

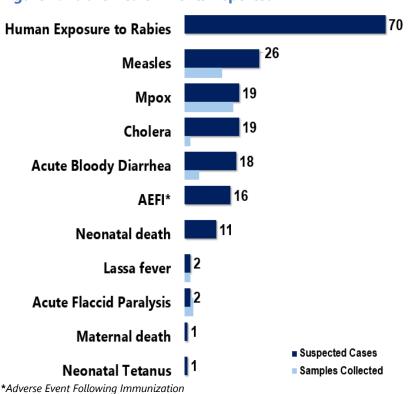
Liberia IDSR Epidemiology Bulletin

2024 Epi-week 43 (October 21 – 27, 2024)

Country Population: 5,406,374 Volume 20 Issue 43 October 21 – 27, 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 185 events of public health importance, including 12 deaths reported
- ◆ Completeness and Timeliness of health facility reports were 100% and 96%, respectively
- ♦ Ongoing Lassa fever outbreak in two counties
- ◆ Ongoing Measles outbreak in two counties
- ♦ Ongoing circulating vaccinederived Poliovirus type 2 outbreak
- ◆ Ongoing Mpox outbreak in six counties

Reporting Coverage

Table 1. Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 43, 2024

County	Expected Reports from Health Facility	Reports Received	Received on Time	Completeness (%)	Timeliness (%)
Bomi	29	29	29	100	100
Bong	64	64	64	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	24	24	24	100	100
Grand Kru	25	25	25	100	100
Lofa	61	61	61	100	100
Margibi	24 24 25 25 25		64	100	100
Maryland	28	28	28	100	100
Montserrado	371	371	367	100	99
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	943	943	939	100	98

943(100%)
Health
facilities
reported
IDSR data

98(100%)
Health
districts
reported
IDSR data

939(99%)
Health
facilities
reported
timely IDSR
data

Legend: ≥80 <80

[•] The national target for weekly IDSR reporting is 80%. All counties reported on time. Health facility timeliness is monitored at the health district level.

Vaccine-Preventable Diseases

Measles

- Twenty-seven (26) suspected cases were reported from Nimba (14), River Gee (3), Grand Gedeh (2), Lofa (2), Sinoe (2), Margibi (1), Bong (1), and Bomi (1) Counties
 - Twelve (12) specimens were collected and received at the lab pending testing
 - Eighty-five percent (22/26) of the suspected cases were vaccinated for measles (see Table 2)
- Cumulatively, 1,596 suspected cases have been reported since Epi-week 1 (see Table 3)
 - Of the total reported 1,239 confirmed cases,
 - 51% were reported to have previously been vaccinated,
 - 37% were unvaccinated
 - 12% had unknown vaccination status
 - Fifty-one percent (634/1239) of the confirmed cases are below 5 years
 - Proportion of suspected cases with sample collected 46% (734/1596)
 - Proportion of suspected cases with sample tested 75% (552/734) [negative – 353, positive – 195, indeterminate-4]
 - Proportion of negative Measles cases tested for Rubella 90% (320/353) [negative – 292, positive – 28]
- Liberia's annualized non-measles febrile rash illness rate now stands at **7.9 per 100,000**. Montserrado and Margibi Counties are below the target (see Table 3)

Table 2. Distribution and Vaccination Status of Measles Cases, Liberia, Epi-week 43, 2024

	Reported		Nui	mber of Dos	es Received
County	cases	Vaccinated	One Dose	Two Doses	Doses Not Indicated
Bomi	1	1	0	1	0
Bong	1	0	0	0	0
Grand Gedeh	2	2	2	0	0
Lofa	2	2	1	1	0
Margibi	1	0	0	0	0
Nimba	14	12	9	3	0
River Gee	3	3	1	0	2
Sinoe	2 2		2	0	0
Total 26 22		22	15	5	2

