

# Africa CDC Epidemic Intelligence Report

Date of Issue: 27 May 2025

Active Events

132

New Events reported in 2025

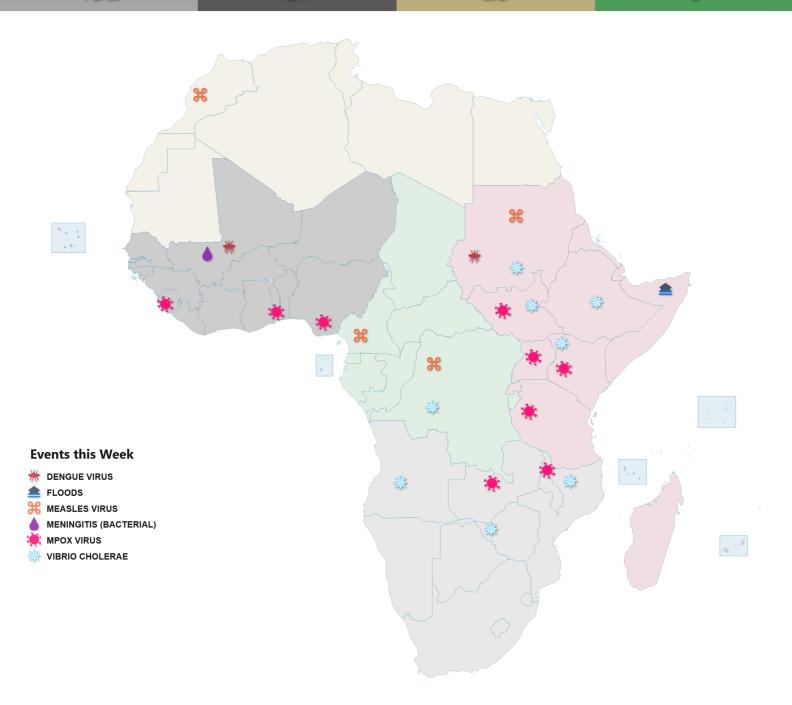
67

Events highlighted this week

25

New events since last issue

0



To represent ALI Member States that are islands

Note: The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the African Union.

	Risk Level					
	Very High (New)	High (New)	Moderate (New)			
Human	0	9	15			
Animal	0	0	0			
Environment	0	0	1			

# **Event Summary**



# **Events Highlighted this week**

Agent/Syndrome	Country	Risk:Human	Risk:Animal	Туре	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
₩ Dengue virus	Mali	Moderate	N/A	8	1,365 (44)	0 (0)	345 (10)	0 (0)
	Sudan	Moderate	N/A	8	3,315 (41)	0 (0)	0 (0)	5 (0)
<b>≜</b> Floods	Somalia	Moderate	N/A	8			84,000 (81,480)	17 (13)
<b>#</b> Measles virus	Cameroon	Moderate	N/A	8	411 (15)	0 (0)	853 (56)	2 (0)
	Democratic Republic of the Congo	Moderate	N/A	8	25,204 (1,563)	0 (0)	0 (0)	379 (20)
	Morocco	Moderate	N/A	8	36,724 (746)	0 (0)	3,291 (0)	79 (0)
	Sudan	High	N/A	8	1,924 (5)	0 (0)	0 (0)	0 (0)
Meningitis (Bacterial)	Mali	Moderate	N/A	8	235 (11)	0 (0)	68 (1)	0 (0)
🌟 Mpox virus	Kenya	Moderate	N/A	8	198 (12)	0 (0)	82 (6)	1 (0)
	Malawi	Moderate	N/A	8	23 (21)		10 (4)	0 (0)
	Nigeria	High	N/A	8	828 (26)	0 (0)	160 (11)	3 (0)
	Sierra Leone	High	Low	8	3,501 (684)	0 (0)	2,648 (603)	14 (3)
	South Sudan	Moderate	N/A	8	166 (30)	0 (0)	14 (3)	0 (0)
	Tanzania	High	N/A	8	235 (21)	0 (0)	51 (7)	0 (0)
	Togo	Moderate	N/A	8	3 (3)	0 (0)	3 (2)	0 (0)
	Uganda	Moderate	N/A	8	4,971 (148)	0 (0)	4,971 (148)	35 (1)
	Zambia	Moderate	N/A	8	464 (206)	0 (0)	76 (5)	3 (0)
🎇 Vibrio cholerae	Angola	Moderate	N/A	8	21,626 (1,479)	0 (0)	937 (0)	630 (21)
	Democratic Republic of the Congo	Moderate	N/A	8	26,520 (1,350)	0 (0)	0 (0)	557 (31)
	Ethiopia	High	N/A	8	4,302 (92)	0 (0)	0 (0)	41 (0)
	Kenya	High	N/A	8	213 (11)	0 (0)	35 (0)	11 (0)
	Mozambique	High	N/A	8	0 (0)	0 (0)	3,421 (137)	36 (1)
	South Sudan	High	N/A	8	48,333 (1,525)	0 (0)	210 (19)	904 (14)
	Sudan	High	N/A	8	11,804 (267)	0 (0)	0 (0)	296 (30)
	Zimbabwe	Moderate	N/A	8	388 (4)	0 (0)	141 (7)	21 (3)

