



SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

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TITLE:	UPDATE ON MONKEYPOX (MPX) IN NIGERIA	
SERIAL NUMBER:	15	
EPI-WEEK:	31	
DATE:	August 7, 2022	

Table 1 – Key Indicators

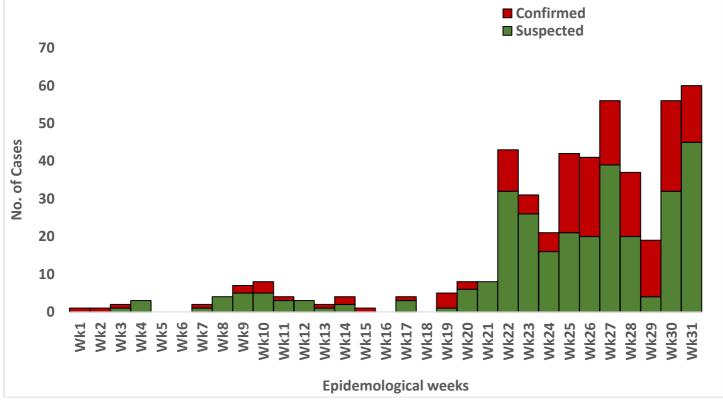
Key Indicators	Number
Total confirmed cases in Epi Week 31, 2022	15
Total suspected cases from January 1 st to August 7 th , 2022 (Epi week 1 to 31)	473
Total confirmed cases from January 1 st to August 7 th , 2022 (Epi week 1 to 31)	172
Total deaths from January 1 st to August 7 th , 2022 (Epi week 1 to 31)	4
Total deaths Sept 2017 - August 7 th , 2022	12
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 – August 7 th , 2022)	398
Grand total suspected cases (Sept 2017 – August 7 th , 2022)	985

- Sixty (60) new suspected cases were reported in Epi week 31, 2022 (1st to 7st August 2022) from nineteen (19) states Ebonyi (8), Abia (5), Adamawa (5), Ondo (5), Taraba (5), FCT (4), Imo (4), Lagos (4), Ogun (4), Edo (3), Anambra (2), Gombe (2), Kwara (2), Rivers (2), Cross River (1), Oyo (1), Kano (1), Nasarawa (1) and Niger (1)
- Of sixty (60) suspected cases, fifteen (15) new confirmed cases have been recorded in Epi week 31 from ten (10) states Imo (3), FCT (2), Ondo (2), Rivers (2), Abia (1), Anambra (1), Ebonyi (1), Edo (1), Ogun (1) and Nasarawa (1).
- From 1st January to 7th August 2022, there have now been 473 suspected cases with 172 confirmed cases (115 male, 57 female) from twenty-seven (27) states Lagos (20), Ondo (16), Adamawa (13), Rivers (13), Delta (12), Bayelsa (12), Edo (9), Nasarawa (9), Anambra (7), FCT (7), Imo (7), Plateau (6), Taraba (5), Kwara (5), Kano (5), Abia (4), Cross River (3), Borno (3), Oyo (3), Gombe (3), Katsina (2), Kogi (2), Ogun (2), Niger (1), Bauchi (1), Akwa Ibom (1) and Ebonyi (1).
- Four (4) associated deaths have been recorded from 4 states in 2022 Delta (1), Lagos (1), Ondo (1) and Akwa Ibom (1)





- Overall, since the re-emergence of monkeypox in September 2017, 985 suspected cases have been reported from 35 states in the country. Of these 985 suspected cases, 398 (40.4%) were confirmed (263 male, 135 female) from 30 states Rivers (65), Bayelsa (55), Lagos (50), Delta (41), Edo (19), Cross River (17), Ondo (16), Imo (15), Adamawa (13), FCT (13), Nasarawa (11), Oyo (9), Plateau (9), Anambra (9), Akwa Ibom (8), Abia (7), Kano (5), Taraba (5), Kwara (5), Enugu (4), Borno (3), Gombe (3), Ogun (3), Benue (2), Ekiti (2), Niger (2), Katsina (2), Kogi (2), Ebonyi (2), and Bauchi (1).
- Twelve (12) deaths have been recorded (CFR= 3.0%) since September 2017 in nine states Lagos (3), Edo (2), Imo (1), Cross River (1), FCT (1), Rivers (1), Ondo (1) Delta (1) and Akwa Ibom (1)
- There are ongoing efforts to strengthen surveillance at National and subnational levels, to increase awareness, and to promptly detect and respond to the outbreak