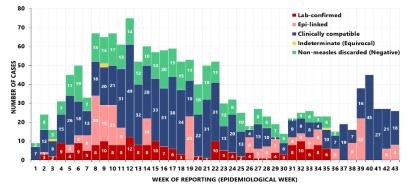


Figure 2. Distribution of Measles Cases by Reporting Week and Epi-classification, Liberia, Epi-week 1 – 43. 2024

Table 3. Classification of measles, reporting rate, and annualized non-measles rash illness rate per 100,000 population by County, Liberia, Epi-week 1 – 43, 2024

			Epi-classifical	tion			Annualized Non
Reporting County	Lab confirmed	Epi-linked	Clinically compatible	Indeterminate (Equivocal)	Discarded (Negative)	Cumulative	Measles Febrile Rash Illness Rate
Bomi	4	1	11	0	9	25	7.9
Bong	ng 2 0 26		0	9	37	2.3	
Gbarpolu	7 0 18		1	26	52	32.4	
Grand Bassa 3 0 42 Grand Cape Mount 7 0 8 Grand Gedeh 37 28 75		0	16	61	6.5		
		0	28	43	18.5		
		0	39	179	20.9		
Grand Kru	31	35	48	0	44	158	46.5
Lofa	5	0	25	0	15 45		4.8
Margibi	0	0	6	0	0 4 10		1.5
Maryland	21	13	168	0	8	210	5.5
Montserrado	4	0	36	0	21	61	1.3
Nimba	36	138	263	1	27	465	5.1
River Gee	23	13	57	1	39	133	37.2
Rivercess	1	0	4	0	6	11	7.6
Sinoe	pe 14 1 28		1	62	106	48.5	
Liberia	195	229	815	4	353	1596	7.9
Target Achieved	>=2		Below Target	<2		Acti	vate Windows

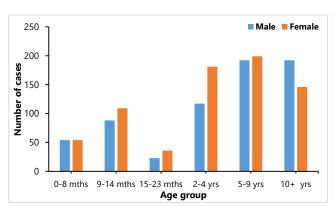


Figure 3. Suspected Measles Cases by Age-group and Sex, Liberia, Epi-week 1 – 43, 2024

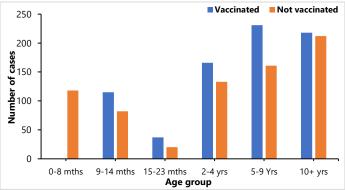


Figure 4. Vaccination status of Suspected Measles Cases by Age Group, Liberia, Epi-week 1 – 43, 2024

Outbreak Section (December 13, 2021 – October 27, 2024)

Table 4. Measles Outbreak by County and Case Status, Liberia, December 13, 2021 – October 27, 2024

County	Total Cases	Active 0 14 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0	Recovery	Deaths	No. of Districts
Montserrado	5,373	0	5,304	69	0/7
Nimba	1407	14	1381	4	5/11
Grand Bassa	950	0	917	7	1/8
Margibi	803	0	802	1	0/4
Bong	578	0	575	3	0/9
Maryland	1,320	0	1320	0	0/6
Lofa	292	0	292	0	0/6
Grand Kru	1,100	0	1,098	2	0/5
Grand Cape Mount	187	0	184	3	0/5
Bomi	148	0	143	5	0/4
Rivercess	84	0	83	1	0/6
Gbarpolu	64	0	64	0	0/5
Grand Gedeh	604	0	604	0	0/6
River Gee	134	0	134	0	0/6
Sinoe	247	0	247	0	0/10
Total	13,291	14	13,148	95	6/98

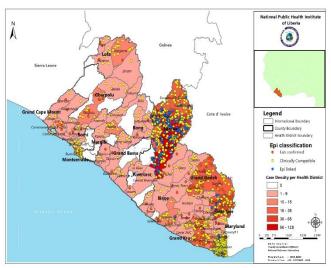


Figure 5. Measles outbreak by County and Case Status, Liberia, December 13, 2021 – October 27, 2024

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 Nimba and Grand Bassa Counties

II. Epidemiological Surveillance

Active case search ongoing in affected communities

III. Case management

 Case management ongoing in Nimba and Grand Bassa Counties

IV. Immunization

Routine immunization ongoing across the country

V. Laboratory

 The National Public Health Reference Laboratory (NPHRL) continues testing of Measles samples

VI. Risk Communication & Community Engagement

 Awareness and health education on the spread and prevention of Measles in health facilities and communities ongoing in Nimba and Grand Bassa Counties.

