



# SITUATION REPORT

# Nigeria Centre For Disease Control (NCDC)

TITLE: UPDATE ON MPOX IN NIGERIA

SERIAL NUMBER: 32

EPI-WEEK: 48

DATE: December 4, 2022

### Table 1 – Key Indicators

Key Indicators	Number
Total confirmed cases in Epi Week 48, 2022	24
Total suspected cases from January 1st to December 4th, 2022 (Epi week 1 to 48)	1907
Total confirmed cases from January 1 <sup>st</sup> to December 4 <sup>th</sup> , 2022 (Epi week 1 to 48)	720
Total deaths from January $1^{st}$ to December $4^{th}$ , 2022 (Epi week 1 to 48)	7
Total deaths Sept 2017 - December 4 <sup>th</sup> , 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 4 <sup>th</sup> , 2022)	946
Grand total suspected cases (Sept 2017 – December 4 <sup>th</sup> , 2022)	2419

- Fifty-one (51) new suspected cases reported in Epi week 48, 2022 (28<sup>th</sup> November to 4<sup>th</sup> December 2022) from ten (10) states and FCT Lagos (18), Abia (7), Imo (7), Kwara (7), Ogun (3), Ondo (3), Plateau (2), Rivers (2), Benue (1) and FCT (1).
- Of the fifty-one (51) suspected cases, twenty-four (24) new confirmed cases have been recorded in Epi week 48 from six (6) states Lagos (13), Kwara (4), Ogun (3), Abia (2), Imo (1) and Rivers (1).
- From 1<sup>st</sup> January to 4<sup>th</sup> December 2022, Nigeria has recorded 1907 suspected cases with 720 confirmed cases (471 male, 249 female) from thirty-two (32) states and FCT Lagos (184), Abia (55), Bayelsa (42), Imo (41), Ogun (36), Ondo (35) Rivers (35), Delta (29), Edo (25), Anambra (24), FCT (21), Kwara (21) Adamawa (16), Nasarawa (15), Plateau (15), Kaduna (14), Cross River (12), Akwa Ibom (11), Ebonyi (11), Benue (10), Oyo (10), Borno (10), Katsina (8), Taraba (7), Kano (7), Gombe (6), Kogi (5), Osun (5), Enugu (4), Kebbi (2), Niger (1), Bauchi (1) and Zamfara (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 1.0%**



















- Overall, since the re-emergence of Mpox in September 2017, 2419 suspected cases have been reported from 36 states and FCT in the country. Of these 2419 suspected cases, there have been 946 (38.9%) confirmed (624 male, 322 female) from 33 states and FCT Lagos (214), Rivers (87), Bayelsa (85), Delta (58), Abia (58), Imo (49), Ogun (37), Edo (35), Ondo (35), FCT (27), Cross River (26), Anambra (26), Kwara (21), Akwa Ibom (18), Plateau (18), Nasarawa (17), Adamawa (16), Oyo (16), Kaduna (14), Benue (12), Ebonyi (12), Borno (10), Katsina (8), Enugu (8)Taraba (7), Kano (7), Gombe (6), Kogi (5), Osun (5), Ekiti (2), Niger (2), Kebbi (2), Bauchi (1) and Zamfara (1).
- Fifteen (15) deaths have been recorded since September 2017 (CFR= 1.6%) 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).

