

TITLE:	UPDATE ON MPOX IN NIGERIA
SERIAL NUMBER:	11
EPI-WEEK:	35
DATE:	September 1, 2024

Table 1: Key Indicators

Reporting Year	Reporting week	Confirmed (Suspected) cases	Death (Confirmed cases)	Case Fatality Rate %(CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2024 Current	Week 35	5(53)	0	0.0	4	4
2024 Cumulative	Week 1-35	55(935)	0	0.0	21 + FCT	39
2023 Cumulative	Week 1- 52	98(1182)	2	2.0	25 +FCT	65

Highlights

- **53[†] new suspected cases were reported in Epi week 35, 2024**, compared with 68 cases reported in the previous week (Epi week 34).
- **Five (5) confirmed cases** were reported in week 35 compared with ten (10)[†] confirmed cases reported in week 34, 2024.
- Twenty-one (21) States and the FCT have recorded at least one confirmed case across thirty-nine (39) Local Government Areas in 2024
- Since September 2017, 4752 suspected cases have been reported from 36 states and FCT, with 1141 confirmed cases (24.0%) from 35 States and FCT with seventeen (17) deaths. Males (~70%) are predominantly affected.
- The National Mpox multi-sectoral & multi-partner Emergency Operation Center (EOC) continues to coordinate the response.
- **[†]:In Epi week 34, we had a backlog of 15 suspected cases (& 2 confirmed cases).**

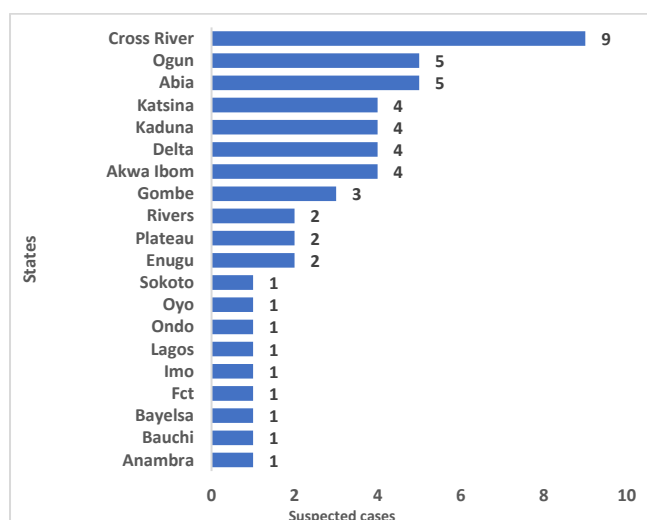


Table 2: Confirmed cases in week 35

States	Confirmed Cases in Epi weeks 35
Akwa Ibom	2
Abia	1
Delta	1
Plateau	1
TOTAL	5

