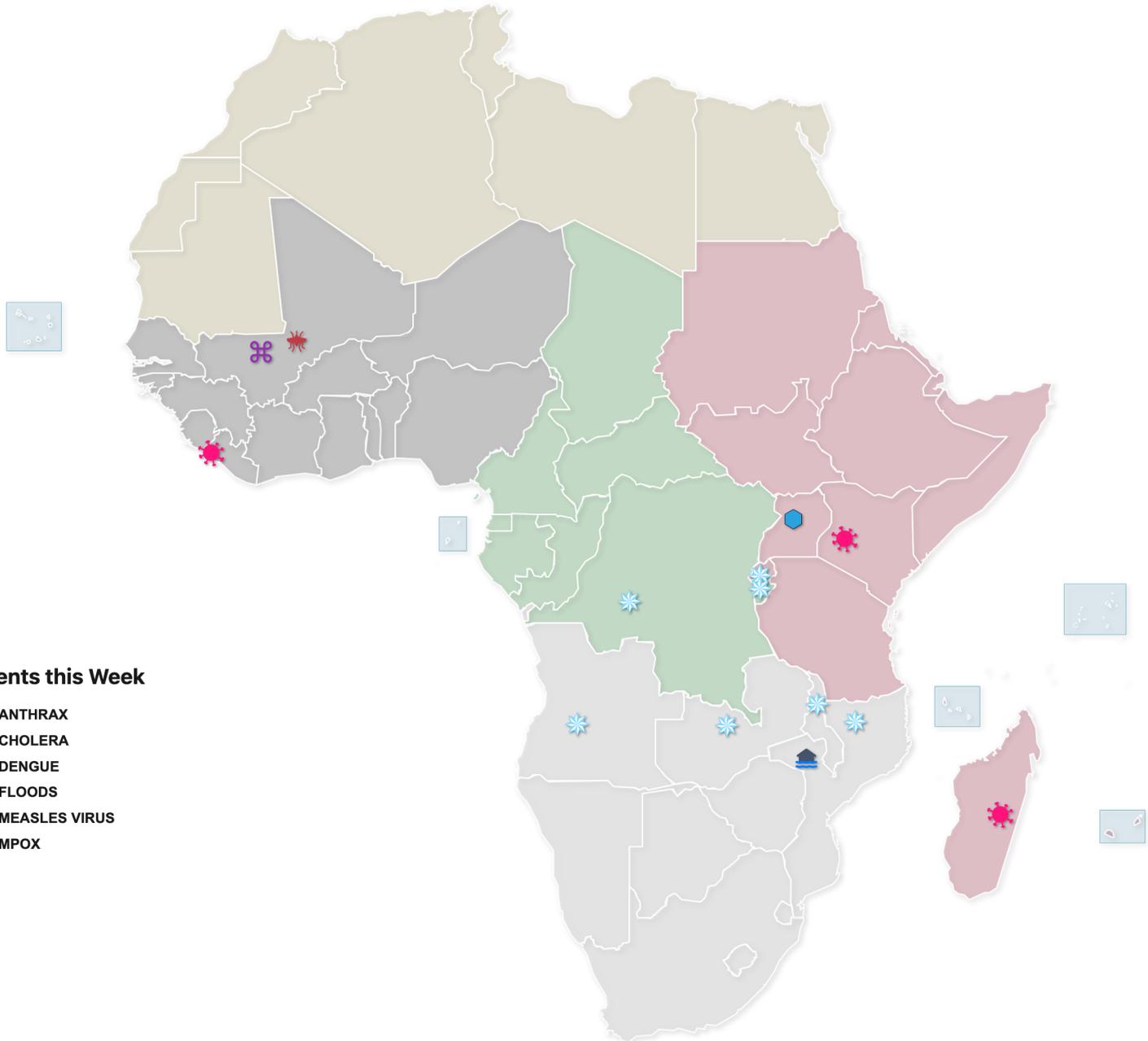


Africa CDC Epidemic Intelligence Report

Date of Issue: 25 Feb 2026

Active Events	New Events reported in 2026	Events highlighted this week	New events since last issue
71	13	14	2



*  represent AU 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

Event Type	Risk Level		
	Very High (New)	High (New)	Moderate (New)
Human	0	5	8 (2)
Animal	0	0	0
Environment	0	0	1

