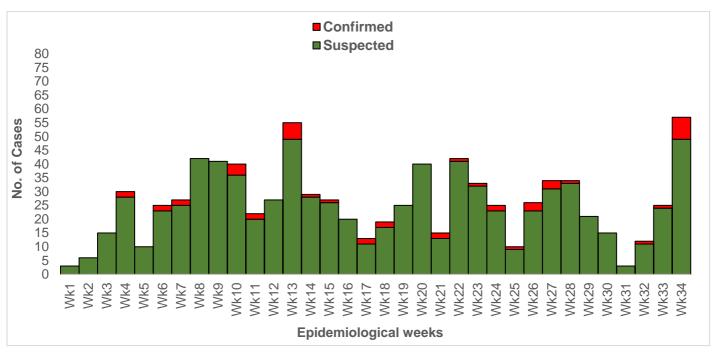


Figure 2: Epidemic curve of suspected and confirmed mpox cases from January 2024 to date.

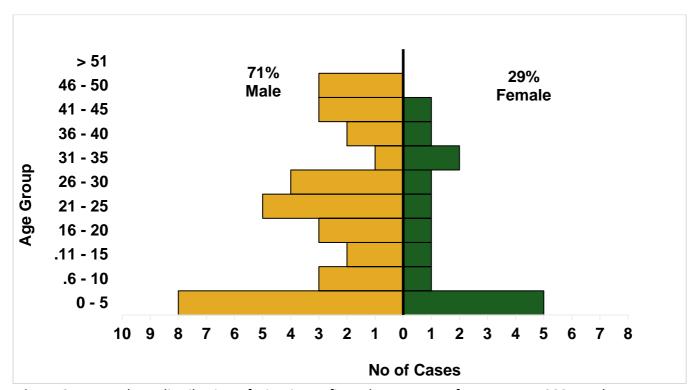


Figure 3: Age and sex distribution of Nigeria confirmed mpox cases from January 2024 to date.

















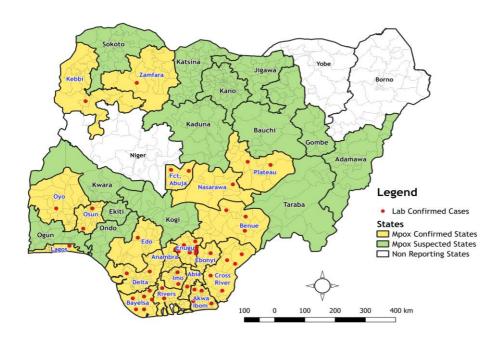


Figure 4: Map of Nigeria showing States with suspected and confirmed mpox Cases from January 2024 till date.

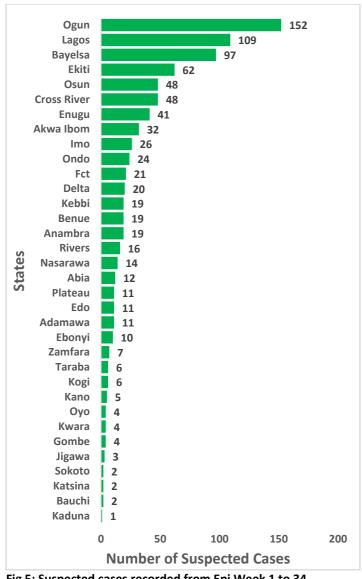


Fig 5: Suspected cases recorded from Epi Week 1 to 34

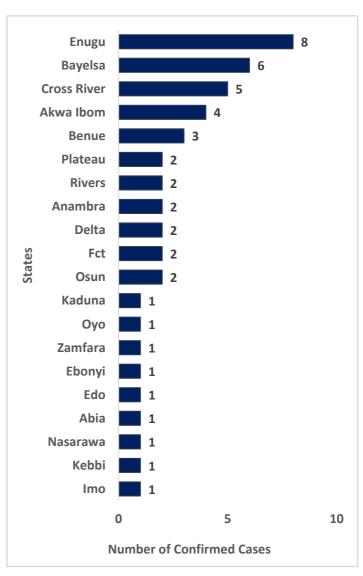


Fig 6: Confirmed cases recorded from Epi Week 1 to 34

















Table 3: Summary statistics for annual Nigeria mpox cases by reporting year, September 2017 – 25th August 2024

Reporting year	Suspected cases	Confirmed cases	(Confirmed Rate % (CFR) (Conf		States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2024	868	48	0	0.0	20 + FCT	35
2023	1182	98	2	2.0	25 +FCT	65
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 4: Age distribution of cumulative number of confirmed mpox cases September 2017 – 25th August 2024

