Nigeria Centre for Disease Control and Prevention
Protecting the health of Nigerians

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Diphtheria Situation Report

Epi Week 3: 12th January 2026 – 18th January 2026

Key Points

Table 1: Summary of the current week (3), cumulative Epi week 3, current year and comparison with the previous year

Reporting Period	Suspected cases	Confirmed cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases)
Current week 2026 (Week 3)	36	34	0	0	State(s):1 LGA(s): 3
2026 Cumulative (Week 3)	360	318	8	2.5	State(s):3 LGA(s):13
2025 Cumulative (Week 3)	728	482	28	5.8	State(s):10 LGA(s): 58
2024 Cumulative (Week 3)	1712	853	20	1.7	State(s):6 LGA(s): 55

Highlights (key summary)

- A total of **36** suspected cases were reported from 1 state across 3 LGAs.
- Of the 36 suspected cases reported, **34 (94.4%) were confirmed cases** *(0 lab confirmed; 0 epid linked; 34 clinically compatible)*, 0 **(0%) were discarded**, and 2 **(5.6%) are pending classification**.
- Zero (0) **deaths (CFR: 0%)** were recorded among the confirmed cases.

Cumulatively: Epi-Week 19 2022 - Epi-Week 3 2026

- A total of **61,930** suspected cases were reported from 37 states across 450 LGAs.
- **Kano** (31,171), **Yobe** (6,682), **Katsina** (5,714), **Bauchi** (5,406), **Borno** (7,274), **Kaduna** (1,876) & **Sokoto** (481) accounted for 94.6% of suspected cases reported.
- Of the 61,930 suspected cases reported, 40,460 (65.3%) were **confirmed cases** (612 *lab confirmed*; 987 *epid linked*; 38,861 *clinically compatible*), 17,020 (27.5%) were **discarded**, 4,450(7.2%) are **pending** classification
- The confirmed cases were distributed across 300 LGAs in 31 states.
- **Kano** (24,687), **Yobe** (3,159), Bauchi(4,139), **Katsina** (2,589), **Borno** (5,077), **Plateau** (137), **Sokoto** (146) & **Kaduna** (156) accounted for 99.1% of confirmed cases reported.

- The majority [**26,226 (64.8%)**] of confirmed cases were among children aged 1-14 years.
- Only **5974 (14.3%)** out of the 40,460 confirmed cases were fully vaccinated with a diphtheria toxoid-containing vaccine.
- A total of **2,151 deaths (CFR: 5.3%)** were recorded among confirmed cases.