Event Summary

New events since last issue

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected	Probable	Confirmed	Deaths
 Anthrax	Uganda	Moderate	Moderate		9	0	3	2
 Cholera	Rwanda	Moderate	N/A		9	0	7	0

Events Highlighted this week

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Cholera	Angola	High	N/A		235 (37)	0 (0)	0 (0)	8 (2)
	Burundi	Moderate	N/A		455 (50)	0 (0)	0 (0)	2 (0)
	Democratic Republic of the Congo	Moderate	N/A		10,883 (1,284)	0 (0)	0 (0)	268 (47)
	Malawi	High	N/A		0 (0)	0 (0)	70 (5)	2 (0)
	Mozambique	Moderate	N/A		0 (0)	0 (0)	3,826 (663)	45 (8)
	Zambia	Moderate	N/A		284 (53)	0 (0)	5 (0)	7 (0)
	Dengue	Mali	Moderate	N/A		296 (38)	0 (0)	50 (10)
 Floods	Mozambique	Moderate	N/A				723,000 (113,000)	43 (0)
 Measles virus	Mali	High	N/A		83 (18)	0 (0)	21 (5)	0 (0)
 mpox	Kenya	Moderate	N/A		226 (39)	0 (0)	88 (27)	1 (0)
	Liberia	High	N/A		316 (57)	0 (0)	112 (4)	0 (0)
	Madagascar	High	N/A		662 (112)	0 (0)	319 (63)	0 (0)

Moderate Risk Events

Human Event AC24567

Anthrax in Uganda

3 confirmed human case(s)
9 suspected human case(s)
2 human deaths (**CFR: 66.67%**)

Agent/Pathogen	Anthrax	First Reported	19-Feb-2026	First Occurred	5-Jan-2026
Country	Uganda	Location	1 district	Source	Ministry of Health
GeoScope	MODERATE	Human Risk Assessment	MODERATE	Animal Risk Assessment	MODERATE

Description:

On 13 February, the Ministry of Health (MoH) reported an outbreak of Anthrax in Lyantonde district, central Uganda. This followed confirmation of three cases at the Uganda Virus Research Institute, Arua Field Station. The number of samples tested and the confirmatory test were not specified. Cumulatively, 12 cases (3 confirmed; 9 suspected) and two deaths (case fatality rate[CFR]: 66.67%) have been reported from one of 146 districts in Uganda this year. Concurrent deaths have been reported among animals, though pending laboratory confirmation.

Anthrax is a zoonotic bacterial infection and can spread to humans through inhalation, handling eating and drinking foods contaminated with bacterial spores. Clinical presentations may vary from cutaneous, inhalation, gastrointestinal and injection types of anthrax. The average CFR ranges from 20%-30% in cutaneous anthrax without antibiotic treatment and 25 - 75% for gastrointestinal anthrax, 80% or higher in inhalation anthrax. Anthrax is endemic in Uganda with outbreaks reported annually. In 2025, a total of 217 cases (83 confirmed; 134 suspected) and 19 deaths (CFR: 8.75) of anthrax were reported from Uganda.

Response by MS/partner/Africa CDC:

The MoH activated the national and district level public health emergency operation centers to coordinate the response. In addition, the MoH continues to enhance surveillance, risk communication, environmental sanitation, safe burial of dead animals and animal vaccination.

Moderate Risk Events

Human Event AC53748

Mpox in Africa

1,345 confirmed case(s) **7,992** Total case(s)
8 Total deaths (CFR: **0.10%**)

Agent/Pathogen	Mpox	First Reported	1-Jan-2026	Previous Report Update	18-Feb-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	22 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 7,992 cases of mpox, of which 1,345 (0.20%) were laboratory-confirmed, have been reported from 22 African Union (AU) Member States (MS). In addition, a total of 53 deaths (CFR: 0.6%) among all cases and eight deaths (CFR: 0.10%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Burundi** (32 confirmed cases; 0 deaths), Cameroon (15; 0), Central Africa Republic (CAR) (1; 0), Comoros (16; 0), Congo*** (19; 0), Democratic Republic of Congo (DRC)**** (484; 0), Ghana (26; 0), Guinea (119; 1), Kenya* (88; 4), Liberia (112; 0), Malawi (3; 0), Mali (7; 2), Madagascar***** (319; 0), Mozambique (2; 0), Nigeria (10; 0), Rwanda (3; 0) Senegal (1; 0), South Africa (2; 0), South Sudan (4; 1), Tanzania (15; 0), Uganda (46; 0) and Zambia*(21; 0).

