

SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

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TITLE:	CHOLERA OUTBREAK IN NIGERIA
SERIAL NUMBER:	09
EPI-WEEK:	29
DATE:	24 July 2018

HIGHLIGHTS

- The multi-agency cholera emergency operations centre (EOC) at NCDC continues to coordinate the response.
- There is a general decline in the number of cases reported. However, cases are still being reported from seven States; Adamawa, Bauchi, Kaduna, Katsina, Niger, Kano and Zamfara.
- No cases reported in the following states in the last two weeks: Gombe, FCT, Jigawa, Kogi, Yobe, Borno, Anambra and Nasarawa.

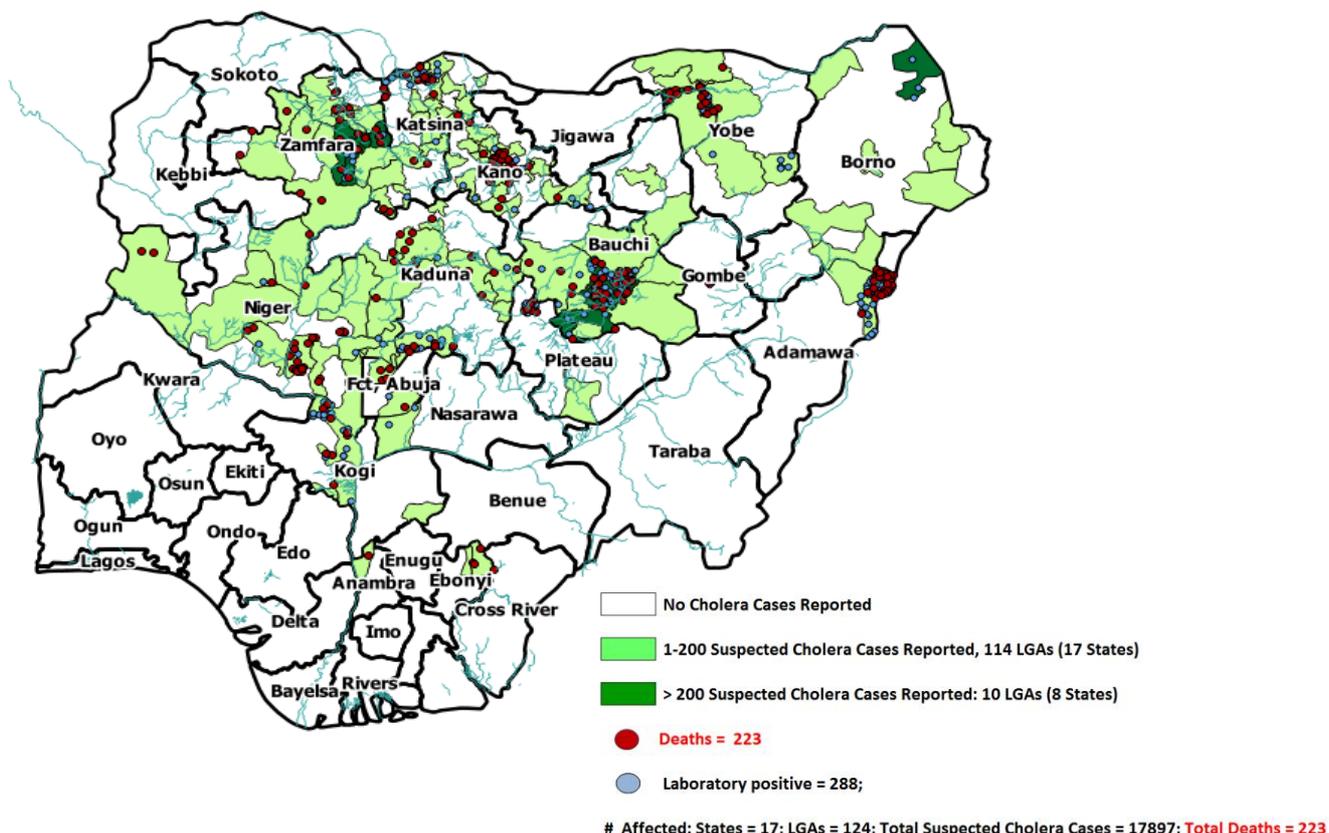
EPI-Summary

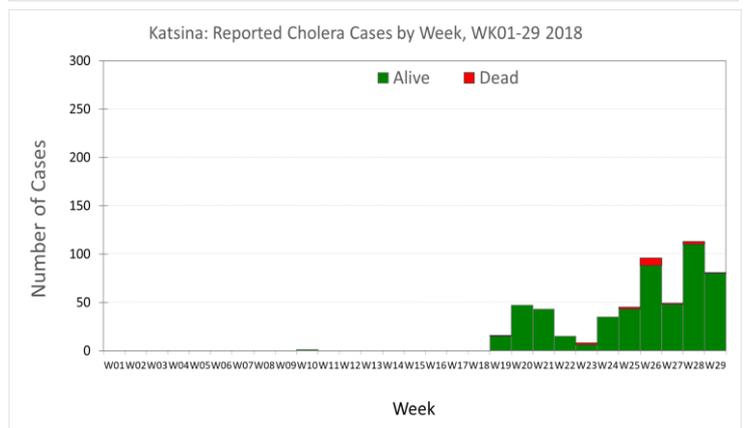
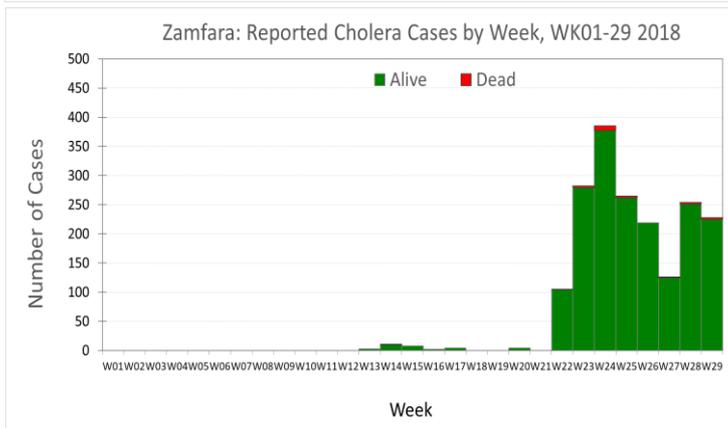
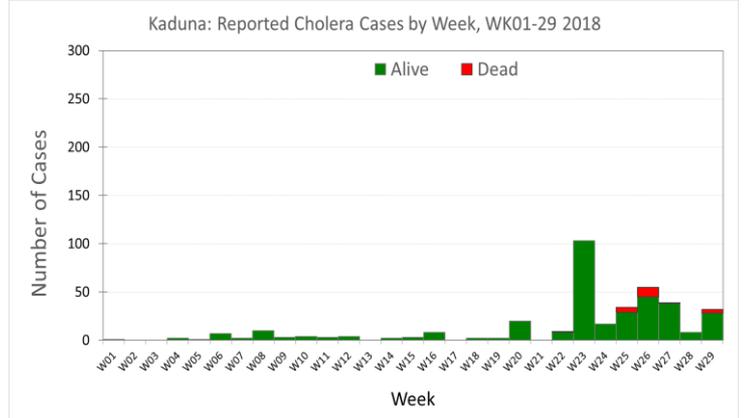
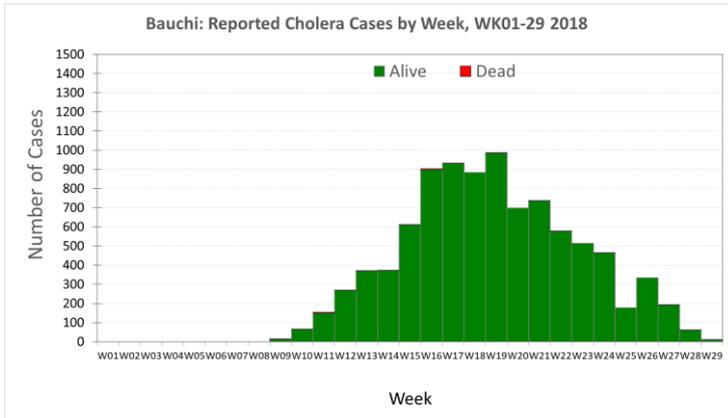
