

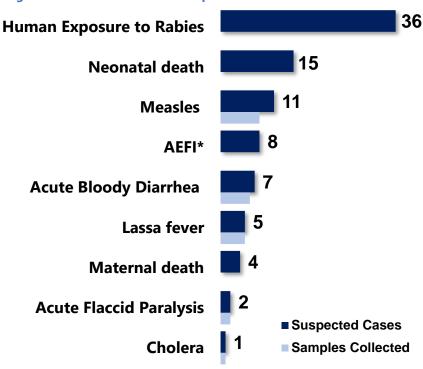
Liberia IDSR Epidemiology Bulletin

2024 Epi-week 30 (July 22 – 28)

Country Population: 5,406,374 | Volume 20 Issue 30 | July 22 – 28, 2024 | Data Source: CSOs from 15 Counties and Laboratory

Highlights

Figure 1: Public Health Events Reported



Keynotes and Events of Public Health Significance

- A total of 89 events of public health importance, including 19 deaths reported
- ◆ Completeness and Timeliness of health facility reports were 87%. and 87% respectively
- Ongoing Lassa fever outbreak in two Counties
- Ongoing Measles outbreak in five Counties

Reporting Coverage

Table 1: Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 30, 2024

County	Expected Reports from HF*	Reports Received	Received on Time	Completeness (%)	Timeliness (%)	838 (87%)
Bomi	29	29	29	100	100	Health facilities
Bong	64	64	64	100	100	reported
Gbarpolu	18	18	18	100	100	IDSR data
Grand Bassa	38	38	35	100	92	
Grand Cape Mount	36	36	36	100	100	
Grand Gedeh	24	24	24	100	100	87(89%) Health
Grand Kru	25	25	25	100	100	districts
Lofa	61	61	61	100	100	reported
Margibi	64	64	64	100	100	IDSR data
Maryland	28	28	28	100	100	
Montserrado	391	368	366	94	94	
Nimba	102	-	-	-	-	833(87%)
Rivercess	21	21	21	100	100	Health facilities
River Gee	21	21	21	100	100	reported
Sinoe	41	41	41	100	100	timely IDSR
Liberia	963	838	833	87	87	Mata Mata

• The national target for weekly IDSR reporting is 80%., Bomi County reported late. Health facility timeliness is monitored at the health district level. No report was received from Nimba county

<80

^{*}Adverse Event Following Immunization

Vaccine-Preventable Diseases

Measles

- Eleven (11) suspected cases were reported from Montserrado (3), Sinoe (3), Gbarpolu (2), Grand Gedeh (1), Grand Kru (1) and Grand Cape Mount (1) Counties
 - o Eight (8) specimens were collected, 6 pending testing at the National Reference Lab (NRL), and 2 pending arrivals at NRL
 - o Seventy-three percent (8/11) of the suspected cases were vaccinated for measles (see Table 2)
- Cumulatively, 1261 suspected cases have been reported since Epi-week 1 (see Table 3)
 - o Of the total reported 933 confirmed cases,
 - 53% were reported to have previously been vaccinated,
 - 36% were unvaccinated
 - 10% had unknown vaccination status
 - o Fifty-one percent (480/933) of the confirmed cases are below 5 years
 - o Proportion of suspected cases with sample collected 46% (586/1261)
 - o Proportion of suspected cases with sample tested 82% (480/586) [negative – 326, positive – 152, indeterminate-2]
 - o Proportion of negative Measles cases tested for Rubella 94% (289/306) [negative – 282, positive – 26]
- Liberia's annualized non-measles febrile rash illness rate now stands at 10.5 per 100,000. Montserrado County is below the target (see Table 3)

Table 2: Distribution and Vaccination Status of Measles Cases. Liberia. Week 30, 2024

			Number of Doses Received							
County	Reported cases	Vaccinated	One Dose	Two Doses	Doses Not Indicated					
Gbarpolu	2	2	2	0	0					
Grand Cape Mount	1	0	0	0	0					
Grand Gedeh	1	0	0	0	0					
Grand Kru	1	1	0	1	0					
Montserrado	3	2	0	2	0					
Sinoe	3	3	3	0	0					
Total	11	8	5	3	0					