In epidemiological week 7, a total of 94 laboratory-confirmed cases and one new death of mpox were reported from three AU MS: Kenya, Liberia and Madagascar.

Kenya: Since the last update (18 February 2025), the MoH reported 27 new laboratory-confirmed cases and one new death (CFR: 3.70%) of mpox from multiple counties. This is a 92% average increase in confirmed cases in the last four weeks. This year, 88 laboratory-confirmed cases and four deaths (CFR: 4.54%) of mpox have been reported from seven of forty-seven counties in Kenya. Since the beginning of this outbreak (July 2024), a cumulative of 1,034 laboratory-confirmed and 16 deaths (CFR: 1.54%) of mpox have been reported from 38 of 47 counties in Kenya. Since July 2024, a total of 2,656 samples were tested resulting in a 39% positivity rate. Clade Ib was isolated from 94 sequenced samples.

Liberia: Since the last update (18 February 2026), the Liberia Public Health Institute reported 57 cases (4 laboratory confirmed) and no deaths of mpox from nine counties. This year, a total of 316 cases of which 112 were laboratory confirmed and no deaths of mpox were reported from Liberia. Since the start of the outbreak (March 2024), a cumulative of 3,146 cases (1,626 laboratory-confirmed), and eight deaths (CFR: 0.49%) of mpox have been reported from all 15 counties in Liberia. A total of 2,952 samples were tested, resulting in a 94% testing rate and a 55% positivity rate. Clade IIb was isolated from sequenced samples.

Madagascar: Since the last update (18 February 2026), the MoH reported 63 new laboratory-confirmed cases and no deaths of mpox from multiple regions. This is a 4% average increase in the number of new cases in the last four weeks. This year, 319 laboratory-confirmed cases and no deaths of mpox have been reported from multiple regions.

Since the start of this outbreak (December 2025), a total of 332 laboratory-confirmed cases and no deaths of mpox have been reported from 27/114 health districts in Madagascar. A total of 710 samples have been tested, resulting in a 47% positivity rate. Clade Ib was isolated from the sequenced samples.

***In epidemiological week 5, a backlog of two deaths were reported from Kenya.**

****In epidemiological week 6, a backlog of nine laboratory-confirmed of mpox were reported from Burundi**

*****In epidemiological week 6, a backlog of three laboratory-confirmed of mpox were reported from Congo**

******Following data harmonization, between epidemiological weeks 1 and 6, a backlog of 5,612 cases of mpox, of which 289 laboratory-confirmed cases were reported from DRC**

*******Following data harmonization, the number of laboratory-confirmed cases were reduced by one case from Madagascar.**

Response by MS/partner/Africa CDC:

The ministries of health in the affected MS continue to intensify surveillance, risk communication, mpox vaccination campaigns and community engagement activities in the affected communities

Cholera in Africa

3,997 confirmed human case(s), **13,038** suspected human case(s)
344 human deaths (CFR: **2.02%**)

Agent/Pathogen	Cholera	First Reported	1-Jan-2026	Previous Report Update	18-Feb-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	14 MS
Source	Ministry of Health	GeoScope	HIGH	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 17,035 cases (3,997 confirmed; 13,038 suspected) and 344 deaths (CFR: 2.02%) of cholera have been reported from 14 AU MS Angola (235 cases; 8 deaths), Burundi (455; 2), DRC* (10,883; 268), Ethiopia (15; 0), Malawi (70; 2), Mozambique (3,826; 45), Namibia (20; 0), Nigeria (251; 3), Rwanda*** (16; 0), Somalia** (402; 0), South Sudan***** (455; 6), Tanzania**** (113; 2), Zambia (289; 7) and Zimbabwe (5; 1).

In epidemiological week 7, a total of 2,092 new cases and 57 new deaths were reported from six AU MS: Angola, Burundi, DRC, Malawi, Mozambique, and Zambia.

