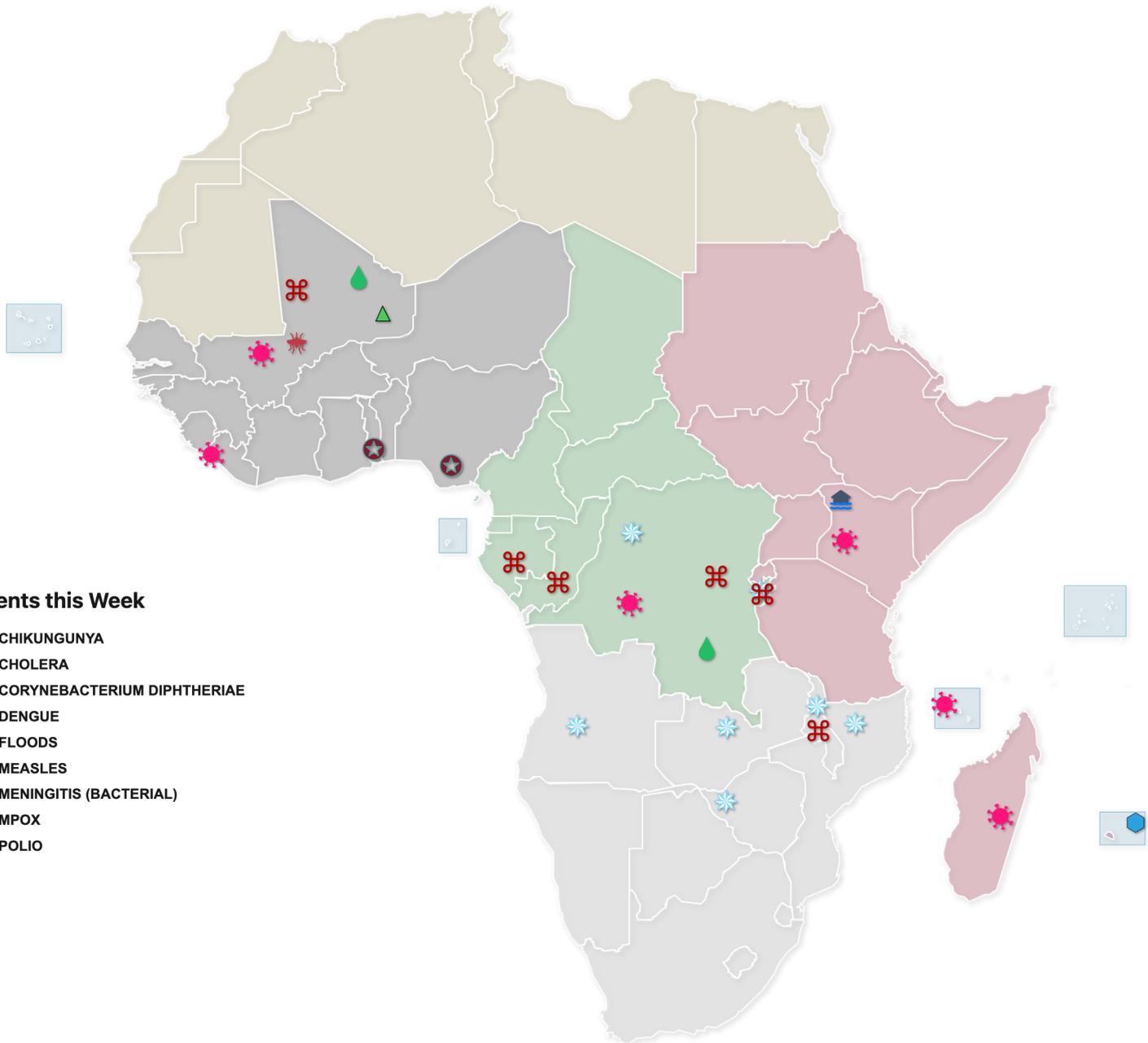


# Africa CDC Epidemic Intelligence Report

Date of Issue: 13 Mar 2026

Active Events	New Events reported in 2026	Events highlighted this week	New events since last issue
<b>86</b>	<b>16</b>	<b>27</b>	<b>3</b>



### Events this Week

-  CHIKUNGUNYA
-  CHOLERA
-  CORYNEBACTERIUM DIPHTHERIAE
-  DENGUE
-  FLOODS
-  MEASLES
-  MENINGITIS (BACTERIAL)
-  MPOX
-  POLIO

\*  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	7	20 (3)
Animal	0	0	0
Environment	0	0	0

# Event Summary

## New events since last issue

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected	Probable	Confirmed	Deaths
 Floods	Kenya	Moderate	N/A		0	0	234	2
 Meningitis (Bacterial)	Democratic Republic of the Congo	Moderate	N/A		0	0	0	0
 Polio	Togo	Moderate	N/A		0	0	1	0