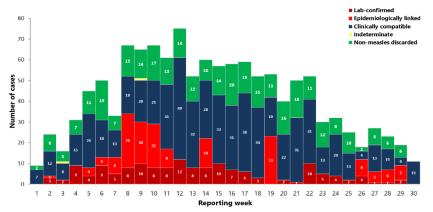
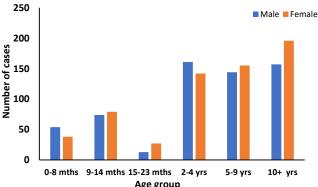
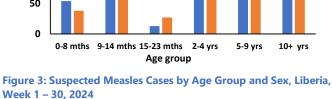


Figure 2: Distribution of Measles Cases by Reporting Week and Epiclassification, Liberia, Week 1 - 30, 2024

Table 3. Classification of measles, reporting rate, and annualized nonmeasles rash illness rate per 100,000 population by County, Liberia, Week 1 - 30, 2024

			Epi-classifica	ation			Annualized Non
Reporting County	Lab confirmed	Epi-linked	Clinically compatible	Indeterminate (Equivocal)	Discarded (Negative)	Cumulative	Measles Febrile
Bomi	1	0	4	0	6	11	7.5
Bong	1	0	21	0	9	31	3.3
Gbarpolu	7	0	13	1	25	46	44.7
Grand Bassa	2	0	8	0	14	24	8.1
Grand Cape Mount	3	0	7	0	26	36	24.6
Grand Gedeh	33	28	62	0	33	156	25.4
Grand Kru	26	35	44	0	44	149	66.7
Lofa	0	0	20	0	15	35	6.9
Margibi	0	0	2	0	4	6	2.2
Maryland	21	6	163	0	8	198	7.9
Montserrado	3	0	25	0	17	45	1.5
Nimba	27	73	188	0	26	314	7.1
River Gee	20	13	46	1	37	117	50.6
Rivercess	0	0	3	0	6	9	11.0
Sinoe	8	1	19	0	56	84	62.8
Liberia	152	156	625	2	326	1261	10.5
Target Achieved	>=2		Below Target	<2			





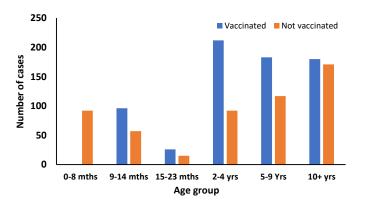


Figure 4: Vaccination status of Suspected Measles Cases by Age **Group, Liberia, Week 1 - 30, 2024**

Table 4: Measles outbreak by County, and Case Status, Liberia, December 13, 2021 – July 28, 2024

County	Total Cases	Active	Recovery	Deaths	# of Districts
Montserrado	5,373	0	5,304	69	0/7
Nimba	1318	8	1306	4	4/11
Grand Bassa	924	0	917	7	0/8
Margibi	803	0	802	1	0/4
Bong	578	0	575	3	0/9
Maryland	1,316	0	1316	0	3/6
Lofa	292	0	292	0	0/6
Grand Kru	1,100	0	1,108	2	3/5
Grand Cape Mount	187	0	184	3	0/5
Bomi	147	0	142	5	0/4
Rivercess	84	0	83	1	0/6
Gbarpolu	64	0	64	0	1/5
Grand Gedeh	602	0	602	0	0/6
River Gee	134	0	134	0	1/6
Sinoe	247	0	247	0	0/10
Total	13,169	8	13,066	95	12/98

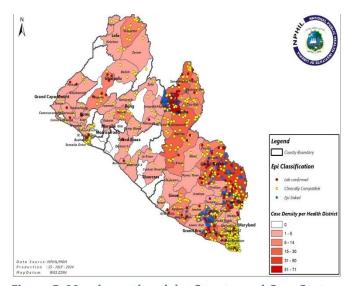


Figure 5: Measles outbreak by County, and Case Status, Liberia, December 13, 2021 – July 28, 2024

PUBLIC HEALTH RESPONSE

I. Coordination

- The county health teams have led the response, with technical support from the National Public Health Institute of Liberia (NPHIL), the Ministry of Health (MOH), and partners (Grand Gedeh-UNICEF, Maryland-PIH, Grand Kru-IRC, and WHO).
- IMS meetings are being held for coordination and mobilization of resources in affected Counties.