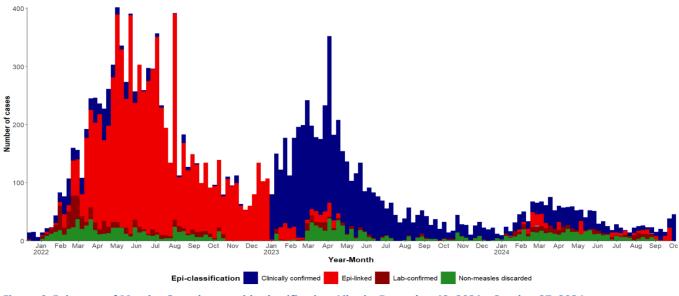


Figure 6: Epi-curve of Measles Cases by monthly classification, Liberia, December 13, 2021 - October 27, 2024

Acute Flaccid Paralysis (AFP)

- Two (2) cases were reported from Montserrado County
 - Specimens were collected and shipped
- Cumulatively, ninety-four (94) cases have been reported since Epi-week 1. One (1) cVDPV2¹, 1 Poliovirus-2, 68 negative, 12 NPENT, and 12 AFP specimens pending testing at the laboratory
- As of week 43, the annualized non-polio AFP rate is at 4.7 per 100,000 populations under 15 years of age.

Table 5. Non-Polio AFP Rate 3/100,000 <15 years by County, Liberia, Epi-week 1 – 43, 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	5	2	9.7	5	100%	0	0%
Bong	215425	1	1	0.6	1	100%	0	0%
Gbarpolu	43630	4	4	11.1	4	100%	0	0%
Grand Bassa	134743	3	3	2.7	3	100%	0	0%
Grand Cape Mount	82471	8	7	11.7	8	100%	1	13%
Grand Gedeh	101412	6	6	7.2	6	100%	1	17%
Grand Kru	51467	3	3	7.0	3	100%	1	33%
Lofa	168626	10	8	7.2	10	100%	1	10%
Margibi	140931	1	1	0.9	1	100%	0	0%
Maryland	78808	3	3	4.6	3	100%	0	0%
Montserrado	898124	21	17	2.8	21	100%	4	19%
Nimba	285705	21	19	8.9	21	100%	4	19%
Rivercess	42729	2	2	5.7	2	100%	0	0%
River Gee	57047	1	1	2.1	1	100%	0	0%
Sinoe	69556	5	5	8.7	5	100%	0	0%
Liberia			4.7	94	100%	12	13%	
Non-Polio AFP Rate	<3 ≥3	Stool a	dequacy	<80% ≥80%	Non-Polio Enterovirus	<10% ≥10%	Silent	

Outbreak Section (February 23 – October 22, 2024)²

- ⇒ The outbreak of circulating type 2 poliovirus variant (cVDPV2) is currently ongoing
 - February 23, 2024: 1st laboratory notification of cVDPV2 confirmation from an environmental surveillance (ES) site of Fiamah Treatment Plant (FTP)
 - o As of **October 20, 2024**, there are:
 - 17 cVDPV2s isolations from ES sites in Monrovia with latest collected 07-MAY-24; nine (9) from Redemption Street Bridge (RSB), latest ENV-LIB-MON-MON-RSB-24-012; eight (8) from FTP, latest ENV-LIB-MON-MON-FTP- 24-011.
 - 12 cVDPV2s from healthy community children/contacts in Monrovia, latest reported LIB-MON-MON-24-CC068 on 20-MAR-24.
 - 1 cVDPV2 from an AFP case: LIB-SIN-KPA-24-059, a 1y7mo old boy from Kpanyan Town, Sinoe County; Date of Onset 8-JUN-24; cVDPV2 report on 07- AUG-2024; closest match ENV-LIB-MON-MON-FTP-24-005.
 - 1 Poliovirus-2 from an AFP case: LIB-GCM-GOK-24-079, a 2-years old female from Managorduah, Grand Cape Mount County; Date of Onset 17-AUG-24.