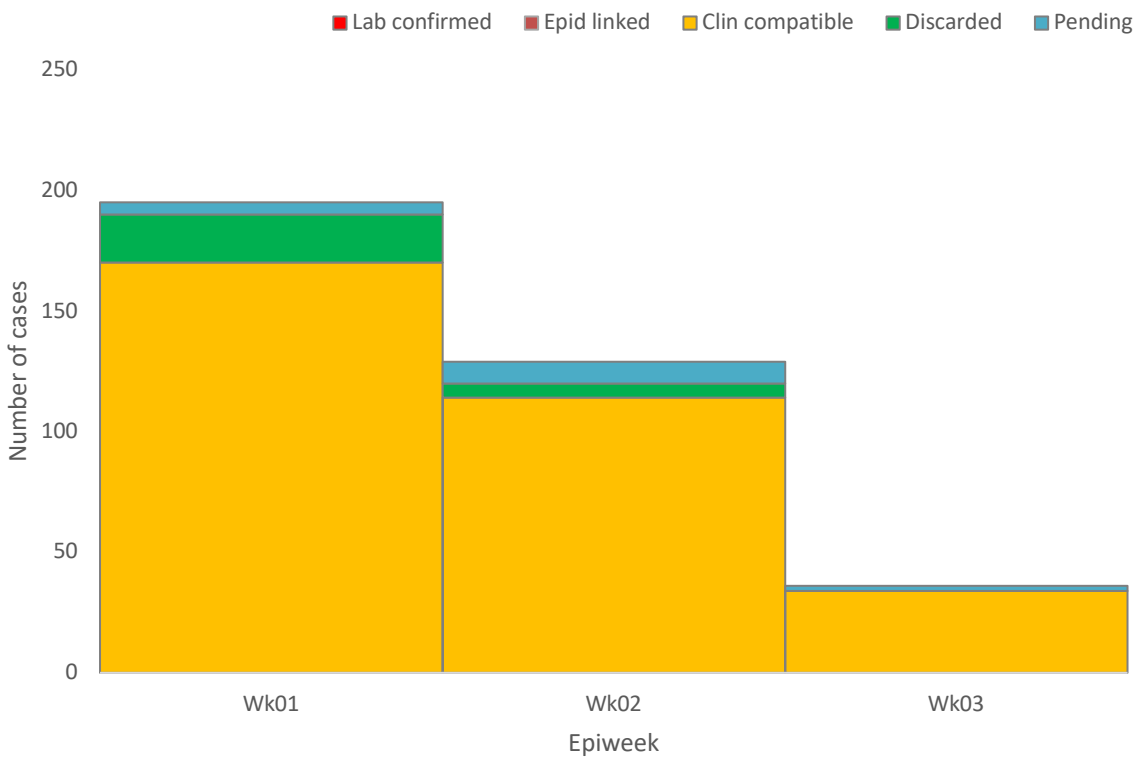

Figure 1: Epidemiological curve of final classification of cases in week 3

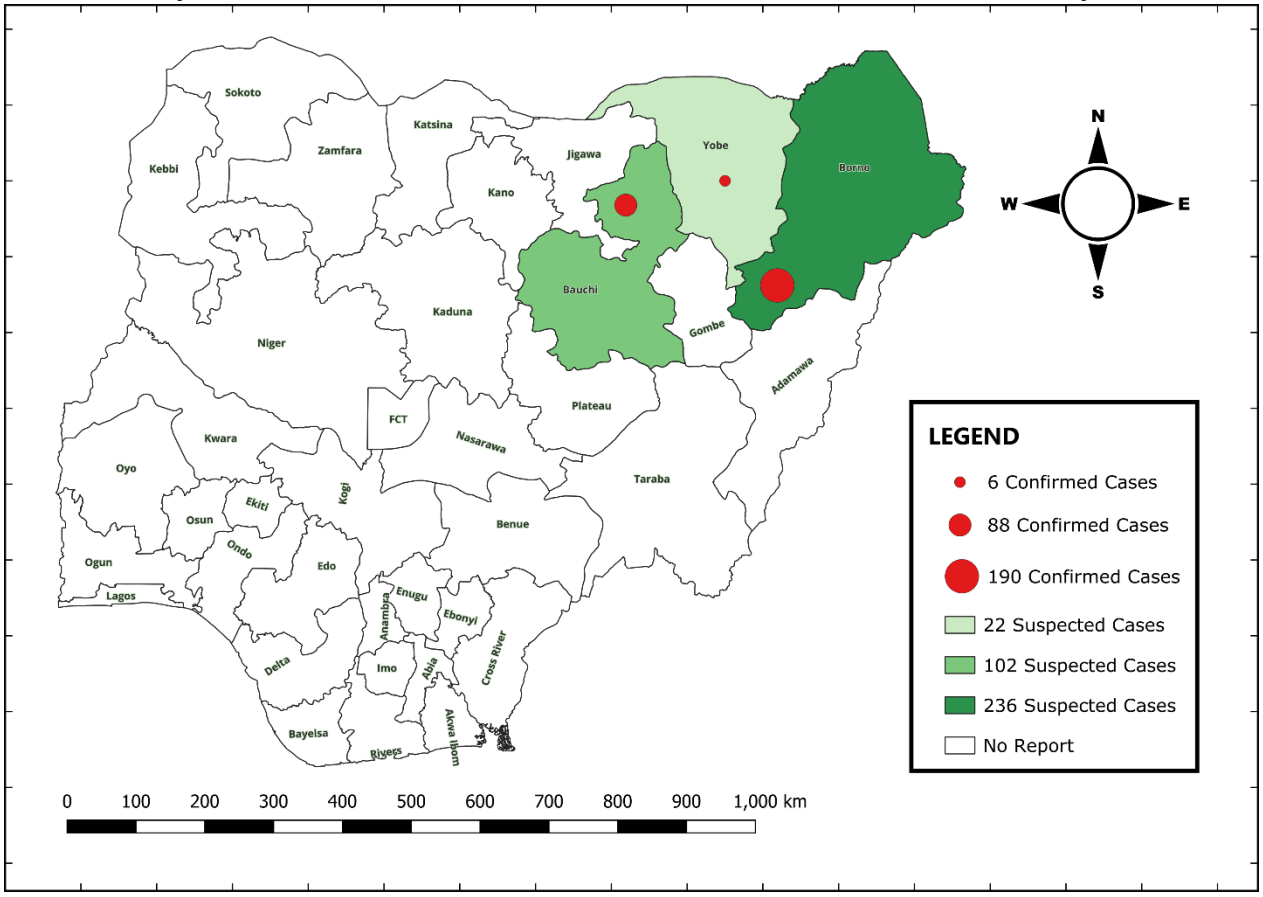

Figure 2. Map showing the distribution of diphtheria cases in Nigeria, 2026.

Table 2: Distribution of diphtheria cases and deaths in Nigeria, 2022-2026

State	# Suspected Case	# Confirmed Case	% Confirmed Case	# Deaths among Confirmed Cases	CFR among Confirmed Cases (%)
Kano	31171	24687	79%	1246	5%
Yobe	6682	3159	47%	129	4%
Katsina	5714	2589	45%	184	7%
Borno	7274	5077	70%	233	5%
Bauchi	5406	4139	77%	213	5%
Kaduna	1876	156	8%	21	14%
Jigawa	539	86	16%	18	21%
Sokoto	481	146	30%	27	19%
Gombe	369	22	6%	1	5%
Lagos	306	27	9%	11	41%
Zamfara	288	21	7%	0	0%
Imo	200	71	36%	3	4%
Plateau	215	137	64%	28	21%
FCT	202	31	15%	7	23%
Oyo	217	4	2%	2	50%
Adamawa	118	33	28%	11	33%
Nasarawa	114	6	5%	2	33%
Taraba	90	2	2%	0	0%
Kebbi	97	5	5%	0	0%
Kogi	76	0	0	0	0%
Ekiti	36	1	3%	1	100%
Edo	70	15	21%	4	27%
Niger	137	3	2%	1	33%
Abia	29	3	10%	1	33%
Anambra	32	14	44%	0	0%
Osun	16	3	19%	1	33%
Bayelsa	15	0	0	0	0%
Ogun	65	8	12%	2	25%
Rivers	14	3	21%	2	67%
Enugu	12	1	8%	0	0%
Akwa Ibom	10	4	40%	0	0%
Delta	49	6	12	3	50%
Ondo	2	0	0	0	0%
Benue	1	0	0	0	0%
Cross river	1	1	100%	0	0%
Ebonyi	1	0	0	0	0%
Kwara	5	0	0	0	0%