II. Epidemiological Surveillance

- Active case search in affected and surrounding communities ongoing
- Four districts (Buah, Trehn, and Dorbor in Grand Kru and Putu in Grand Gedeh counties outbreaks ended and the end-of-outbreak reports were shared.

III. Case management

• Case management ongoing in affected counties

IV. Immunization

• Routine immunization ongoing across the country

V. Laboratory

- The National Public Health Reference Laboratory (NPHRL) continues testing of Measles samples
- A total of six hundred ninety-one (691) cases have been confirmed by the NPHRL from December 13, 2021 – July 28, 2024.

VI. Risk Communication & Community Engagement

- Continual of community advocacy meetings with local leaders and family members in the affected communities.
- Awareness and health education on the spread and prevention of Measles in health facilities and communities ongoing

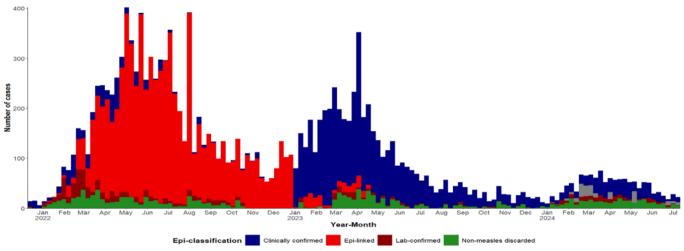


Figure 6: Epi-curve of Measles Cases by monthly Epi-classification, Liberia, December 13, 2021 – July 28, 2024

Acute Flaccid Paralysis (AFP)

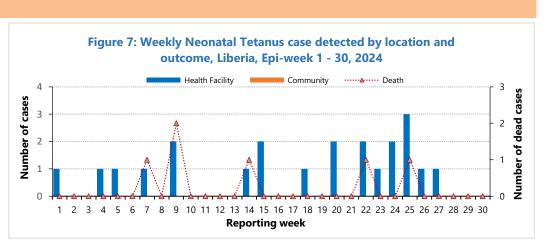
- Two (2) cases were reported from Montserrado and Lofa Counties
 - o Specimens were collected, one shipped and one pending recollection
- Cumulatively, sixty-nine (69) cases have been reported since Epi-week 1. Zero confirmed, 51 negative, 9 NPENT, and 9 pending lab confirmation
- As of week 30, the annualized non-polio AFP rate is at 4.9 per 100,000 population in less than 15 years of age.

Table 5: Non-Polio AFP Rate 3/100,000 <15 years by County, Liberia, Epi-week 1 – 30, 2024

County	< 15 years pop	# of AFP Cases Reported	# of Cases with Lab Result	Non-Polio AFP Rate	# of cases <14 days specimen collected	% of stool <14days	# of NPENTs	% of NPENT
Bomi	62196	2	2	5.6	2	100%	0	0%
Bong	215425	1	1	0.8	1	100%	0	0%
Gbarpolu	43630	2	2	7.9	2	100%	0	0%
Grand Bassa	134743	3	3	3.9	3	100%	0	0%
Grand Cape Mount	82471	5	5	10.5	5	100%	1	20%
Grand Gedeh	101412	5	4	8.5	5	100%	1	20%
Grand Kru	51467	2	2	6.7	2	2 100%		50%
Lofa	168626	7	5	7.2	7	100%	0	0%
Margibi	140931	1	1	1.2	1	100%	0	0%
Maryland	78808	2	2	4.4	1	50%	0	0%
Montserrado	898124	14	12	2.7	14	100%	2	14%
Nimba	285705	18	16	10.9	18	100%	4	22%
Rivercess	42729	1	0	4.1	1	100%	0	0%
River Gee	57047	1	1	3.0	1	100%	0	0%
Sinoe	69556	5	4	12.5	5	100%	0	0%
Liberia	2432868	69	60	4.9	68	99%	9	13%
Non-Polio AFP Rate	<2 ≥ 2	Stool a	dequacy	<80% ≥80%	Non-Polio Enterovirus	<10% ≥10%	Silent	

Neonatal Tetanus

- Zero cases were reported
- Cumulatively, twenty- two (22) cases have been reported, including 6 deaths since Epiweek 1. Case Fatality Rate is 27%, and community detection at 0%.



