



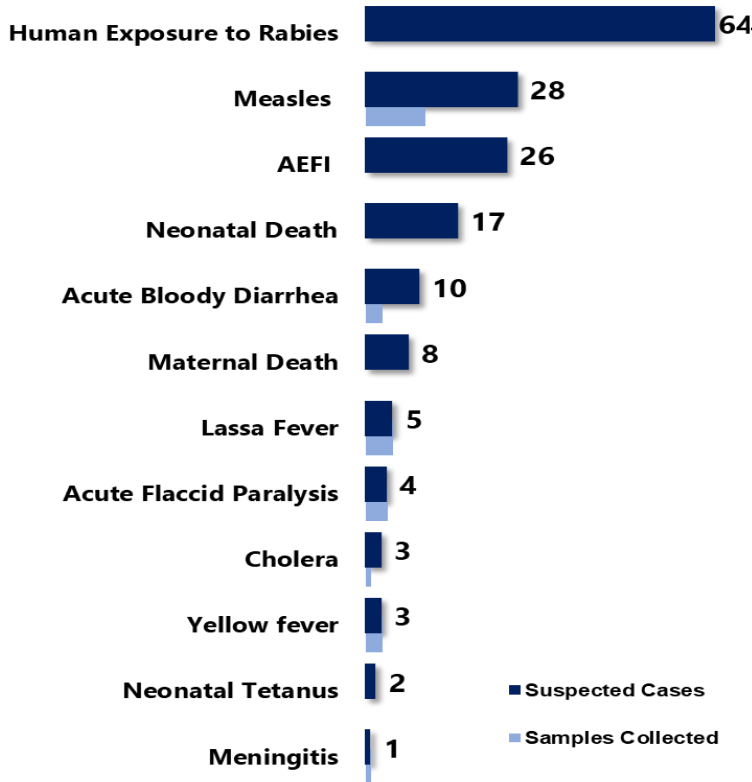
Liberia IDSR Epidemiology Bulletin

Epi-week 24 (June 10- 16 2024)

Country Population: 5,104,413 | Volume 20 Issue 24 | June 10 – 16, 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 171 events of public health importance including 25 deaths reported
- ◆ Completeness and Timeliness of health facility reports were 98% and 97%
- ◆ Ongoing Lassa fever outbreak in four Counties
- ◆ Ongoing Measles outbreak in Six Counties

Reporting Coverage

Table 1: Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 24, 2024

County	Expected Reports from HF*	Reports Received	Received on Time	Completeness (%)	Timeliness (%)
Bomi	29	29	29	100	100
Bong	66	66	66	100	100
Gbarpolu	18	18	18	100	100
Grand Bassa	38	38	38	100	100
Grand Cape Mount	36	36	36	100	100
Grand Gedeh	25	25	25	100	100
Grand Kru	25	25	25	100	100
Lofa	60	60	60	100	100
Margibi	60	60	60	100	100
Maryland	27	27	27	100	100
Montserrado	391	367	365	94	93
Nimba	102	102	102	100	100
Rivercess	21	21	21	100	100
River Gee	21	21	21	100	100
Sinoe	41	41	41	100	100
Liberia	960	936	934	98	97

936 (98%)
Health facilities reported IDSR data

98(98%)
Health districts reported IDSR data

934(97%)
Health facilities reported timely IDSR data

- ◆ The national target for weekly IDSR reporting is 80%. Two counties, Nimba and Maryland, reported late.
- ◆ Health facility timeliness is monitored at the health district level

Legend:



Vaccine-Preventable Diseases

Measles

- ☞ Twenty-eight (28) suspected cases were reported (see table below)
 - Eleven (11) specimens were collected and all pending testing
 - The proportion of suspected cases vaccinated (11/28) 39%
- ☞ Cumulatively, one thousand one hundred thirty (1130) cases reported
 - Proportion of suspected cases with sample collected (511/1130) 45%
 - Proportion of suspected cases with sample tested (418/511) 82% (negative 280, confirmed 136)
 - Proportion of negative Measles cases tested for Rubella (263/280) 94% (negative 240, confirmed 23)

Table 2. Distribution of suspected Measles Cases by County and Epi-classification, Liberia, Week 1-24, 2024

