

WEEKLY DIPHTHERIA SITUATION REPORT

As of 09th February 2025 (Epi-Week 06, 2025)



The information contained in this document is based on data generated from the country's surveillance system & can be used, published, or redistributed to the public.

HIGHLIGHTS

In Epi-Week 06, 2025

- A total of **35** suspected cases were reported from 2 states across 8 LGAs.
- Of the 35 suspected cases reported, **19 (54.3%) were confirmed cases** (*0 lab confirmed; 0 epid linked; 19 clinically compatible*), **0 (0.0%) were discarded**, **0 (0.0%) are pending classification** & **16 (45.7%) were unknown**.
- The confirmed cases were distributed across 6 LGAs in 2 states.
- A total of **0 deaths (CFR: 0%)** were recorded among the confirmed cases.

Cumulatively: Epi-Week 19, 2022 - Epi-Week 06, 2025

- A total of **41,978** suspected cases were reported from 37 states across 350 LGAs.
- **Kano** (24,062), **Yobe** (5,330), **Katsina** (3,939), **Bauchi** (3,066), **Borno** (3,035), **Kaduna** (777) & **Jigawa** (364) accounted for 96.6 of suspected cases reported.
- Of the **41,978** suspected cases reported, 25,298 (60.3%) were **confirmed cases** (*394 lab confirmed; 215 epid linked; 24,717 clinically compatible*), 7,769 (18.5%) were **discarded**, 3,561 (8.5%) are **pending classification** & 5,350 (12.7%) were **unknown**.
- The confirmed cases were distributed across 184 LGAs in 26 states.
- **Kano** (17,931), **Bauchi** (2,334), **Yobe** (2,408), **Katsina** (1,276), **Borno** (1,139) & **Jigawa** (53), **Plateau** (31) & **Kaduna** (44) accounted for 99.4 of confirmed cases reported.
- Majority [**16,125 (63.7%)**] of the confirmed cases were among children aged 1 - 14 years.
- Only **4,981 (19.7%)** out of the 25326 confirmed cases were fully vaccinated with a diphtheria toxoid-containing vaccine.
- A total of **1,279 deaths ((CFR: 5.1%))** were recorded among confirmed cases.

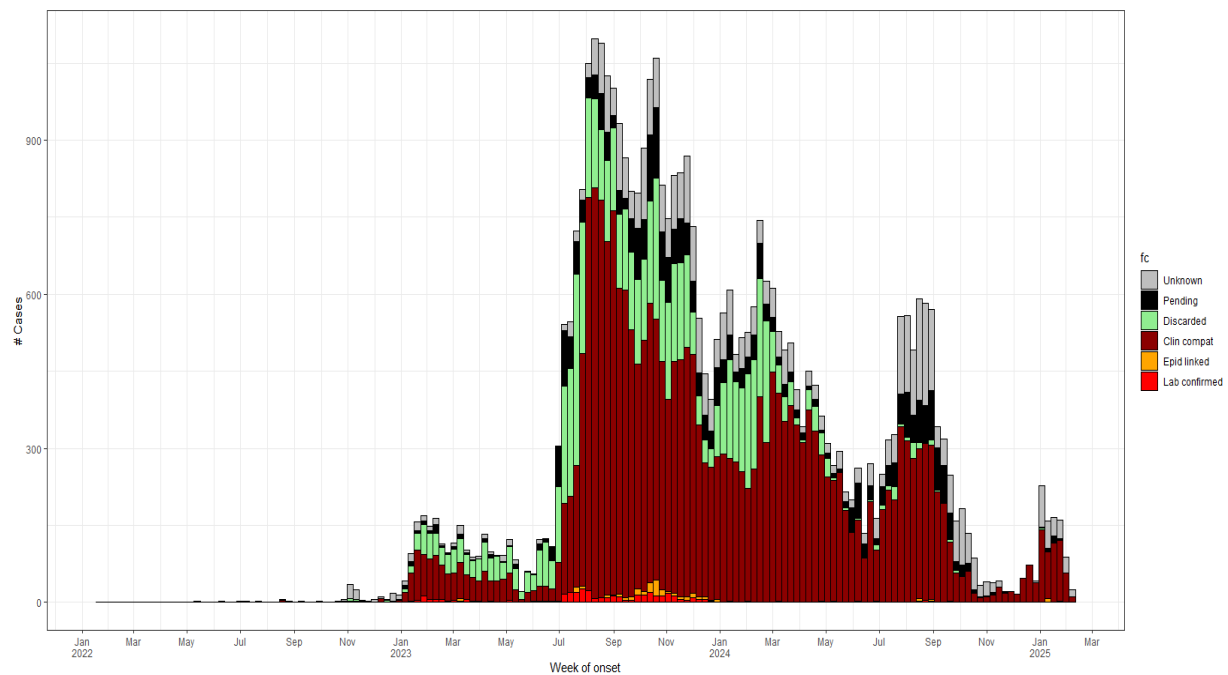


Figure 1: Epi-curve of confirmed diphtheria cases in Nigeria, epi-week 19 2022 - epi-week 06 2025