Influenza-Like Illnesses

Coronavirus Disease (COVID-19)

- Zero suspected cases were reported
- © Cumulatively, three (3) cases have been reported: two positive and one negative

Influenza

- Zero suspected cases were reported
- Cumulatively, seventy-one (71) suspected cases reported
 - Seventy-one (71) specimens were collected: 65 tested negative, 5 specimens were discarded, and one positive

Viral Hemorrhagic Fever

Lassa fever

- Five (5) suspected cases were reported from Nimba (2), Bong (1), Montserrado (1) and Grand Kru (1) Counties
 - Specimens were collected: 2 tested positive, 2 negative and 1 pending testing
- Cumulatively, one hundred thirtytwo (132) suspected cases have been reported
 - Proportion of suspected cases with sample collected (132/132) 100%. Four of the collected samples were discarded
 - Proportion of suspected cases with sample tested (131/132)
 99%
 - Nineteen (19) positive,
 including 5 deaths, 106 negative, 1 indeterminate, 1 pending testing
 - Case fatality rate: (5/19) 26%
 - Bong County accounts for 53% of the total confirmed cases.

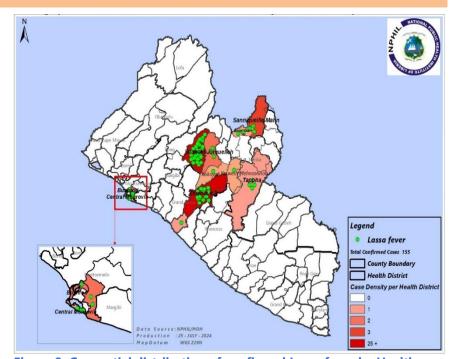


Figure 8: Geospatial distribution of confirmed Lassa fever by Health District, Liberia, Epi-week $1-30,\,2024$

Outbreak Section (January 6, 2022 – July 28, 2024)

- Two (2) new confirmed cases reported from Bong and Nimba Counties
- Eight (8) contact lines listed, including 2 healthcare workers (HCWs)
- Total of forty-two (42) contacts, including 20 HCWs under 21 days follow-up
- A total of 157 confirmed cases, including 46 deaths reported
- © Cumulative Case Fatality Rate (CFR): 29% (46/157)
- Two counties are currently in active outbreak mode

PUBLIC HEALTH RESPONSE

I. Coordination

 The National Public Health Institute of Liberia (NPHIL) and the Ministry of Health (MOH) are providing technical support to the affected counties with support from partners

II. Epidemiological Surveillance

- Active case search ongoing in affected communities
- Forty-two (42) contacts, including 20 healthcare workers line listed and under 21 days follow-up
- Weekly sit-reps developed and disseminated to stakeholders

III. Case management

- Ribavirin distributed to all affected counties
- Cases treated with ribavirin and discharged

IV. Dead Body Management

Safe and dignified burial conducted for the deceased cases

V. Laboratory

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 157 Lassa fever cases have been confirmed since this outbreak

Table 6: Summary of Lassa fever Outbreak, Liberia, January 6, 2022 – July 28, 2024