Age Group	2017	2018	2019	2020	2021	2022	2023	2024	Total
0-10 Years	7	5	1	0	1	125	21	17	177
11-20 Years	12	4	1	0	4	123	8	7	159
21-30 Years	34	13	13	4	10	187	24	9	294
31- 40 Years	26	17	22	4	13	205	21	8	316
41-50 Years	9	10	9	0	5	89	17	7	146
> 50 Years	0	0	1	0	1	33	7	0	42
Total	88	49	47	8	34	762	98	48	1134















Table 5: Nigeria confirmed Mpox cases by State, September 2017 – 25th August 2024

S/N	State	2017	2018	2019	2020	2021	2022	2023	2024	Total
1	Lagos	4	1	15	4	6	188	27	1	246
2	Rivers	25	14	7	1	5	37	4	2	95
3	Bayelsa	19	11	7	0	6	45	2	6	96
4	Abia	1	2	0	0	0	58	6	1	68
5	Delta	3	6	10	1	9	31	3	2	65
6	Imo	5	2	1	0	0	45	5	1	59
7	Ogun	0	0	0	0	1	40	17	0	58
8	Ondo	0	0	0	0	0	40	2	0	42
9	Edo	4	1	1	0	4	27	4	1	42
10	FCT	5	0	0	0	1	25	4	2	37
11	Anambra	0	1	1	0	0	25	0	2	29
12	Cross River	9	3	1	0	1	12	1	5	32
13	Kwara	0	0	0	0	0	21	0	0	21
14	Plateau	0	2	0	1	0	16	0	2	21
15	Akwa Ibom	6	0	1	0	0	12	4	4	27
16	Nasarawa	1	1	0	0	0	17	1	1	21
17	Adamawa	0	0	0	0	0	16	0	0	16
18	Oyo	1	3	2	0	0	10	1	1	18
19	Kaduna	0	0	0	0	0	15	2	1	18
20	Ebonyi	0	0	0	1	0	12	1	1	15
21	Benue	2	0	0	0	0	10	0	3	15
22		0	0	0	0	0	11		0	13
23	Borno	1	2				4	2	8	
	Enugu	0	0	1	0	0		4		20
24 25	Katsina Taraba	0	0	0	0	0	8 7	0	0	9 7
26	Kano	0	0	0	0	0	7	0	0	7
27	Gombe	0	0	0	0	0	6	0	0	6
28	Kogi	0	0	0	0	0	5	2	0	7
29	Osun	0	0	0	0	0	5	1	2	8
30	Ekiti	2	0	0	0	0	1	1	0	4
31	Niger	0	0	0	0	1	1	1	0	3
32	Kebbi	0	0	0	0	0	2	1	1	4
33	Bauchi	0	0	0	0	0	1	0	0	1
34	Zamfara	0	0	0	0	0	1	0	1	2
35	Yobe	0	0	0	0	0	1	0	0	1
36	Jigawa	0	0	0	0	0	0	1	0	1
	Grand	88	49	47	8	34	762	98	48	1134
	Total									

Notes on this report.

Data Source

Information for this disease was case-based data retrieved from the National Mpox Emergency Operations Centre.



















Mpox Case definitions

Suspected case

• An acute illness with fever >38.3°C, intense headache, lymphadenopathy, back pain, myalgia, and intense asthenia followed by a progressively developing rash often beginning on the face (most dense) and then spreading elsewhere on the body & may soles of feet and palms of the hand.

Probable case

• A case that meets the clinical case definition and 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, feces, 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.

Mpox Prevention Measures

To prevent the spread of mpox:

- Avoid close contact with individuals showing symptoms, particularly those with rashes or skin lesions.
- Practice good hand hygiene by regularly washing hands with soap and water or using an alcohol-based hand sanitizer.
- Wear protective gear (gloves, masks) when caring for someone with suspected or confirmed mpox.
- Avoid contact with animals that may harbor the virus, such as rodents and primates, especially in areas where mpox is known to occur.
- Ensure meat is thoroughly cooked before consumption.

Actions for Healthcare Providers

- Be vigilant for patients presenting with fever, rash, and other mpox symptoms, especially if they have a history of travel to affected areas or contact with suspected cases.
- Promptly isolate suspected cases to prevent transmission within healthcare settings.
- Notify the relevant public health authorities immediately upon identifying a suspected case.
- Educate patients on the importance of reporting symptoms early and adhering to isolation guidelines if diagnosed with mpox.

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