Angola: Since the last update (18 February 2026), the MoH reported 37 new suspected cases and two new deaths (CFR: 5.40%) of cholera from five provinces. This is a 4% average decrease in the number of new cases in the last four weeks. This year, a total of 235 suspected cases and eight deaths (CFR: 3.40%) were reported from Angola. Since the beginning of this outbreak (January 2025), a total of 36,528 cases (937 confirmed; 35,591 suspected) and 903 deaths (CFR: 2.47%) of cholera have been reported from 18 of 21 provinces in Angola. Males accounted for 54% of all cases and 63% of all deaths. Children <15 years accounted for 37% of all cases and 32% of all deaths. Additionally, 55% of all deaths occurred at the health facilities. In comparison to the same period in 2025 (epidemiological week 7), 4,107 cases and 147 deaths (CFR: 3.58%), which is a 94% decrease in the number of cases and 95% decrease in the number of deaths of cholera were reported in Angola.

Burundi: In epidemiological week 7, the MoH reported 50 new confirmed cases and no new deaths of cholera from multiple provinces. This is a 4% average increase in the number of new cases in the past four weeks. This year, a total of 455 confirmed cases and two deaths (CFR: 0.44%) of cholera were reported from four of eighteen provinces in Burundi. Males accounted for 50% and children <5 years accounted for 21% of all cases. In comparison to the same period in 2025 (epidemiological week 1 to 7), a total of 60 confirmed cases and no deaths of cholera were reported in Burundi, which is a 6-fold increase in the number of cases and a 2-fold increase in the number of deaths.

DRC: Since the last update (18 February 2026), the MoH reported 1,284 new suspected cases and 47 new deaths (CFR: 3.70%) of cholera from 12 provinces. This is a 2% average decrease in the number of cases in the past four weeks. This year, a total of 10,883 suspected cases and 268 deaths (CFR: 2.46%) of cholera have been reported from 12 of 26 provinces in DRC. In comparison to epidemiological week 1 to 7 of 2026, a total of 7,294 cases and 149 deaths (CFR: 2.04%) of cholera were reported in DRC, which is a 49% increase in the number of cases and 79% increase in the number of deaths in the same period.

Malawi: Since the last update (18 February 2026), the MoH reported five new confirmed cases and no new deaths of cholera from three of twenty-nine districts. This year, 70 confirmed cases and two deaths (CFR: 2.86%) of cholera have been reported from 12 of 29 districts in Malawi. Since the beginning of this outbreak (December 2025), a cumulative of 91 confirmed cases [Lilongwe (2), Balaka (1), Chitipa (1), Mzimba North (1), Neno (3), Kasungu (5), Blantyre (44), Karonga (1), Dowa (1), Chiradzulu (6), Mulanje (13), Chikwawa (4), and Zomba (9) districts and two deaths (CFR: 2.20%) of cholera have been reported from 13 of 29 districts in Malawi. In comparison to epidemiological week 1 to 7 of 2025, a total of 89 confirmed cases and three deaths (CFR: 3.37%) of cholera were reported in Malawi, which is a 21% decrease in the number of cases and a 33% decrease in the number of deaths.

Mozambique: Since the last update (18 February 2026), the MoH reported 663 new confirmed cases and eight new deaths (CFR: 1.21%) of cholera from five provinces. This is a 17% average increase in the number of new cases in the last four weeks. This year, a total of 3,826 cases and 45 deaths (CFR: 1.18%) of cholera were reported from five provinces. Since the beginning of this outbreak (September 2025), a total of 5,389 confirmed cases and 70 deaths (CFR: 1.29%) of cholera have been reported from five of ten provinces in Mozambique. Additionally, 73% of all deaths occurred in communities. In comparison to the same period in 2025 (epidemiological week 1 to 7), no confirmed cases and deaths of cholera were reported in Mozambique.

Zambia: Since the last update (18 February 2026), the MoH reported 53 new suspected cases and no new deaths of cholera from multiple provinces. This year, 289 cases (5 confirmed; 284 suspected) and seven deaths (CFR: 2.42%) of cholera have been reported from eight of ten provinces in Zambia. This outbreak started in August 2025. Cumulatively, 914 cases (205 confirmed; 709 suspected) and 16 deaths (CFR: 1.75%) of cholera have been reported from eight of ten provinces in Zambia. In comparison to the same period in 2025 (epidemiological week 1 to 7), a total of 252 cases and nine deaths (CFR: 3.57%) of cholera were reported in Zambia, which is a 15% increase in the number of cases and a 22% decrease in the number of deaths.

