

Nigeria Centre for Disease Control and Prevention

Protecting the health of Nigerians

Epi Week: 8, 2024

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Cholera Situation Report

MONTHLY EPIDEMIOLOGICAL REPORT 2

Epidemiological week 5 - 8: (29 January 2024 - 25 February 2024)

Key Points

Table 1: Current Epi-summary for week 8, 2024

Suspected	Deaths	Case Fatality	States	LGAs
Cases	(Suspected cases)	Ratio (%)	Reporting Cases	Reporting cases
3	0	0.0%	2	2

Table 2: Cumulative suspected cases (Epi week 1 - 8, 2024)

Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
318	4	1.3%	15	36

Months	Epi- Weeks	Suspected Cases	Deaths (Suspected cases)	Case Fatality Ratio (%)	States Reporting Cases	LGAs Reporting cases
January	1 - 4	226	3	1.3%	9	23
February	5 – 8	92	1	1.1%	14	21

Table 3: Summary of monthly reported cases (Epi week 1 - 8, 2024)

	Week	Week	
	1	8	
Summary	2023	2024	% Change
Suspected Cases	1,472	318	-78%
Deaths	45	4	-91%
CFR	3.1%	1.3%	-59%

Table 4: Comparison of cumulative cases as at week 8, 2023 and 2024

Week 8 Highlight

- 3 new cases were reported, 0 deaths with CFR = 0.0%
- 2 States Ogun (1) and Osun (2) reported cases of Cholera within the Epidemiological week

In the reporting month,

- States have reported 92 suspected cases of Cholera, Bauchi (38), Cross River (16), Bayelsa (10), Osun (7), Delta (5), Gombe (4), Imo (3), Katsina (2), Ogun (2), and Akwa Ibom, Benue, Edo, Ekiti and Kano each reporting (1).
- 1 Deaths was recorded with CFR = 1.1%
- No Rapid Diagnostic Test (RDT) was conducted
- 18 stool culture tests were conducted with 1 positive result (Bayelsa 1)
- National multi-sectoral Cholera TWG continues to monitor response across states

Cumulative Epi-Summary for 2024

- As of 25th February 2024, a total of 318 suspected cases including 4 deaths (CFR 1.3%)
 have been reported from 15 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, 48% are males and 52% are females
- Bayelsa (169 cases) accounts for 53% of all suspected cases in the country of the 15 States that have reported cases of cholera
- Southern Ijaw LGA (83 cases) in Bayelsa State accounts for 26% of all suspected cases reported in the country
- Other States; Cross River (42 cases), Bauchi (38 cases), Delta (24 cases), Katsina (9 cases),
 Osun (8 cases), Kano (6 cases), Gombe (4 cases) and Imo (3 cases) account for 43% of the suspected cases this year
- Comparatively, suspected cases of Cholera in the current year have decreased by 78% compared to what was reported as at Epi-week 8 in 2023. Likewise, cumulative deaths recorded have decreased by 91% in 2024

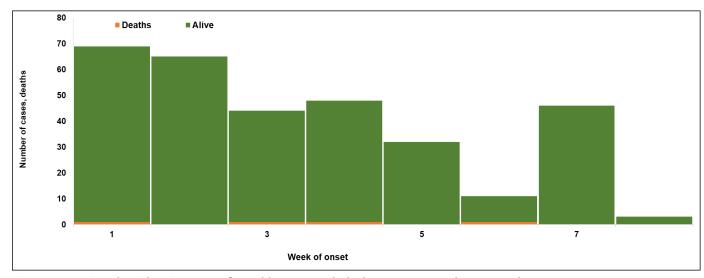
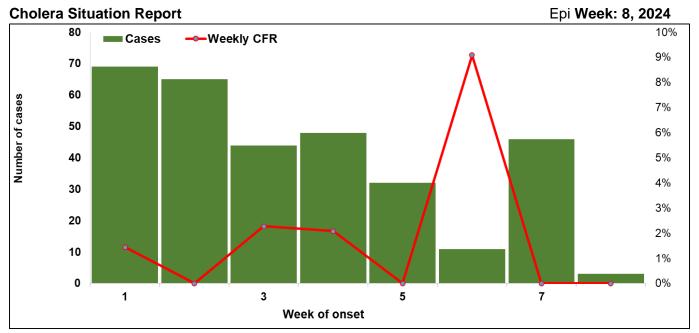