County	Outbreak Districts	Outbreak Start Date	Total suspected	Total confirmed	HCWs confirmed	Total Deaths	Deaths in HCWs	CFR %	Total Contacts	# HCW Contacts	Contacts became cases	Contacts under follow-up	Contacts completed	Days in countdown	Outbreak Status
	Bushrod	13-Feb-23	17	1	0	0	0	0%	29	21	0	0	29	Completed	Ended
County I	Central Monrovia	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Ended
	Central Monrovia	3-Mar-23	38	2	0	1	0	50%	28	27	0	0	28	Completed	Ended
	Bushrod	30-Apr-24	2	1	0	0	0	0%	14	6	0	0	14	Completed	Ended
	Suakoko	21-Apr-23	192	54	18	13	2	24%	496	114	6	0	417	Completed	Ended
	Jorquelleh	15-Oct-23	14	6	3	1	1	17%	121	86	3	0	169	Completed	Ended
	Kokoyah	6-Jun-24	3	1	0	0	0	0%	8	0	0	0	8	34	Countdown
Bong	Suakoko	29-Jul-24	2	1	0	0	0	0%	8	2	0	8	0	Active	Ongoing
	Suakoko	23-Feb-24	31	3	0	0	0	0%	29	14	0	0	29	Completed	Ended
	Salala	8-Mar-24	2	2	0	1	0	50%	21	0	0	0	21	Completed	Ended
	Jorquelleh	11-Apr-24	3	2	0	1	0	0%	41	30	0	0	41	34	Countdown
	Jorquelleh	22-Jul-24	1	1	0	0	0	0%	14	2	0	14	0	Active	Ongoing
	District 3A&B	21-Aug-23	87	44	0	10	0	23%	177	40	40	0	159	Completed	Ended
Grand Bassa	Buchanan	11-Aug-23	2	1	0	1	0	100%	4	2	0	0	4	Completed	Ended
	District 3A&B	30-Apr-24	6	3	0	1	0	33%	12	3	0	0	12	Completed	Countdown
	Saclepea-Mah	21-Nov-23	4	2	0	1	0	50%	5	0	0	0	5	Completed	Ended
	Sanniquellie-Mah	6-Feb-23	43	15	0	6	0	40%	43	35	8	0	43	Completed	Ended
	Tappita	29-Jul-24	1	1	0	0	0	0%	0	0	0	0	0	Active	Ongoing
Nimba	Tappita	20-Nov-23	12	5	0	3	0	60%	88	39	4	0	77	Completed	Ended
	Bain-Garr	1-Jun-23	25	6	0	3	0	50%	61	25	0	0	31	Completed	Ended
	Bain-Garr	15-Apr-24	5	2	0	1	0	50%	25	7	0	0	25	Completed	Ended
	Bain-Garr	18-Jul-24	2	1	0	1	0	100%	20	16	0	20	0	Active	Ongoing
River Gee	Putupo	25-Nov-22	2	1	0	1	0	100%	14	0	0	0	14	Completed	Ended
Total	•	•	495	157	21	46	3	29%	1307	469	61	42	1175	•	•

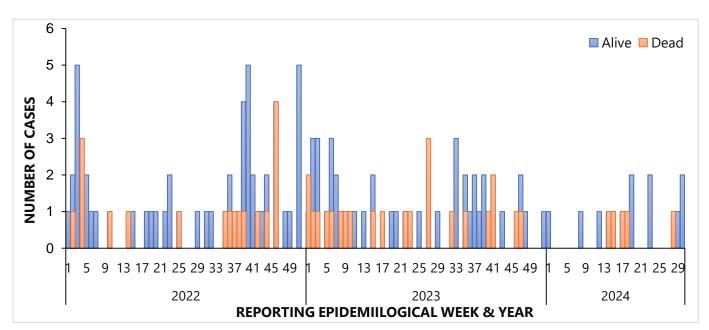


Figure 6: Epi-curve of Confirmed Lassa Fever Cases by Outcome, Liberia, January 6, 2022 – July 28, 2024

Yellow Fever

- Zero suspected cases were reported
- Cumulatively, sixty-one (61) cases have been reported
 - Proportion of suspected cases with samples collected (58/61) 95%, however, 7 samples pending testing, 1 rejected
 - o Proportion of suspected cases with samples tested (50/58) 86%: 49 negative, 1 indeterminate

Dengue

- Zero suspected cases were reported
- Cumulatively, five (5) suspected cases were reported

Ebola Virus Disease

Zero cases were reported

Diarrheal Diseases

Acute Bloody Diarrhea (Suspected Shigellosis)

- Seven (7) cases were reported from Grand Cape Mount (3), Grand Gedeh (2), Gbarpolu (1), and River Gee (1) Counties
 - o Six (6) specimens collected, 4 pending testing, and 2 pending arrival at NRL
- Cumulatively, two hundred-fifty-two (252) cases have been reported
 - o 149 specimens were collected, with 117 received at the Lab. Of the 117 specimens, 94 tested negative, 8 confirmed (S. *flexneri-2 & S. sonnei-6*), 7 rejected, and 8 pending testing

Severe Acute Watery Diarrhea (Suspected Cholera)

- One (1) case was reported from Lofa County
- Specimen was collected and pending testing
- Cumulatively, one hundred seventy (170) cases have been reported
 - o 103 specimens collected, 76 received at the Lab
 - o 54 tested negatives, 10 rejected, and 12 pending testing

Other Reportable Diseases

Animal bite (Human Exposure to Rabies)