Rwanda (initial report): On 13 January 2026, the MoH reported an outbreak of cholera in Rusizi district. This followed laboratory confirmation of six samples by culture, in which *Vibrio cholerae* Ogawa was isolated. As of 1 February 2026, a total of 16 cases (7 confirmed; 9 suspected) and no deaths have been reported in two of Rwanda's 30 districts. This is the first cholera outbreak reported this year. The last outbreak occurred in 2025, with 313 cases and no deaths of cholera reported from multiple districts.

*Between epidemiological week 1 - 6, a backlog of 274 cases and two deaths were reported from DRC.

**In epidemiological week 6, a backlog of 79 cases were reported from Somalia.

****Between epidemiological week 1-4, a backlog of 113 cases and two deaths were reported from Tanzania.

***** Between epidemiological week 1-4, a backlog of 455 cases and six deaths were reported from South Sudan.

Response by MS/partner/Africa CDC:

The ministries of health of the affected MS activated the emergency operation centers and deployed one health rapid response teams to conduct enhanced surveillance, risk communication, and environmental sanitation in the affected communities.

Measles in Africa

600 confirmed human case(s), **22,427** suspected human case(s)
238 human deaths (CFR: **1.03%**)

Agent/Pathogen	Measles	First Reported	1-Jan-2026	Previous Report Update	18-Feb-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	8 AU MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 22,909 cases (600 confirmed; 22,427 suspected) and 238 deaths (1.03%) of measles have been reported from eight AU MS: DRC* (20,231 cases; 238 deaths), Guinea (71; 0), Liberia (46; 0), Mali (104; 0), Mozambique (62; 0), Senegal (11; 0), Somalia** (2,077; 0), and South Africa (307; 0).

In epidemiological week 7 of 2026, a total of 3,887 and no deaths of measles have been reported from DRC, Mali and Mozambique.

DRC: Since the last update (10 February 2026), the MoH reported 3,848 new suspected cases and 41 new deaths (CFR: 1.06%) of measles from 26 provinces. This year, a total of 20,231 new suspected cases and 238 deaths (CFR: 1.12%) of measles have been reported from all 26 provinces in DRC. This is a protracted outbreak that started in January 2022. In comparison to epidemiological weeks 1 to 6 of 2025, a total of 7,491 cases and 93 deaths (CFR: 1.24%) of measles were reported in DRC, which is a 109% increase in the number of cases and a 92% increase in the number of deaths in the same period. In 2018, the national measles vaccination coverage among children <5 years in DRC was 57%

Mali: Since the last update (19 February 2026), the MoH reported 23 cases (5 confirmed; 18 suspected) and no new deaths of measles from Bamako of six regions. This is a 7% decrease in the number of new cases in the last four weeks. This year, 104 cases (21 confirmed; 83 suspected) and no deaths of measles were reported from all 11 regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,526 cases (626 confirmed; 923 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%.

Mozambique: Since the last update (11 February 2026), the MoH reported 16 new confirmed cases and no new deaths of measles from one provinces. This is a 102% average increase in the number of confirmed cases in the last four weeks. This year, a total of 62 confirmed cases and no deaths of measles were reported from six provinces. Since the beginning of this outbreak (July 2025), a total of 633 confirmed cases and one death (CFR: 0.16%) of measles have been reported from six of ten provinces in Mozambique: Niassa (104; 0), Nampula (195; 1), Manica (37; 0), Maputo (7; 0), Zambezia (96; 0) and Sofala (191; 0). In 2024, the national measles vaccination coverage (MCV1) was 44%.

***Between epidemiological week 3 - 6, a backlog of 728 cases and 18 deaths of measles has been reported from DRC.**

****In epidemiological week 6, a backlog of 412 cases were reported from Somalia.**

In 2025, a total of 195,211 cases (33,036 confirmed; 162,175 suspected) and 1,512 deaths (CFR: 0.77%) of measles have been reported from 21 AU MS: Cameroon (2,883 cases; 4 deaths), Chad (926; 1), DRC (85,210; 1,188), Ethiopia (4,429; 22), Guinea (6,640; 9), Kenya (61; 0), Liberia (1,559; 0), Malawi (167; 0), Mali (666; 0), Mauritania (102; 0), Morocco (44,372; 95), Mozambique (571; 1), Namibia (850; 2), Nigeria (26,866; 153), Rwanda (218; 0), Senegal (123; 0), Somalia (12,378; 14), South Africa (2,448; 0), Sudan (3,275; 22), Uganda (77; 1) and Zambia (1,082; 0).