## Events Highlighted this week

Agent/Syndrome	Country	Risk Human	Risk Animal	Type	Suspected (New)	Probable (New)	Confirmed (New)	Deaths (New)
 Chikungunya	Mauritius	Moderate	N/A		0 (0)	0 (0)	193 (74)	0 (0)
 Cholera	Angola	High	N/A		339 (48)	0 (0)	0 (0)	9 (0)
	Burundi	Moderate	N/A		512 (21)	0 (0)	0 (0)	2 (0)
	Democratic Republic of the Congo	Moderate	N/A		13,702 (1,338)	0 (0)	0 (0)	353 (39)
	Malawi	High	N/A		0 (0)	0 (0)	85 (9)	2 (0)
	Mozambique	Moderate	N/A		0 (0)	0 (0)	5,659 (510)	57 (6)
	Zambia	Moderate	N/A		531 (75)	0 (0)	5 (0)	9 (0)
	Zimbabwe	Moderate	N/A		23 (1)	0 (0)	13 (0)	2 (0)
 Corynebacterium diphtheriae	Mali	Moderate	N/A		58 (8)	0 (0)	12 (4)	2 (0)
 Dengue	Mali	Moderate	N/A		384 (0)	0 (0)	116 (17)	1 (0)
 Measles	Burundi	Moderate	N/A		339 (38)	0 (0)	0 (0)	1 (0)
	Congo Republic	Moderate	N/A		502 (37)	0 (0)	56 (16)	6 (0)
	Democratic Republic of the Congo	Moderate	N/A		28,663 (4,034)	0 (0)	0 (0)	298 (35)
	Gabon	Moderate	N/A		10 (3)	0 (0)	0 (0)	0 (0)
	Malawi	Moderate	N/A		515 (26)	0 (0)	113 (0)	0 (0)
	Mali	High	N/A		110 (20)	0 (0)	54 (21)	0 (0)
	Mali	Moderate	N/A		61 (9)	0 (0)	18 (4)	0 (0)
 mpox	Comoros	High	N/A		59 (1)	0 (0)	27 (1)	0 (0)
	Democratic Republic of the Congo	Moderate	N/A		8,412 (909)	0 (0)	537 (17)	1 (0)
	Kenya	Moderate	N/A		277 (23)	0 (0)	112 (13)	6 (2)
	Liberia	High	N/A		368 (28)	0 (0)	120 (5)	0 (0)
	Madagascar	High	N/A		1,061 (281)	0 (0)	479 (105)	1 (1)
	Mali	High	N/A		47 (13)	0 (0)	15 (2)	2 (0)
	Mali	Moderate	N/A		0 (0)	0 (0)	8 (4)	0 (0)
 Polio	Nigeria	Moderate	N/A		0 (0)	0 (0)	8 (4)	0 (0)

## High Risk Events

Human Event AC98595

### Corynebacterium diphtheriae in Africa

**347** confirmed human case(s)  
**1,028** suspected human case(s)  
**1** human deaths (**CFR: 0.29%**)

Agent/Pathogen	<b>Corynebacterium diphtheriae</b>	First Reported	<b>1-Jan-2026</b>	Previous Report Update	<b>5-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>7 MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>HIGH</b>
		Animal Risk Assessment	<b>N/A</b>		

#### Update to Event:

Since the beginning of the year, a total of 1,375 cases (347 confirmed; 1,028 suspected) and 42 deaths, with one death reported among confirmed cases [case fatality rate (CFR): 0.29%] of toxigenic respiratory diphtheria, have been reported from seven African Union (AU) Member States (MS): Guinea (28 cases; 3 deaths), Mali (70; 2), Mauritania (71; 1), Niger\* (78, 6), Nigeria\*\* (360; 8), Somalia\*\*\* (758; 21), and South Africa\*\*\*\* (10; 1).

In epidemiological week 9, a total of 12 new cases and no new deaths of toxigenic respiratory diphtheria were reported from Mali and South Africa.

**Mali:** Since the last update (5 March 2026), the MoH reported 12 new cases (4 confirmed; 8 suspected) and no new deaths due to diphtheria from the Bamako region. This is a 3% average decrease in new cases over the last four weeks. This year, a total of 70 cases (12 confirmed; 58 suspected) and two deaths (CFR: 16.7%) of diphtheria were reported in Mali. Since the beginning of this outbreak (2025), a cumulative total of 702 cases (70 confirmed; 632 suspected) and 35 deaths (CFR: 50%) have been reported across eight regions in Mali.

**South Africa:** Since the last update (20 February 2026), the National Institute for Communicable Diseases reported one new laboratory-confirmed case and no new deaths due to toxigenic respiratory diphtheria in the Western Cape province. This year, a total of ten cases (10 confirmed; 0 probable) and one death (CFR: 10.00%) of diphtheria were reported in South Africa. Since the beginning of this outbreak (January 2024), a cumulative total of 94 cases (92 confirmed; 2 probable) and 19 deaths (CFR: 20.21%) of toxigenic respiratory and cutaneous diphtheria were reported from five provinces: Gauteng, KwaZulu-Natal, Limpopo, Mpumalanga, and Western Cape. Of the total cases reported, 62 laboratory-confirmed cases were asymptomatic carriers of toxigenic C. diphtheriae, and 94 laboratory-confirmed cases were identified during contact tracing as toxigenic cutaneous diphtheria in Zulu-Natal, Limpopo, and Mpumalanga.

\*Between epidemiological weeks 1 - 4, a backlog of 78 cases and six deaths of diphtheria were reported from Niger.

\*\* Between epidemiological weeks 1 - 3, a backlog of 360 cases and eight deaths of diphtheria were reported from Nigeria.

\*\*\*In epidemiological week 8, a backlog of 92 cases and two deaths of diphtheria were reported from Somalia.

**\*\*\*Between epidemiological weeks 1 - 7, a backlog of four cases of diphtheria were reported from South Africa.**

**Note:** In 2025, a total of 24,838 cases (7,016 confirmed; 2 probable; 19,075 suspected) and 1,176 deaths among confirmed cases (CFR: 4.36%) of toxigenic respiratory diphtheria have been reported from 10 AU MS: Algeria (837 cases; 93 deaths), Chad (6,506; 52), Guinea (604; 206), Mali (632; 9), Mauritania (1,299; 48), Niger\* (2,194; 149), Nigeria (10,166; 561), Somalia (3,655; 143), Sudan (112; 0) and South Africa (88; 18).