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*AFENET APRILACEN ()

Figure 1: Epidemic Curve of Suspected & Confirmed MPX Cases Jan. 2022 till date



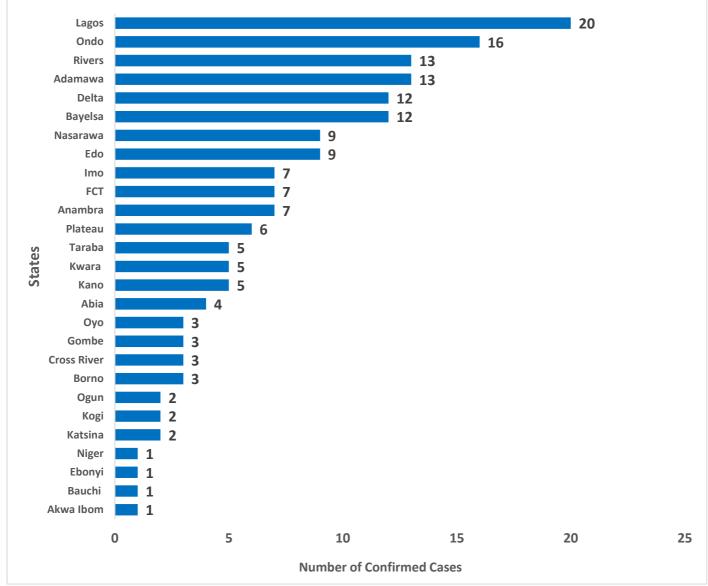


Figure 2: Bar chart Showing confirmed monkeypox cases by state from January 1st – 7th August 2022





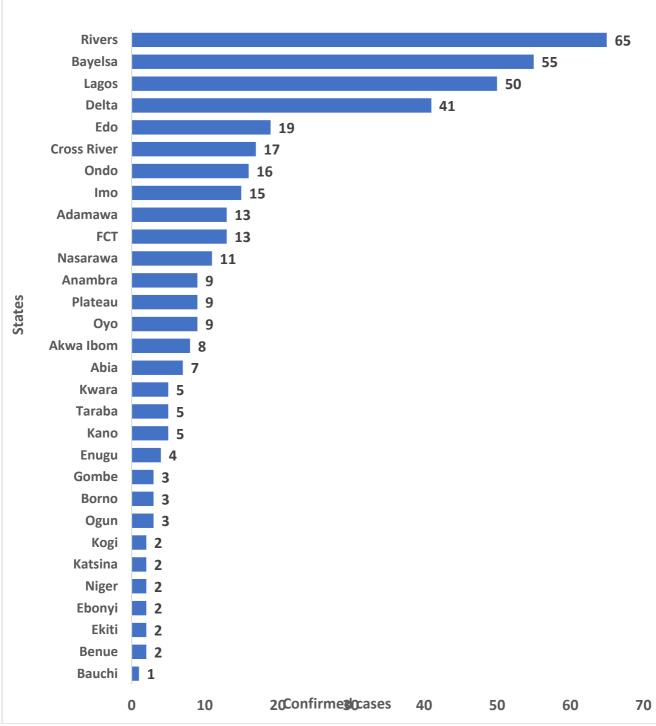


Figure 3: Bar chart Showing confirmed monkeypox cases by state, September 2017 – 7th August 2022



Table 2: Nigeria confirmed	monkeypox cases	by state. Septemb	er 2017 – 7 th August 2022
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State	2017	2018	2019	2020	2021	2022	Total
Rivers	25	14	7	1	5	13	65
Bayelsa	19	11	7	0	6	12	55
Lagos	4	1	15	4	6	20	50
Delta	3	6	10	1	9	12	41
Cross River	9	3	1	0	1	3	17
Imo	5	2	1	0	0	7	15
Akwa Ibom	6	0	1	0	0	1	8
Оуо	1	3	2	0	0	3	9
Edo	4	1	1	0	4	9	19
FCT	5	0	0	0	1	7	13
Enugu	1	2	1	0	0	0	4
Abia	1	2	0	0	0	4	7
Plateau	0	2	0	1	0	6	9
Nasarawa	1	1	0	0	0	9	11
Benue	2	0	0	0	0	0	2
Anambra	0	1	1	0	0	7	9
Ekiti	2	0	0	0	0	0	2
Ebonyi	0	0	0	1	0	1	2
Niger	0	0	0	0	1	1	2
Ogun	0	0	0	0	1	2	3
Adamawa	0	0	0	0	0	13	13
Kano	0	0	0	0	0	5	5
Ondo	0	0	0	0	0	16	16
Taraba	0	0	0	0	0	5	5
Katsina	0	0	0	0	0	2	2
Kwara	0	0	0	0	0	5	5
Borno	0	0	0	0	0	3	3
Gombe	0	0	0	0	0	3	3
Kogi	0	0	0	0	0	2	2
Bauchi	0	0	0	0	0	1	1
Grand Total	88	49	47	8	34	172	398