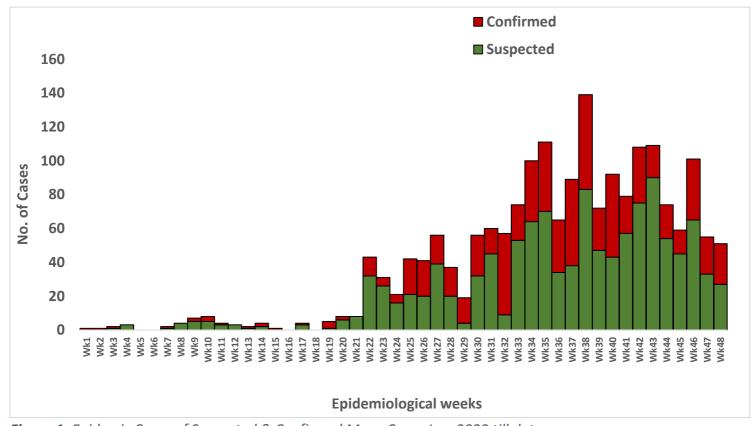


Figure 1: Epidemic Curve of Suspected & Confirmed Mpox Cases Jan. 2022 till date



















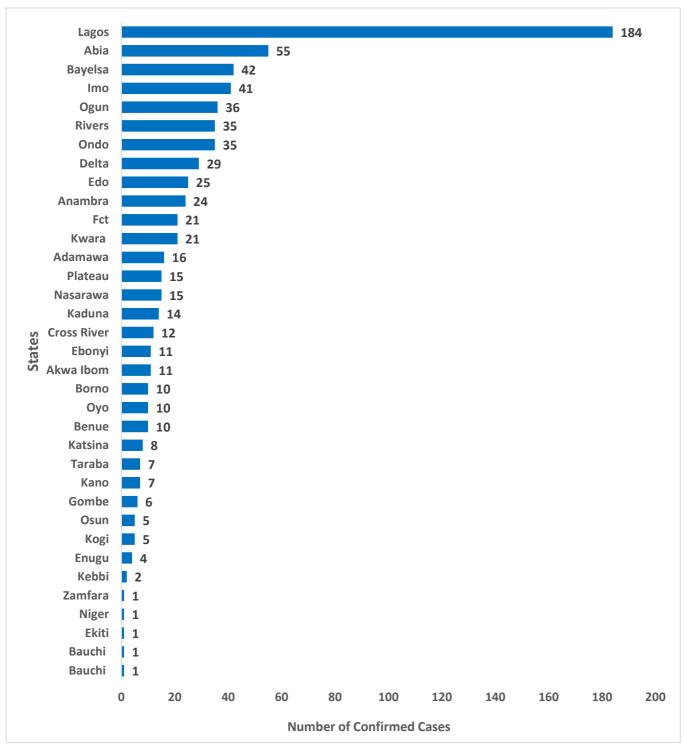


Figure 2: Bar chart Showing confirmed Mpox cases by state from January  $1^{st} - 4^{th}$  December 2022

















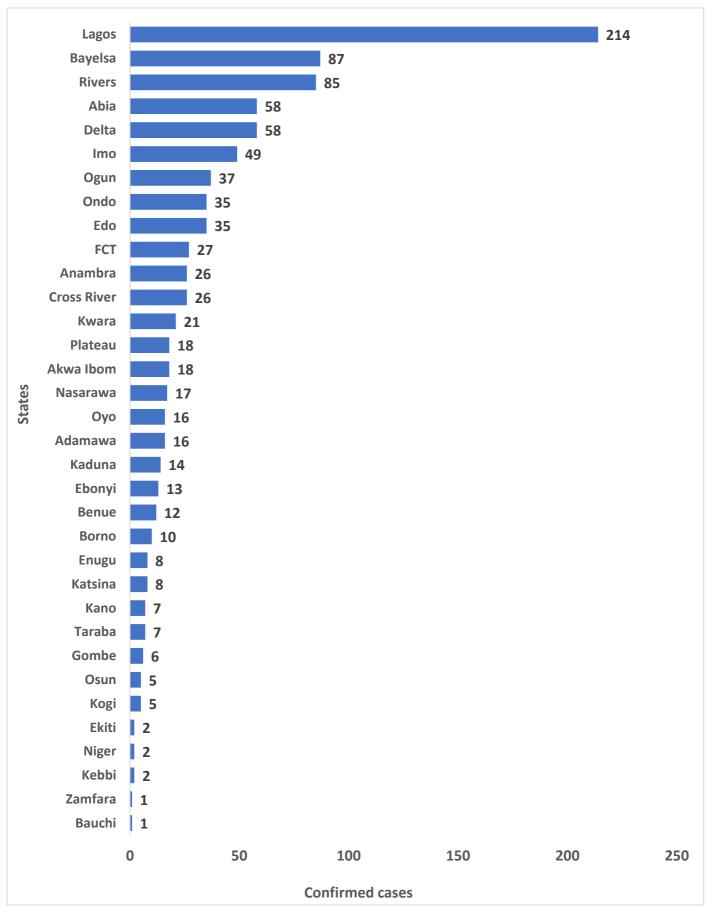


Figure 3: Bar chart Showing confirmed Mpox cases by state, September 2017 –  $4^{th}$  December 2022

















Table 2: Nigeria confirmed Mpox cases by state, September 2017 – 4<sup>th</sup> December 2022