**\*Between epidemiological week 17 - 52 of 2025, a backlog of 1,255 suspected cases and 91 deaths of diphtheria were reported from Niger.**

**Response by MS/partner/Africa CDC:**

**Mali:** The MoH continues to enhance surveillance, ensure adherence to infection prevention and control measures, support isolation and risk communication, and community engagement. In addition, the MoH is conducting ring vaccination campaigns.

## Meningitis (Bacterial) in Africa

**21** confirmed human case(s), **82** suspected human case(s)  
**9** human deaths (**CFR: 8.74%**)

Agent/Pathogen	<b>Meningitis (Bacterial)</b>	First Reported	<b>2-Jan-2026</b>	Previous Report Update	<b>5-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>2 MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>HIGH</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 103 cases (21 confirmed; 82 suspected) and nine deaths (CFR: 8.74%) of bacterial meningitis have been reported from two AU MS: DRC (24 cases; 9 deaths), and Mali (79; 0).

In epidemiological week 9, a total of six new cases and no new deaths of bacterial meningitis were reported from DRC and Mali.

**DRC (Initial report):** On 23 February 2026, the MoH reported an outbreak of bacterial meningitis in Mangembo health zone, Kongo Central province. The outbreak was initially detected among students in a secondary school, where several individuals developed similar symptoms within a short period. Three samples tested positive for bacterial meningitis, *Neisseria meningitidis* W135 serotype by polymerase chain reaction. Cumulatively, 24 cases (3 confirmed; 21 suspected) and nine deaths (CFR: 37.50%) of bacterial meningitis have been reported. The majority of the cases are persons aged 13–24 years.

**Mali:** Since the last update (5 March 2026), the MoH reported 13 new cases (4 confirmed; 9 suspected) and no new deaths of bacterial meningitis from five regions. This is a 5% average decrease in new cases over the last four weeks. This year, a total of 79 cases (18 confirmed; 61 suspected) and no deaths of bacterial meningitis were reported from Mali. Since the start of the outbreak (January 2025), a cumulative total of 851 cases (149 confirmed; 702 suspected) and no deaths from bacterial meningitis have been reported across all 11 regions in Mali. The bacteria isolated from the confirmed cases include: *Streptococcus pneumoniae* (11), *Neisseria meningitidis* W135 (1), *Neisseria meningitidis* (2), *Haemophilus influenzae* (3) untyped, and *Haemophilus influenzae non-b* (1). In 2023, the national meningitis vaccination coverage among children <5 years in Mali was 94%.

**Note:** In 2025, a total of 1,341 cases (192 confirmed; 1,149 suspected) and 27 deaths (CFR: 2.01%) of bacterial meningitis have been reported from four AU MS: Ghana (439 cases; 20 deaths), Mali (772; 0), Togo (47; 7), and Zambia (83; 0).

### Response by MS/partner/Africa CDC:

**DRC:** The MoH activated an incident management team to coordinate response interventions. The MoH continues to conduct case management in health facilities, and has intensified risk communication and community engagement activities in the affected province.

**Mali:** The MoH continues to coordinate the response activities, including enhanced surveillance, case management, and vaccination.

## Moderate Risk Events

Human Event AC53748

### Mpox in Africa

**1,648** confirmed case(s) **11,440** Total case(s)  
**12** Total deaths (**CFR: 0.10%**)

Agent/Pathogen	<b>Mpox</b>	First Reported	<b>1-Jan-2026</b>	Previous Report Update	<b>5-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>22 MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 11,440 mpox cases, of which 1,648 (14%) were laboratory-confirmed, have been reported from 22 African Union (AU) Member States (MS). In addition, a total of 93 deaths (CFR: 0.81%) among all cases and 12 deaths (CFR: 0.10%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Burundi (46 confirmed cases; 0 deaths), Cameroon (15; 0), Central Africa Republic (CAR) (3; 0), Comoros\* (27; 0), Congo (19; 0), Democratic Republic of Congo (DRC)\*\* (537; 1), Ghana (26; 0), Guinea (119; 1), Kenya (112; 6), Liberia (120; 0), Malawi (3; 0), Mali (15; 2), Madagascar (479; 1), Mozambique (2; 0), Nigeria (12; 0), Rwanda (3; 0) Senegal (1; 0), South Africa (2; 0), South Sudan (4; 1), Tanzania (36; 0), Uganda (46; 0) and Zambia (21; 0).

In epidemiological week 9, a total of 143 laboratory-confirmed cases and three new deaths among confirmed cases of mpox were reported from six AU MS: Comoros, DRC, Kenya, Liberia, Madagascar, and Mali.

**Comoros:** Since the last update (5 March 2026), the MoH reported one new laboratory-confirmed case and no deaths from Ngazidja region. There is no percentage change in the number of new cases over the last four weeks. Cumulatively, 27 laboratory-confirmed mpox cases and no deaths have been reported from two of three regions in Comoros: Ngazidja (26 cases; 0 deaths) and Ndzuwani (1; 0). A total of 59 samples were tested, resulting in a 100% testing rate and 46% positivity rate. Clade Ib was isolated from sequenced samples.