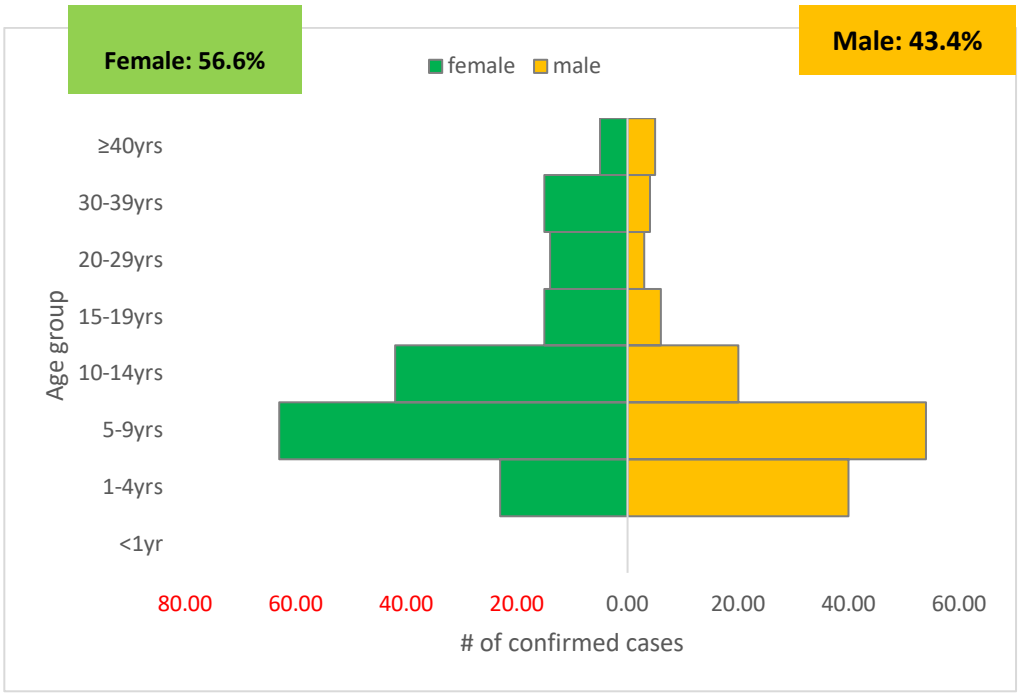

Figure 3: Age and sex distribution pyramid showing the number of confirmed diphtheria cases for 2026

