

WEEKLY DIPHTHERIA SITUATION REPORT



As of 16th March 2025 (Epi-Week 11, 2025)

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HIGHLIGHTS

In Epi-Week 11, 2025

- A total of **16** suspected cases were reported from 2 states across 4 LGAs.
- Of the 16 suspected cases reported, **3 (18.8%)** were **confirmed cases** (*0 lab confirmed; 0 epid linked; 3 clinically compatible*), **0 (0.0%)** were **discarded**, **10 (62.5%)** are **pending classification** & **3 (18.8%)** were **unknown**.
- The confirmed cases were distributed across 3 LGAs in 1 state.
- A total of **1 death (CFR: 33.3%)** were recorded among the confirmed cases.

Cumulatively: Epi-Week 19, 2022 - Epi-Week 11, 2025

- A total of **42,805** suspected cases were reported from 37 states across 351 LGAs.
- Kano** (24,385), **Yobe** (5,330), **Katsina** (4,253), **Bauchi** (3,066), **Borno** (3,059), **Kaduna** (777) & **Jigawa** (364) accounted for 96.3 of suspected cases reported.
- Of the 42,805 suspected cases reported, **25,977 (60.7%)** were **confirmed cases** (*396 lab confirmed; 238 epid linked; 25,353 clinically compatible*), **7,769 (18.1%)** were **discarded**, **3,606 (8.4%)** are **pending classification** & **5,453 (12.7%)** were **unknown**.
- The confirmed cases were distributed across 187 LGAs in 26 states.
- Kano** (18,254), **Bauchi** (2,334), **Yobe** (2,383), **Katsina** (1,517), **Borno** (1,161) & **Jigawa** (53), **Plateau** (119) & **Kaduna** (44) accounted for 99.1 of confirmed cases reported.
- Majority [**16,579 (63.8%)**] of the confirmed cases were among children aged 1 - 14 years.

- Only **4,983 (19.2%)** out of the 26005 confirmed cases were fully vaccinated with a diphtheria toxoid-containing vaccine.
- A total of **1331 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 11 2025

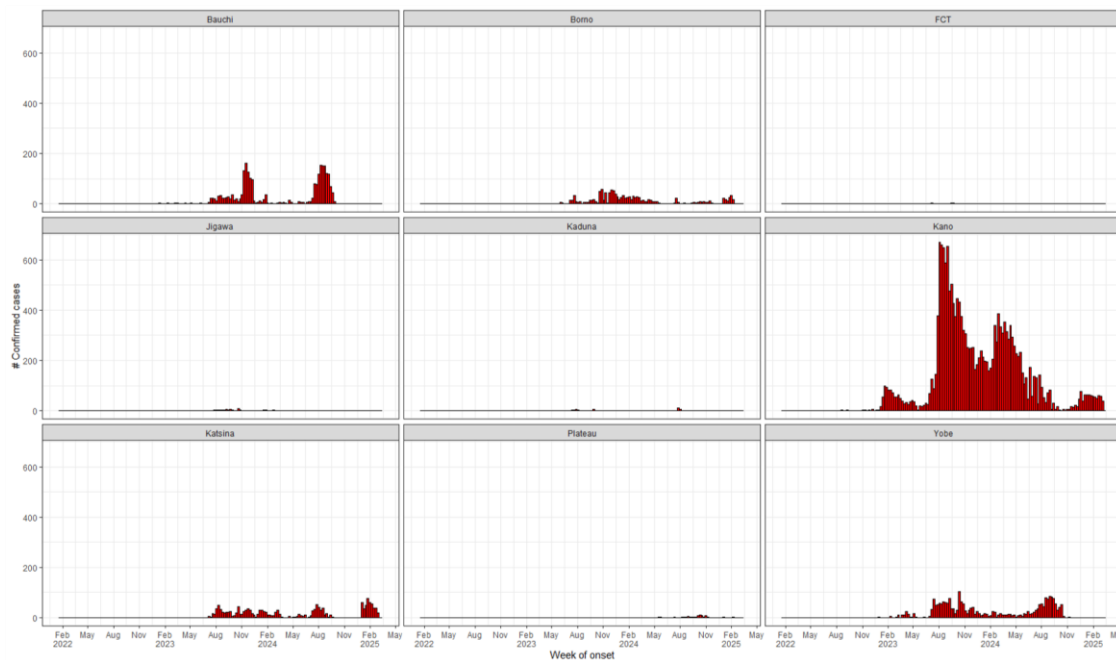


Figure 2: Epi-curve of confirmed diphtheria cases in high burden States, epi-week 19 2022 - epi-week 11 2025