Fig 1: Suspected cases recorded in Week 35

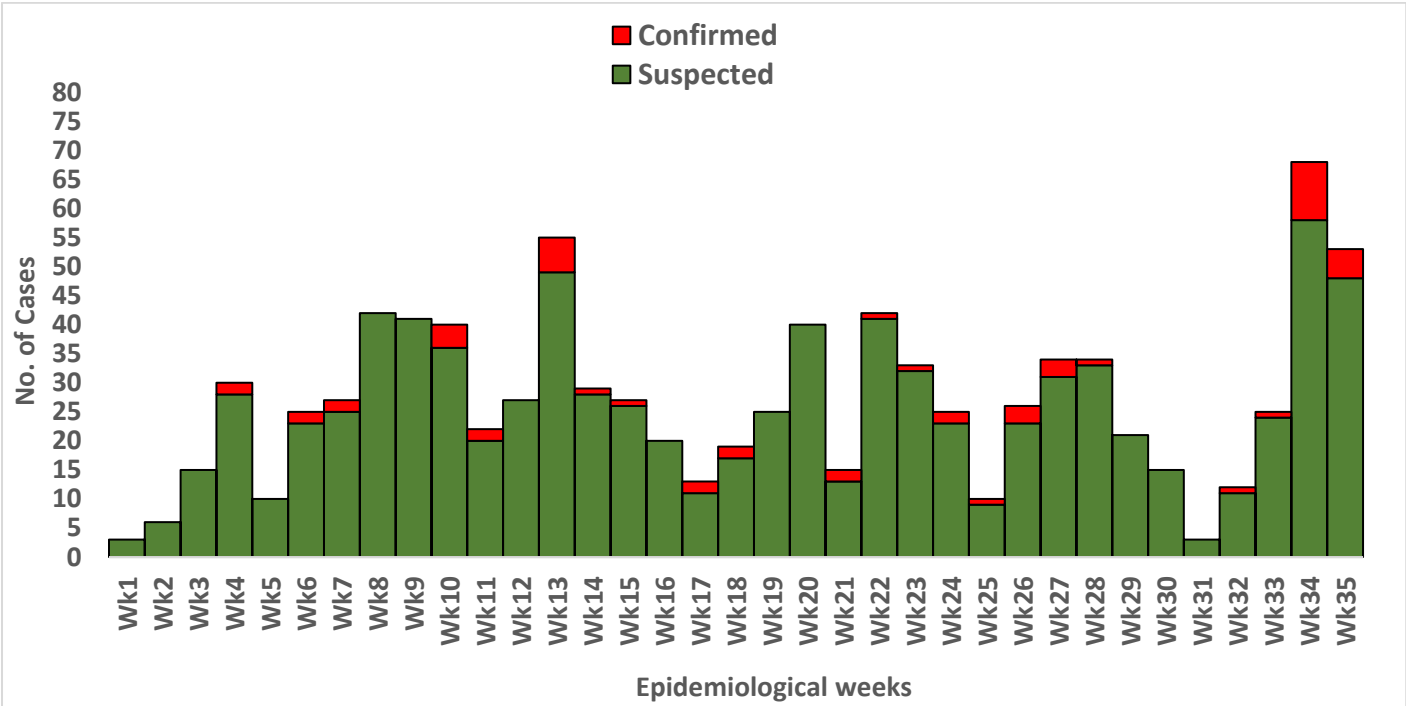


Fig 2: Epidemic curve of suspected and confirmed mpox cases from January 2024 to date.