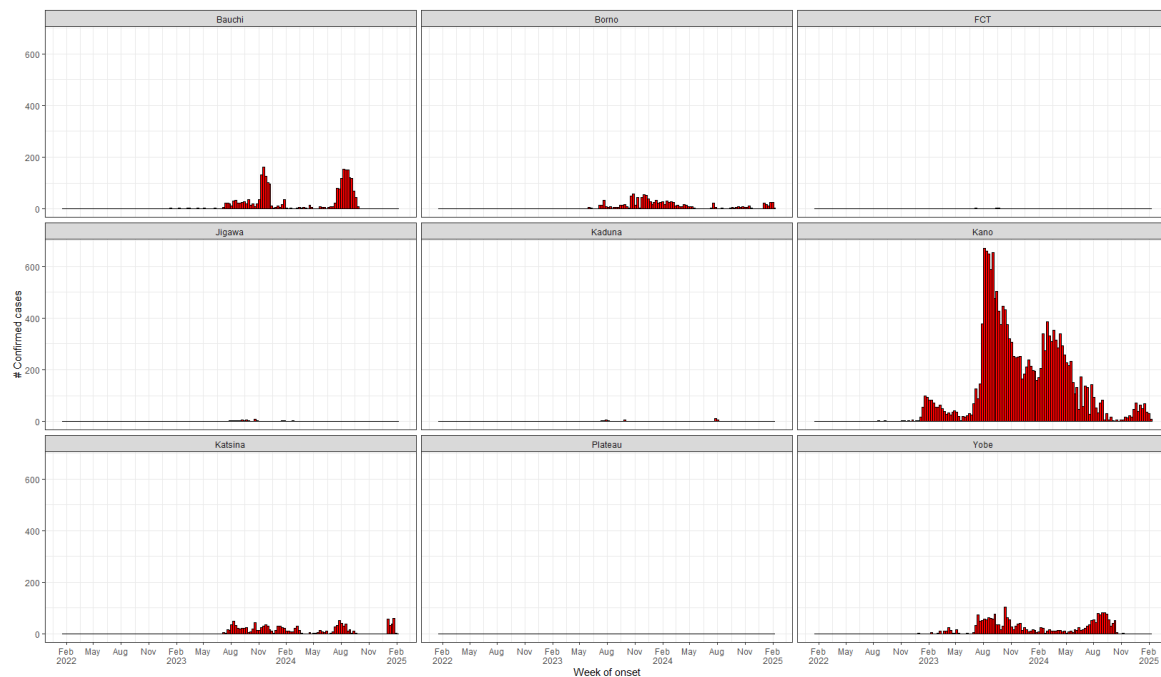


Figure 2: Epi-curve of confirmed diphtheria cases in high burden States, epi-week 19 2022 - epi-week 06 2025

Table 1: Distribution of diphtheria cases and deaths in Nigeria, epi-week 19 2022 - epi-week 06 2025

State	Suspected Case	Confirmed Case	% Confirmed Case	# Deaths among Confirmed Cases	CFR among Confirmed Cases (%)
Kano	24,062	17,931	75%	829	5%
Yobe	5,330	2,408	45%	109	5%
Bauchi	3,066	2,334	76%	104	4%
Katsina	3,939	1,276	32%	110	9%
Borno	3,035	1,139	38%	68	6%
Jigawa	364	53	15%	7	13%
Kaduna	777	44	6%	11	25%
Plateau	66	31	47%	15	48%
Sokoto	200	31	16%	5	16%
Zamfara	219	21	10%	0	0%
FCT	146	15	10%	7	47%
Gombe	216	7	3%	1	14%
Edo	20	6	30%	2	33%
Lagos	37	6	16%	5	83%
Adamawa	65	5	8%	4	80%
Nasarawa	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 River	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 Ibom	1	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	