Unvaccinated	99.1%
Partially vaccinated	0%
Fully vaccinated	0%
Unknown	0.9%

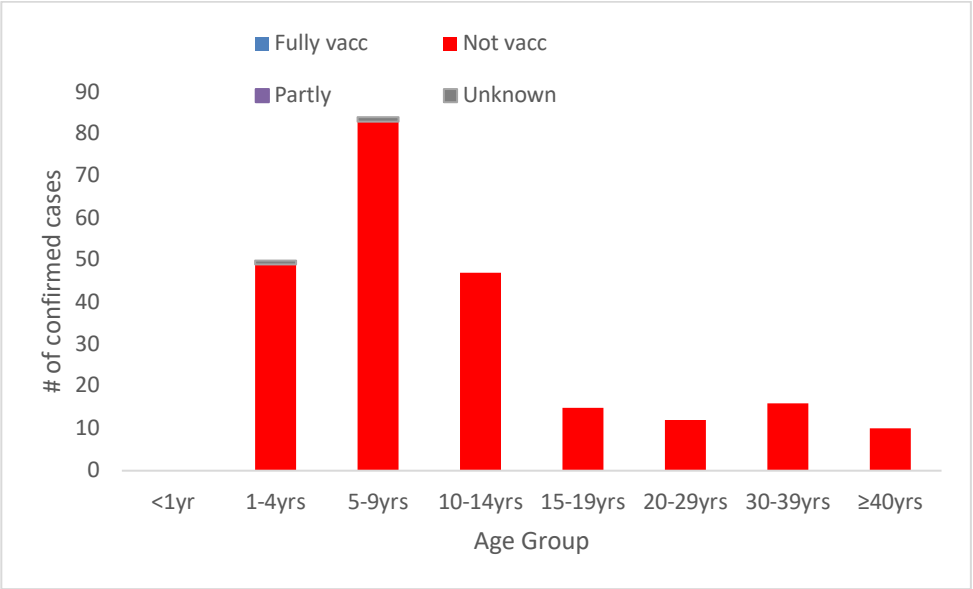

Figure 4: Vaccination status among the age group of confirmed cases for 2026

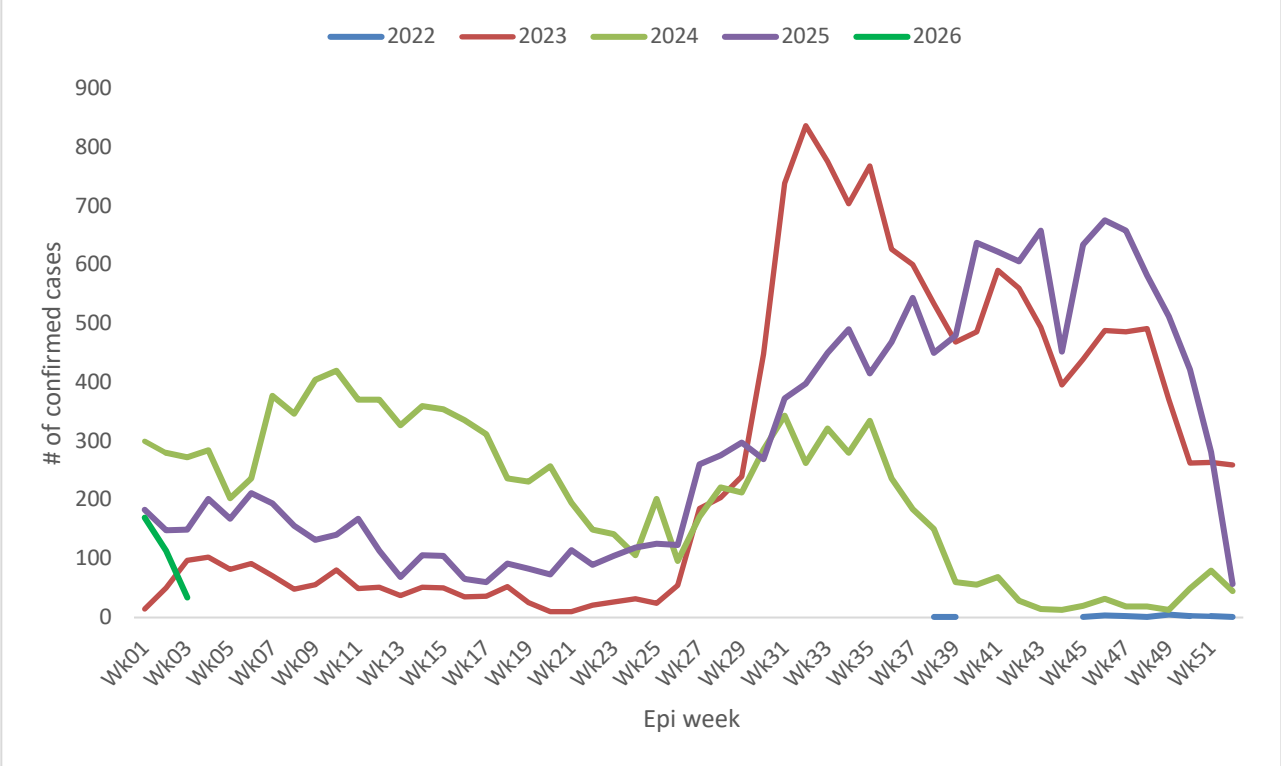

Figure 5: Trend of confirmed cases by epidemiological week,2022-2026, Nigeria

Table 3: Summary of response activities by pillar

Pillar	Activities to date	Next steps
Coordination	• Coordinate weekly National Diphtheria EOC meetings • Development of weekly sitrep • Follow up with state to resolve coordination challenges	• Approval of Diphtheria IAP • Continous weekly EOC meetings
Surveillance	• Follow up with states for updates and technical support • Data harmonization and analysis for development of sitrep	• Continuous phone calls to states for updates and technical support • Continuous data harmonization
Laboratory	• Follow up with states for updates and technical support • Testing diphtheria clinical samples and isolates • Preliminary and confirmatory testing at sub-national and national level, respectively • Meeting with network of Lab	• Whole Genome Sequencing (WGS)for confirmed isolates • Scale up by assessing more laboratories for network expansion • Support testing sites with reagents and consumables
Case Management	• Treatment Centre engagement • Data harmonization with states, surveillance and Lab pillar • Weekly pillar Engagement	• Continue engagement with states for remote technical support and weekly data sharing • Continue harmonization of Data with states, surveillance and lab pillar. • Early case detection, linkage to facilities, isolation and prompt treatement
RCCE	• Social Media Engagement • (WhatsApp, X, FB, Stakeholders channel) • Stakeholders Engagement meeting • Offsite and onsite support to states and partners in states • Routine Infodemic monitoring at the national and subnational	• Offsite support to reporting and non-reporting states (SBC materials dissemination) • Continues social media leveraging to improve awareness • Collaboration with CGPP to triangulate and collect rumors in states
Logistics	• Distribution of case management cosumables • Track utilisation of DAT and Erythromycin	• Obtaining clearance from customs and NAFDAC for DAT
Immuniztion	• Conduct Reactive vaccination • Conduct routine Immunization	• Conduct reactive vaccination in affected states
Research	• Developed research agenda • Devloped activities for diphtheria IAP	• Implement research agenda