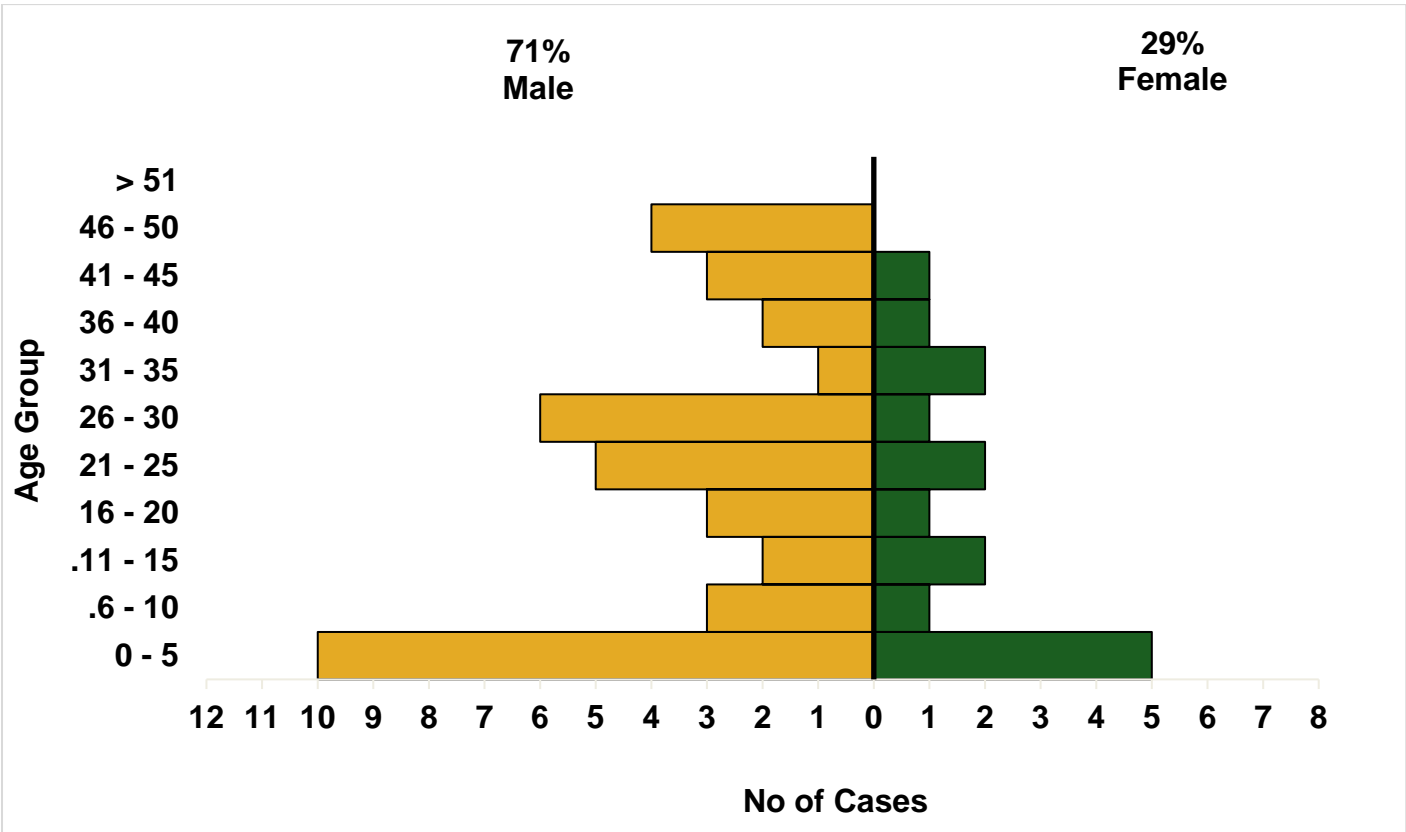


Fig 3: Age and sex distribution of Nigeria confirmed mpox cases from January 2024 to date.

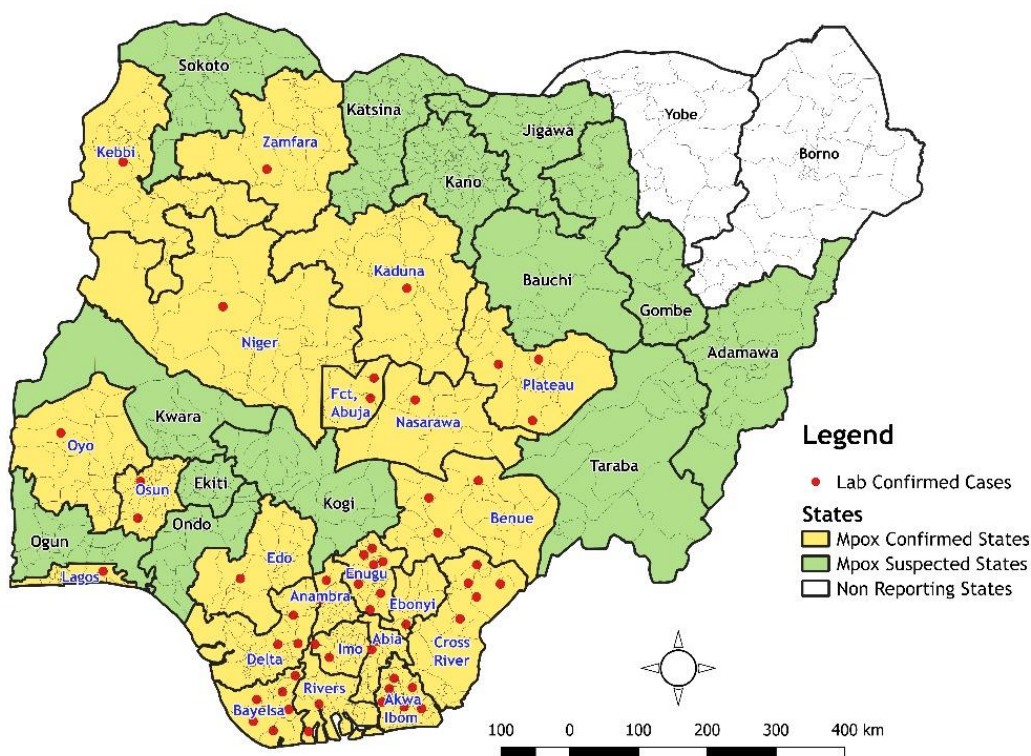


Fig 4: Map of Nigeria showing States with suspected and confirmed mpox Cases from January 2024 till date.