**DRC:** Since the last update (10 February 2026), the MoH reported 909 new cases (17 laboratory-confirmed) and no new confirmed deaths of mpox from eight provinces. This year, 8,412 cases, of which 537 were laboratory confirmed, and one confirmed deaths (CFR: 0.19%) of mpox were reported from eight provinces in DRC. Since the beginning of this outbreak (January 2024), 159,347 cases, of which 36,965 were laboratory-confirmed, and 2,257 deaths (CFR: 1.42%) among all cases and 127 deaths (CFR: 0.34%) among confirmed cases of mpox were reported from all 26 provinces in DRC. The clade Ia and Ib mpox strains were isolated from the confirmed cases.

**Kenya:** Since the last update (5 March 2025), the MoH reported 13 new laboratory-confirmed mpox cases and two deaths (CFR: 15.38%) across multiple counties. This is a 65% average increase in confirmed cases in the last four weeks. This year, 112 laboratory-confirmed cases and six deaths (CFR: 5.35%) of mpox have been reported from seven of forty-seven counties in Kenya. Since the beginning of this outbreak (July 2024), a total of 1,058 laboratory-confirmed mpox cases and 18 deaths (CFR: 1.70%) have been reported from 38 of 47 counties in Kenya. Since July 2024, a total of 2,707 samples were tested, resulting in a 39% positivity rate. Clade Ib was isolated from 94 sequenced samples.

**Liberia:** Since the last update (5 March 2026), the Liberia Public Health Institute reported 28 cases (5 laboratory-confirmed) and no new deaths of mpox from seven counties. This is a 67% average decrease in new cases over the last four weeks. This year, a total of 368 cases (120 laboratory confirmed) and no deaths of mpox were reported from Liberia. Since the start of the outbreak (March 2024), a cumulative of 3,198 cases (1,634 laboratory-confirmed), and eight deaths (CFR: 0.49%) of mpox have been reported from all 15 counties in Liberia. A total of 2,994 samples were tested, resulting in a 94% testing rate and a 51% positivity rate. Clade IIb was isolated from sequenced samples.

**Madagascar:** Since the last update (5 March 2026), the MoH reported 105 new laboratory-confirmed mpox cases and one death (CFR: 1.95%) from multiple regions. This is a 29% average increase in new cases over the last four weeks. This year, 479 laboratory-confirmed mpox cases and one death (CFR: 0.20%) have been reported from multiple regions. Since the start of this outbreak (December 2025), a total of 492 laboratory-confirmed mpox cases and one death (CFR: 0.20%) have been reported from 27/114 health districts in Madagascar. A total of 1,109 samples have been tested, resulting in a 44% positivity rate. Clade Ib was isolated from the sequenced samples.

**Mali:** Since the last update (5 March 2025), the MoH reported thirteen new cases (two laboratory-confirmed) and no deaths of mpox from Bamako region. This is a 67% average decrease in new cases over the last four weeks. This year, a total of 47 cases (15 laboratory-confirmed) and two deaths (CFR: 13.3%) of mpox were reported from Mali. Since the beginning of this outbreak (November 2025), a total of 78 cases (26 laboratory-confirmed) and two deaths (CFR: 7.7%) have been reported from six of twelve regions in Mali. A total of 78 samples were tested, resulting in a 100% testing rate and 33% positivity rate. Clade IIb was isolated from the confirmed cases.

**\*After harmonization between epidemiological week 1- 8, a backlog of 96 cases were reported and one death were reported from DRC.**

**Between epidemiological weeks 3-8, a backlog of six cases were reported from Comoros.**

**Namibia - end of mpox outbreak:** On March 4, 2026, the Ministry of Health and Social Services (MoHSS) of Namibia declared the end of the Mpox outbreak in the Swakopmund District (Erongo Region). The Mpox outbreak began on 19 October 2025, with three confirmed cases and no deaths. The outbreak was declared over after 90 days without new infections since the last reported case on October 21, 2025.

**Note:** In 2025, a total of 141,999 cases of mpox, of which 43,041 were laboratory-confirmed, were reported from 29 AU MS. In addition, a total of 825 deaths (CFR: 0.58%) among all cases and 254 deaths (CFR: 0.60%) among confirmed cases have been reported. The distribution of confirmed cases and deaths by MS is as follows: Angola (8 confirmed cases; 0 deaths), Burundi (1,662; 0), Cameroon (12; 0), Central African Republic (CAR) (72; 6), Congo (104; 1), Côte d'Ivoire (79; 1), Democratic Republic of Congo (DRC) (21,629; 99), Ethiopia (48; 1), Gambia (1; 0), Ghana (973; 7), Guinea (2,038; 6), Kenya (915; 11), Liberia (1,451; 8), Madagascar (13; 0), Malawi (147; 1), Mali (11; 0), Morocco (2; 0), Mozambique (91; 0), Namibia (2; 0), Nigeria (435; 6), Rwanda (47; 0), Senegal (9; 0), Sierra Leone (5,442; 60), South Africa (14; 0), South Sudan (38; 0), Tanzania (265; 0), Togo (90; 0), Uganda (7,073; 44), and Zambia (370; 3).

### **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

## Polio (Vaccine-derived) in Africa

**12** confirmed human case(s)  
**0** human deaths (**CFR: 0%**)

Agent/Pathogen	Polio (Vaccine-derived)	First Occurred	1-Jan-2026	Country	Multiple Countries
Location	14 MS	Source	Ministry of Health	GeoScope	MODERATE
	Human Risk Assessment		Animal Risk Assessment		N/A
	MODERATE				

### Update to Event:

Since the beginning of this year, 11 confirmed cases and no deaths of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been reported from four AU MS: DRC (2; 0), Nigeria\* (7; 0), Somalia (1; 0), and Togo (1; 0). One confirmed case, and no deaths of cVDPV3 were reported from Nigeria (2; 0).

