



SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

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TITLE:	UPDATE ON MPOX IN NIGERIA		
SERIAL NUMBER:	34		
EPI-WEEK:	50		
DATE:	December 18, 2022		

Table 1 – Key Indicators

Key Indicators	Number
Total confirmed cases in Epi Week 50, 2022	9
Total suspected cases from January 1 st to December 18 th , 2022 (Epi week 1 to 50)	2042
Total confirmed cases from January 1 st to December 18 th , 2022 (Epi week 1 to 50)	753
Total deaths from January 1 st to December 18 th , 2022 (Epi week 1 to 50)	7
Total deaths Sept 2017 - December 18 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 – December 18 th , 2022)	979
Grand total suspected cases (Sept 2017 – December 18 th , 2022)	2551

- Fifty-two (52) new suspected cases reported in Epi week 50, 2022 (5th to 18th December 2022) from nineteen (19) states and FCT Ekiti (10), Lagos (7), Bayelsa (4), Cross River (4), Edo (4), Ogun (4), Nasarawa (3), Ondo (3), Akwa Ibom (2), Imo (2), Benue (1), Delta (1), FCT (1), Kaduna (1), Kogi (1), Kwara (1), Osun (1), Rivers (1) and Zamfara (1).
- Of the Fifty-two (52) suspected cases, nine (9) new confirmed cases have been recorded in Epi week 50 from seven (7) states and FCT Edo (2), Akwa Ibom (1), FCT (1), Lagos (1), Imo (1), Nasarawa (1), Ondo (1) and Rivers (1)
- From 1st January to 18th December 2022, Nigeria has recorded 2042 suspected cases with 753 confirmed cases (494 male, 259 female) from thirty-three (33) states and FCT Lagos (187), Abia (58), Bayelsa (45), Imo (43), Ogun (40), Ondo (37) Rivers (37), Delta (30), Edo (27), Anambra (25), FCT (23), Kwara (21), Nasarawa (17), Adamawa (16), Plateau (16), Kaduna (15), Cross River (12), Ebonyi (12), Akwa Ibom (12), Borno (11), Benue (10), Oyo (10), Katsina (8), Taraba (7), Kano (7), Gombe (6), Kogi (5), Osun (5), Enugu (4), Kebbi (2), Niger (1), Bauchi (1), Zamfara (1), Not specified (1), and Ekiti (1).
- Seven (7) associated deaths were recorded from 7 states in 2022 Delta (1), Lagos (1), Ondo (1), Akwa Ibom (1), Kogi (1), Taraba (1), and Imo (1). **CFR 0.9%**

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- Overall, since the re-emergence of Mpox in September 2017, 2551 suspected cases have been reported from 36 states and FCT in the country. Of these, 979 of 2551 (38.4%) were confirmed with majority male (647 male, 332 female) and from 33 states and FCT Lagos (217), Rivers (89), Bayelsa (88), Abia (61), Delta (59), Imo (51), Ogun (41), Ondo (37), Edo (37), FCT (29), Anambra (27), Cross-River (26), Kwara (21), Plateau (19), Akwa Ibom (19), Nasarawa (19), Adamawa (16), Oyo (16), Kaduna (15), Ebonyi (13), Benue (12), Borno (11), Katsina (8), Enugu (8),Taraba (7), Kano (7), Gombe (6), Kogi (5), Osun (5), Ekiti (3), Niger (2), Kebbi (2), Bauchi (1) and Zamfara (1).
- Fifteen (15) deaths have been recorded since September 2017 (CFR= 1.5%) 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).

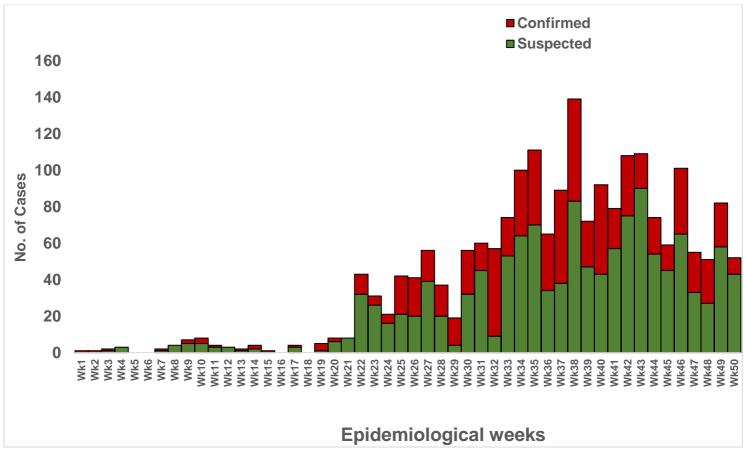


Figure 1: Epidemic curve of suspected and confirmed Mpox cases January 2022 till date