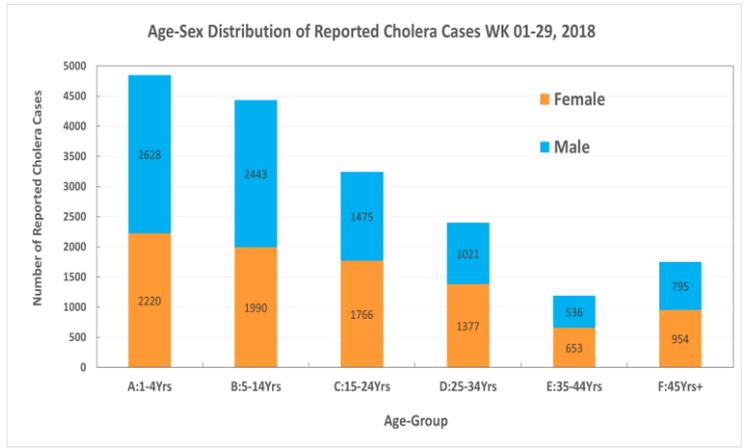
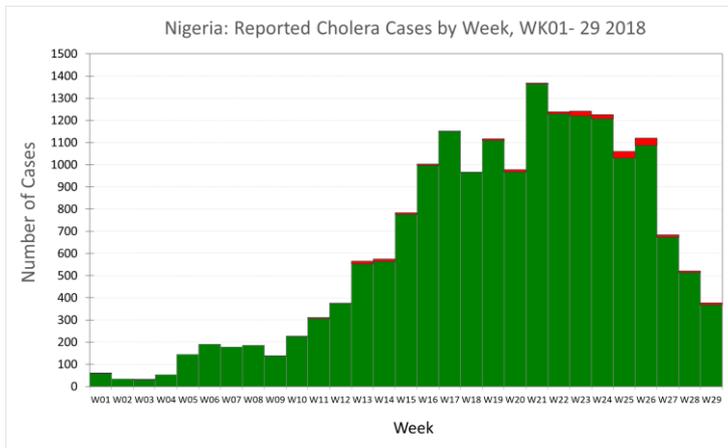
- In week 29 (16-22 July); 377 new suspected cases were reported from seven states- Adamawa (19), Bauchi (10), Kaduna (32), Kano (1), Katsina (81), Niger (6) and Zamfara (228) including nine deaths in four States Bauchi (1), Kaduna (4), Katsina (1), Zamfara (3).
- As at 24th July 2018, a total of 17,897 suspected cases including 223 deaths (CFR: 1.25%) have been reported from 17 States (Adamawa, Anambra, Bauchi, Borno, Ebonyi, FCT, Gombe, Jigawa, Kaduna, Kano, Katsina, Kogi, Nasarawa, Niger, Plateau, Yobe and Zamfara) since the beginning of 2018.
- Increasing number of cases reported in Zamfara, Kaduna and Katsina states.
- 51.9 % of the cases are aged 1-14 years; 1-4years (27.1%) and 5-14years (24.8%)
- 49.8% male and 50.2% female affected