Figure 1: National Epidemic curve of weekly reported Cholera cases, week 1 to week 8, 2024



`Figure 2: Trends in Case Fatality Ratio (CFR), Epi weeks 1 - 8, 2024, Nigeria

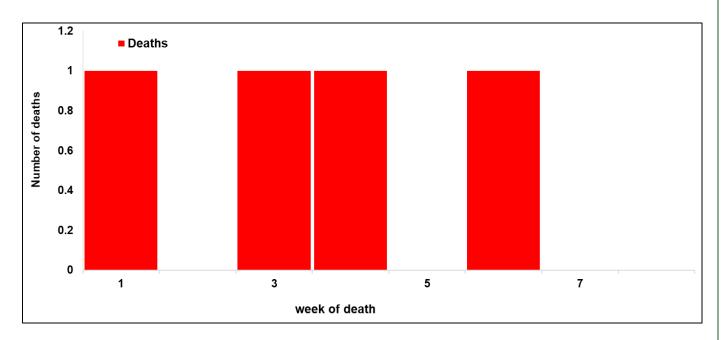


Figure 3: Trends in deaths, Epi weeks 1 - 8, 2024, Nigeria

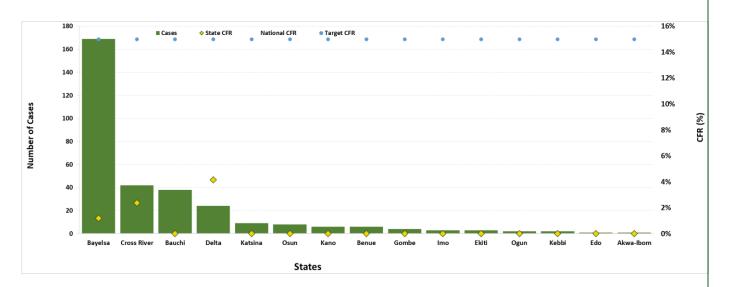


Figure 4: States' Cholera cases by Case fatality ratio (CFR) Epi-weeks 1 - 8, 2024

Table 5: Top 9 States in cumulative cases

No	State	Cases	Percent of cumulative cases	Cumulative % of total cases
1	Bayelsa	169	53%	53%
2	Cross River	42	13%	66%
3	Bauchi	38	12%	78%
4	Delta	24	8%	86%
5	Katsina	9	3%	89%
6	Osun	8	3%	92%
7	Kano	6	2%	94%
8	Gombe	4	1%	95%
9	Imo	3	1%	96%
Total		309	96%	

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Table 6: Top 9 Local Government Areas (LGAs) in cumulative cases

No	LGA	State	Cases	% of cumulative cases	Cumulative %
1	Southern Ijaw	Bayelsa	83	26%	26%
2	Giade	Bauchi	33	10%	36%
3	Warri South West	Delta	24	8%	44%
4	Ogbia	Bayelsa	21	7%	51%
5	Etung	Cross River	16	5%	56%
6	Yenagoa	Bayelsa	14	4%	60%
7	Biase	Cross River	13	4%	64%
8	Sagbama	Bayelsa	12	4%	68%
9	Nembe	Bayelsa	12	4%	72%
Total			228	72%	

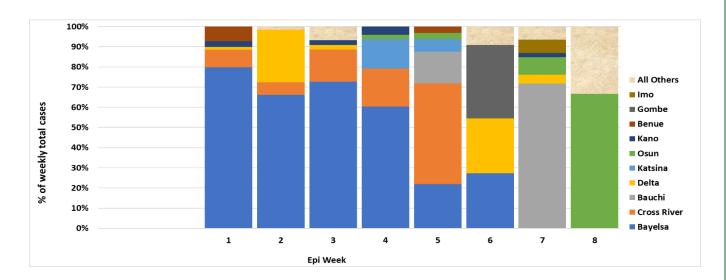
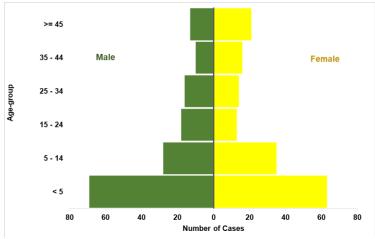