# **Human Event Updates**



**Moderate Risk Events** 

#### Mpox in Africa 16,730 confirmed human case(s), 59,636 suspected human case(s) 477 human deaths (CFR: 0.80%) **Previous Report** Agent/Pathogen Mpox virus First Reported 3-Jan-2025 9-May-2025 Update First Occurred 1-Jan-2025 **Multiple Countries** 18 MS Country Location Human Risk Source Ministry of Health GeoScope MODERATE Assessment **Animal Risk** N/A Assessment

# **Update to Event:**

Since the beginning of 2025. A total of 59,636 cases have been reported, with 16,730 (28.05%) laboratory confirmed. Overall, 477 deaths have been reported (CFR: 0.96%) from 18 African Union Member States (AU MS), and among confirmed cases, the CFR is 0.82% (138 deaths). The distribution of cases and deaths by MS is as follows: Angola (4 confirmed cases; 0 deaths), Burundi (968; 0), Central African Republic (CAR) (8; 0), Congo (36; 1), Côte d'Ivoire (12; 0), Democratic Republic of Congo (DRC) (5,386; 421), Ghana\*(5; 0), Kenya (82; 1), Malawi (10; 0), Liberia (15; 0), Nigeria\*(160; 3), Rwanda\*(37; 0), Sierra Leone (2,648; 14), South Africa (6; 0), South Sudan\*(14; 0), Tanzania (51; 0), Togo (3; 0), Uganda (4,971; 42), and Zambia (74; 3).

In epidemiological week 20, nine AU MS (Kenya, Malawi, Nigeria, Sierra Leone, South Sudan, Tanzania, Togo, Uganda and Zambia) reported a total of 883 new mpox cases, with 787 (89.13%) laboratory-confirmed cases, and five new confirmed deaths.

Kenya: Since the last update (16 May 2025), the Ministry of Health reported 6 new laboratory-confirmed cases, and no new death of mpox from 3 counties. This represents a 4% average decrease in the number of new cases over the past four weeks. This year, 82 laboratory-confirmed cases and one death (CFR: 0.50%) of mpox have been reported from six of forty-seven counties in Kenya. This outbreak started in July 2024. Cumulatively, 113 laboratory-confirmed cases and two deaths (CFR: 0.36%) of mpox have been reported from 15 of 47 counties in Kenya. A total of 553 samples were tested resulting in a 100% testing rate and a 20.43% test positivity rate. Clade Ib was isolated from 33 sequenced samples.

Malawi: Since the last update (13 May 2025) the MoH) reported four new cases of which were laboratory confirmed and no deaths of mpox from all the districts. Since the beginning of this year, 10 cases of which all were laboratory confirmed and no death of mpox have been reported from three of twenty-eight health district in Malawi. Lilongwe, Mangochi and Ntcheu districts collectively recorded a total of ten (10) confirmed cases (Lilongwe - 8, Mangochi -1 and Ntcheu -1) of mpox. Nine of the cases are males and one female in the age range of 2 to 40 years. Since August 2024, a total of 145 samples from suspected cases have been tested. This outbreak started in April 2025.