PUBLIC HEALTH RESPONSE

I. Coordination

- The GPEI coordination mechanism is operational with partner representations from WHO, UNICEF, CDC/US, BMGF, GAVI, Rotary Group, USAID, as well as Africa CDC, AFENET, MSF, and more
- Weekly sit-reps developed and disseminated to stakeholders

II. Epidemiological Surveillance

- Active case search ongoing in affected community
- Detailed investigation is being conducted by the national team comprising EPI-MoH, NPHIL, and WHO
- Routine Immunization intensification activities ongoing (Monthly outreaches, Quarterly Periodic Intensification of Routine Immunization (PIRI), Use of SIAs to improve RI)

III. Laboratory

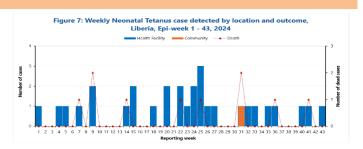
 ES sample is collected twice a month and tested by the Institute Pasteur Lab in Cote D'Ivoire

¹ circulating Vaccine-Derived Poliovirus type 2

² Liberia Polio Outbreak Response Situation Report as of October 22, 2024

Neonatal Tetanus

- One (1) clinically confirmed case was reported from Montserrado County
- Cumulatively, thirty-one (31) cases have been reported, including 10 deaths since Epi-week 1. Case Fatality Rate is 32%, and community detection is at 3%.



Influenza-Like Illnesses

Coronavirus Disease (COVID-19)

- Zero suspected cases were reported
- Cumulatively, three (3) cases have been reported since Epi-week 1, with two positive and one negative

Influenza

- Zero cases were reported
- Cumulatively, one hundred eighteen (118) suspected cases reported since Epi-week 1.
 - One hundred eighteen (118) specimens were collected: 110 tested negative, 4 specimens were discarded, and 4 positive

Viral Haemorrhagic Fever

Lassa fever

- Two (2) suspected cases were reported from Margibi (1) and Nimba (1) Counties
 - Two (2) specimens were collected and tested
 1 positive and 1 negative
- Cumulatively, two hundred ten (210) suspected cases have been reported since Epi-week 1.
 - Proportion of suspected cases with sample collected (210/210) 100%. Six of the collected samples were discarded
 - Proportion of suspected cases with sample tested (202/210) 96%
 - Thirty-seven (38) positive, including 11 deaths, and 164 negative
 - o Case fatality rate: (11/38) 29%
 - Nimba County accounts for 39.5% of the total confirmed cases.

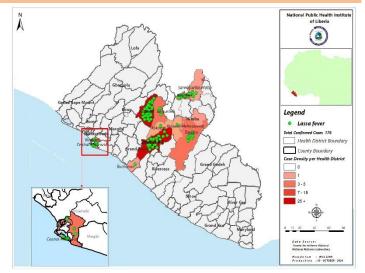
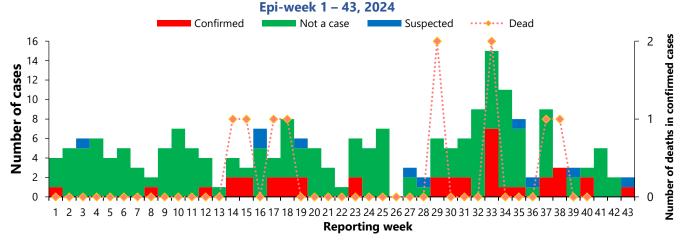