Response by MS/partner/Africa CDC:

The MoH in the affected MS continue to strengthen measles surveillance and supplemental immunization activities in the affected communities.

Dengue in Africa

105 confirmed human case(s), **296** suspected human case(s)
0 human deaths (**CFR: 0%**)

Agent/Pathogen	Dengue	First Reported	1-Jan-2026	Previous Report Update	18-Feb-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	3 MS
Source	Ministry of Health	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 405 cases (109 confirmed; 296 suspected) and no deaths of dengue fever have been reported from three AU MS: Mali (346 cases; 0 deaths), Mauritania (33; 0) and Senegal (26; 0).

In epidemiological week 7 of 2026, a total of 48 cases and no deaths of dengue fever have been reported from Mali.

Mali: Since the last update (18 February 2026), the MoH reported 48 cases (10 confirmed; 38 suspected) and no new deaths of dengue fever from Bamako (43 cases; 0 deaths), Kayes (1; 0), Koulikoro (3; 0) and Sikasso (1; 0) regions. This is a 7% decrease in the number of new cases in the last four weeks. This year, a total of 346 cases (50 confirmed; 296 suspected) and no deaths of dengue fever were reported in Mali. Since the beginning of this outbreak (September 2023), a cumulative of 19,783 cases (2,645 confirmed; 17,138 suspected) and 74 deaths (CFR: 2.8%) of dengue fever have been reported from all 11 regions in Mali.

Note: In 2025, a total of 62,315 cases (12,909 confirmed; 156 probable; 49,250 suspected) and 139 deaths (CFR: 0.22%) of dengue fever have been reported from 11 AU MS: Burkina Faso (866 cases; 0 deaths), Cabo Verde (335; 0), Comoros (1,320; 1), Guinea (2; 0), Kenya (1; 0), Mali (4,344; 0), Mauritania (4,547; 1), Mauritius (59; 0), Nigeria (178; 11), Senegal (6,668; 0), and Sudan (43,995; 126).

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.

Moderate Risk Events

Environmental Event AC74027

Floods in Africa

987,842 displaced persons
253 human deaths

Agent/Pathogen	Floods	First Reported	22-Jan-2026	Previous Report Update	18-Feb-2026
First Occurred	24-Dec-2025	Country	Multiple Countries	Location	7 MS
Source	EIOS	GeoScope	MODERATE	Human Risk Assessment	MODERATE
		Animal Risk Assessment	N/A		

Update to Event:

Since the beginning of 2026, a total of 987,842 displaced persons and 258 deaths due to floods have been reported from seven AU MS: Malawi (163,274 displaced; 40 deaths), Madagascar (47,428; 71), Morocco (50,000; 0), Mozambique (723,000; 43), South Africa (0; 30), Zambia (4,140; 4) and Zimbabwe (0; 70).

Mozambique: Since the last update (23 January, 2026), the National Disasters Management Institute (INGD) officially raised the national alert level to its highest point to manage the severe flash floods that affected Mozambique. As of 17 February 2025, at least 43 people have died, 229 health facilities affected, 28 people have been injured as well, while a total of 723,000 people were displaced across four of eleven provinces. Additionally, the floods have caused significant damage to homes, infrastructures, and agriculture destroyed in four of eleven provinces.

Response by MS/partner/Africa CDC:

Mozambique: The government in collaboration with humanitarian agencies, is intensifying public awareness campaigns, pre-positioning relief supplies, standing by search-and-rescue teams, and setting up temporary shelters.

- Epidemiological week 6 covers the period from 8 to 15 February 2026.
- The cases in this report include confirmed, probable, and suspected cases.
- Deaths among mpox suspected cases are all reported from DRC.
- In epidemiological week 6, a backlog of 82 cases and one death of diphtheria were reported from Somalia.
- CFR are calculated using confirmed cases and deaths among confirmed cases 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 sub-national 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.

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