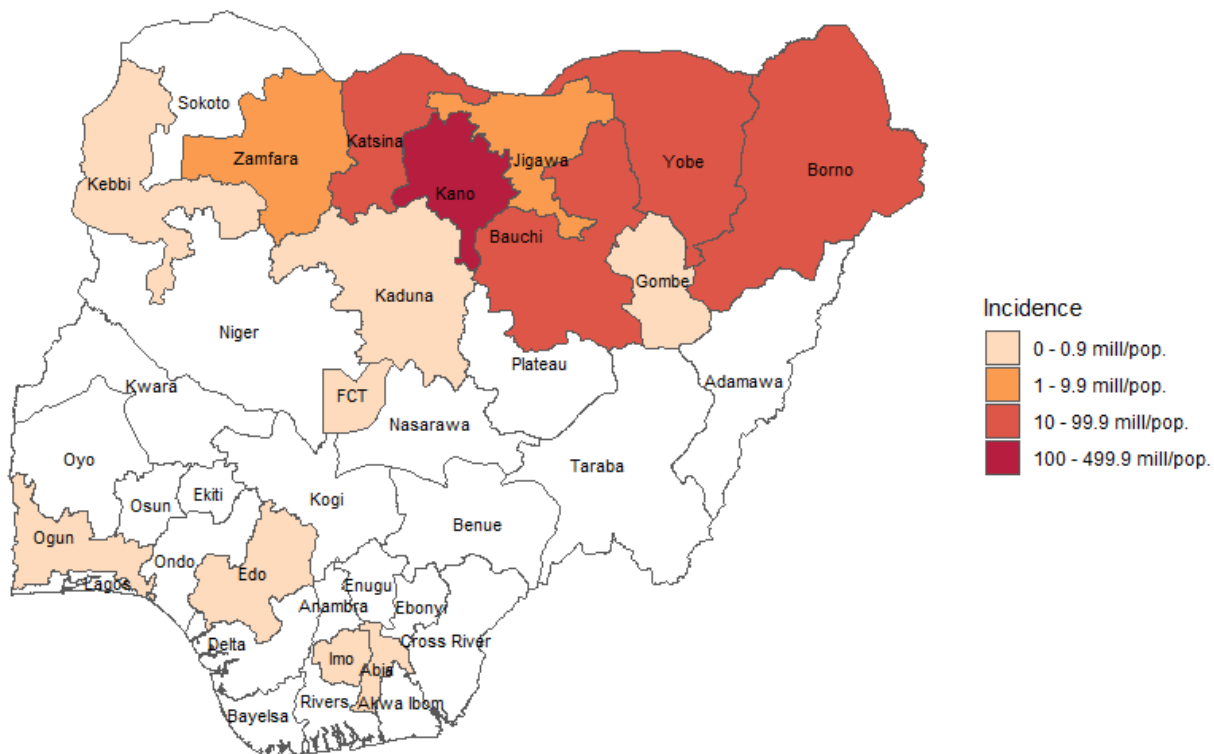


Figure 3: Incidence (per million population) of confirmed diphtheria cases in Nigeria by State, epi-week 19 2022 - epi-week 06 2025