Figure 8. Geospatial distribution of confirmed Lassa fever by Health District, Liberia, Epi-week 1 – 43, 2024

Figure 9: Weekly distribution of Lassa fever cases by Epi-classification, Liberia,



Outbreak Section (January 6, 2022 – October 30, 2024)

- One (1) new confirmed case reported from Nimba County
- Total of 10 contacts, including seven (7) healthcare workers line listed and undergoing 21 days follow up
- A total of 176 confirmed cases, including 55 deaths reported
- Cumulative Case Fatality Rate (CFR): 31% (55/176)

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

o Active case search ongoing in affected communities

- Total of ten (10) contacts, including 7 HCWs linelisted and undergoing 21 days follow-up
- Weekly sit-reps developed and disseminated to stakeholders

III. Case management

- o Ribavirin distributed to affected counties
- No confirmed case in isolation

IV. Risk Communication and Community Engagement

 Risk communication and community engagement ongoing in affected communities

V. Dead Body Management

Safe and dignified burial conducted for the deceased cases

VI. Laboratory

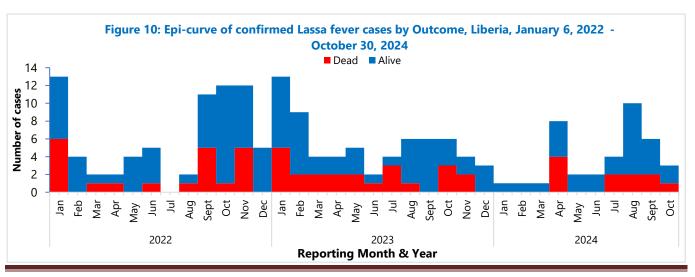
- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 176 Lassa fever cases have been confirmed since this outbreak

Table 6. Summary of Lassa fever Outbreak, Liberia, January 6, 2022 - October 30, 2024

		Outbreak	Total	Total	HCWs	Total	Deaths in		Total	# HCW	Contacts_be	Contacts under	Contacts	Days in	Outbreak
County	Outbreak Districts	Start Date	suspected	confirmed	confirmed	Deaths	HCWs	CFR %	Contacts	contacts	came cases	follow up	completed	countdown	Status
	Bushrod	13-Feb-23	17	1	0	0	0	0%	29	21	0	0	29	Completed	Ended
Montserrado	Central Monrovia	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Ended
wontserrado	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	Completed	Ended
Bong	Suakoko	29-Jul-24	11	5	1	0	0	0%	37	14	0	0	37	Completed	Ended
	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	Completed	Ended
	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
Grand bassa	District 3A&B	30-Apr-24	7	3	0	1	0	33%	12	3	0	0	12	Completed	Ended
	District 3A&B	3-Sep-24	7	6	0	1	0	17%	27	10	0	0	27	10	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	9	0	60%	43	35	8	0	43	Completed	Ended
	Tappita	29-Jul-24	5	2	0	1	0	50%	27	24	0	0	27	Completed	Ended
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	20	10	0	5	0	50%	173	98	1	10	163	Active	Ongoing
River Gee	Putupo	25-Nov-22	2	1	0	1	0	100%	14	0	0	0	14	Completed	Ended
Total			533	176	22	55	3	31%	1529	595	62	10	1429		

Legend: Outbreaks in countdown stage in reporting districts

Active/ ongoing outbreaks not in countdown stage with active response interventions in reporting districts