Reporting County	Epi-classification					Total	Annualized Non Measles Febrile Rash Illness Rate
	Lab confirmed	Epi-linked	Clinically confirmed	Indeterminate (Equivocal)	Discarded (Negative)		
Bomi	1	0	4	0	5	10	7.8
Bong	1	0	21	0	7	29	3.2
Gbarpolu	3	0	10	1	22	36	49.2
Grand Bassa	2	0	8	0	13	23	9.4
Grand Cape Mount	3	0	6	0	24	33	28.4
Grand Gedeh	33	27	59	0	28	147	26.9
Grand Kru	25	35	40	0	43	143	81.5
Lofa	0	0	16	0	12	28	6.9
Margibi	0	0	2	0	4	6	2.8
Maryland	19	1	145	0	7	172	8.7
Montserrado	2	0	19	0	16	37	1.7
Nimba	26	53	181	0	23	283	7.8
River Gee	16	13	43	1	27	100	46.1
Rivercess	0	0	4	0	5	9	11.4
Sinoe	6	1	19	0	48	74	67.3
Liberia	137	130	577	2	284	1130	11.4

Target Achieved >=2 Below Target <2

Table 3: Distribution and Vaccination Status of Measles Cases, Liberia, Epi-week 24, 2024

County	No of cases	Vaccinated	Number of Doses Received		
			One Dose	Two Doses	Doses Not Indicated
Bong	1	0	0	0	0
Grand Cape Mount	2	2	2	0	0
Grand Gedeh	2	0	0	0	0
Maryland	2	1	0	1	0
Nimba	12	6	3	2	1
River Gee	5	1	0	0	1
Rivercess	1	1	1	0	0
Sinoe	3	0	0	0	0
Total	28	11 (39%)	6(55%)	3(27%)	2(18%)

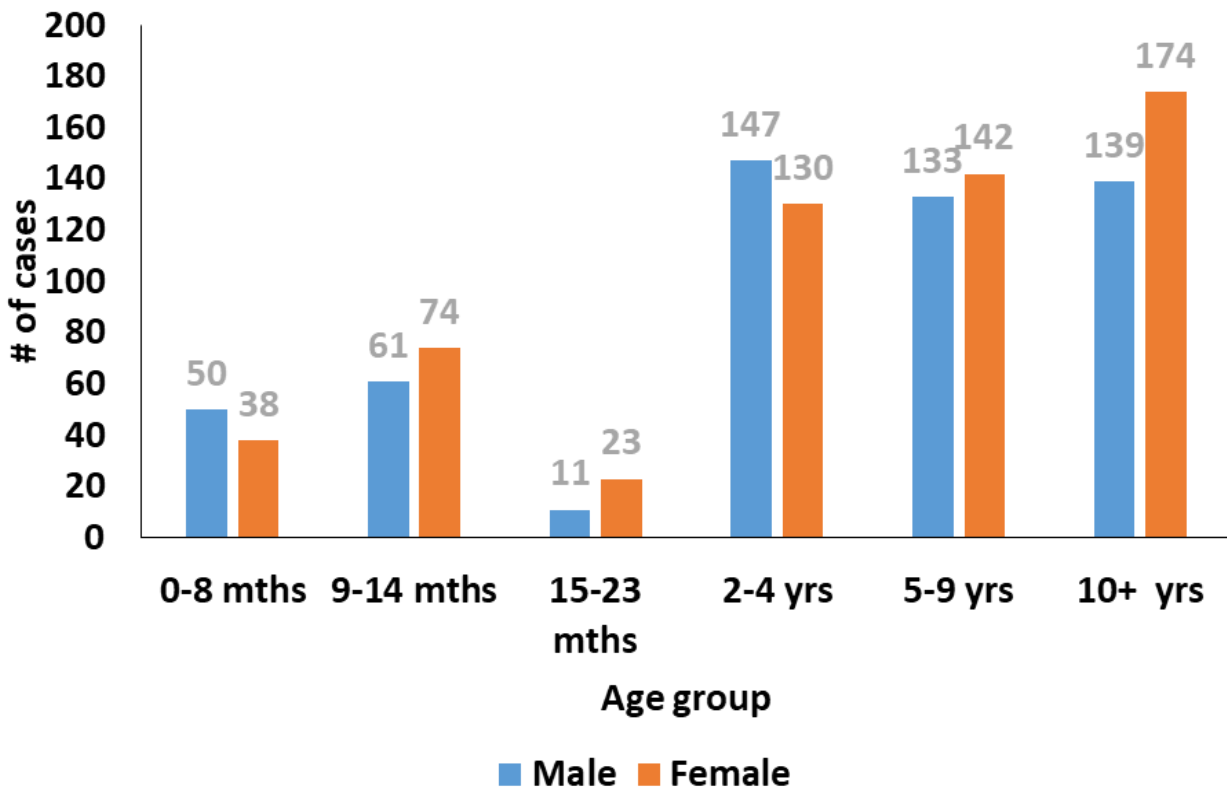


Figure 2: Suspected Measles Cases by Age group and Sex, Liberia, Epi week 24, 2024