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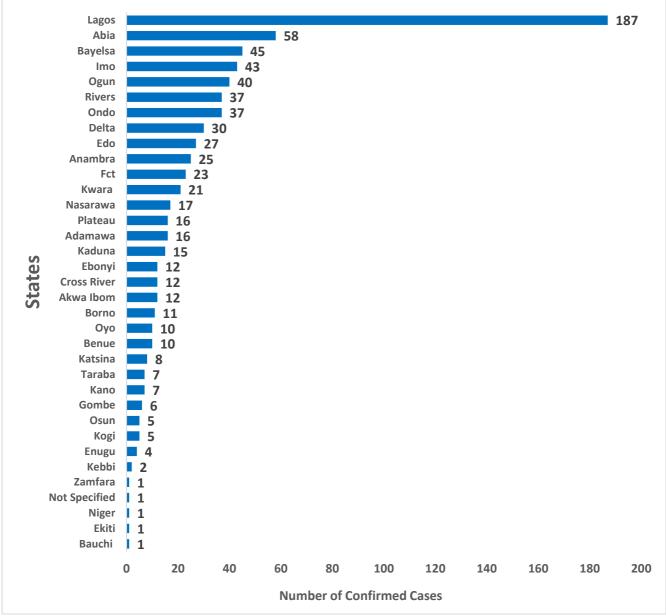


Figure 2: Bar chart showing confirmed Mpox cases by state from January 1st – 18th December 2022





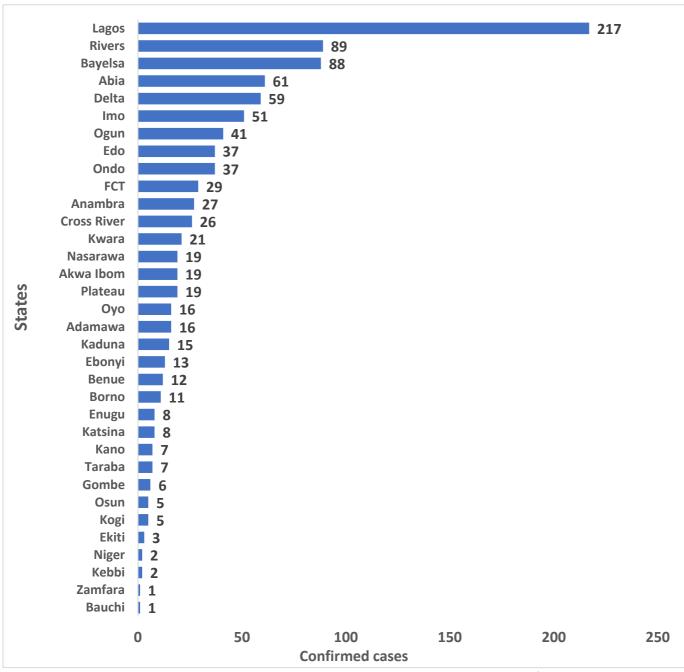


Figure 3: Bar chart showing confirmed Mpox cases by state, September 2017 – 18th December 2022





S/N	State	2017	2018	2019	2020	2021	2022	Total
1	Lagos	4	1	15	4	6	184	217
2	Rivers	25	14	7	1	5	35	89
3	Bayelsa	19	11	7	0	6	42	88
4	Abia	1	2	0	0	0	58	61
5	Delta	3	6	10	1	9	30	59
6	Imo	5	2	1	0	0	42	51
7	Ogun	0	0	0	0	1	40	41
8	Ondo	0	0	0	0	0	36	37
9	Edo	4	1	1	0	4	25	37
10	FCT	5	0	0	0	1	22	29
11	Anambra	0	1	1	0	0	25	27
12	Cross River	9	3	1	0	1	12	26
13	Kwara	0	0	1	0	0	21	21
14	Plateau	0	2	0	1	0	15	19
15	Akwa Ibom	6	0	1	0	0	11	19
16	Nasarawa	1	1	0	0	0	16	19
17	Adamawa	0	0	0	1	0	16	16
18	Оуо	1	3	2	0	0	10	16
19	Kaduna	0	0	0	0	0	15	15
20	Ebonyi	0	0	0	1	0	12	13
21	Benue	2	0	0	0	0	10	12
22	Borno	0	0	0	0	0	11	11
23	Katsina	0	0	0	0	0	8	8
24	Enugu	1	2	1	0	0	4	8
25	Taraba	0	0	0	0	0	7	7
26	Kano	0	0	0	0	0	7	7
27	Gombe	0	0	0	0	0	6	6
28	Kogi	0	0	0	0	0	5	5
29	Osun	0	0	0	0	0	5	5
30	Ekiti	2	0	0	0	0	1	3
31	Niger	0	0	0	0	1	1	2
32	Kebbi	0	0	0	0	0	2	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	753	979