S/N	State	2017	2018	2019	2020	2021	2022	Total
1	Lagos	4	1	15	4	6	184	214
2	Rivers	25	14	7	1	5	35	87
3	Bayelsa	19	11	7	0	6	42	85
4	Delta	3	6	10	1	9	29	58
5	Abia	1	2	0	0	0	55	58
6	Imo	5	2	1	0	0	41	49
7	Ogun	0	0	0	0	1	36	37
8	Edo	4	1	1	0	4	25	35
9	Ondo	0	0	0	0	0	35	35
10	FCT	5	0	0	0	1	21	27
11	Anambra	0	1	1	0	0	24	26
12	Cross River	9	3	1	0	1	12	26
13	Akwa Ibom	6	0	1	0	0	11	18
14	Plateau	0	2	0	1	0	15	18
15	Nasarawa	1	1	0	0	0	15	17
16	Kwara	0	0	0	0	0	21	21
17	Adamawa	0	0	0	0	0	16	16
18	Oyo	1	3	2	0	0	10	16
19	Kaduna	0	0	0	0	0	14	14
20	Ebonyi	0	0	0	1	0	11	12
21	Benue	2	0	0	0	0	10	12
22	Borno	0	0	0	0	0	10	10
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	Kebbi	0	0	0	0	0	2	2
31	Niger	0	0	0	0	1	1	2
32	Ekiti	2	0	0	0	0	0	2
33	Bauchi	0	0	0	0	0	1	1
34	Zamfara	0	0	0	0	0	1	1
	<b>Grand Total</b>	88	49	47	8	34	720	946



















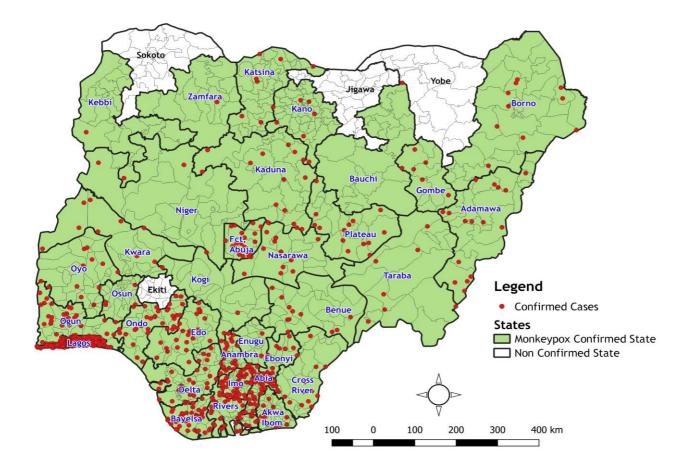


Figure 4: Map of Nigeria Showing States with Confirmed Mpox Cases from January 2022 till date (32 states and FCT)

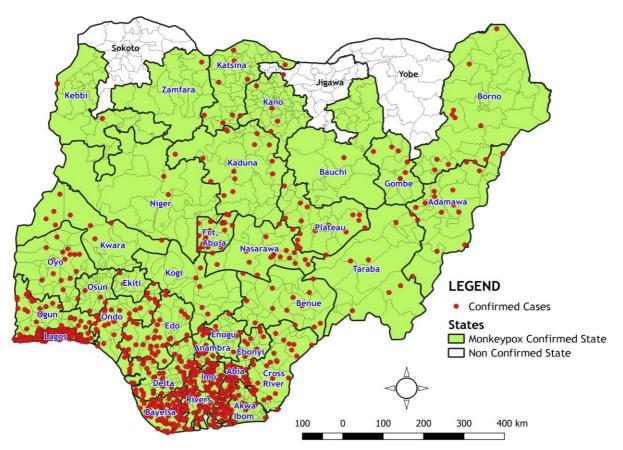


Figure 5: Map of Nigeria Showing States with Confirmed Mpox Cases from September 2017 till date (33 states and FCT)









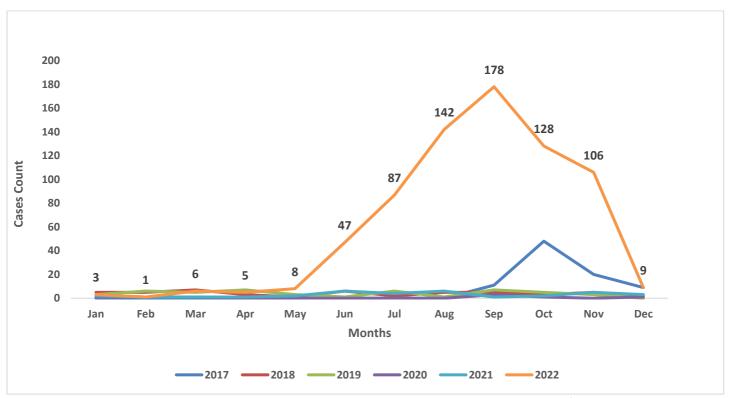












**Figure 6:** Nigeria confirmed Mpox cases by the year of incidence- September 2017 to 4<sup>th</sup> December 2022

Table 3: Age distribution of confirmed Mpox cases September 2017 – 4<sup>th</sup> December 2022