Figure 5: Proportion contribution of suspected cases by states in recent 10 epidemiologic week

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Male 48%

Figure 7. Sex disaggregation for cumulative Cholera cases, week 1-8, 2024: N=318



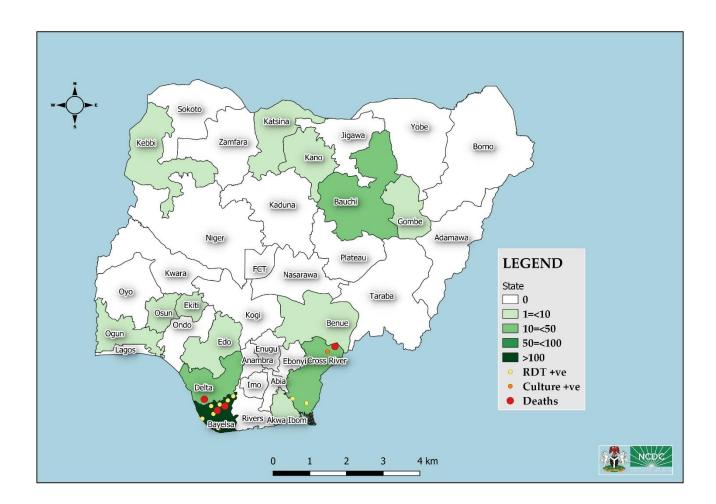


Fig. 8: Map of Nigeria showing states with RDT + Culture and suspected cases, weeks 1 - 8, 2024

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

States			Current week: (Week 8)					Cumulative (Week 1 - 8)				
Reporting	State outbreak	C	ases	De	eaths		Tests				Test	s
		Cases	% change	Deaths	% change	RDT (%Pos)	Culture (%pos)	Cases	Deaths	CFR	RDT (%Pos)	Cultur (%pos
1 Akwa-Ibom	Active		▼ 100%					1	-	0.0%		1 (0%
2 Bauchi	Active		▼ 100%					38	-	0.0%		
Bayelsa	Active							169	2	1.2%	13 (54%)	11 (99
4 Benue								6	-	0.0%		
Cross River								42	1	2.4%	9 (22%)	2 (509
Delta	Active		▼ 100%					24	1	4.2%		
7 Edo	Active							1	-	0.0%		
B Ekiti	Active		▼ 100%					3	-	0.0%		2 (0%
Gombe	Active							4	-	0.0%		4 (09
Imo	Active		▼ 100%					3	-	0.0%		3 (0%
1 Kano	Active		▼ 100%					6	-	0.0%		
Katsina								9	-	0.0%		
Kebbi								2	_	0.0%		
4 Ogun	Active	1					1 (0%)	2	-	0.0%		1 (09
Osun	Active	2	▼ 50%				2 (0%)	8	_	0.0%		7 (09
National	11	3	▼ 93%	0			3 (0%)	318	4	1.3	3% 22 (41%)	31

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Table 7: Response activities

	Pillon Activities to date							
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	 The national multi-sectoral TWG will continue to coordinate the national response Continue sub-national level preparedness and response support Ongoing review of National Cholera Plan 						
Surveillance	 Ongoing surveillance in all states through the routine Integrated Disease Surveillance and Response (IDSR) and Event Based Surveillance (EBS) Providing offsite/onsite support to states and follow up for daily reporting and progress with response activities 	 Continue data collation and harmonisation Ongoing cholera surveillance evaluation across states 						

Cholera Situation Re	eport	Epi Week: 8, 2024
Case Management & IPC	 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 Cross River and states Bayelsa	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

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 from epi week 1 4 (57) was added
- A backlog of deaths in suspected cases from epi week 1 4 (1) was added

DATA AS REPORTED AND ACCURATE BY NCDC AS AT MIDNIGHT 25th FEBRUARY 2024