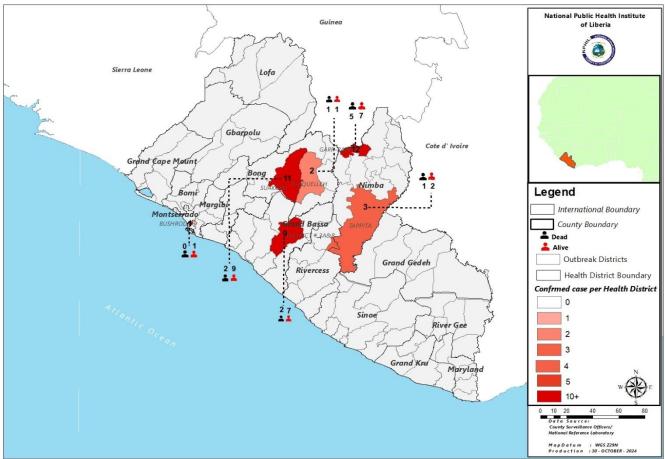


Figure 11. Geospatial distribution of outbreak district with number of confirmed Lassa fever cases, Liberia, Epi-week 1 – 43, 2024

Yellow Fever

- Zero suspected cases were reported
- Cumulatively, ninety-two (92) cases have been reported since Epi-week 1.
 - o Proportion of suspected cases with samples collected (89/92) 97%; however, 1 was rejected
 - Proportion of suspected cases with samples tested (86/89) 97% [presumptive positive 4, negative 81, indeterminate 1]

Dengue

- Zero suspected cases were reported
- Cumulatively, six (6) suspected cases were reported

Diarrheal Diseases

Acute Bloody Diarrhoea (Shigellosis)

- Eighteen (18) cases were reported from Lofa (9), Rivercess (2), Sinoe (2), Grand Kru (2), River Gee (2) and Grand Bassa (1) Counties
 - Five (5) specimens were collected and pending testing
- Cumulatively, three hundred forty-four (344) cases have been reported since Epi-week 1.
 - 199 specimens were collected, with 151 received at the Lab. Of the 151 specimens, 119 tested negative, 17 confirmed (S. flexneri-4, S. sonnei-9, others-4), 7 rejected, and 8 pending testing

Severe Acute Watery Diarrhoea (Cholera)

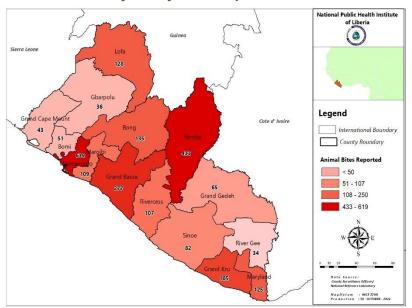
- Nineteen (19) suspected cases were reported from Lofa (15), Margibi (1), and River Gee (1), Nimba (1) and Grand Kru (1) Counties
- Cumulatively, two hundred forty (240) cases have been reported since Epi-week 1.
 - o 133 specimens collected, 98 received at the Laboratory
 - o 73 tested negative, 12 rejected, and 13 pending testing.

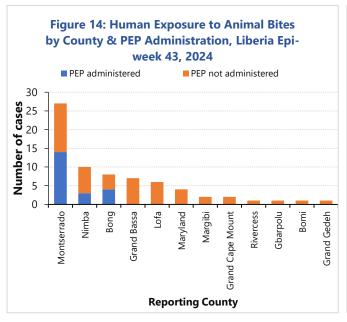
Other Reportable Diseases

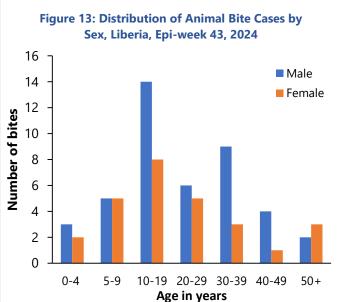
Animal bite (Human Exposure to Rabies)

- reported from Montserrado (27), Nimba (10), Bong (8), Grand Bassa (7), Lofa (6), Maryland (4), Grand Cape Mount (2), Margibi (2), Grand Gedeh (1), Grand Kru (1), Rivercess (1) and Bomi (1) Counties
- Proportion of cases investigated is 42% (30/70)
- PEP was administered to twenty-one (21) persons in Montserrado (14), Bong (4), and Nimba (3) Counties
- Cumulatively, 2,455 cases have been reported, including 2 deaths (suspected human rabies) since Epi-week 1.