In epidemiological week 9, five new confirmed cases of cVDPV2 were reported from Nigeria and Togo.

**Nigeria:** In epidemiological week 9, the Global Polio Eradication Initiative reported four new confirmed cases and no deaths of cVDPV2 from Katsina and Zamfara states. This year, a total of nine cases of vaccine derived polio virus were reported from Nigeria: cVDPV2 (7 cases) and cVDPV3 (1 case), were reported from Nigeria. In 2025, a total of 66 cases of cVDPV2 and five cases of cVDPV3 were reported from Nigeria. In 2023, the national oral polio vaccination (OPV3) coverage among children <1 year in Nigeria was 84%.

**Togo (initial report):** On 25 February 2026, the MoH reported an outbreak of cVDPV2 in the Mo Health district, Central region of Togo, with one confirmed case and no deaths. The case was a three-year-old male child with paralysis in the lower right limb, which started on 17 January 2026. He was admitted to the Mo health facility, and two stool samples were collected on 24 and 26 January 2026 for laboratory analysis. The laboratory result was available on 20 February 2026 and was positive for CVDPV2. The child had a history of one dose of oral polio vaccine that was administered at birth. The last outbreak of cVDPV2 was reported in 2022, with two confirmed cases in the Savane and Plateaux regions of Togo. In 2023, the national coverage for 3rd dose of polio-containing vaccine (either oral or inactivated polio vaccine) was 89% in Togo.

**\*In epidemiological week 1, a backlog of four cVDPV2 (3 cases) and cVDPV3 (1 case) were reported from Nigeria.**

**Note:** In 2025, three confirmed cases and no deaths of circulating vaccine-derived poliovirus type 1 (cVDPV1) were reported from Algeria (1; 0), DRC (1; 0), and Niger (1; 0). A total of 184 confirmed cases and no deaths of cVDPV2 were reported from 11 AU MS: Angola (19 cases; 0 deaths), Benin (3; 0), Burkina Faso (1; 0), CAR (2; 0), Chad (31; 0), Djibouti (1; 0), DRC (6; 0), Ethiopia (42; 0), Mali (1; 0), Niger (3; 0), Nigeria\* (66; 0), Somalia (2; 0), and Sudan (7; 0). Twelve confirmed cases and no deaths of cVDPV3 have been reported from Cameroon (1; 0), Chad (4; 0), and Guinea (2; 0). Nigeria (5; 0).

**\*Between epidemiological weeks 45 and 52 of 2025, a backlog of 14 cVDPV2 and 5 cVDPV3 cases were reported from Nigeria.**

### Response by MS/partner/Africa CDC:

**Togo:** The MoH conducted outbreak investigations, case management, and conducted a nationwide polio vaccination campaign between 12 - 14, March 2026 using the novel oral polio vaccine type 2 (nOPV2).

## Cholera in Africa

**5,288** confirmed human case(s), **16,529** suspected human case(s)  
**438** human deaths (CFR: **2.01%**)

Agent/Pathogen	<b>Cholera</b>	First Reported	<b>1-Jan-2026</b>	Previous Report Update	<b>5-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>14 MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>HIGH</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 21,817 cases (5,288 confirmed; 16,529 suspected) and 438 deaths (CFR: 1.62%) of cholera have been reported from 14 AU MS:

Angola (339 cases; 9 deaths), Burundi (512; 2), DRC\* (13,702; 353), Ethiopia (15; 0), Malawi (85; 2), Mozambique (5,149; 51), Namibia (49; 0), Nigeria (251; 3), Rwanda (16; 0), Somalia\*\* (641; 0), South Sudan (455; 6), Tanzania (113; 2), Zambia (461; 9), and Zimbabwe (29; 1).

In epidemiological week 9, a total of 2,313 new cases and 43 new deaths of cholera were reported from seven AU MS: Angola, Burundi, DRC, Malawi, Mozambique, Zambia, and Zimbabwe.

**Angola:** Since the last update (5 March 2026), the MoH reported 48 new suspected cases and no new deaths of cholera from five provinces. This is a 70% average increase in the number of new cases in the last four weeks. This year, a total of 339 suspected cases and nine deaths (CFR: 2.65%) were reported from Angola. Since the beginning of this outbreak (January 2025), a total of 36,632 cases (937 confirmed; 35,695 suspected) and 904 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. Compared with the same period in 2025 (epidemiological week 1 to 9), 5,872 cases and 209 deaths (CFR: 2.99%) were reported from Angola, representing a 94% decrease in cases and a 95% decrease in deaths due to cholera.

**Burundi:** Since the last update (5 March 2026), the MoH reported 21 new confirmed cases and no new deaths of cholera from multiple provinces. This is a 68% average decrease in the number of new cases in the past four weeks. This year, a total of 512 confirmed cases and two deaths (CR: 0.39%) of cholera were reported from four of the eighteen provinces in Burundi. Males accounted for 50.4%, and children <5 years accounted for 20.4% of all cases. Compared with the same period in 2025 (epidemiological week 1 to 9), a total of 79 confirmed cholera cases and no deaths were reported in Burundi, representing a 5-fold increase in cases and a 2-fold increase in deaths.

