



# ITUATION REPORT

Nigeria Centre For Disease Control and Prevention (NCDC)

NCDC.GOV.NG

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TITLE:	UPDATE ON MPOX IN NIGERIA	
SERIAL NUMBER:	14	
EPI-WEEK:	38	
DATE:	September 22, 2024	

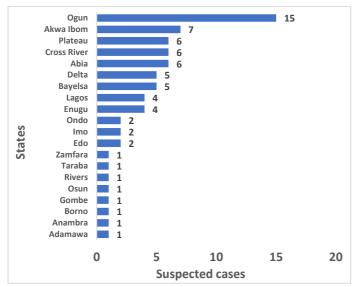
# **Table 1: Key Indicators**

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 38	3(72)	0	0.0	2	2
2024 Cumulative	Week 1-38	78(1180)	0	0.0	24 + FCT	54
2023 Cumulative	Week 1- 52	98(1182)	2	2.0	25 +FCT	65

# **Highlights**

- 72 new suspected cases were reported in Epi week 38, 2024, compared with 71<sup>†</sup> cases reported in the previous week (Epi week 37).
- Three (3) confirmed cases were reported in week 38, compared with eight (8)<sup>†</sup> confirmed cases reported in week 37, 2024.
- Twenty-four (24) States & FCT have recorded at least a confirmed case across fifty-four (54) Local Government Areas in 2024
- Since September 2017, 4997 suspected cases have been reported from 36 states and FCT, with 1164 confirmed cases (23.3%) from 35 States and FCT with seventeen (17) deaths.
- The National Mpox multi-sectoral & multi-partner Emergency Operation Center (EOC) continues to coordinate the response.
  - † Epi week 37 had a backlog of 8 suspected (2 confirmed cases).

Table 2: Confirmed cases in week 38



States	Confirmed Cases in Epi weeks 38
Plateau	2
Delta	1
TOTAL	3

Fig 1: Suspected cases recorded in Week 38























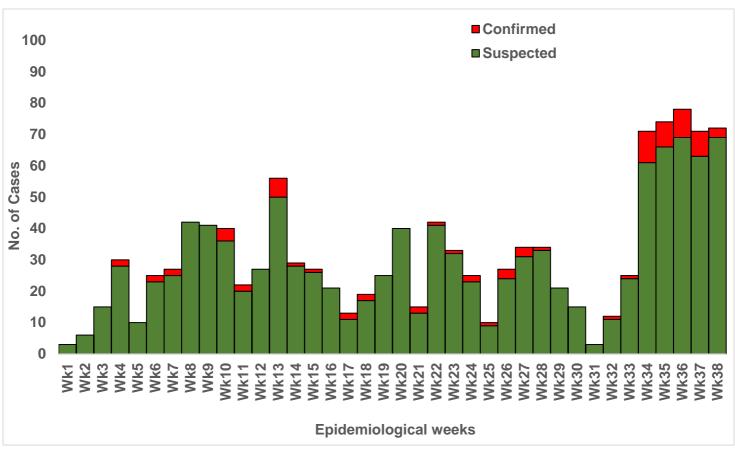


Fig 2: Epidemic curve of suspected and confirmed mpox cases from January 2024 to date.

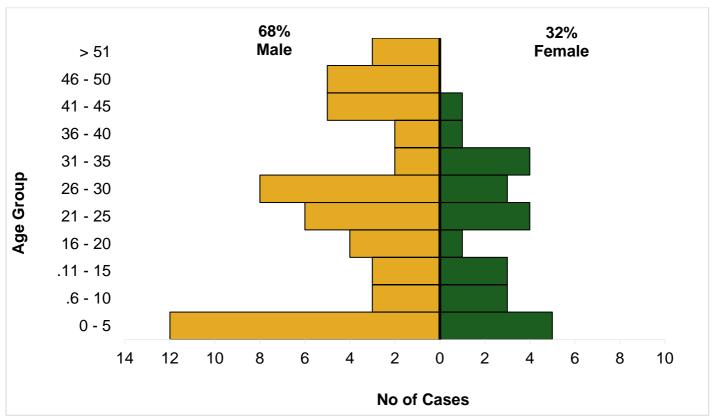


Fig 3: Age and sex distribution of Nigeria confirmed mpox cases from January 2024 to date.



















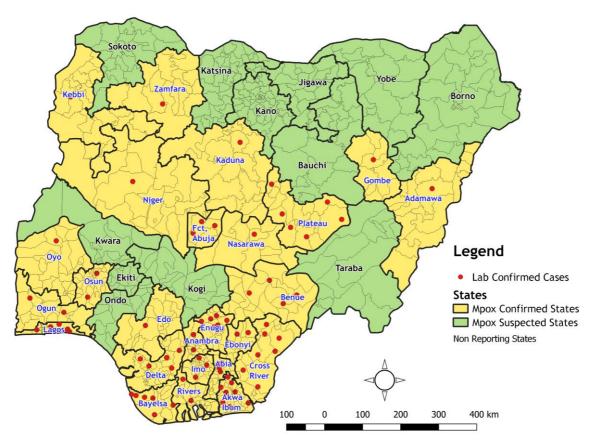
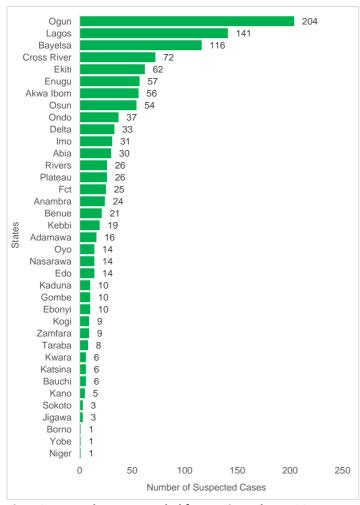


Fig 4: Map of Nigeria showing States with suspected and confirmed mpox Cases from January 2024 till date.



Enugu 8 Akwa Ibom 8 Lagos **Cross River Plateau Bayelsa** 6 Delta **Benue** Imo **Fct** 3 **Abia Rivers** States 2 Osun **Ogun Anambra** Zamfara Oyo Niger Nasarawa Kebbi Kaduna Gombe Edo Ebonyi Adamawa 0 2 10 **Number of Confirmed Cases** 

Fig 5: Suspected cases recorded from Epi Week 1 to 38

Fig 6: Confirmed cases recorded from Epi Week 1 to 38



















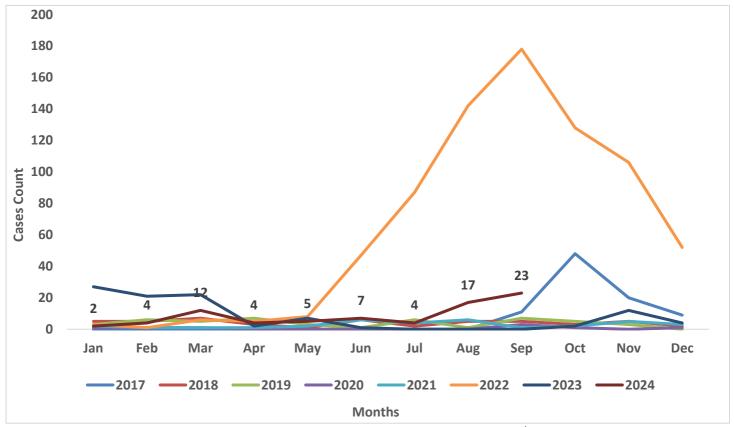


Fig 7: Nigeria confirmed Mpox cases by the year of incidence- Sept. 2017 to 22<sup>nd</sup> Sept. 2024

## 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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