

Nigeria Centre for Disease Control and Prevention

Protecting the health of Nigerians

Epi Week: 12, 2024

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Cholera Situation Report

MONTHLY EPIDEMIOLOGICAL REPORT 3

Epidemiological week 9 - 12: (26 February 2024 - 24 March 2024)

Key Points

Table 1: Current Epi-summary for week 12, 2024

Suspected	Deaths	Case Fatality	States	LGAs
Cases	(Suspected cases)	Ratio (%)	Reporting Cases	Reporting cases
9	0	0.0%	1	2

Table 2: Cumulative suspected cases (Epi week 1 - 12, 2024)

Suspected	Deaths (Suspected cases)	Case Fatality	States	LGAs
Cases		Ratio (%)	Reporting Cases	Reporting cases
559	7	1.3%	18	40

Months	Epi- Weeks	Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
January	1 - 4	258	3	1.2%	9	23
February	5 – 8	237	2	0.8%	17	28
March	9 – 12	64	2	3.1%	3	8

Table 3: Summary of monthly reported cases (Epi week 1 - 12, 2024)

	Week	Week	
	1	12	
Summary	2023	2024	% Change
Suspected Cases	1,927	559	-71%
Deaths	53	7	-87%
CFR	2.8%	1.3%	-54%

Table 4: Comparison of cumulative cases as at week 12, 2023 and 2024

Week 12 Highlight

- 9 new cases were reported, 0 deaths with CFR = 0.0%
- 1 State Bayelsa (9) reported cases of Cholera within the Epidemiological week

In the reporting month,

• States have reported 64 suspected cases of Cholera, Bayelsa (36), Abia (19) and Ondo (9)

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- 2 Deaths were recorded with CFR = 3.1%
- 18 Rapid Diagnostic Tests (RDT) were conducted with 3 positive results (Ondo 3)
- 5 stool culture tests were conducted with 1 positive result (Ondo 1)
- National multi-sectoral Cholera TWG continues to monitor response across states

Cumulative Epi-Summary for 2024

- As of 24th March 2024, a total of 559 suspected cases including 7 deaths (CFR 1.3%)
 have been reported from 18 states
- Of the suspected cases since the beginning of the year, age groups <5 years are mostly affected, followed by the age groups 5 14 years in aggregate of both males and females
- Of all suspected cases, 49% are males and 51% are females
- Bayelsa (356 cases) accounts for 64% of all suspected cases in the country of the 18 States that have reported cases of cholera
- Southern Ijaw LGA (133 cases) in Bayelsa State accounts for 24% of all suspected cases reported in the country
- Other States; Cross River (42 cases), Bauchi (38 cases), Delta (24 cases), Abia (24 cases),
 Nasarawa (19 cases), Ondo (11 cases), Katsina (9 cases), and Osun (8 cases) account for 31% of the suspected cases this year
- Comparatively, suspected cases of Cholera in the current year have decreased by 71% compared to what was reported as at Epi-week 12 in 2023. Likewise, cumulative deaths recorded have decreased by 87% in 2024

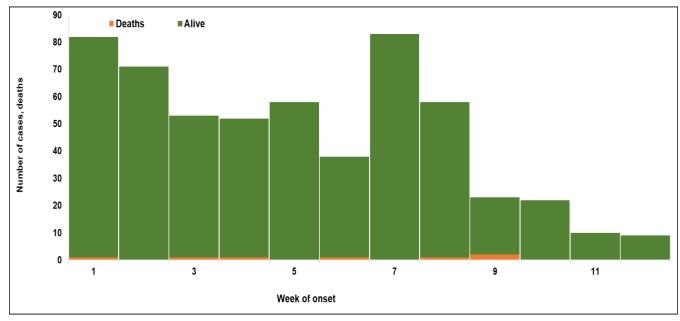
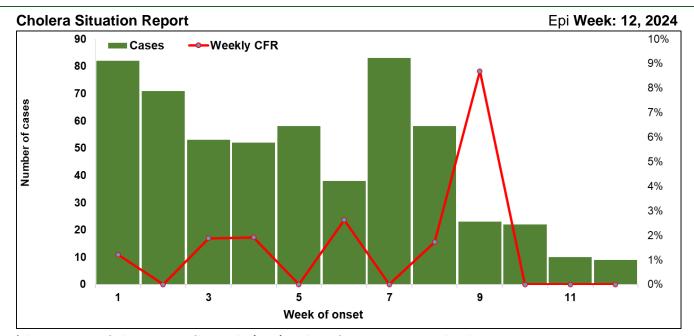