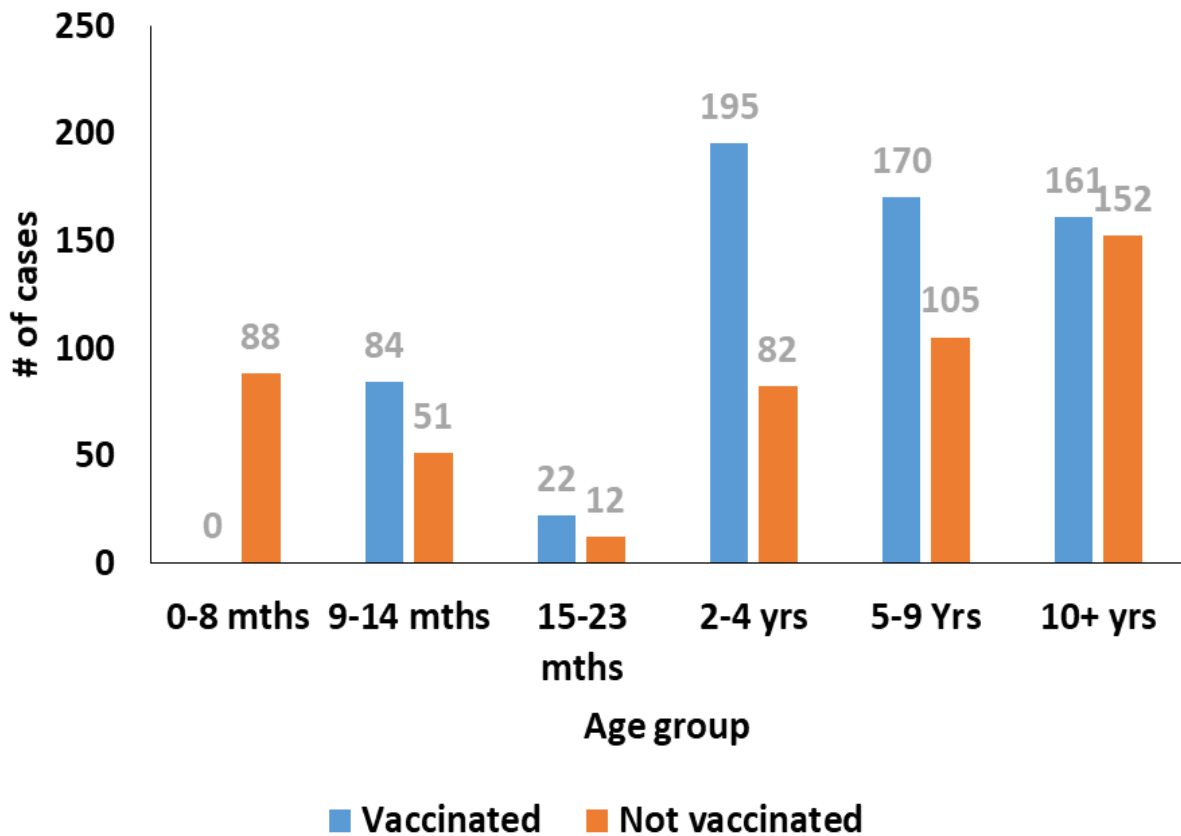


Figure 3: Suspected Measles Cases by Age Group and Vaccination Status, Liberia, Epi-Week 24, 2024

Table 4: Status of Confirmed (lab, clinically confirmed, and epi-linked) Measles Cases by County, Liberia,

County	Total Cases	Active	Recovery	Deaths	# of Districts
Montserrado	5,373	0	5,304	69	0/7
Nimba	1,281	7	1,270	4	4/6
Grand Bassa	924	0	917	7	0/8
Margibi	803	0	802	1	0/4
Bong	578	0	575	3	0/9
Maryland	1,293	2	1291	0	3/6
Lofa	292	0	292	0	1/6
Grand Kru	1,090	1	1087	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	58	4	54	0	1/5
Grand Gedeh	591	2	589	0	1/6
River Gee	125	0	124	0	1/6
Sinoe	247	0	247	0	2/10
Total	13,072	16	12,961	95	16/98