Table 2: Nigeria confirmed Mpox cases by state, September 2017 – 18th December 2022



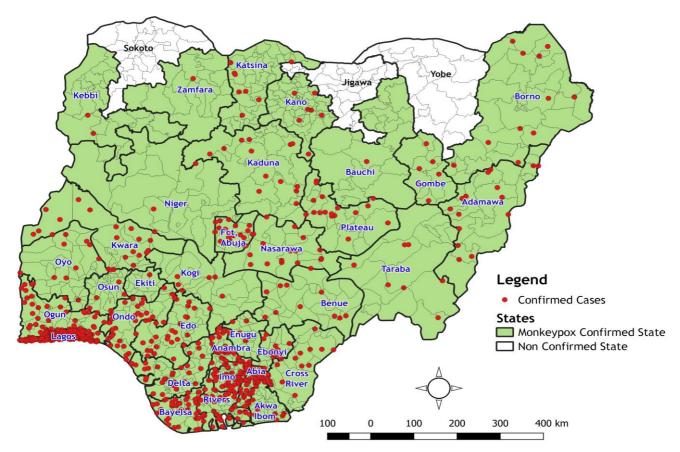


Figure 4: Map of Nigeria showing states with confirmed Mpox cases from January 2022 till date (33 states and FCT)

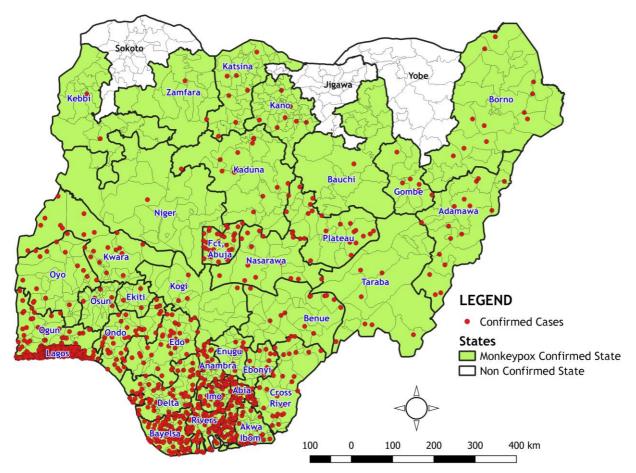


Figure 5: Map of Nigeria showing states with confirmed Mpox cases from September 2017 till date (33 states and FCT)

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CUSAID Breakthrough





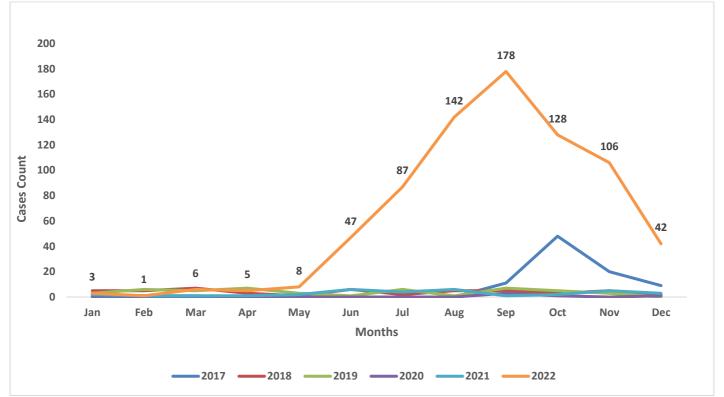


Figure 6: Nigeria confirmed Mpox cases by the year of incidence- September 2017 to 18th December 2022