- Thirty-six (36) dog-bite cases were reported from Montserrado (9),
 Grand Bassa (6), Bong (5), Lofa (3),
 Sinoe (3), Rivercess (2), Margibi (2),
 Grand Gedeh (2), Gbarpolu (2), Grand
 Kru (1) and Bomi (1) Counties
- Proportion of cases investigated: 11/36 (31%)
- PEP administered to 6 persons (17%) in Bong (4) and Rivercess (2) Counties
- Cumulatively, 1,778 cases have been reported, including 2 deaths (Suspected Human Rabies)

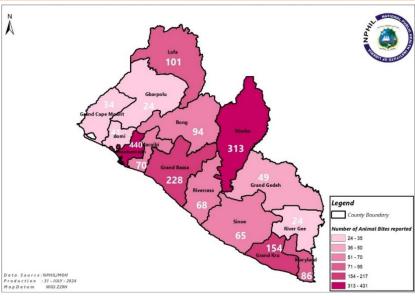
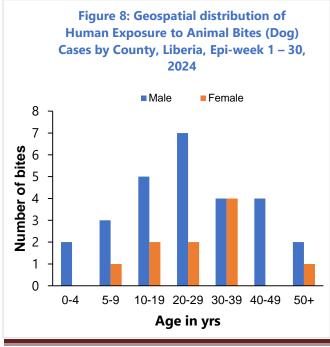
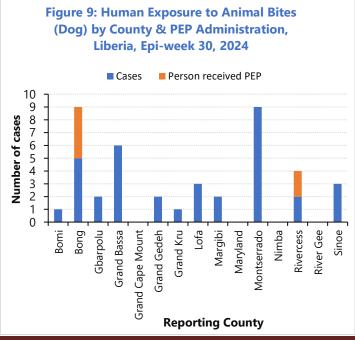


Figure 7: Geospatial distribution of Human Exposure to Animal Bites (Dog) Cases by County, Liberia, Epi-week 1 – 30, 2024





Meningitis

- Zero cases were reported
- Cumulatively, nineteen (19) suspected cases have been reported
 - o Proportion of specimen collected (16/19) 89%, 3 specimens not collected
 - o Proportion of specimens tested (15/16) 94% (14 negative, 1 positive)

Mpox

- Zero cases were reported
- Cumulatively, forty-eight (48) suspected cases have been reported, with 41 samples collected:
 - o Thirty-five (35) tested, of which, 5 positive and 30 negative
 - o 2 rejected, 3 pending testing, and 1 discarded

Other Events of Public Health Importance

Maternal Mortality

- Four (4) deaths reported from Montserrado (4) County
- Primary causes of death were postpartum hemorrhage (3) and under investigation (1)
- Two of the deaths occurred in health facility and two in the community
- Cumulatively, one hundred and ninety-two (192) deaths have been reported since Epi-week 1, of which (177) 93% were reported from health facilities and (14) 7% from communities
 - Proportion of deaths reviewed (78/192) 41%
- Annualized maternal mortality ratio is at 143 per 100,000 live births (*Table 7*). The expected MMR based on 2019-20 Demographic Health Survey (DHS) is 742 deaths per 100,000 live births.

Table 7. Cumulative Maternal Mortality reporting rate and Annualized Maternal Mortality per 100,000 live births by County, Liberia, Week 1 – 30, 2024

County	Estimated Annual Live birth (4.3%)	Current week	Cumulative	% of Cumulative Maternal deaths	Annualized MMR/100,000
Grand Bassa	12875	0	17	8.9	229
Montserrado	85821	4	103	53.6	208
Grand Cape Mount	7881	0	7	3.6	154
Margibi	13467	0	11	5.7	142
Nimba	27301	0	23	12.0	146
Maryland	7531	0	5	2.6	115
Bomi	5943	0	4	2.1	117
Lofa	16113	0	8	4.2	86
Rivercess	4083	0	2	1.0	85
Grand Kru	4918	0	2	1.0	70
River Gee	5451	0	2	1.0	64
Grand Gedeh	9690	0	3	1.6	54
Bong	20585	0	4	2.1	34
Sinoe	6646	0	1	0.5	26
Gbarpolu	4169	0	0	0.0	0
Liberia	232474	4	192	100.0	143

Neonatal Mortality

- Fifteen (15) deaths were reported from Montserrado (12), Maryland (1), Lofa (1), and Grand Gedeh (1) Counties
- Primary causes of death were birth asphyxia (10), prematurity (2), sepsis (2), and under investigation (1)
- All of the deaths were reported to have occurred in health facility
- Cumulatively, five hundred and seven (507) deaths have been reported since Epi-week 1.
 - o Proportion of deaths reviewed (160/507) 32%
- Annualized neonatal mortality rate is at 4.6 per 100,000 live births (*Table 8*). The expected NMR based on 2019-20 Demographic Health Survey (DHS) is 37 deaths per 100,000 live births.