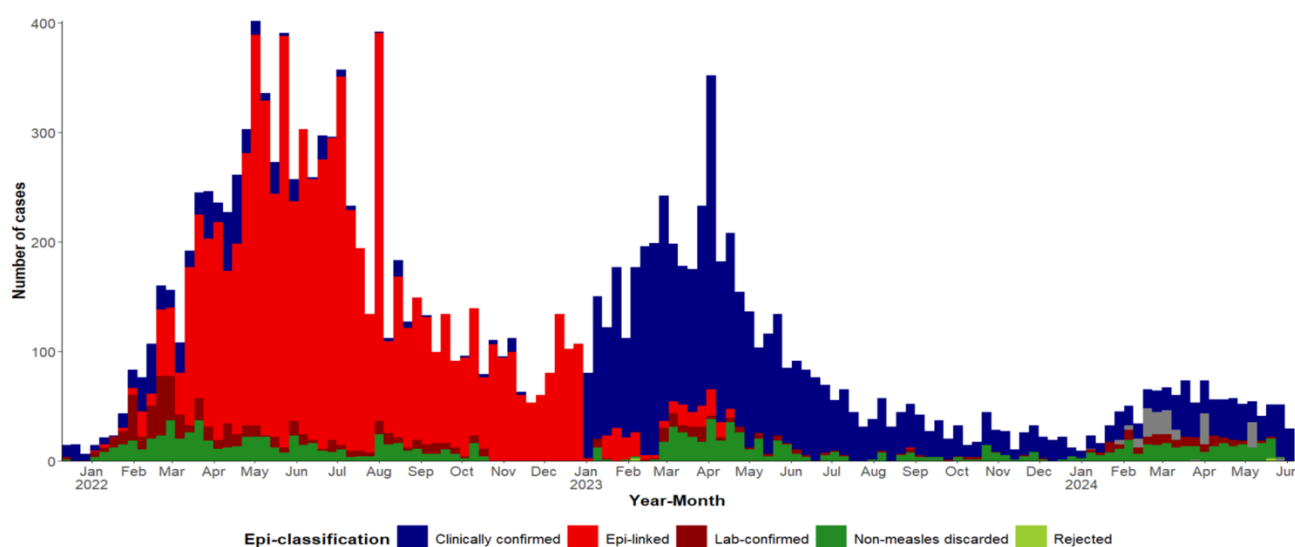


Figure 4: Epi-curve of Measles Cases by Epi-classification, Liberia, 13 December 2021 – 16 June 2024

PUBLIC HEALTH RESPONSE

I. Coordination

- The response has been led by the County Health Teams with technical support from the National Public Health Institute of Liberia (NPHIL), the Ministry of Health (MOH) and partners.
- 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 in Grand Kru County.
- Situational reports have been developed and disseminated to stakeholders
- Investigation of all rumors and alerts reported from the community ongoing in Grand Kru County

III. Case management

- Case management ongoing in affected counties

IV. Immunization

- Routine immunization ongoing across the country

V. Infection Prevention and Control (IPC)

- Reinforcing hand washing especially in the affected communities (Grand Kru)
- Distribution of IPC supplies such as gloves, nose masks, and hand sanitizers to responders (Grand Kru)

VI. Laboratory

- The National Public Health Reference Laboratory continues testing of Measles samples
- A total of six hundred sixty-three (663) cases have been confirmed by the NPHRL from December 13, 2021 – June 16, 2024.

VII. Risk Communication and Community Engagement

- Continual community advocacy meetings with local leaders and family members in the affected communities (Grand Kru)
- Awareness and health education are ongoing on the spread and prevention of Measles at health facility and community levels in Grand Kru County
- Community engagement meetings in the affected communities ongoing in Grand Kru County

Challenges

- No DSA for responders (Grand Kru)
- No gasoline support (Grand Kru)

Acute Flaccid Paralysis (AFP)

- ☞ Five (5) cases were reported from Nimba (2), Bomi (1), Gbarpolu (1), and Lofa (1) Counties
 - Specimens were collected and shipped
- ☞ Cumulatively, fifty-seven (57) cases have been reported
 - Thirty (30) tested negative, Two (NPENT), 25 pending testing

Neonatal Tetanus

- ☞ Two (2) cases were reported from Montserrado County
- ☞ Cumulatively, seventeen (17) cases have been reported including five (5) deaths

Influenza-Like Illnesses

Coronavirus Disease (COVID-19)

- ☞ Zero suspected cases reported
- ☞ Cumulatively, two (2) confirmed cases have been reported