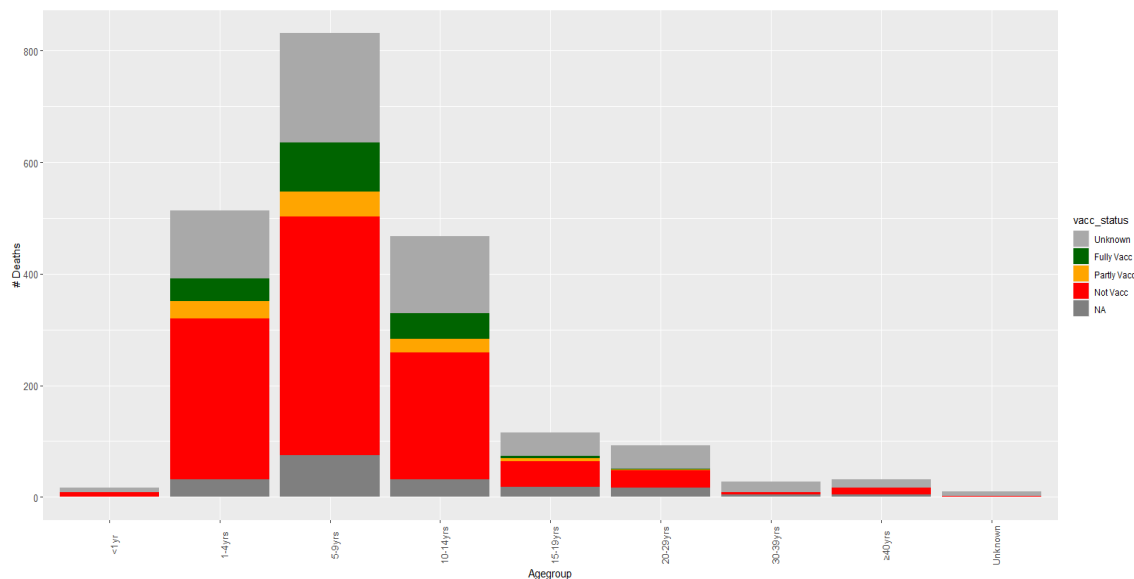
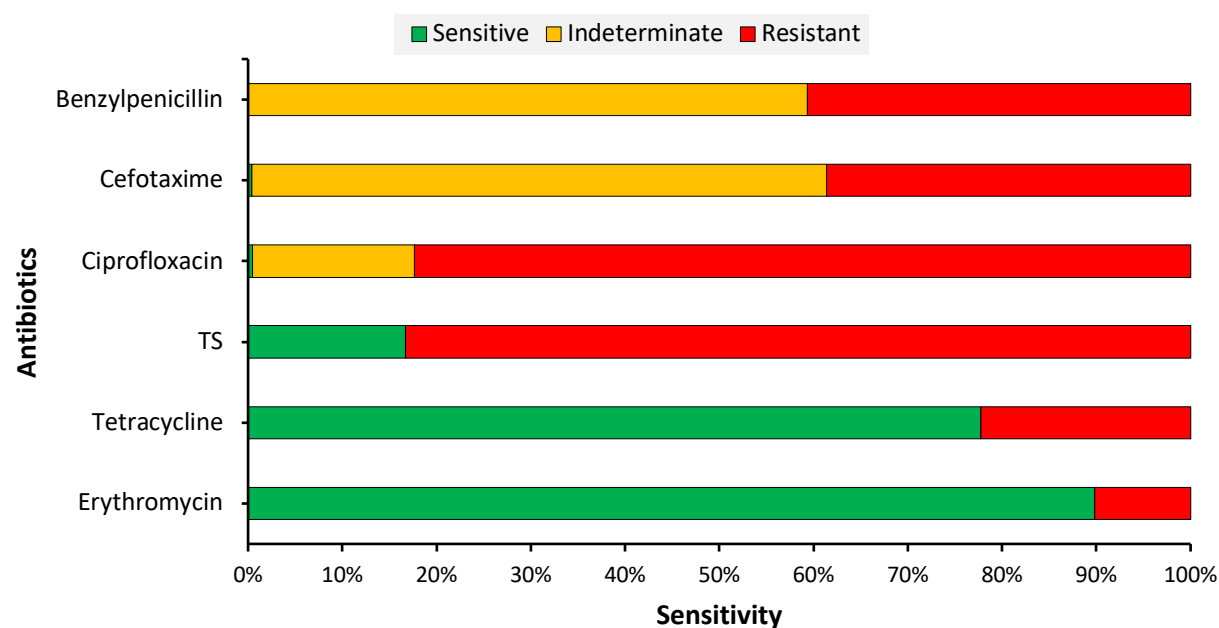


Figure 4: Age distribution and vaccination status of deaths among confirmed diphtheria cases in Nigeria, epi-week 19 2022 - epi-week 06 2025



*TS: Trimethoprim-sulfamethaxole

Figure 5: Drug sensitivity results of toxigenic *Corynebacterium diphtheriae* isolated in Nigeria, epi-week 19 2022 – epi-week 06 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.
- Development of Sitrep

▪ **SURVEILLANCE**

- Analysis for development of sitrep
- 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.
- AST of Diphtheria isolates is ongoing
- Analysis of sequenced *Corynebacterium diphtheriae* isolates.
- Discussions on validation of PCR on clinical samples.
- Ongoing Diphtheria Proficiency Testing for Laboratories.

▪ **CASE MANAGEMENT**

- Treatment Centre engagement
- Prepositioning of DAT across states and facilities.
- Data harmonization with states and other pillars.
- Collection of case management data across high burden states.
- Remote technical support to states and treatment centres.

▪ **RCCE**

- Continues social media engagement also leveraging on stakeholder's platform
- Offsite and onsite technical support to states
- Dissemination of SBC materials (Soft copies) Training slides, posters, flyers etc
- 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**

- Conducted 3rd round of reactive vaccination in the remaining states.
- Routine Immunization services across healthcare facilities.

CHALLENGES

- Delayed reporting from states.
- Competing outbreaks significantly strain available resources, limiting the capacity for effective response and mitigation efforts.

NEXT STEPS

- Continue case management data harmonization and follow up with states.
- Continue data collection by case managers across DTCs.
- Continues social media engagement
- 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.
- Optimize protocol for PCR on clinical samples and metagenomics.
- 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.