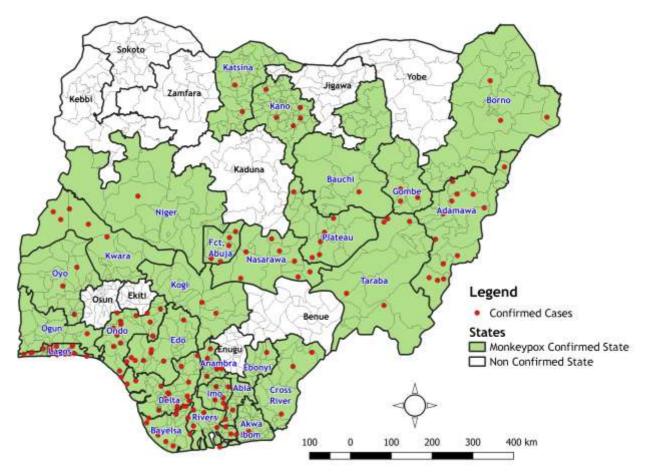


Figure 4: Map of Nigeria Showing States with Confirmed MPX Cases from January 2022 till date (27 states)

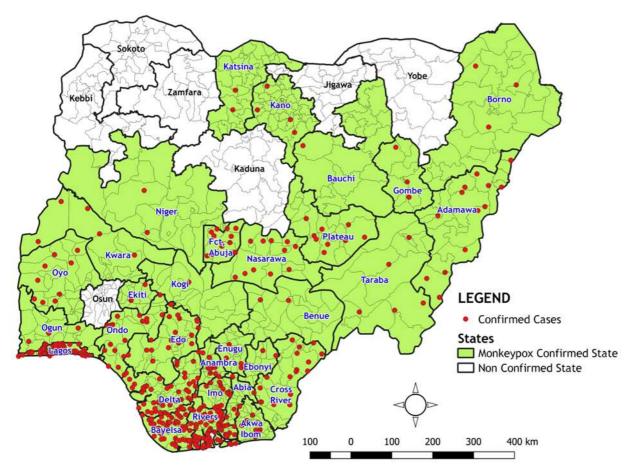


Figure 5: Map of Nigeria Showing States with Confirmed MPX Cases from September 2017 till date (30 states)



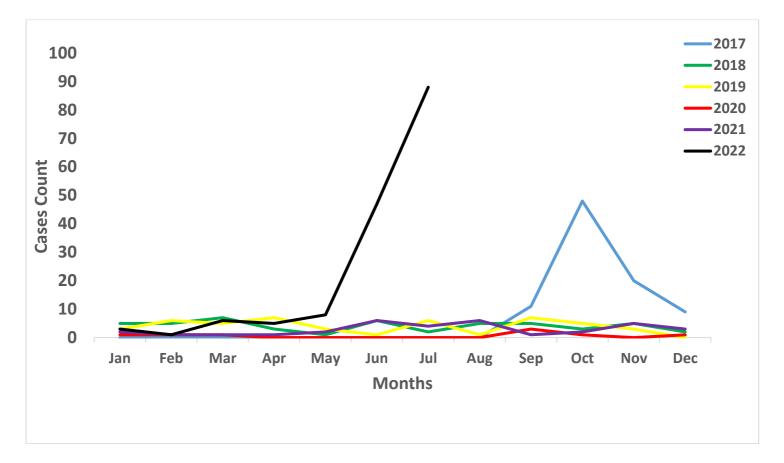


Figure 6: Nigeria confirmed Monkeypox cases by the year of incidence- September 2017 to end of July 2022

Age Group	2017	2018	2019	2020	2021	2022	Total
0-10 Years	7	5	1	0	1	20	34
11-20 Years	12	4	1	0	4	29	50
21-30 Years	34	13	13	4	10	43	117
31- 40 Years	26	17	22	4	13	56	138
41-50 Years	9	10	9	0	5	19	52
51-60 Years	0	0	1	0	1	5	7
Total	88	49	47	8	34	172	398