Influenza

- ☞ Zero cases reported
- ☞ Cumulatively, seventy (70) suspected cases reported
 - Seventy (70) specimens were collected: 65 tested negative, 5 specimens were discarded

Viral Hemorrhagic Fever

Lassa fever

- ☞ Five (5) suspected cases were reported from Bong (3), and Sinoe (2) Counties
 - Specimens were collected and tested negative
- ☞ Cumulatively, one hundred nine (109) suspected cases have been reported
 - Proportion of suspected cases with the sample collected (109/109) 100%
 - Proportion of suspected cases with sample tested (100/105) 95%

- Confirmed 15 including 4 deaths, negative 90 and discarded 4
- Case fatality rate: (4/15) 27%

Outbreak:

- ☞ No new confirmed case reported
- ☞ Twenty-seven (27) contacts including 13 healthcare workers (HCWs) line listed and under follow-up
- ☞ A total of 153 confirmed cases including 45 deaths reported
- ☞ Cumulative Case Fatality Rate (CFR): 29% (45/153)
- ☞ Four counties are currently in outbreak

Table 5: Summary of Lassa fever Outbreak, Liberia, January 6, 2022-June 16, 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
Montserrado	Bushrod	13-Feb-23	17	1	0	0	0	0%	29	21	0	0	29	Completed	Ended
	Central Monro	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Ended
	Central Monro	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	34	Countdown
Bong	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	2	1	0	0	0	0%	8	0	0	8	0	Active	Ongoing
	Suakoko	23-Feb-24	23	3	0	0	0	0%	29	14	0	0	29	36	Countdown
	Salala	8-Mar-24	2	2	0	1	0	50%	21	0	0	0	21	Completed	Ended
Grand Bassa	Jorquelleh	11-Apr-24	3	2	0	1	0	0%	41	30	0	19	22	Active	Ongoing
	District 3A&B	21-Aug-23	87	44	0	10	0	23%	177	40	40	0	159	Completed	Ended
	Buchanan	11-Aug-23	2	1	0	1	0	100%	4	2	0	0	4	Completed	Ended
Nimba	District 3A&B	30-Apr-24	5	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	42	15	0	6	0	40%	43	35	8	0	43	Completed	Ended
	Tappita	20-Nov-23	12	5	0	3	0	60%	88	39	4	0	77	Completed	Ended
River Gee	Bain-Garr	1-Jun-23	24	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	34	Countdown
Total			477	153	21	45	3	29%	1265	449	61	27	1148		