Table 8. Cumulative Neonatal Mortality reporting rate and Annualized Neonatal Mortality per 1,000 live births by County, Liberia, Week 1-30, 2024

County	Estimated Annual Live births (4.3%)	Current Week	Cumulative	% of Cumulative Neonatal deaths	Annualized Neonatal Mortality Rate/1,000
Maryland	7347	1	71	14.0	16.8
Grand Kru	3130	0	19	3.7	10.5
Montserrado	62479	12	302	59.6	8.4
Sinoe	5534	0	14	2.8	4.4
Rivercess	3865	0	8	1.6	3.6
Gbarpolu	4507	0	8	1.6	3.1
Grand Gedeh	6770	1	10	2.0	2.6
Bong	18775	0	18	3.6	1.7
Lofa	14911	1	14	2.8	1.6
Nimba	24970	0	23	4.5	1.6
Margibi	11345	0	9	1.8	1.4
River Gee	3610	0	4	0.8	1.9
Bomi	4546	0	2	0.4	0.8
Grand Bassa	11981	0	4	0.8	0.6
Grand Cape Mount	6868	0	1	0.2	0.3
Liberia (National)	190636	15	507	100.0	4.6

Adverse Events Following Immunization (AEFI)/Adverse Drug Reaction (ADR)

- Eight (8) cases were reported from Sinoe (3), Gbarpolu (2), Grand Bassa (1), Maryland (1), and Margibi (1), Counties
- All reported cases were investigated and classified as non-serious. Related vaccines included: Measles (3/8) 37.5%, OPV-1 (2/8) 25%, Penta (1/8) 12.5%, IPV (1/8) 12.5%, Td (1/8) 12.5%
- Cumulatively, six hundred and sixty-one (661) events were reported since Epi-week 1.

Neglected Tropical Diseases

Buruli Ulcer

- Zero cases were reported
- Cumulatively, two confirmed cases have been reported since Epi-week 1.

Border Surveillance Update

A total of 5,281 travelers were recorded from eight (8) designated out of Forty-five (45) official Points of Entry, with incoming travelers accounting for 53% (2780/5281) (*Table 9*).

Table 8. Cross-border activity at the POE for incoming and outgoing travelers, Liberia, Epi-week 30, 2024

Type of Ports	Point of Entry	Weekly total	Arrival	Departure	Total travelers with YB	Yellow Book Damage	Card Replaced	Travelers Vaccinated against YF & Issued book	Alerts detected/ Verified
A in and	James S. Paynes	1	0	1	0	0	0	0	0
Airport	Robert Int'l Airport	4274	2209	2065	4215	1	31	15	0
Seaport	Freeport of Monrovia	120	60	60	120	0	0	0	0
•	Buchanan Port	44	22	22	44	0	0	0	0
	Bo Water Side	283	187	96	275	0	8	0	0
Ground	Ganta	98	56	42	47	0	0	0	0
Crossing	Yekepa	100	58	42	15	0	0	0	0
	Loguatuo	361	188	173	300	19	19	0	0
Total		5,281	2,780	2,501	5,017	20	58	15	0

Note: Yellow book issue for both arrival and departure; Vaccination coverage for both arrival and departure

Public Health Measures

National level

- Providing remote technical and operational support to counties
- Produced and disseminated situation reports (Lassa fever, Measles, etc..)
- Produced and disseminated weekly bulletin

County-level

Surveillance

- Publication of situational reports
- o Active case search ongoing in affected and surrounding communities

Case Management

- o Administration of PEP
- o Management of measles and Lassa fever cases ongoing in affected counties

Appendix
Summary of Immediately Reportable Diseases, Conditions, and Events by County