**Nigeria:** Since the last update (16 May 2025), the Nigeria Centre for Disease Control reported 24 new cases, of which 10 were laboratory-confirmed, and no new death of mpox from 11 states. This is a two-fold average increase in the number of confirmed cases in the last four weeks. Since the beginning of this year, 828 cases, of which 160 were laboratory-confirmed, and three deaths (CFR: 1.87%) of mpox were reported from 36 states and the federal capital territory. Nigeria is endemic for mpox, and cases have been reported since 2017. Cumulatively 6,580 cases, of which 1,395 were laboratory-confirmed, and 20 deaths (CFR: 1.43%) of mpox have been reported from all 36 states and the federal capital territory in Nigeria. Clade IIb was isolated from the confirmed cases.

**Sierra Leone:** Since the last update (9 May 2025), the MoH reported 684 new cases, of which 603 were laboratory-confirmed, and three new deaths (CFR: 0.49%) of mpox from multiple districts. This is a 29% average increase in the number of new cases in the last four weeks. Since the start of the outbreak in January 2025, a cumulative of 3,501 cases, of which 2,648 were laboratory-confirmed, and 14 deaths (CFR: 0.53%) of mpox have been reported from all the 16 districts in Sierra Leone. Of the confirmed cases, children <15 years accounted for 3% and 52% were males. Clade IIb was isolated from sequenced samples.

**South Sudan:** Since the last update (27 April 2025), the MoH reported three new laboratory-confirmed cases, and no deaths of mpox from two counties. This is a 50% increase in the number of confirmed cases compared to the last update. Cumulatively, fourteen laboratory confirmed cases have been reported from three counties (Malaka – 1case; Rumbek- 2; and Juba – 11) in South Sudan. Clade Ib was isolated from 11 of 13 positive samples.

**Tanzania:** Since the last update (9 May 2025), the MoH has reported seven new laboratory-confirmed cases and no deaths of mpox from Zanzibar and Tanzania. This is a 58% average decrease in the number of new confirmed cases in the last four weeks. Since the start of the outbreak in March 2025, a cumulative of 51 laboratory-confirmed, and no deaths of mpox have been reported from 16 of 31 regions in Zanzibar and Tanzania. Clade Ib was isolated from sequenced samples.

**Togo**: Since the last update (18 May 2025) the MoH reported two new cases of which one is laboratory confirmed cases no deaths of mpox from Golfe health district, Greater Lomé region. This is a 75% increase in the number of confirmed cases compared to the last update. Cumulatively, three cases, all of which were laboratory confirmed were reported from Togo. Of the confirmed cases, females accounted for 67% and all cases are adults above 15 years of age. Clade IIb was isolated from the confirmed case.

**Uganda**: Since the last update (16 May 2025), the MoH reported 148 new laboratory-confirmed cases and one new death (CFR:0.68%) of mpox from multiple districts. This is a 1% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 4,971 laboratory-confirmed cases and 35 deaths (CFR: 0.70%) of mpox were reported. This outbreak started in July 2024. Cumulatively, 6,324 laboratory-confirmed cases and 42 deaths (CFR: 0.66%) of mpox have been reported from 100 of 146 districts in Uganda. A total of 7,005 cases were tested resulting in a 100% testing rate and a 90.27% test positivity rate. Clade Ib was isolated from all sequenced samples.

**Zambia**: Since the last update (18 April 2025), the MoH reported five new cases which were laboratory-confirmed, and one new death of mpox from Nyimba district. Since the beginning of this year, 333 cases, of which 76 were laboratory-confirmed, and three deaths (CFR: 0.9%) of mpox were reported. This outbreak started in October 2024. Cumulatively, 464 suspected cases, of which 76 were laboratory-confirmed, and three deaths (CFR: 0.5%) of mpox have been reported from four of ten provinces in Zambia. A total of 464 cases were tested resulting in a 100% testing rate and a 16.4% positivity rate. Clade lb was isolated from sequenced samples.

In epidemiological week 19, seven cases of which two were laboratory confirmed cases and no deaths of mpox were reported from Ghana.

In epidemiological week 19, two cases of which one were laboratory confirmed cases and no deaths of mpox were reported from Nigeria.

In epidemiological week 19, eleven cases of which one were laboratory confirmed cases and no deaths of mpox were reported from Liberia.