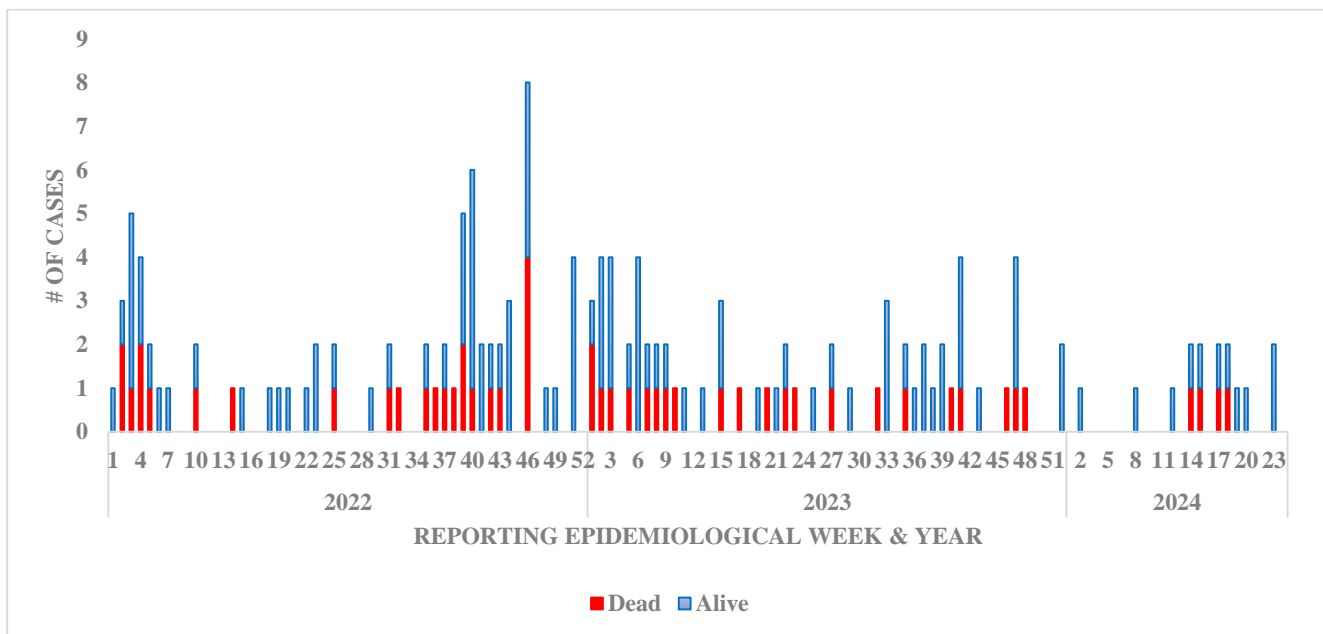


Figure 5: Epi-curve of Confirmed Lassa fever cases, Liberia, January 6, 2022- June 16, 2024

Public Health Measures

I. Coordination

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

II. Surveillance

- Active case search ongoing in affected communities and districts

- Twenty-seven (27) contacts line listed and under 21 days follow up
- Weekly sit-reps developed and disseminated to stakeholders

III. Laboratory

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 153 Lassa fever cases have been confirmed since this outbreak

IV. Case management and IPC

- Ribavirin supply in the country is being distributed for treatment of Lf cases to affected counties
- The 2 confirmed cases in isolation at Phebe Hospital were treatment with ribavirin and discharged

Challenges

- Limited supply of IPC materials in affected counties
- Limited logistics (gasoline, communication cards, fuel, etc.) to support active case search and contact tracing in the affected counties
- Lack of stationeries in EOC to produce case alert forms, contact tracing form and others tools for investigations (Bong County)
- Lack of computer for County Surveillance Officer (Bong County)

Yellow Fever

- ☞ Three (3) suspected cases reported from Grand Kru (2), and Grand Cape Mount (1) Counties
- ☞ Specimens were collected: 1 tested negative and 2 pending testing
- ☞ Cumulatively, fifty-three (53) cases have been reported
 - Proportion of suspected cases with samples collected (50/53) 94%, however, 2 samples pending testing, and 1 sample discarded
 - Proportion of suspected cases with samples tested (47/50) 94% (negative 46) (1 indeterminate)

Dengue

- ☞ Zero suspected cases reported
- ☞ Cumulatively, four (4) suspected cases were reported

Ebola Virus Disease

- ☞ Zero cases reported

Diarrheal Diseases

Acute Bloody Diarrhea (Suspected Shigellosis)

- ☞ Ten (10) cases were reported from Rivercess (2), Grand Kru (1), Margibi (1), River Gee (1), Montserrado (1), Maryland (1), Bomi (1), Grand Bassa (1), and Nimba (1) Counties
- ☞ Four Specimens were collected: 2 tested negative and 2 rejected
- ☞ Cumulatively, two hundred fourteen (214) cases have been reported
 - 116 specimens were collected, 90 reached the Lab
 - 81 tested negative, 7 rejected
 - 2 confirmed (*S. flexneri* & *S. sonnei*)

Severe Acute Watery Diarrhea (Suspected Cholera)

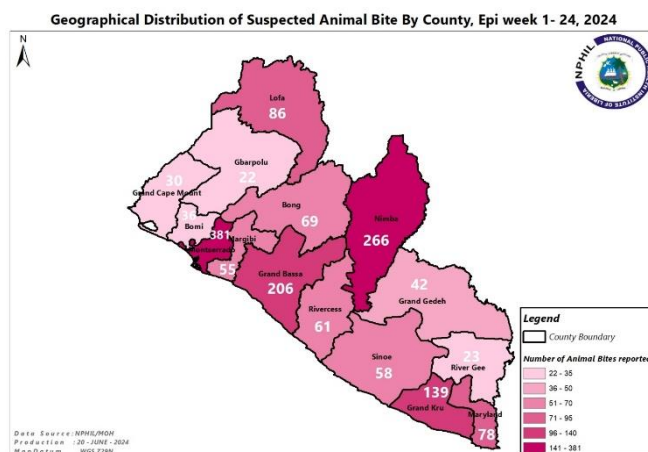
- ☞ Three (3) cases were reported from Grand Kru (1), Lofa (1), and Sinoe (1) Counties
- ☞ One specimen was collected and pending testing
- ☞ Cumulatively, one hundred forty-six (146) cases have been reported
 - 83 specimens collected, 54 reached the Lab
 - 46 tested negatives, 7 rejected and 1 pending testing