- Juninary	of Immediately Reportable I	J131	cas	=5, C	.OIIC	iiii)115,	anu	EV	ents	Бу	Cou	шц							
Counties			Bomi	Bong	Gbarpolu	Grand Bassa	Grand Cape Mount	Grand Gedeh	Grand Kru	Lofa	Margibi	Maryland	Montserrado	Nimba	Rivercess	River Gee	Sinoe	Total Weekly	Cumulative Reported	Cumulative Lab-confirmed
No. of Expecte	d Health District		4	9	5	8	5	6	5	6	4	6	7	11	6	6	10	98		
No. of Health I	District Reported		4	9	5	8	5	6	5	6	4	6	7	0	6	6	10	87		
_	Acute Flaccid Paralysis (Suspected Polio)	Α	0	0	0	0	0	0	0	1	0	0	1	0	0	0	0	2	69	0
aple	redic Hacera Faranysis (Suspected Follo)	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Vaccine Preventable Diseases	Measles	A D	0	0	0	0	0	0	0	0	0	0	3	0	0	0	3	11 0	1261 0	152 0
ne Preven Diseases		Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	16	0
cine D	Neonatal Tetanus	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6	0
Vac	Yellow fever	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	61	0
	Tellow level	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
gic	Dengue fever	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	0
rr ha	- J	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Viral Hemorrhagic Fever	Ebola Virus Disease	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Ĭ, r		D A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	115	0 19
Vira	Lassa fever	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	17	5
Influenza-Like		Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1
Illnesses	COVID-19	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	As to Blood Biochess (Glindles)	Α	0	0	1	0	3	2	0	0	0	0	0	0	0	1	0	7	252	8
rhea	Acute Bloody Diarrhoea (Shigellosis)	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diarrheal	Severe Acute Watery Diarrhoea (Cholera)	Α	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	170	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
blic	Maternal Mortality	D	0	0	0	0	0	0	0	0	0	0	4	0	0	0	0	4	192	
Pub	Neonatal Mortality	D	0	0	0	0	0	1	0	1	0	1	12	0	0	0	0	15	507	
Events of Pu ealth Import	Adverse Events Following Immunization	A	0	0	2	1	0	0	0	0	1	1	0	0	0	0	3	8	661	0
ents Ith I	(AEFI)	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Events of Pu Health Import	Unexplained Cluster of Health Events/Disease	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	48	5
Ses	Мрох	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
seas	Tuberculosis	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
e Di		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
tabl	Human Exposure to Rabies (Suspected	Α	1	5	2	6	0	2	1	3	2	0	9	0	2	0	3	36	1776	0
por	Human Rabies)	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
Other Reportable Diseases	Meningitis	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	19 0	0
Othe		A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Unexplained Cluster of deaths	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
g _ "	Durali I llega	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	123	2
leglectec Tropical Diseases	Buruli Ulcer	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Neglected Tropical Diseases	Yaws	Α	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	<u> </u>	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	TO	TAL	1	6	7	7	4	6	3	6	3	2	30	2	2	1	9	89	5303	193

D = Dead **A** = Alive

Notes

- **Completeness** refers to the proportion of expected weekly IDSR reports received (target: ≥80%)
- Timeliness refers to the proportion of expected weekly IDSR reports received by the next level on time (target: ≥80%). The time requirement for weekly IDSR reports:
 - Health facility required on or before 5:00 pm every Saturday to the district level
 - Health district required on or before 5:00 pm every Sunday to the county level
 - County required on or before 5:00 pm every Monday to the national level
- Non-polio AFP rate is the proportion of non-polio AFP cases per 100,000 among the estimated population under 15 years of age in 2024 (annual target: ≥2/100,000)
- Non-measles febrile rash illness rate refers to the proportion of Negative measles cases per 100,000 population
- Annualized maternal mortality rate refers to the maternal mortality rate of a given period of less than one year, and it is the number of maternal deaths per 100,000 live births
- Annualized neonatal mortality rate refers to the neonatal mortality ratio of a given period of less than one year, and it is the number of neonatal deaths per 1,000 live births
- **Epi-linked** refers to any suspected case that has not had a specimen taken for serologic confirmation but is linked to a laboratory-confirmed case
- **Confirmed case** refers to a case whose specimen has been tested positive or reactive upon laboratory testing, or has been classified as confirmed by either epidemiologic linkage with a confirmed case or clinical compatibility with the disease or condition

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For comments or questions, please contact

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Data sources

Data and information is provided by the fifteen County Surveillance Officers and National Public Health Reference Laboratory via regular weekly reports, telephone calls and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.