**Note:** In 2024, a total of 77,945 cases of mpox, of which 16,780 were laboratory confirmed, and 1,321 deaths (CFR: 1. 78%) of mpox have been reported from 20 AU MS: Angola (4 laboratory-confirmed cases; 0 deaths), Burundi (2,946; 1), Cameroon (9; 2), Central Africa Republic (CAR) (90; 3), Congo (24; 0), Côte d'Ivoire (107; 1), Democratic Republic of Congo (DRC) (11,834; 1,304), Gabon (2; 0), Ghana (13; 0), Guinea (1; 0), Liberia (63; 0), Kenya(31; 1), Mauritius (1; 0), Morocco (2; 0) Nigeria (184; 0), Rwanda (82; 0), Sierra Leone (4; 0), South Africa (25; 3), Uganda(1,353; 7), Zambia (3; 0), and Zimbabwe (2; 0).

# Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, and community engagement activities. Mpox vaccination activities are currently ongoing with 19 member states having been actively involved in developing vaccination plans.

# Cholera in Africa

**5,638** confirmed human case(s), **47** probable human case(s), **121,431** suspected human case(s) **2,579** human deaths (CFR: 2.03%)

Agent/Pathogen	Vibrio cholerae	First Reported	3-Jan-2025	Previous Report Update	16-May-2025
First Occurred	1-Jan-2025	Country	Multiple Countries	Location	20 MS
Source	Ministry of Health	GeoScope	нідн	Human Risk Assessment	MODERATE
Animal Risk Assessment	N/A				

## **Update to Event:**

Since the beginning cases (5,638 confirmed; 47 probable; 116,781 suspected) and 1,944 deaths (CFR: 1.60%) of cholera have been reported from 20 AU MS: Angola (21,084 cases; 630 deaths), Burundi (217; 0), Comoros\*\*(40; 0), DRC\*(24,395; 513), Ethiopia\* (4,302; 41), Ghana (2,780; 14), Kenya (237; 11), Malawi (91; 3), Mozambique (3,421; 36), Namibia (1: 0), Nigeria\*\*(1,307; 34), Rwanda\*\*(228; 0), Somalia\*\*(3,256; 2), South Sudan\*\*(43,347; 862), Sudan\*\*\*(11,804; 296), Tanzania\*\*(2,085; 16), Togo\*\*(165; 4), Uganda (99; 1), Zambia (463; 9), and Zimbabwe (535; 21).

In epidemiological week 20, a total of 4,891 cases and 100 deaths of cholera were reported from eight AU MS: Angola, DRC, Ethiopia, Kenya, Mozambique, South Sudan, Sudan and Zimbabwe.

Angola: Since the last update (16 May 2025), the MoH reported 1,479 new suspected cases and 21 new deaths (CFR: 1.42%) of cholera from 17 provinces. This is a 4% average decrease in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 21,084 cases (937 confirmed; 20,147 suspected) and 630 deaths (CFR: 2.99%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 62% of all deaths. Children <15years accounted for 39% of all cases and 33% of all deaths. Additionally, 62% of all deaths occurred in the health facilities.

**DRC:** Since the last update (16 May 2025), the MoH reported 1,350 new suspected cases and 31 new deaths (CER: 2.30%) of cholera from 11 provinces. This is a 7 % average increase in the number of cases in the past four weeks. This year, a total of 26,520 suspected cases and 557 deaths (CFR: 2.10%) of cholera have been reported from 14 of 26 provinces in DRC. Since the beginning of this outbreak (January 2023), a cumulative of 111,269 cases and 1,434 deaths (CFR: 1.29%) of cholera have been reported from 16 of 26 provinces in DRC. In comparison to epidemiological week 1 to 20 of 2024, a total of 17,230 cases and 267 deaths (CFR: 1.55%) of cholera were reported in DRC, which is a 54% increase in the number of cases and a 52% increase in the number of deaths in the same period.

**Ethiopia:** Since the last update (16 May 2025), the Ethiopia Public Health Institute reported 92 new suspected cases and no new deaths of cholera from two regions. This is a 7% average increase in the number of new cases in the past four weeks. Since the beginning of this outbreak (January 2025), a cumulative of 4,302 suspected cases and 41 deaths (CFR: 0.95%) of cholera have been reported from two of twelve regions in Ethiopia; Gambella (2,195 cases; 32 deaths) and Amhara (2,107; 9) regions.