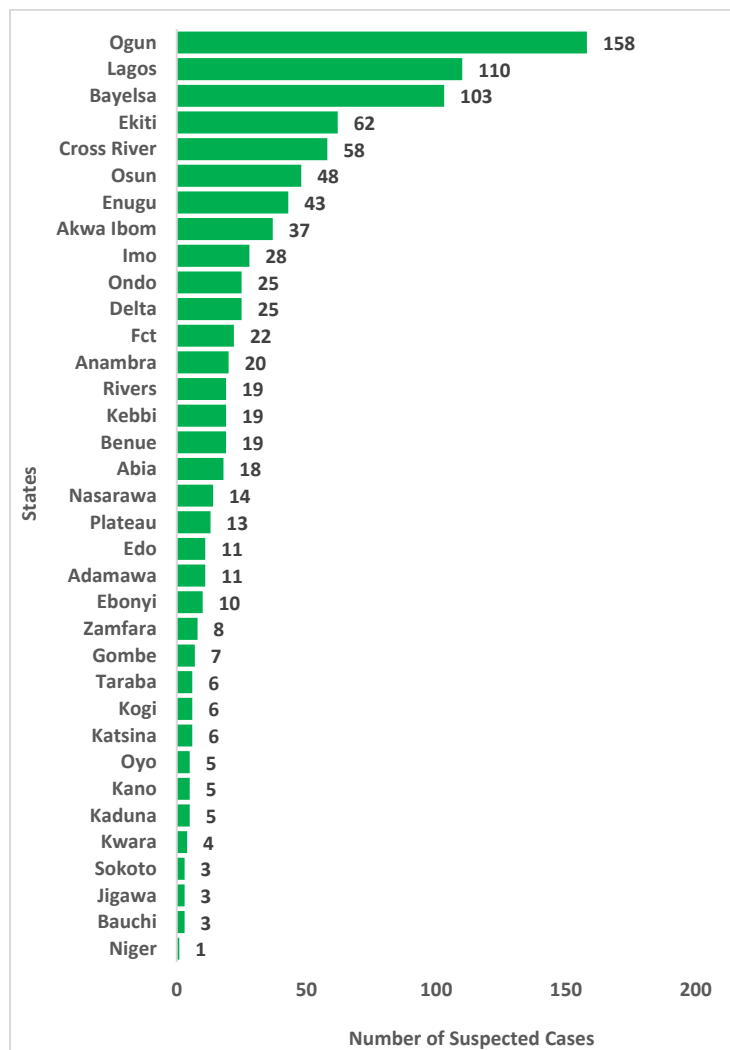


Fig 5: Suspected cases recorded from Epi Week 1 to 35

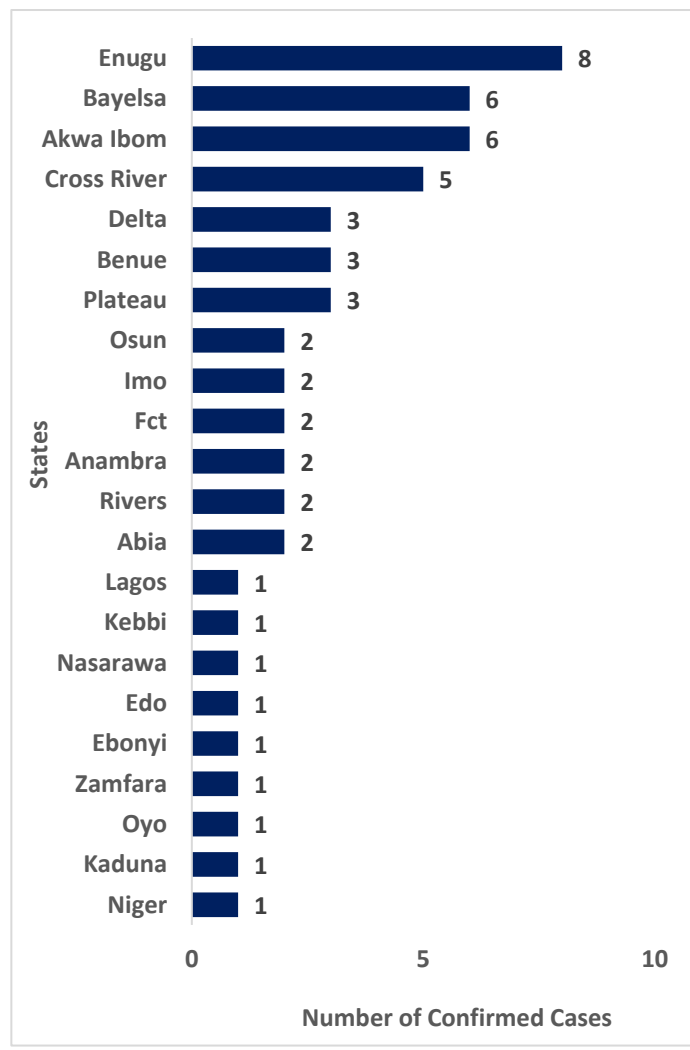


Fig 6: Confirmed cases recorded from Epi Week 1 to 35

Table 3: Summary statistics for annual Nigeria mpox cases by reporting year, Sept. 2017 – 1st Sept. 2024

Reporting year	Suspected cases	Confirmed cases	Deaths (Confirmed cases)	Case Fatality Rate % (CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2024	935	55	0	0.0	21 + FCT	39
2023	1182	98	2	2.0	25 + FCT	65
2022	2123	762	7	0.9	34 + FCT	238
2021	98	34	0	0.0	8 + FCT	25
2020	35	8	0	0.0	5	7
2019	65	47	1	2.1	11	26
2018	116	49	1	2.0	13	25
2017	198	88	6	6.8	14 + FCT	33

Table 4: Age distribution of cumulative number of confirmed mpox cases Sept. 2017 – 1st Sept. 2024

Age Group	2017	2018	2019	2020	2021	2022	2023	2024	Total
0-10 Years	7	5	1	0	1	125	21	19	179
11-20 Years	12	4	1	0	4	123	8	8	160
21-30 Years	34	13	13	4	10	187	24	12	297
31- 40 Years	26	17	22	4	13	205	21	8	316
41-50 Years	9	10	9	0	5	89	17	7	146
> 50 Years	0	0	1	0	1	33	7	1	43
Total	88	49	47	8	34	762	98	55	1141

Notes on this report.

Data Source

Information for this disease was case-based data retrieved from the National Mpox Emergency Operations Centre.

Mpox Case definitions

Suspected case

- An acute illness with fever $>38.3^{\circ}\text{C}$, intense headache, lymphadenopathy, back pain, myalgia, and intense asthenia followed by a progressively developing rash often beginning on the face (most dense) and then spreading elsewhere on the body & may soles of feet and palms of the hand.

Probable case

- A case that meets the clinical case definition and 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, feces, 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.

Mpox Prevention Measures

To prevent the spread of mpox:

- Avoid close contact with individuals showing symptoms, particularly those with rashes or skin lesions.
- Practice good hand hygiene by regularly washing hands with soap and water or using an alcohol-based hand sanitizer.
- Wear protective gear (gloves, masks) when caring for someone with suspected or confirmed mpox.
- Avoid contact with animals that may harbor the virus, such as rodents and primates, especially in areas where mpox is known to occur.
- Ensure meat is thoroughly cooked before consumption.

Actions for Healthcare Providers

- Be vigilant for patients presenting with fever, rash, and other mpox symptoms, especially if they have a history of travel to affected areas or contact with suspected cases.
- Promptly isolate suspected cases to prevent transmission within healthcare settings.
- Notify the relevant public health authorities immediately upon identifying a suspected case.
- Educate patients on the importance of reporting symptoms early and adhering to isolation guidelines if diagnosed with mpox.

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