Figure 12. Geospatial distribution of Human Exposure to Animal Bites Cases by County, Liberia, Epi-week 1 – 43, 2024







Meningitis

- Zero cases were reported
- Cumulatively, twenty-one (21) suspected cases have been reported
 - Proportion of specimen collected (18/21) 86%, 3 specimens not collected
 - o Proportion of specimens tested (17/18) 94% (15 negative, 2 positive)

Mpox

- Nineteen (19) suspected cases were reported from Nimba (5), Lofa (4), Sinoe (2), Grand Bassa (2), Gbarpolu (2), Montserrado (2), Bomi (1), and River Gee (1) Counties
 - Seventeen (17) specimens were collected, 8 tested negative, 3 positive, and 6 pending testing
- Cumulatively, 273 suspected cases have been reported, 259 samples collected with 1 rejected
 - o Two hundred thirty-four (234) tested: 22 positive, 210 negative and 2 indeterminate

Outbreak Section (January 1 – October 30, 2024)

- Three (3) new confirmed cases reported from Nimba (3) and Lofa (1) Counties
- Total of 47 contacts under follow-up (13-Bong, 12-Grand Bassa, Montserrado-3, Nimba-4, Lofa-15)

Table 7. Confirmed Cases Reported by Counties and Health Districts, Liberia, January – October 30, 2024

Reporting County	Reporting District	Active Cases	Recovered	Cumulative
Pana	Kokoyah	0	1	1
Bong	Sanoyea	2	0	2
Grand Bassa	District #4	1	0	1
Grand Kru	Trehn	0	1	1
Lofa	Zorzor	1	2	3
Maryland	Harper	0	1	1
Mantagrada	Bushrod	0	1	1
Montserrado	Commonwealth	1	0	1
	Saclepea Mah	2	1	3
Nimba	Tappita	0	1	1
Nimba	Twah River	0	1	1
	Zoe Geh	1	1	2
River Gee	Webbo	0	1	1
Sinoe	Jaedae	0	1	1
Silide	Jedepo		2	2
Total	15	8	14	22

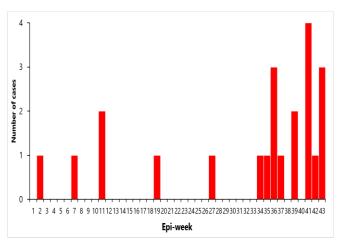


Figure 15. Weekly epi-curve of Mpox lab-confirmed cases detected in Liberia, Epi-week 1 - 43, 2024

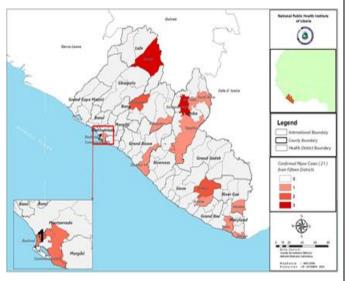


Figure 16. Distribution of Lab-confirmed Mpox cases by Health District, Liberia, January 1 – October 30, 2024

PUBLIC HEALTH RESPONSE

I. Coordination

- Conduct regular IMS meetings at national and subnational levels in affected counties to direct response efforts
- o Production of regular Sitreps and dissemination

II. Epidemiological Surveillance

- Active media scanning and community case finding continue through EIOS platform
- Continue to follow up with response counties to obtain updates on the status of the Mpox outbreak
- Total of 47 contacts under follow-up (13-Bong, 12-Grand Bassa, Montserrado-3, Nimba-4, Lofa-15)

III. Case management

 Eight (8) cases currently in isolation (Bong-2, Montserrado-1, Grand Bassa-1, Nimba-3, Lofa-1)

IV. Laboratory

- Sequencing results showed Clade IIa
- The National Public Health Reference Laboratory continues the testing of Mpox samples