**Kenya:** Since the last update (16 May 2025), the MoH reported 11 new suspected cases and no new deaths of cholera from two counties. This is a 48% average increase in the number of new cases in the past four weeks. Since the beginning of the outbreak (February 2025), a cumulative of 248 cases (35 confirmed; 213 suspected) and 11 deaths (CFR: 4.43%) of cholera have been reported from four of forty-seven counties in Kenya; Kisumu (93 cases; 7 deaths), Migori (53; 1), Nairobi (59; 1) and Kwale (43; 2). Fifty-two percent cases are males.

**Mozambique**: Since the last update (16 May 2025), the MoH reported 137 confirmed cases and one new death (CFR: 0.73%) of cholera from Nampula and Zambezia provinces. This is a 27% average increase in the number of new cases in the past four weeks. This year, 3,421 confirmed cases and 36 deaths (CFR: 1.05%) of cholera were reported from eight provinces in Mozambique. Since the beginning of the outbreak (October 2024), a cumulative of 3,724 confirmed cases and 58 deaths (CFR: 1.56%) of cholera have been reported from eight of ten provinces in Mozambique. In comparison to the same period in 2024 (epidemiological week 1 to 20), a total of 7,606 confirmed cases and 15 deaths (CFR: 0.20%) of cholera were reported in Mozambique, which is a 55% decrease in the number of cases and a 2.4-fold increase in the number of deaths.

**South Sudan:** Since the last update (16 May 2025), the MoH reported 1,544 new cases (19 confirmed; 1,525 suspected) and 19 new deaths (CFR: 1.2%) of cholera from 24 counties. This is a 1 % average increase in the number of cases in the past four weeks. This year, 48,543 cases (210\*\* confirmed; 48,333 suspected) and 904 deaths (CFR: 1.86%) were reported from nine of ten states in South Sudan. Since the beginning of this outbreak (September 2024), a cumulative of 64,350 cases and 1,233 deaths (CFR: 1.91%) of cholera have been reported from nine of ten states in South Sudan.

**Sudan:** Since the last update (16 May 2025), the MoH reported 267 new suspected cases and 30 new deaths (CFR: 11.2%) of cholera from 12 states. This is a 10% average increase in the number of new cases in the past four weeks. This year, 11,804 suspected cases and 296 deaths (CFR: 2.51%) of cholera have been reported. Since the beginning of this outbreak (July 2024), a cumulative of 62,780 cases and 1,680 deaths (CFR: 2.67%) of cholera have been reported from 12 states in Sudan. The outbreak is occurring amid a sustained complex humanitarian crisis.

**Zimbabwe:** Since the last update (16 May 2025), the MoH reported 11 new cases (7 confirmed; 4 suspected) and three new deaths (CFR:27.27%) of cholera from Mashonaland East province. This is a 61% average increase in the number of cases in the past four weeks. This year, 535 cases (147 confirmed; 388 suspected) and 21 deaths (CFR: 3.93%) of cholera were reported. Since the beginning of this outbreak (4 November 2024), a cumulative of 767 cases (152 confirmed; 615 suspected) and 23 deaths (CFR: 3.00%) of cholera have been reported from eight of ten provinces in Zimbabwe. In comparison to the same period in 2024 (1 to 20 of 2024), a total of 18,849 cases and 377 deaths (CFR: 2.00%) of cholera were reported in Zimbabwe, which is a 97% decrease in the number of cases and a 94% decrease in the number of deaths.

\* Cholera data from the DRC extracted from the IDSR database, covering epidemiological week 1 to epidemiological week 20 of year 2025.

In week 19, a backlog of four suspected cases and no deaths were reported from Rwanda.

Between epi-week 1-19, a backlog of 121 cases were reported from Ethiopia.

\*\*Following data harmonization, 141 confirmed cases have been reclassified as suspected cases

\*\*\*Between epi-week 2 – 19, a backlog of 5,196 cases and 42 deaths were reported from South Sudan.

**Note:** In 2024, a total of 236,874 cases (30,597 confirmed; 689 probable; 205,588 suspected) and 4,182 deaths (CFR: 1.78%) of cholera were reported from 20 AU MS: Burundi (2,216 cases; 12 deaths), Cameroon (287; 0), Comoros (10,540; 152), DRC (30,373; 415), Ethiopia (26,052; 255), Ghana (5,653; 37), Kenya (300; 3), Malawi (476; 15), Mozambique (8,486; 38), Niger (273; 10), Nigeria (10,837; 35), Somalia (21,739; 138), South Africa (150; 1), South Sudan (16,017; 329), Sudan (52,896; 1,359), Tanzania (12,148; 145), Togo (604; 37), Uganda (58; 3), Zambia (20,076; 612), and Zimbabwe (19,646; 388).