Age Group	2017	2018	2019	2020	2021	2022	Total
0-10 Years	7	5	1	0	1	124	138
11-20 Years	12	4	1	0	4	123	144
21-30 Years	34	13	13	4	10	183	257
31- 40 Years	26	17	22	4	13	202	284
41-50 Years	9	10	9	0	5	89	122
> 50 Years	0	0	1	0	1	32	34
Total	88	49	47	8	34	753	979

Table 3: Age distribution of confirmed Mpox cases September 2017 – 18th December 2022



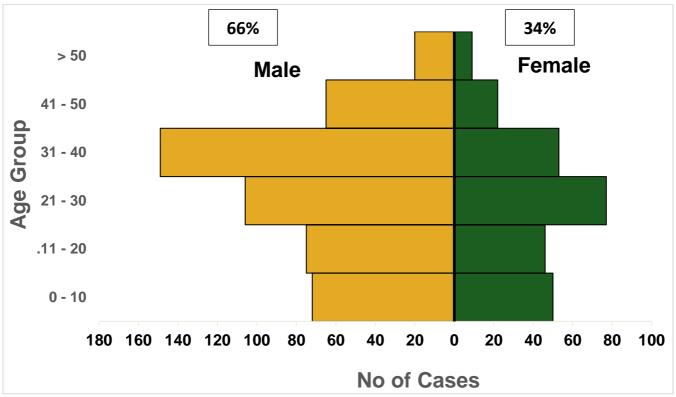


Figure 7: Age and sex distribution of Nigeria confirmed Mpox cases January 1st -18th December 2022

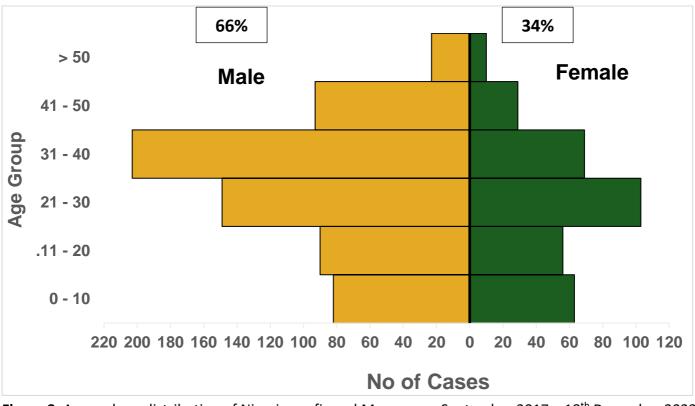


Figure 8: Age and sex distribution of Nigeria confirmed Mpox cases September 2017 – 18th December 2022



CUSAID Breakthrough

Pillar	Activities to date	Next steps
Coordination	 Held a meeting with Plateau, Bayelsa, Zamfara, Nasarawa states: key challenges included challenges with case finding due to geographical accessibility and limited supply of sample collection materials Data was harmonised with the states by comparing the Mpox linelist with the national Mpox SORMAS and laboratory databases 	 Plan for high-level advocacy to states' governments: provision of CIFs, need for data support, provision of sample collection and transport materials
Risk communication	 Ongoing airing of jingles in six states: Ebonyi, Lagos, Plateau, Bauchi, Rivers and Adamawa Reviewed and updated Mpox video jingles 	 Continue engagement with the public via NCDC social media platforms Air and monitor Mpox jingles nationally and subnationally
Surveillance	 Provided off-site support to states on case identification, reporting and response Harmonised and analysed Mpox data for the development of weekly sitrep Updated and validated data in SORMAS 	 Follow up on retrieving contact information of new confirmed cases Follow up with SORMAS SSOs and States on completeness of data on both CIFs and SORMAS, including silent states (Jigawa, Sokoto and Yobe)
IPC	 Conducted IPC training for 30 IPC focal persons from secondary and tertiary health facilities in Bauchi state Finalised plans for starting multimodal hand hygiene improvement program across 30 HFs in FCT and Nasarawa state. Finalised mpox IPC guidelines, homebased care and management. 	 Finalisation of graphic design and technical content for IPC IEC materials co-developed with BA-N and Risk comm pillar ongoing
Laboratory	 Conducted sample management training for National reference Laboratory Central Public Health Laboratory 	 Capacity strengthening and sample management in identified states planned

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°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, stool, 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