**DRC:** Since the last update (25 February 2026), the MoH reported 1,358 new suspected cases and 39 new deaths (CER: 2.87%) of cholera from 12 provinces. This is a 3% average decrease in the number of cases in the past four weeks. This year, a total of 13,702 suspected cases and 353 deaths (CR: 2.58%) of cholera have been reported from 12 of 26 provinces in DRC. Compared with epidemiological week 1 to 9 of 2025, a total of 10,110 cholera cases and 200 deaths (CFR: 1.98%) were reported in DRC, representing a 36% increase in cases and a 77% increase in deaths in the same period.

**Malawi:** Since the last update (5 March 2026), the MoH reported nine new confirmed cases and no new deaths of cholera from two districts. This is an 8% average decrease in the number of cases in the past four weeks. This year, 85 confirmed cases and two deaths (CFR: 2.40%) of cholera have been reported from 14 of 29 districts in Malawi. Since the beginning of this outbreak (December 2025), a cumulative of 106 confirmed cases and two deaths (CFR: 1.89%) of cholera have been reported from 14 of 29 districts in Malawi. Compared with epidemiological week 1 to 9 of 2025, a total of 90 confirmed cholera cases and 3 deaths (CFR: 3.33%) were reported in Malawi, representing a 16% decrease in cases and a 33% decrease in deaths.

**Mozambique:** Since the last update (5 March 2026), the MoH reported 713 new confirmed cases and four new deaths (CFR: 0.56%) of cholera from five provinces. This is a 3% average decrease in new cases over the last four weeks. This year, a total of 5,149 cases and 51 deaths (CFR: 1.00%) of cholera were reported from five provinces. Since the beginning of this outbreak (September 2025), a total of 6,712 confirmed cases and 76 deaths (CFR: 1.13%) of cholera have been reported from five of the ten provinces in Mozambique. Additionally, 74% of all deaths occurred in communities. Compared with the same period in 2025 (epidemiological week 1 to 9), a total of 474 confirmed cholera cases and 8 deaths (CFR: 1.69%) were reported in Mozambique, representing an 11-fold increase in cases and a 6-fold increase in deaths.

**Zambia:** Since the last update (5 March 2026), the MoH reported 140 new suspected cases and no new deaths of cholera from multiple provinces. This year, 461 cases (5 confirmed; 456 suspected) and nine deaths (CFR: 1.95%) of cholera have been reported from nine of the ten provinces in Zambia. This outbreak started in August 2025. Cumulatively, 1,086 cases (205 confirmed; 881 suspected) and 19 deaths (CFR: 1.75%) of cholera have been reported from nine of the ten provinces in Zambia. Compared with the same period in 2025 (epidemiological week 1 to 9), a total of 292 cholera cases and 9 deaths (CFR: 3.08%) were reported in Zambia, representing a 58% increase in cases and no change in deaths.

**Zimbabwe:** Between epidemiological week 5 to 9, the MoH reported 24 new cases (8 confirmed; 16 suspected) and no new deaths of cholera from multiple provinces. This year, 29 cases (13 confirmed; 16 suspected) and one death (CFR: 3.45%) of cholera have been reported from two of the ten provinces in Zimbabwe. This outbreak started in January 2026. Cumulatively, 29 cases (13 confirmed; 16 suspected) and one death (CFR: 3.45%) of cholera have been reported from two of ten provinces in Zimbabwe. Compared with the same period in 2025 (epidemiological week 1 to 9), a total of 278 cholera cases and 9 deaths (CFR: 3.24%) were reported in Zimbabwe, representing a 90% decrease in cases and an 89% decrease in deaths.

**\*After harmonization between epidemiological week 1- 8, a backlog of 1,461 cases and 46 deaths were reported from DRC.**

**\*\*In epidemiological week 8, a backlog of 86 cases and no deaths were reported from Somalia.**

**Sudan:** On 3 March 2026, the Sudan MoH declared the end of the cholera outbreak. This outbreak started in July 2024 in Kassala state but subsequently spread across all 18 states in Sudan. A total of 123,692 cases and 3,569 (CFR: 2.88%) deaths were associated with this outbreak.

**Note:** In 2025, a total of 323,395 cases (12,297 confirmed; 47 probable; 311,051 suspected) and 7,352 deaths (CFR: 2.28%) of cholera have been reported from 24 AU MS: Angola (36,293; 895 deaths), Burundi (3,353; 14), Cameroon (11; 0), Chad (3,091; 167), Comoros (40; 0), Congo (815; 67), Côte d'Ivoire (556; 24), DRC (71,646; 2,028), Ethiopia (8,503; 84), Ghana (2,870; 14), Kenya (686; 26), Malawi (102; 3), Mozambique (5,787; 68), Namibia (75; 1), Nigeria (22,196; 505), Rwanda (325; 0), Somalia (8,915; 9), South Sudan (79,633; 1,277), Sudan (72,057; 2,077), Tanzania (4,063; 45), Togo (165; 4), Uganda (136; 3), Zambia (1,103; 18), and Zimbabwe (601; 23).

#### **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

**1,155** confirmed human case(s), **35,144** suspected human case(s)  
**314** human deaths (CFR: **0.87%**)

Agent/Pathogen	<b>Measles</b>	First Reported	<b>1-Jan-2026</b>	Previous Report Update	<b>5-Mar-2026</b>
First Occurred	<b>1-Jan-2026</b>	Country	<b>Multiple Countries</b>	Location	<b>16 AU MS</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 36,299 cases (1,155 confirmed; 35,144 suspected) and 314 deaths (0.87%) of measles have been reported from 16 AU MS: Burundi (339 cases; 1 death), Cameroon\* (105; 1), Chad\*\* (1,887; 0), Congo (558; 6), DRC\*\*\* (28,663; 298), Gabon (10; 0), Guinea (71; 0), Kenya\*\*\*\* (271; 4), Liberia\*\*\*\*\* (1,505; 8), Malawi (628; 0), Mali (164; 0), Mozambique (109; 0), Senegal\*\*\*\*\* (23; 0), Somalia\*\*\*\*\* (3,333; 0), South Africa\*\*\*\*\* (420; 0), and Togo\*\*\*\*\* (223; 0).