Figure 1: National Epidemic curve of weekly reported Cholera cases, week 1 to week 12, 2024



`Figure 2: Trends in Case Fatality Ratio (CFR), Epi weeks 1 – 12, 2024, Nigeria

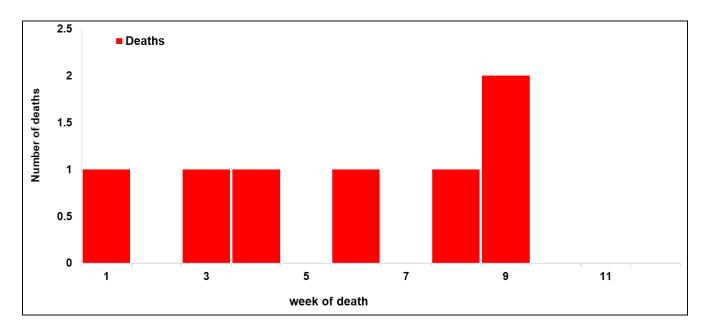


Figure 3: Trends in deaths, Epi weeks 1 - 12, 2024, Nigeria

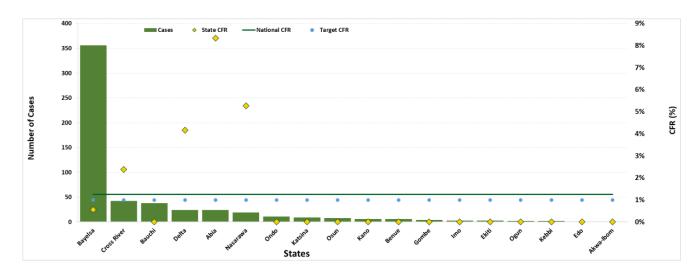


Figure 4: States' Cholera cases by Case fatality ratio (CFR) Epi-weeks 1 - 12, 2024

Table 5: Top 9 States in cumulative cases

No	State	Cases	Percent of cumulative cases	Cumulative % of total cases
1	Bayelsa	356	64%	64%
2	Cross River	42	8%	72%
3	Bauchi	38	7%	79%
4	Delta	24	4%	83%
5	Abia	24	4%	87%
6	Nasarawa	19	3%	90%
7	Ondo	11	2%	92%
8	Katsina	9	2%	94%
9	Osun	8	1%	95%
Total		531	95%	

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Table 6: Top 14 Local Government Areas (LGAs) in cumulative cases

No	LGA	State	Cases	% of cumulative cases	Cumulative %
1	Southern Ijaw	Bayelsa	133	24%	24%
2	Yenagoa	Bayelsa	62	11%	35%
3	Nembe	Bayelsa	54	10%	45%
4	Ogbia	Bayelsa	36	6%	51%
5	Giade	Bauchi	33	6%	57%
6	Ekeremor	Bayelsa	29	5%	62%
7	Warri Southwest	Delta	24	4%	66%
8	Kokona	Nasarawa	19	3%	70%
9	Sagbama	Bayelsa	19	3%	73%
10	Etung	Cross River	16	3%	76%
11	Bende	Abia	15	3%	79%
12	Biase	Cross River	13	2%	81%
13	Kolokuma/Opokuma	Bayelsa	12	2%	83%
14	Okitipupa	Ondo	11	2%	85%
Total			476	85%	