Other Reportable Diseases

Animal bite (Human Exposure to Rabies) Other Reportable Diseases

Animal bite (Human Exposure to Rabies)

- ☞ Sixty-five (65) animal bite cases were reported from Montserrado (14), Nimba (14), Grand Kru (9), Lofa (6), Maryland (5), Bong (4), Grand Bassa (4), Sinoe (3), Rivercess (2), Gbarpolu (2), Margibi (1), and River Gee (1) Counties
- ☞ All bites were attributed to dog
- ☞ Proportion of cases investigated: 37/65 (57%)
- ☞ Proportion of dogs vaccinated: 0/37 (0%)
- ☞ Cumulatively, 1,482 cases have been reported



Public Health Actions

- ☞ All cases were clinically managed and discharged
- ☞ PEP Administered to 16 persons (25%): Montserrado (12), Bong (11), and Lofa (1) Counties

Meningitis

- ☞ One (1) suspected case was reported from Montserrado County
- ☞ Specimen was collected and tested negative
- ☞ Cumulatively, eighteen (18) suspected cases have been reported
 - Proportion of specimen collected (16/18) 89%, 2 specimens not collected
 - Proportion of specimens tested (15/16) 94% (14 negative, 1 positive), and one discarded

Mpox

- ☞ Zero cases were reported
- ☞ Cumulatively, forty-five (45) suspected cases have been reported with 38 samples collected, and 35 tested of which, 5 confirmed positive, 30 negative, and 1 rejected, 2 pending investigations

Outbreak

- ☞ No new confirmed case reported
- ☞ A total of 20 contacts are being followed up for 21 days
- ☞ Cumulatively 2 cases (1 positive, 1 suspected) have been reported since the beginning of the outbreak

Public Health Measure

I. Coordination

- Coordination is ongoing at county and district levels

II. Epi-surveillance

- Twenty (20) contacts are being daily monitoring
- Active case search is ongoing in the affected communities and its surroundings

III. Risk Communication & Community Engagement

- Awareness and health education on the spread and prevention of the disease in the affected communities and its surroundings are ongoing

IV. Infection Prevention and Control (IPC)

- Reinforced hand washing in the affected community

V. Case Management

- Treatment of confirmed case is in progress

VI. Planned Activities

- Monitor contacts daily for signs and symptoms of Mpox

Challenges

- No gasoline support to intensify response activities
- No feeding support for patients at the treatment units

Unexplained cluster of deaths

- ☞ Zero cases reported

An Unexplained Cluster of Health Events

- ☞ Zero cases reported

Other Events of Public Health Importance

Maternal Mortality

- ☞ Eight (8) deaths were reported from Montserrado (4), Grand Bassa (1), Maryland (1), Nimba (1), and Grand Gedeh (1) Counties
- ☞ Reported causes: Postpartum Hemorrhage, Cardiac Arrest, Sepsis, Abortion, Hemorrhagic Shock, Prolonged Labor, Eclampsia and Hyperemesis Gravidarum
- ☞ Reporting sites:
 - Health facility (8/8) 100%
- ☞ Cumulatively, one hundred thirty-nine (139) deaths reported
 - Proportion of deaths reviewed (43/139) 31%

Neonatal Mortality

- ☞ Seventeen (17) deaths were reported from Montserrado (10), Maryland (2), Grand Kru (2), Bong (1), Rivercess (1), and Margibi (1) Counties
- ☞ Reported causes: Birth Asphyxia (7), Sepsis (5), Aspirated Pneumonia (1), Neonatal Apnea (1), Neonatal Jaundice (1), Prolonged Labor (1), and Hyperthermia (1)
- ☞ Reported sites:
 - Health facility (15/17) 88 %
 - Community (2/17) 12%
- ☞ Cumulatively, four hundred (400) deaths reported
 - Proportion of deaths reviewed (103/400) 26%

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

- ☞ Twenty-six (26) cases were reported from Sinoe (6), Grand Kru (5), Maryland (3), Grand Cape Mount (2), Lofa (2), Grand Gedeh (2), Bomi (1), Bong (1), Grand Bassa (1), Rivercess (1), Nimba (1), and Montserrado (1) Counties
- ☞ All were classified as non-serious
- ☞ Related vaccine:
 - Penta (14/26) 54%
 - Typhoid conjugate (5/26) 19%
 - Measles (3/26) 12%
 - nOPV2 (3/26) 12%
 - Pneumo (1/26) 4%
- ☞ Cumulatively, five hundred seventy-seven (577) events were reported and all were classified as non-serious.