## Response by MS/partner/Africa CDC:

The MOH of the affected AU MS activated the emergence operation centres.

Africa CDC continues to support member states with high burden of cholera through case management, surveillance activities as well as WASH and RCCE activities.

**Angola:** Africa CDC deployed three additional technical officers in addition to the team which is on the ground .Supporting with trainings in far to reach districts of Angola.

The other member states are currently making use of the support they got in surveillance ,case management and risk communication and community engagement.

#### Dengue fever in Africa 810 confirmed human case(s), 156 probable human case(s), 6,032 suspected human case(s) 6 human deaths (CFR: 0.09%) **Previous Report** 1-Jan-2025 16-May-2025 Agent/Pathogen Dengue virus First Reported Update First Occurred 1-Jan-2025 Country **Multiple Countries** Location **7 MS** Human Risk Ministry of Health MODERATE MODERATE Source GeoScope Assessment **Animal Risk** N/A Assessment

## **Update to Event:**

Since the beginning of 2025, a total of 6998 cases(810 confirmed; 156 probable; 6,032 suspected) and 6 deaths (CFR: 0.09%) of dengue fever have been reported from seven AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (739; 1), Guinea (1; 0), Mali (1,710: 0), Senegal (32; 0), and Sudan\*(3,315; 5).

In epidemiological week 20, a total of 95 new cases and no new deaths of dengue fever were reported from Mali and Sudan.

**Mali**: Since the last update (9 May 2025), the MoH reported 54 new cases (10 confirmed; 44 suspected) and no new deaths of dengue fever from Bamako (38 cases; 0 deaths), and Kayes (14; 0) regions. This is a 2% average increase in the number of new cases in the last four weeks. This year, a total of 1,710 (345 confirmed; 1,365 suspected) cases and no deaths of dengue fever were reported in all regions in Mali. Since the start of this outbreak (September 2023) a cumulative of 16,702 cases (1,853 confirmed; 14,849 suspected) and 74 deaths (CFR: 0.44%) of dengue fever have been reported from all 11 regions in Mali.

**Sudan:** Since the last update (16 May 2025), the MoH reported 41 new suspected cases and no new deaths of dengue fever from ten multiple states. This is a 24% average decrease in the number of new cases in the past four weeks. Since the beginning of this year, 3,315 suspected cases and five deaths (CFR: 0.15%) of dengue fever have been reported from ten of twelve states in Sudan. Since the start of this outbreak (July 2024), a total of 11,757 suspected cases and 20 deaths (CFR: 0.17%) of dengue fever have been reported from ten of twelve states in Sudan.

\*A backlog of 132 cases and no deaths of dengue fever were reported from Sudan in epidemiological week 14(44 cases) and epidemiological week 16 (88).

**Note:** In 2024, a total of 191,717 cases (30,465 confirmed; 25,249 probable; 121,102 suspected) and 152 deaths (CFR: 0.08%) of dengue fever were reported from 15 AU MS: Burkina Faso (110,257 cases; 102 deaths), Cameroon (1; 0), Cabo Verde (43,597; 8), CAR (430; 1), Chad (983; 0), Côte d'Ivoire (39; 0), Ethiopia (3,463; 0), Ghana (1,71 3; 2), Kenya (88; 0), Mali (9,541; 13), Mauritius (9,166; 8), Sao Tome and Principe (9; 0), Senegal (902; 0), Sudan (8,683; 15), and Togo (2,205; 3).

## Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

#### Measles in Africa 6,746 confirmed human case(s), 80,204 suspected human case(s) **499** human deaths (CFR: 0.57%) **Previous Report** 8-Jan-2025 16-May-2025 Agent/Pathogen Measles virus First Reported Update First Occurred 30-Dec-2024 Country **Multiple Countries** Location 16 MS Human Risk Ministry of Health HIGH MODERATE Source GeoScope Assessment **Animal Risk** N/A Assessment

## **Update to Event:**

Since the beginning of 2025, a total of 80,204 cases (6,746 confirmed; 73,458 suspected) and 499 deaths (CFR: 0.62%) of measles have been reported from 17 AU MS: Cameroon(1,264 cases; 2 deaths), Chad (926; 1), DRC (21,914 cases; 338 deaths), Ethiopia (3,908; 22), Kenya (61; 0), Malawi (167; 0), Mali (383; 0), Mauritania\*(189;0), Morocco\* (40,086; 79), Nigeria (739; 0), Rwanda (736; 0), Senegal (75; 0), Somalia\*\*(3,554; 14), South Africa (108; 0), Sudan\*\*(1,875; 1), Uganda (77; 1) and Zambia (856; 0).

In epidemiological week 20, a total of 2407 cases and 20 new deaths of measles were reported from five AU MS: Cameroon, DRC, Mali, Morocco and Sudan.

Cameroon: Since the last update (16 May 2025) the MoH reported 71 new cases (56 confirmed; 15 suspected) and no new deaths of measles from all 10 regions. Since the beginning of this year, 1,264 cases (853 confirmed; 411 suspected) and two deaths (CFR: 0.16%) of measles have been reported from all the 10 regions in Cameroon. Of the confirmed cases, 67.4% were unvaccinated against measles and children <5 years accounted for 55.7%. In 2023, the national measles vaccination coverage among children <2 years in Cameroon was 56%

**DRC:** Since the last update (16 May 2025), the MoH reported 1,563 new suspected cases and 20 new deaths (CFR: 1.28%) of measles from 24 provinces. Since the beginning of this year; 25,204 new suspected cases and 379 deaths (CFR: 1.5%) of measles have been reported from all the 26 provinces in DRC. This is a protracted outbreak that started in January 2022. Since the beginning of this outbreak (January 2022), a cumulative of 583,764 cases and 10,233 deaths (CFR: 1.75%) of measles have been reported from all the 26 provinces in DRC. In comparison to epidemiological week 1 to 20 of 2024, a total of 48,176 cases and 1,068 deaths (CFR: 2.22%) of measles were reported in DRC, which is a 51% decrease in the number of cases and a 67% decrease in the number of deaths in the same period. In 2018, the national measles vaccination coverage among children <5 years in DRC was 57%.

**Morocco:** In epi-week 20,the MOH reported 746 new cases and no new death of measles from multiple regions in Morocco. Since the beginning of this year,40,033 cases and 79 deaths(CFR;0.20%) of measles were reported. This outbreak started in October 2023.Of the total cases reported,68% are less than 18years,50.7% are males and 49% are unvaccinated. In 2022,the national measles vaccination coverage among children <1 year in Morocco was 99%.

**Mali**: Since the last update (16 May 2025), the MoH reported 22 new cases (9 confirmed; 13 suspected) and no new deaths of measles from six regions. This is a 13% average increase in the number of new confirmed cases in the last four weeks. This year, a total of 383 cases (110 confirmed; 273 suspected) and no deaths of measles were reported from seven of eleven regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,095 cases (458 confirmed; 637 suspected) and no deaths of measles have been reported from all 11 regions in Mali. In 2023, the national measles vaccination coverage among children <1 year in Mali was 98%.

**Sudan**: Since the last update (2 May 2025), the MoH reported five new cases and no new death of measles from multiple states. This is a 45% average decrease in the number of new cases in the last four weeks. This year, 1,924 cases and one death (CFR: 0.05%) of measles have been reported from nine states. In 2023, the national measles vaccination coverage among children <1 year in Sudan was 51%. The outbreak is occurring amid a sustained complex humanitarian crisis.

A backlog of 289 cases (38 confirmed; 251 suspected) and no deaths of measles were reported from Somalia for epidemiological week 18.

A backlog of 44 measles cases were reported from Sudan in epi-week 18 (1 case) and epi-week 19 (43).