Age Group	2017	2018	2019	2020	2021	2022	Total
0-10 Years	7	5	1	0	1	117	131
11-20 Years	12	4	1	0	4	116	137
21-30 Years	34	13	13	4	10	177	251
31- 40 Years	26	17	22	4	13	195	277
41-50 Years	9	10	9	0	5	83	116
> 50	0	0	1	0	1	32	34
Total	88	49	47	8	34	720	946





















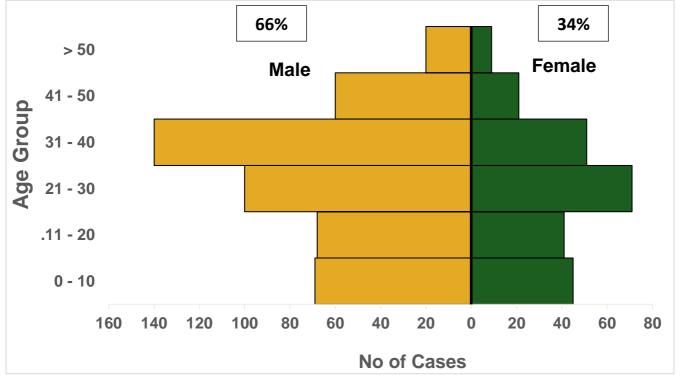
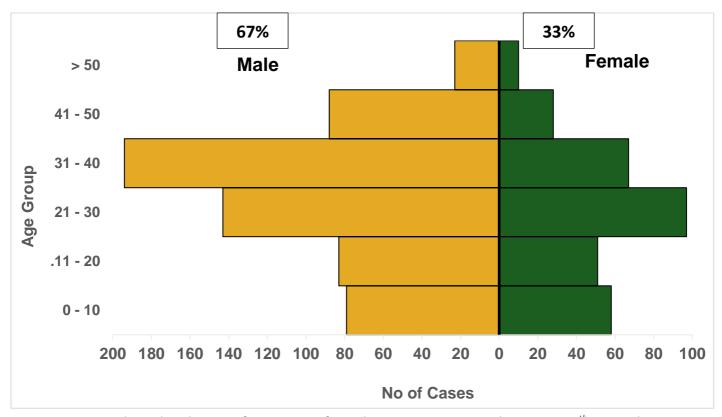


Figure 7: Age and sex distribution of Nigeria confirmed Mpox cases January 1<sup>st</sup> –4<sup>th</sup> December 2022



**Figure 8:** Age and sex distribution of Nigeria confirmed Mpox cases September 2017  $-4^{th}$  December 2022

















# **Response activities**

Pillar	Activities to date	Next steps
Coordination	<ul> <li>Supported the daily activities of the activated Mpox Emergency Operations Centre (EOC)</li> </ul>	Coordinate ongoing response activities in the country while contributing to the global response
Risk communication	<ul> <li>Airing Mpox jingles in six states, supported by partners and stakeholders continued</li> <li>Used the findings from a community-based Mpox perception survey (conducted in collaboration with Breakthrough Action Nigeria), which found 50% of 5217 respondents were aware of Mpoox mainly via media – only 30% were aware of prevention methods</li> <li>Mpox IEC materials were updated to focus on how to prevent the infection and reduce spread</li> </ul>	<ul> <li>Continue the engagement of the public through social media with key messages and infodemics monitoring</li> <li>Airing and monitoring of Mpox jingles nationally and subnationally</li> <li>Continue media engagement and response to media queries</li> </ul>
Surveillance	Provided off-site support to states on case identification, reporting and response	<ul> <li>Follow up with Lagos state (reported only one suspected case for week 48)</li> <li>Follow up with SORMAS SSOs and States on completeness of data on both CIFs and SORMAS</li> <li>Continue follow up on response activities in silent states (Jigawa, Sokoto and Yobe)</li> </ul>
IPC	<ul> <li>Held a meeting with 10 Orange         Network facilities to pilot ODK for routine monitoring of IPC in health facilities supported by RTSL through AFENET     </li> <li>Finalised IEC materials for standard precaution</li> </ul>	<ul> <li>Finalise graphic design and technical content for IEC materials co-developed</li> <li>Print isolation precaution signages for healthcare facilities</li> </ul>
Case management	Update signs, symptoms and hospitalisation status of confirmed cases on hospitalization and other outcomes	Develop home management protocol for Mpox cases
Laboratory	<ul> <li>HIV testing of Mpox samples commenced</li> <li>35 Mpox samples sequenced to define the circulating clade – findings shows that the circulating strain is clade II (no change in clade type noted)</li> </ul>	Train selected states (including Zamfara) on appropriate sample selection, collection techniques, sample packaging and transport



















#### 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



