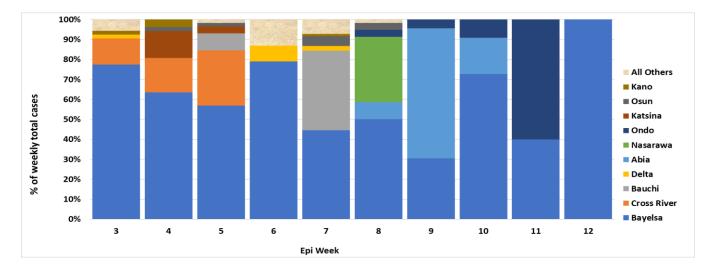
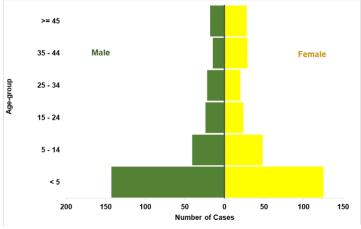


Figure 5: Proportion contribution of suspected cases by states in recent 10 epidemiologic week



Male 49%

Figure 7. Sex disaggregation for cumulative Cholera cases, week 1-12, 2024: N=559

Figure 6. Age-Sex Pyramid for cumulative Cholera Cases, week 1-12 ,2024: N=559

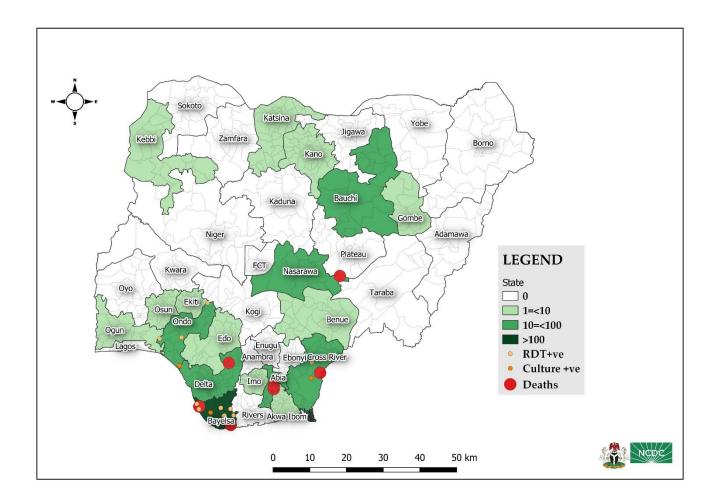


Fig. 8: Map of Nigeria showing states with RDT + Culture and suspected cases, weeks 1 - 12, 2024

Table 7. Summary table for Weekly & Cumulative number of Cholera Cases, for 2024

States		Current week: (Week 12)					Cumulative (Week 1 - 12)					
Reporting	State outbreak	Ca	ises	De	eaths		Tests				Test	s
cases in 2024 status*	Cases	% change	Deaths	% change	RDT (%Pos)	Culture (%pos)	Cases De	Deaths	CFR	RDT (%Pos)	Culture (%pos)	
1 Abia	Active							24	2	8.3%	8 (0%)	
2 Akwa-Ibom								1	-	0.0%		1 (0%)
3 Bauchi								38	-	0.0%		
4 Bayelsa	Active	9	▲ 125%			1 (0%)		356	2	0.6%	27 (30%)	12 (8%)
5 Benue								6	-	0.0%		
6 Cross River								42	1	2.4%	9 (22%)	2 (50%)
7 Delta								24	1	4.2%		
8 Edo								1	-	0.0%		
9 Ekiti								3	-	0.0%		2 (0%)
Gombe								4	-	0.0%		4 (0%)
1 Imo								3	-	0.0%		3 (0%)
2 Kano								6	-	0.0%		
3 Katsina								9		0.0%		
4 Kebbi								2	-	0.0%		
Nasarawa								19	1	5.3%	1 (0%)	1 (0%)
6 Ogun								2	-	0.0%	, ,	1 (0%)
7 Ondo	Active		▼ 100%					11	-	0.0%	6 (50%)	7 (14%)
8 Osun								8	-	0.0%	. (,	7 (0%)
National	3	9	▼ 10%	0		1 (0%)		559	7	1.3	% 51 (25%)	40 (8

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Table 7: Response activities