Table 1: Distribution of diphtheria cases and deaths in Nigeria, epi-week 19 2022 - epi-week 11 2025

State	# Suspected Case	# Confirmed Case	% Confirmed Case	# Deaths among Confirmed Cases	CFR among Confirmed Cases (%)
Kano	24,385	18,254	75%	856	5 %
Yobe	5,330	2,411	45%	109	5 %
Bauchi	3,066	2,334	76%	104	4 %
Katsina	4,253	1,517	36%	120	8 %
Borno	3,059	1,161	38%	68	6 %

Plateau	192	119	62%	29	24 %
Jigawa	364	53	15%	7	13 %
Kaduna	777	44	6%	11	25 %
Sokoto	200	31	16%	5	16 %
Zamfara	219	21	10%	0	0 %
FCT	146	15	10%	7	47 %
Lagos	78	8	10%	6	75 %
Gombe	216	7	3%	1	14 %
Edo	20	6	30%	2	33 %
Adamaw	a 65	5	8%	4	80 %
Nasaraw	a 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 Riv	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 Ibo	m1	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	

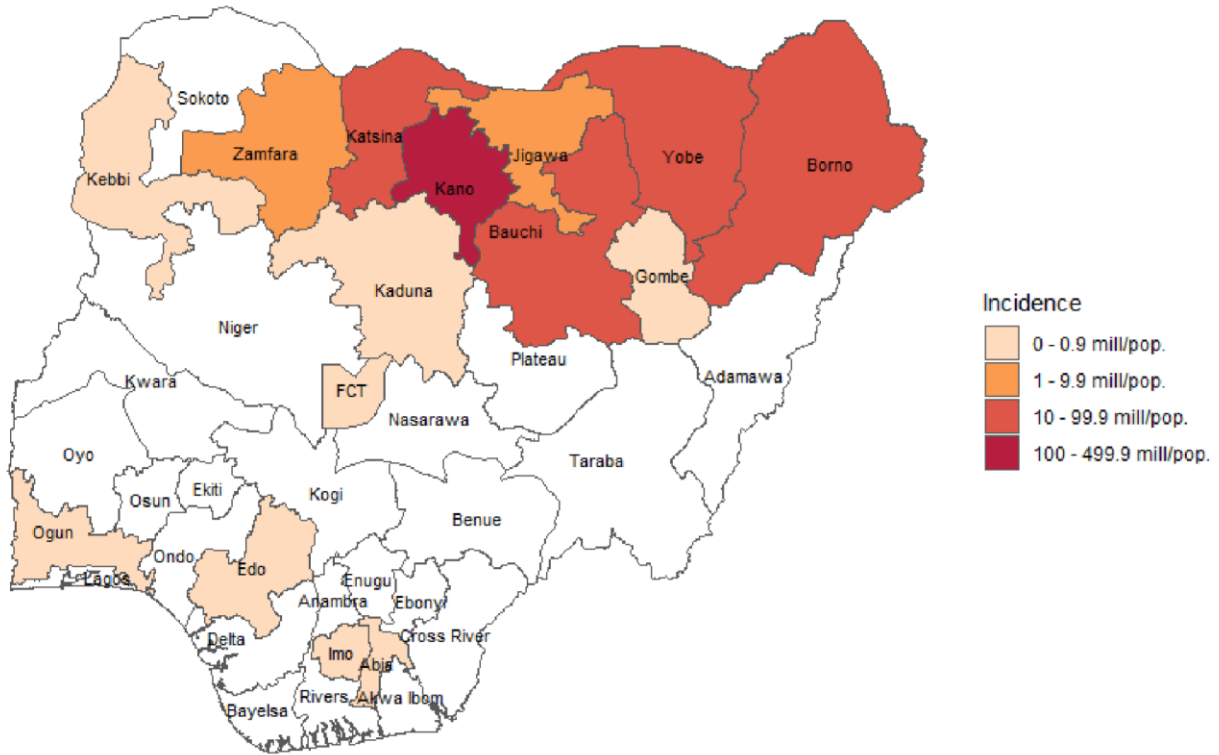


Figure 3: Incidence (per million population) of confirmed diphtheria cases in Nigeria by State, epi-week 19 2022 - epi-week 11 2025