Challenges

- *Delay / no reporting of data from states across the Surveillance, laboratory, and case management pillars*
- *Shortage IV erythromycin*
- *Shortage of Case managers to support the treatment of diphtheria in the treatment centers (TCs)*
- *Limited supply of consumables and reagents (Diphtheria selective medium and PCR reagents)*

Recommendations

- *Continuous follow-up with the state for prompt data sharing*
- *Early case detection, linkage to facilities, isolation, and prompt treatment*
- *Conduct reactive vaccination in the affected states and LGAs*
- *RI intensification across all states*
- *Regular supply of DAT, IV erythromycin, and lab consumables and reagents before stockout by NCDC*
- *Support Task Shifting Task Sharing*
- *Capacity building on diphtheria for case managers for newly reporting states*
- *Robust and sustained airing of audio and video jingles*

Notes on this report

Information for this disease was case-based data retrieved from the National Diphtheria EOC.

Data Source

This data was gotten from ;

- *Diphtheria National Linelist shared by the state*
- *SORMAS*

Key definition(s) of terminologies

Case definitions

Suspected cases: *A case of an upper respiratory tractinfection characterized by laryngitis, pharyngitis, or tonsillitis and adherent membranes of the tonsils, pharynx, and nose*

A Diphtheria Case is said to be a confirmed case if it meets the following criteria:

*• **A Laboratory-confirmed case:** is defined as a person who has Corynebacterium spp. isolated by culture and is positive for toxin production, regardless of symptoms.*

*• **An Epidemiologically Linked case**: is defined as a person who meets the definition of a suspected case and had close contact with a laboratory-confirmed case within ten days of his/her symptom onset. This classification is done by a trained disease surveillance and notification officer. Note: This linkage can be to an epidemiologically linked case in a region where an outbreak is confirmed.*

*• **Clinically compatible case:** This refers to a case of diphtheria that meets the criteria for a suspected case but does not have a confirmatory laboratory test result or a known epidemiological link to a laboratory-confirmed case.*

*• **A discarded case:** is a suspected case that meets either of these criteria:*
• Nontoxigenic Corynebacterium (negative Elek test)
OR
• NegativePCRforthediphtheria toxin (tox) gene.

Calculations for CFR
CFR (%)=(Number of confirmed / Number of deaths due to the diphtheria)×100
The case fatality rate (CFR) for this disease is reported for confirmed cases only.

Key Indicators

PILLAR	ATTRIBUTE	INDICATOR	TARGET	VALUE
Surveillance	Adequacy of Investigation	Percentage of all suspected diphtheria cases that have an adequate investigation (CIF and sample collected)	≥80%	80%
	Timeliness of Investigation	Percentage of all suspected diphtheria cases that have an adequate investigation initiated within 48hrs of notification	≥80%	65%
Laboratry	Total Positivity Rate	Total number of laboratories Confirmed samples as numerator by Total number of samples tested	≥80%	46%
	Turn Around Time	Number of results released within the stipulated Time as Numerator (5 days for preliminary culture test and10 days for confirmatory tests) by Total number of specimens received in a month as Denominator	≥80%	90%
Case Management/IPC	CFR %	Number of deaths from diphtheria confirmed cases/Total number of confirmed diphtheria cases* 100	<5%	5.4%
	Proportion discharged patients linked to the immunization	Numberof diphtheria cases managed and linked to the immunization and child welfare clinic at a particular time/Total number of diphtheria cases managed at a particular time* 100	≥80%	100%
	Healthcare worker infection rate	Number of confirmed or probable diphtheria cases among HCWs exposed during patient care or specimen handling within a specified period/Total number of HCWs at risk of exposure during the same period* 100	<1%	0%

QUICK REFERENCE

National Diphtheria Guideline: https://ncdc.gov.ng/themes/common/docs/protocols/358_1738765953.pdf

National Technical Guideline for Intergrated Disease Surveillance and Response: https://ncdc.gov.ng/themes/common/docs/protocols/242_1601639437.pdf

Nigeria Centre for Disease Control and Prevention: www.ncdc.gov.ng