Pillar	Activities to date	Next steps
Coordination	 Response is being coordinated by the national multi-sectoral TWG hosted at NCDC, in collaboration with Federal Ministry of Health (FMOH), Federal Ministry of Water Resources (FMWR), Federal Ministry of Environment (FMEnvrt), National Primary Health Care Development Agency (NPHCDA) and Development Partners Ongoing assessment of states readiness and preparedness 	Continue sub-national level
Surveillance	Ongoing surveillance in all states through the routine Integrated Disease Surveillance and Response (IDSR) and Event Based Surveillance (EBS)	 Continue data collation and harmonisation Ongoing cholera surveillance evaluation across states

^{*}State is considered active if it has reported cases in recent 3 weeks from reporting week, Other states listed have reported cases during the year but not in recent 3 weeks

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Case Management & IPC	 Providing offsite/onsite support to states and follow up for daily reporting and progress with response activities Provided technical support and response commodities to affected states Finalization workshop held on cholera case management guideline, treatment protocol and SOP harmonization 	 Continue providing technical support on case management and IPC to states Continue training of Health Care Workers (HCW) on management of cholera Continuous follow up with states for updates and support 							
Laboratory	Supported ongoing testing across state-level laboratories at NCDC National Reference Laboratory (NRL), Abuja and CPHL Yaba-Lagos	 Ongoing sub-national level training of Laboratory Scientists on sample collection and analysis Ongoing finalization of cholera diagnostics guidelines and SOP 							
WASH	 Hygiene promotion, provision of safe water, water chlorination, household disinfection and sensitisation on dangers of open defecation ongoing in high-risk communities by WASH sector partners and Community Health Volunteers in the affected states Continuous construction of sanitation and hygiene facilities with boreholes in cholera hotspots Conducted WASH Sector review workshop 	Continue distribution of hygiene kits to affected states							
Logistics	 Essential response commodities are being distributed to all cholera affected states 	Continue supporting affected states with essential response commodities							
Vaccination (led by NPHCDA)	Epidemiological trend is being monitored to guide ICG request for planned vaccination campaigns	Continue monitoring epidemiological trend to guide ICG request for planned vaccination campaigns							
Risk communication	 Cholera jingles are being aired in English and local languages Community social mobilisation, media interviews, distribution of Information, Education and Communication (IEC) materials and awareness campaigns ongoing in affected communities Cholera advisory developed and circulated 	 Continue airing of cholera jingles and distribution of IEC materials Continue media engagement meetings and training of journalist, other media professionals Continued follow-up with states for update on risk communication 							
State Response	Multi-sectoral State-level Emergency Operation Centres (EOCs) activated in Bayelsa State	Continue supporting state response activities							

Challenges

- Difficulty in accessing some communities due to security concerns
- Open defecation in affected communities
- Lack of potable drinking water in some rural areas and urban slums
- Poor hygiene practice in most cholera affected communities
- Inadequate health facility infrastructure and cholera commodities for management of patients (Ringer's lactate and ORS)

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- Inadequate trained personnel in states for case management
- Poor and inconsistent reporting from states
- High attrition rate of skilled workforce

Next Steps

- Continue training on cholera surveillance, hotspot mapping and develop state level preparedness and response plans
- Maintain communication with and support to states for data reporting and response
- Continue advocacy to State Governments to increase funding in WASH infrastructure
- Continue distributing response commodities across states
- Build capacity for sample collection, transportation and laboratory diagnosis
- Continue cholera surveillance evaluation across states
- · Scale up risk communications
- Continue review of the National Cholera Plan

Notes on this report

Data Source

Information for this disease was from routine case-based data and outbreak line-lists retrieved by the National Cholera Technical Working Group

Case definitions

Suspected Case:

- ➤ Any patient aged ≥2 years with acute watery diarrhoea and severe dehydration or dying from acute watery diarrhoea with or without vomiting.
- In areas where a Cholera outbreak is declared, any person presenting with or dying from acute watery diarrhoea with or without vomiting.

Confirmed Case: A suspected case in which Vibrio cholerae O1 or O139 has been isolated in the stool by culture.

Erratum

- A backlog of suspected cases for epi week 5 8 (144) was added
- A backlog of deaths in suspected cases for epi week 5 8 (1) was added

DATA AS REPORTED AND ACCURATE BY NCDC AS AT MIDNIGHT 24th MARCH 2024