In epidemiological week 9, a total of 4,219 new cases and 35 new deaths of measles have been reported from four AU MS: Burundi, Congo, DRC, Gabon, Malawi, Mali, and Mozambique.

**Burundi:** In epidemiological week 9, the MoH reported 38 new suspected cases and no new deaths of measles, from multiple provinces. Cumulatively, 339 suspected cases and one death (CFR: 0.29%) of measles have been reported from four provinces in Burundi this year. In 2023, the national measles vaccination coverage among children <2 years in Burundi was 81%.

**Congo:** In epidemiological week 9, the MoH reported 53 new cases (16 confirmed; 37 suspected) and no new deaths of measles from four departments. Cumulatively, 558 cases (56 confirmed; 502 suspected) and six deaths (CFR: 1.07%) of measles have been reported from five of 15 departments in Congo this year. This is a protracted outbreak that started in April 2022. In 2022, the national measles vaccination coverage among children <1 year in Congo was 78%.

**DRC:** Since the last update (10 February 2026), the MoH reported 4,034 new suspected cases and 35 new deaths (CFR: 0.87%) of measles from 26 provinces. Since the beginning of this year, 28,663 new suspected cases and 298 deaths (CFR: 1.04%) of measles have been reported from all 26 provinces in DRC. This is a protracted outbreak that started in January 2022. Compared with epidemiological weeks 1 to 9 of 2025, a total of 10,503 measles cases and 137 deaths (CFR: 1.30%) were reported in DRC, representing a 173% increase in cases and a 118% increase in deaths in the same period. In 2018, the national measles vaccination coverage among children <5 years in DRC was 57%.

**Gabon:** In epidemiological week 9, the MoH reported three new suspected cases and no deaths of measles from three departments. Cumulatively, 10 suspected cases and no deaths of measles have been reported from all 10 departments this year. This is a protracted outbreak that started in January 2022. In 2024, the national measles vaccination coverage among children <5 years in Gabon was 61%.

**Malawi (initial report):** In epidemiological week 9, the MoH reported 26 new suspected cases and no deaths of measles from 17 of 28 districts. This year, 628 cases (113 confirmed; 515 suspected) and no deaths of measles have been reported from 17 of 28 districts. In 2024, the national measles vaccination coverage among children <1 year in Malawi was 69%.

**Mali:** Since the last update (5 March 2026), the MoH reported 41 cases (21 confirmed; 20 suspected) and no new deaths of measles from four regions. This is a 5% average increase in new cases over the last four weeks. This year, 164 cases (54 confirmed; 110 suspected) and no deaths of measles were reported across all 11 regions in Mali. Since the beginning of this outbreak (March 2024), a cumulative of 1,609 cases (659 confirmed; 950 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 (5 March 2026), the MoH reported 24 new confirmed cases and no new deaths of measles from three provinces. This is a 101% average increase in the number of confirmed cases in the last four weeks. This year, a total of 109 confirmed cases and no deaths of measles were reported from six provinces. Since the beginning of this outbreak (July 2025), a total of 680 confirmed cases and one death (CFR: 0.15%) of measles have been reported from six of the ten provinces in Mozambique. In 2024, the national measles vaccination coverage (MCV1) was 44%.

**\*In epidemiological week 1-5, a backlog of 105 cases and one death of measles were reported from Cameroon.**

**\*\*In epidemiological week 1-8, a backlog of 1,887 cases and no deaths of measles were reported from Chad.**

**\*\*\*After harmonization between epidemiological week 1- 8, a backlog of 4,398 cases and 25 deaths of measles were reported from DRC.**

**\*\*\*\*In epidemiological week 1-7, a backlog of 271 cases and four deaths of measles were reported from Kenya.**

**\*\*\*\*\*Between epidemiological week 2 - 8, a backlog of 1,459 cases (142 confirmed; 1,317 suspected) and eight deaths of measles were reported from Liberia.**

**\*\*\*\*\*Between epidemiological week 6-8, a backlog of 12 confirmed measles cases were reported from Senegal.**

**\*\*\*\*\*In epidemiological week 8, a backlog of 413 measles cases and no deaths were reported from Somalia.**

**\*\*\*\*\*In epidemiological week 8, a backlog of 54 measles cases were reported from South Africa.**

**\*\*\*\*\*Between epidemiological week 1- 8, a backlog of 223 cases and no deaths of measles were reported from Togo**

**Note:** 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

**184** confirmed human case(s), **384** suspected human case(s)  
**1** human deaths (**CFR: 0.18%**)

Agent/Pathogen	Dengue	First Reported	1-Jan-2026	Previous Report Update	5-Mar-2026
First Occurred	1-Jan-2026	Country	Multiple Countries	Location	4 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 568 cases (184 confirmed; 384 suspected) and one death (CFR: 0.18%) of dengue fever have been reported from three AU MS: CAR\* (1 case; 1 death), Mali\*\* (500; 1), Mauritania (33; 0), and Senegal\*\*\* (34; 0).

In epidemiological week 9, a total of 17 cases and no deaths of dengue fever have been reported from Mali.