- \* Measles data from the DRC extracted from the IDSR database, covering epidemiological week 1 to epidemiological week 20 of year 2025.
- \*A backlog of 189 cases and no death were reported from Mauritania between epi-weeks 5-19
- \*A backlog of 19,947 cases and 42 deaths were reported from Morocco between epi-weeks 9-19

**Note**: In 2024, a total of 260,752 cases (26,432 confirmed; 234,320 suspected) and 3,220 deaths (CFR: 1.23%) of measles have been reported from 30 AU MS: Burkina Faso (10,639 cases; 46 deaths), Burundi (15,003; 149), Cameroon (2,507; 69), Central African Republic [CAR (4,550; 4)], Côte d'Ivoire (7,856: 169), Chad (8,712; 27), Congo (546; 4), DRC (95,126; 2,178), Ethiopia (28,421; 220), Gabon (347; 1), Ghana (1,398; 0), Kenya (1,953; 13), Liberia (2,891; 0), Mali (681; 0), Malawi (937; 1), Mauritania (2,881; 4), Morocco (20,435; 111), Mozambique (1,183; 31), Namibia (105; 0), Nigeria (27,517; 73), Niger(2,226; 13), Senegal (484; 0), Sierra Leone (67; 1), Somalia (12,277: 40), South Africa (626; 0), South Sudan (3,200; 41), Sudan (777; 10), Togo (628; 2), Uganda (2,011; 13), and Zambia (4,946; 0).

# Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to strengthen measles surveillance, case management, and supplemental immunization activities in the affected communities.

#### **Bacterial Meningitis in Africa** 124 confirmed human case(s), 665 suspected human case(s) 27 human deaths (CFR: 3.42%) Meningitis **Previous Report** 3-Jan-2025 Agent/Pathogen First Reported 16-May-2025 (Bacterial) Update First Occurred 3-Jan-2025 Country **Multiple Countries** Location **3 MS** Human Risk Source Ministry of Health GeoScope Assessment **Animal Risk** N/A Assessment

# **Update to Event:**

Since the beginning of 2025, a total of 789 cases (124 confirmed; 665 suspected) and 27 deaths (CFR: 3.42%) of bacterial meningitis have been reported from three AU MS: Ghana (439 cases; 20 deaths), Mali (303; 0), and Togo (47; 7).

In epidemiological week 20, a total of 12 new cases and no new deaths of bacterial meningitis were reported from Mali.

Mali: Since the last update (16 May 2025), the MoH reported 12 new cases (1 confirmed; 11 suspected) and no new deaths of bacterial meningitis from six regions. This is a one-fold average increase in the number of new cases in the last four weeks. Cumulatively, 303 cases (68 confirmed; 235 suspected) and no deaths of bacterial meningitis have been reported from six of eleven regions in Mali this year. The bacteria isolated from the confirmed cases include; Streptococcus pneumoniae (isolated from 24 confirmed cases), Neisseria meningitidis W135 (22), Haemophilus influenzae (21 being typed) and Haemophilus influenzae b (1). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

**Note:** In 2024, a total of 7,118 cases (1,473 confirmed; 5,645 suspected) and 492 deaths (CFR: 7.07%) of bacterial meningitis have been reported from four AU MS: CAR (296 cases; 25 deaths), Mali (735; 0), Niger (2,781; 202), and Nigeria (3,302; 265).

# Response by MS/partner/Africa CDC:

**Mali:** The MoH continues to conduct enhance surveillance, case management, Cerebro-Spinal Fluid sample collection, as well as risk communication and community engagement activities in the affected districts.



- In epidemiological week 18, the Nigeria Centre for Disease Control (NCDC) reported 390 new cases (21 confirmed; 369 suspected) and six new deaths (CFR: 29%) of Lassa fever from Nigeria.
- -In epidemiological week 16, the Nigeria CDC reported 158 new suspected cases and six new deaths (CFR: 3.8 %) of cholera from Nigeria
- Epidemiological week 18 covers the period 5 11 May 2025
- Mpox cases include all persons who have presented with symptoms consistent with the suspected case definition for mpox.
- -The cases in this report include confirmed, probable, and suspected cases.
- CFR are calculated using confirmed cases and deaths only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever where CFR is calculated using all cases and deaths.
- The GeoScope level is determined by where the event is currently occurring on the continent. Low: the event is limited to subnational areas within one MS; Moderate: The event is affecting multiple countries within an AU region or has been imported from/exported to 1-2 countries from another global region; High: The event is affecting several multinational AU regions, or have been imported from/exported to >2 countries from another global region; Very High: Event is considered a pandemic, affecting multiple continents or worldwide. The risk level is determined by evaluating the following criteria: morbidity and mortality of the disease, probability of spread within and to the other MSs, and availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high or very high depending on how they score on the above criteria.