Table 1: Reported suspected Cholera cases by State as at Epi week 29, 2018

S/N	State	LGAs reporting in week 29 (n)	LGAs ever reported in 2018 cases (n)	Cases in week 29	Total cases reported (n)	Deaths in week 29	Total Deaths (n)	CFR (%)	Total Lab positive (n)
1	Bauchi	2	10	10	9331	1	34	0.36	57
2	Adamawa	3	4	19	1718	0	27	1.57	65
3	Zamfara	8	10	228	1896	3	23	1.21	8
4	Borno	0	3	0	1543	0	0	0.00	3
5	Kano	1	26	1	759	0	26	3.43	17
6	Yobe	0	7	0	449	0	17	3.79	22
7	Niger	3	17	6	547	0	28	5.12	10
8	Plateau	0	2	0	313	0	6	1.92	22
9	Kaduna	1	9	32	371	4	21	5.66	4
10	Katsina	9	18	81	549	1	18	3.28	29
11	Ebonyi	0	2	0	168	0	4	2.38	0
12	Kogi	0	4	0	102	0	8	7.84	15
13	FCT	0	2	0	59	0	5	8.47	1
14	Gombe	0	1	0	46	0	4	8.70	10
15	Anambra	0	1	0	23	0	1	4.35	0
16	Jigawa	0	1	0	15	0	1	6.67	3
17	Nasarawa	0	1	0	8	0	0	0.00	2
Total		27	118	377	17,897	9	223	1.25	288

Nigeria: States/LGAs affected by Cholera, Wk01-29, 2018





RESPONSE ACTIVITIES

Coordination

- Response is being coordinated by NCDC through an EOC in collaboration with NPHCDA, Federal Ministry of Water Resources (FMWR), WHO, UNICEF, MSF, AFENET, UMB and US-CDC
- EOC meetings hold in most affected states to coordinate the outbreak response
- National cholera stakeholders' consensus meeting held to discuss cholera hotspot LGAs and review of preventive OCV campaign implementation schedule on Thursday 19th July, 2018

Surveillance

- Clinician sensitization for early detection and reporting conducted
- Active case search is ongoing in affected States

- Cases are included in the line-list daily with intensified surveillance in high risk states

Case management

- Cases are being treated at designated health facilities or Cholera Treatment Centres (CTCs) in the affected States supported by partners

WaSH

- Hygiene promotion and community sensitization ongoing

Laboratory Surveillance

- Samples are being tested with Rapid Diagnostic Test kits (RDTs) in the field and confirmed by stool culture.
- Assessment and mapping of two labs per states ongoing in Plateau, Katsina, Kano and Kaduna states
- Total number of positive laboratory results: 288

Risk communications

- Radio jingles in English, Hausa and pidgin ongoing in affected states
- IEC materials distribution to 10 states and NPHCDA

Logistics and Vaccination

- First round of OCV campaign completed in Maiha, Mubi North and Mubi South LGAs of Adamawa State vaccinating 377,935 persons with an administrative coverage of 112%
- Second round scheduled for 11-15 August, 2018

CHALLENGES

- Delay in submission of line-list for national update by some states
- Inadequate number of trained health care workers for case management
- Low proportion of samples tested by culture
- Poor IPC practices in health facilities

NEXT STEPS

- Deploy national RRTs to states with increasing number of cases
- Conduct laboratory needs assessment for cholera diagnosis in all the cholera active states
- Deploy risk communications team to Zamfara states for care givers sensitization