Table 3: Age distribution o	of confirmed Monkeypox	cases September 2017	' – August 7 th , 2022
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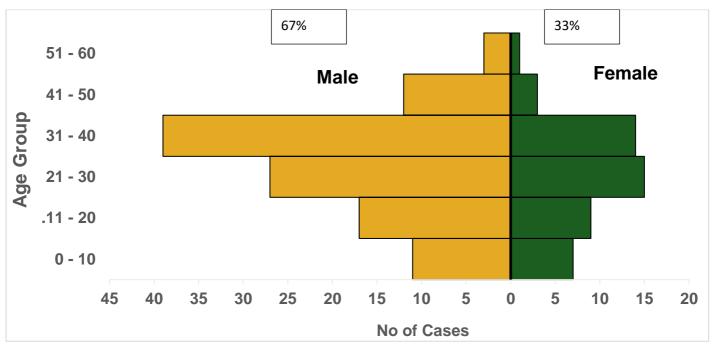


Figure 7: Age and sex distribution of Nigeria confirmed monkeypox cases January 1st – 7th August 2022

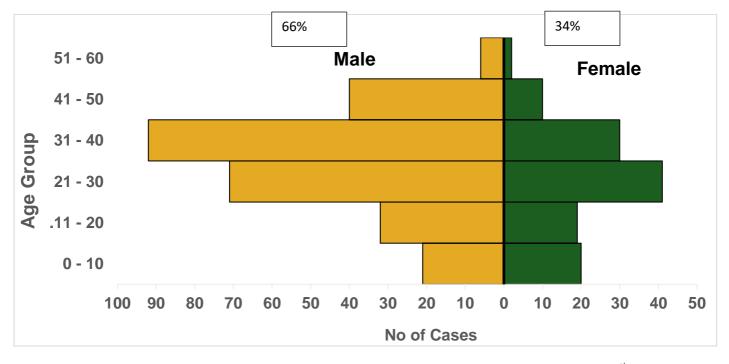


Figure 8: Age and sex distribution of Nigeria confirmed monkeypox cases September 2017 – 7th August 2022

World Health Organization

Response activities

Pillar	Activities	Next steps
Coordination	 Supporting the daily activities of the activated Emergency Operations Centre (EOC) The multi-agency MPX Emergency Operation Centre coordinates monkeypox activities at NCDC. 	1. The EOC will continue to coordinate ongoing response activities in the country while contributing to the global response.
Risk communication	 Daily tracking, monitoring and response to rumours and misinformation of Monkeypox in Nigeria Collaboration with partners to develop Monkeypox-specific awareness content Review of collated output from the just concluded content review workshop 	 Continue monitoring and analysis of Monkeypox infodemics Continue engagement of social media channels with key messages on Monkeypox prevention
Surveillance	 Providing off-site support to states Data harmonization and analysis for development of weekly sitrep Updating and validating data in SORMAS 	 Remote support on active case search in health facilities and communities Daily follow-up via calls/emails to the state surveillance & case management teams Follow up with SORMAS SSOs on completeness of data on SORMAS
IPC	 Dissemination of Monkeypox advisory to IPC focal persons under the Orange Network Engagement meeting with the CM pillar on harmonizing IPC and CM guidelines for MPX Review of the timelines and relevant indicators in the approved MPX IAP Mentorship support and provision of technical IPC materials on MPX to Rivers, Ogun, and Taraba states IPC pillars MPX HCW infection surveillance continues across the Orange Network and states 	 Continue IPC mentoring engagements across states Continue to provide close-level support to states who have activated the MPX EOC Further dissemination of Monkeypox advisories across IPC networks at State and Health facilities Continuous support to state and facilities on IPC program establishment/strengthening Review and finalization workshop on MPX IPC guidelines with relevant stakeholders Implementation of other approved IPC activities in the MPX IAP
Case management	Follow up on all confirmed cases	Continue ongoing case audit on MPX characterization & outcome
POE	Screening of passengers at points of entry	Continue ongoing screening activities at points of entry
Laboratory	 Ongoing sequencing of all confirmed cases All MPX virus sequences are all West African clade Off-site support to states 	 To continue testing and ensure the target turnaround time is maintained Plan to carry out deferential analysis on MPX negative samples Plan to ship out inconclusive blood samples for analysis





Notes on this report

Data Source:

Information for this disease is case-based data retrieved from the National Monkeypox 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, 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