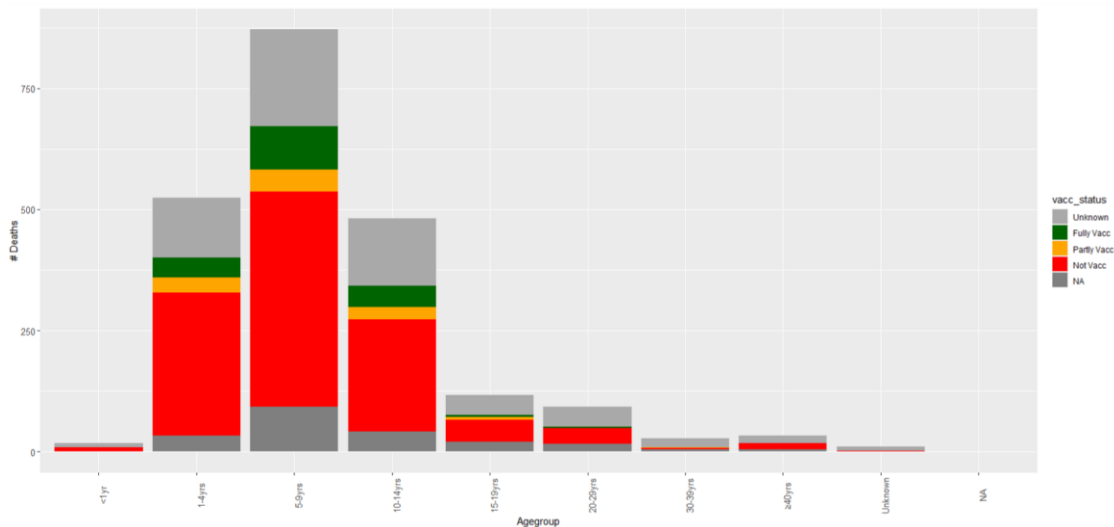
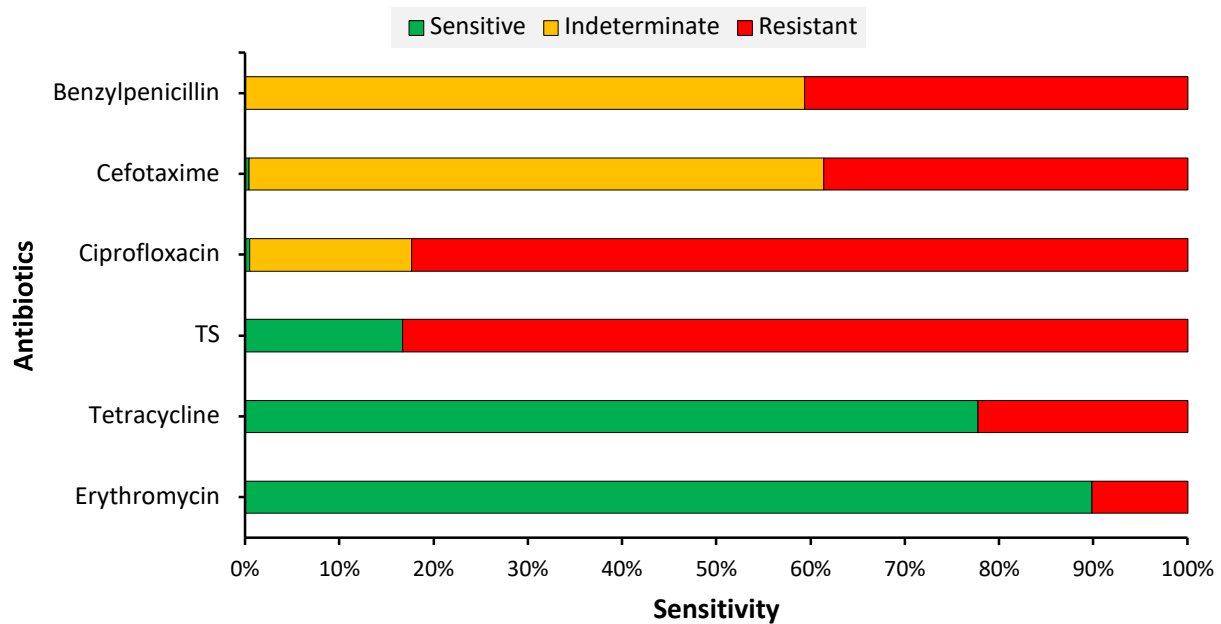


Figure 4: Age distribution and vaccination status of deaths among confirmed diphtheria cases in Nigeria, epi-week 19 2022 - epi-week 11 2025



*TS: Trimethoprim-sulfamethaxole

Figure 5: Drug sensitivity results of toxigenic *Corynebacterium diphtheriae* isolated in Nigeria, epi-week 19 2022 – epi-week 11 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.
- Direct 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.

– 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**

– Routine Immunization across public and private facilities in all states –

Reactive vaccination in the affected states.

CHALLENGES

- Delayed reporting from the states.

NEXT STEPS

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