Neglected Tropical Diseases

YAWS

- ☞ Zero cases were reported

Buruli Ulcer

- ☞ Zero cases were reported

Border Surveillance Update

A total of 5592 travelers were recorded from eight (8) designated out of Forty-five (45) official POEs with incoming travelers accounting for 55% (2528/5592)

Table 6: Border activity at the PoE for incoming and outgoing travelers, Liberia, Epi week 24

Type of Ports	Point of Entry	Weekly total	Arrival	Departure	Total travelers with YB	Yellow Book Damage	Card Replaced	Vaccinated against YF & Issued	Alerts detected/ Verified
Airport	James S. Paynes	29	15	14	0	0	0	0	0
	Robert Int'l Airport	4297	2330	1967	0	0	92	10	0
Seaport	Freeport of Monrovia	272	136	136	272	0	0	0	0
	Buchanan Port	86	43	43	86	0	0	0	0
Ground Crossing	Bo Water Side	539	276	263	521	0	11	7	0
	Ganta	110	94	16	95	0	0	0	0
	Yekepa	37	22	15	8	0	0	0	0
	Loguatu	222	148	74	164	0	0	0	0
Total		5,592	3,064	2,528	1,146	0	103	17	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, and Mpox outbreaks)
- ☞ Produced and disseminated weekly bulletin

County-level

Surveillance

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

Case Management

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

Appendix

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

		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 Expected Health District		4	9	5	8	5	6	5	6	4	6	7	11	6	6	10	98			
No. of Health District Reported		4	9	5	8	5	6	5	6	4	6	7	11	6	6	10	98			
Vaccine Preventable Diseases	Acute Flaccid Paralysis (Suspected Polio)	A	1	0	0	0	0	0	1	0	0	0	2	0	0	0	4	49	0	
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Measles	A	0	1	0	0	2	2	0	0	0	2	0	12	1	5	3	28	1,111	50
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Neonatal Tetanus	A	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2	15	0	
	D	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	5	0	
Yellow fever	A	0	0	0	0	1	0	2	0	0	0	0	1	0	1	0	3	49	0	
	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Viral Hemorrhagic Febrile Diseases	Dengue fever	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Ebola Virus Disease	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Lassa fever	A	0	3	0	0	0	0	0	0	0	0	0	0	0	0	2	5	100	2	
	D	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	4	0	
Influenza-Like Illnesses	COVID-19	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	2
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Influenza Like Illnesses	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	70	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diarrheal Diseases	Acute Bloody Diarrhoea (Shigellosis)	A	1	0	0	1	0	0	1	1	1	1	1	0	2	0	10	201	0	
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Severe Acute Watery Diarrhoea (Cholera)	A	0	0	0	0	0	0	0	1	1	0	0	0	0	0	1	3	142	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Events of Public Health Interest	Maternal Mortality	D	0	0	0	1	0	1	0	0	0	1	4	1	0	0	8	131		
	Neonatal Mortality	D	0	1	0	0	0	2	0	1	2	10	0	1	0	0	17	383		
	AEFI	A	1	1	0	1	2	2	5	2	0	3	1	1	1	0	6	26	549	0
	Unexplained Cluster of Health Events/Disease	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Reportable Diseases	Mpox	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	45	2
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Tuberculosis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	20	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Human Exposure to Rabies (Suspected Human)	A	0	4	2	4	0	0	9	6	1	5	14	13	2	1	3	64	1,416	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
	Meningitis	A	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	17	1
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Unexplained Cluster of deaths	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
	D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	
Neglected Tropical Diseases	Buruli Ulcer	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Yaws	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL		3	10	2	7	0	5	0	11	0	14	0	31	0	9	15	173	4313	7	

D = Dead **A** = Alive

Notes

- ☞ **Completeness** refers to the proportion of expected weekly IDSR reports received (target: $\geq 80\%$)
- ☞ **Timeliness** refers to the proportion of expected weekly IDSR reports received by the next level on time (target: $\geq 80\%$). 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 2017 (annual target: $\geq 2/100,000$)
- ☞ **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

Ralph W. Jetoh, MD, MPH

Director

Infectious Disease and Epidemiology Division

National Public Health Institute of Liberia

Republic of Liberia

Email: ralphica2000@gmail.com

Phone: +231 886526388/777372655

Website: www.nphil.gov.lr

National Public Health Institute of Liberia (NPHIL)

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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.