**Mali:** Since the last update (5 March 2026), the MoH reported 17 new confirmed cases and no new deaths of dengue fever from Bamako (7 cases; 0 deaths) and Mopti (10; 0) regions. This is a 159% average decrease in the number of new cases in the last four weeks. This year, 500 cases (116 confirmed; 384 suspected) and one death (CFR: 0.20%) of dengue were reported in Mali. Since the beginning of this outbreak (September 2023), a cumulative of 19,937 cases (2,711 confirmed; 17,226 suspected) and 74 deaths (CFR: 0.40%) of dengue fever have been reported from all 11 regions in Mali.

**\*In epidemiological week 1, a backlog of one confirmed case and one death of dengue fever was reported from CAR.**

**\*\*In epidemiological week 7, a backlog of one death of dengue fever was reported from Mali.**

**\*\*\*Between epidemiological weeks 6-8, a backlog of eight confirmed dengue cases were reported from Senegal.**

**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:

**Mali:** The MoH continues to conduct enhanced surveillance, case management, vector control, and risk communication activities in the affected communities.

## Chikungunya in Mauritius

**193** confirmed human case(s)  
**0** human deaths (**CFR: 0%**)

Agent/Pathogen	<b>Chikungunya</b>	First Reported	<b>5-Jan-2026</b>	Previous Report Update	<b>5-Jan-2026</b>
First Occurred	<b>5-Jan-2026</b>	Country	<b>Mauritius</b>	Location	<b>2 Islands</b>
Source	<b>Ministry of Health</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

**Initial report:** In epidemiological week 9, a total of 74 cases and no deaths of chikungunya were reported from one Island in Mauritius. Since the start of this outbreak (5 January 2026), a total of 193\* cases (191 local; 2 imported), and no deaths from chikungunya have been reported from Mauritius island, in Mauritius.

**\*Between epidemiological week 1-8, a backlog of 119 chikungunya cases were reported from Mauritius.**

### Response by MS/partner/Africa CDC:

The MoH continues to conduct enhanced surveillance, case management, daily mapping of chikungunya hotspots, larviciding, and risk communication and community engagement activities.

## Moderate Risk Events

Environmental Event AC74027

### Floods in Africa

**988,076** displaced persons  
**260** human deaths

Agent/Pathogen	<b>Floods</b>	First Reported	<b>22-Jan-2026</b>	Previous Report Update	<b>25-Feb-2026</b>
First Occurred	<b>24-Dec-2025</b>	Country	<b>Multiple Countries</b>	Location	<b>8 MS</b>
Source	<b>EIOS</b>	GeoScope	<b>MODERATE</b>	Human Risk Assessment	<b>MODERATE</b>
		Animal Risk Assessment	<b>N/A</b>		

### Update to Event:

Since the beginning of 2026, a total of 988,076 displaced persons and 260 deaths due to floods have been reported from eight AU MS: Kenya (234 displaced; 2 deaths), Malawi (163,274; 40), Madagascar (47,428; 71), Morocco (50,000; 0), Mozambique (723,000; 43), South Africa (0; 30), Zambia (4,140; 4) and Zimbabwe (0; 70).

In epidemiological week 9, a total of 234 displaced persons and two deaths due to floods were reported from Kenya.

**Kenya (initial report):** Since 23 February 2026, heavy and prolonged rainfall caused severe flooding in Migori county, southwestern Kenya. A total of two deaths and 234 displaced persons have been reported across the eight sub-counties in Migori county. In addition, the flood waters damaged one health facility, eight schools, and 69 latrines. Similarly, the floods led to contamination of rivers and wells, increasing the risk for water-borne disease outbreaks.

A flash flood is a rapid flooding of low-lying areas. It may be caused by heavy rain associated with severe thunderstorms, hurricanes, or tropical storms. Flash floods are a significant hazard, with the potential to cause fatalities and displace people. Flooding events occur commonly in Kenya, mostly linked to the March-April-May (MAM) rainfalls. In 2024, floods led to the displacement of over 209,045 persons and 277 deaths, reported in 41 of 47 counties in Kenya.

### Response by MS/partner/Africa CDC:

**Kenya:** The Government of Kenya, through the relevant ministries, activated the emergency operations center and deployed a rapid response team. Response activities, including active surveillance for potential water-borne illnesses, health education on hygiene and sanitation, environmental inspection, and vector control, are ongoing in the affected sub-counties.

**-Namibia: End of CCHF Outbreak:** On March 4, 2026, the Ministry of Health and Social Services (MoHSS) of Namibia declared the end of the CCHF outbreak in the Omaheke Region. The CCHF outbreak began on November 28, 2025, with one fatal confirmed case (CFR: 100%).

- Between epidemiological week 5 - 8, a backlog of 23 cases (3 confirmed; 20 suspected) and one death of Lassa fever were reported from Liberia.

- Between epidemiological week 6 - 8, a backlog of 1,235 cases (239 confirmed; 996 suspected) and 68 deaths of Lassa fever were reported from Nigeria.

- **Epidemiological week 9 covers the period from 23 February to 1 March 2026.**

- The cases in this report include confirmed, probable, and suspected cases.

- **Deaths among mpox suspected cases are all reported from DRC.**

-**CFRs are calculated using confirmed cases and deaths among confirmed cases only, except for bacterial meningitis, cholera, measles, mpox, dengue, and yellow fever, where CFRs are 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: disease morbidity and mortality, the probability of spread within and to other MSs, and the availability of effective treatments, vaccines, or other control measures. An event risk level can be classified as low, moderate, high, or very high based on its score on the above criteria.**

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