V. Risk Communication & Community Engagement

 Ongoing community engagement and awareness creation via a radio station in partnership between the RCCE team and affected County Health teams

VI. Infection Prevention and Control (IPC)

- IPC supplies distributed to all eight designated points of entry
- Ongoing distribution of IPC supplies to the 15 Counties;
 4/15 received supplies

NEXT STEPS

o Continue active case search in the affected communities

Other Events of Public Health Importance

Maternal Mortality

- One (1) death was reported from Nimba County
- Primary causes of death: PPH
- The death occurred in public health facility
- Cumulatively, two hundred fiftyfive (255) deaths have been reported since Epi-week 1, of which (234) 92% were reported from health facilities and (21) 8% from communities.
 - Proportion of deaths reviewed (129/255) 50%.
- Annualized maternal mortality ratio is at 133 per 100,000 live births

Table 8. Cumulative Maternal Mortality reporting rate and Annualized Maternal Mortality per 100,000 live births by County, Liberia, Week 1 - 43, 2024

	Estimated Annual	Current		% of Cumulative	Annualized Maternal
County	Live birth (4.3%)	week	Cumulative	Maternal deaths	Mortality Ratio/100,000
Montserrado	85821	0	131	51.4	185
Grand Bassa	12875	0	19	7.5	178
Nimba	27301	1	34	13.3	151
Margibi	13467	0	16	6.3	144
Grand Cape Mount	7881	0	9	3.5	138
Maryland	7531	0	7	2.7	112
Bomi	5943	0	5	2.0	102
Lofa	16113	0	10	3.9	75
Grand Gedeh	9690	0	6	2.4	75
Grand Kru	4918	0	3	1.2	74
Rivercess	4083	0	2	0.8	59
Bong	20585	0	10	3.9	59
River Gee	5451	0	2	0.8	44
Sinoe	6646	0	1	0.4	18
Gbarpolu	4169	0	0	0.0	0
Liberia	232474	1	255	100.0	133

(Table 8). The expected MMR based on 2019-20 Demographic Health Survey (DHS) is 742 deaths per 100,000 live births.

Neonatal Mortality

- Eleven (11) deaths were reported from Montserrado (5), Maryland (3), Grand Kru (1), River Gee (1), and Margibi (1) Counties
- Primary causes of death were birth asphyxia (6), respiratory failure (3), and prematurity (1)
- Ten (10) of the deaths occurred in health facility and 1 in the community
- Cumulatively, six hundred seventy-nine (679) deaths have been reported since Epi-week 1.
 - o Proportion of deaths reviewed (322/679) 47%
- Annualized neonatal mortality

Table 9. Cumulative Neonatal Mortality reporting rate and Annualized Neonatal Mortality per 1,000 live births by County, Liberia, Week 1 - 43, 2024

	Estimated Annual	Current		% of Cumulative	Annualized Neonatal
County	Live birth (4.3%)	Week	Cumulative	Neonatal deaths	Mortality Rate/1,000
Maryland	7347	3	86	12.7	14.2
Grand Kru	3130	1	27	4.0	10.4
Montserrado	62479	5	408	60.1	7.9
Sinoe	5534	0	17	2.5	3.7
Gbarpolu	4507	0	13	1.9	3.5
Rivercess	•		11	1.6	3.4
Grand Gedeh			13	1.9	2.3
Bong	18775	0	24	3.5	1.5
River Gee	3610	1	8	1.2	2.7
Lofa	14911	0	20	2.9	1.6
Margibi	11345	1	17	2.5	1.8
Nimba	24970	0	27	4.0	1.3
Bomi			2 0.3		0.5
Grand Bassa 11981 0		5	0.7	0.5	
Grand Cape Mount 6868		0	1	0.1	0.2
Liberia	190636	11	679	100.0	4.3

rate is at **4.3 per 1,000 live births** (*Table 9*).

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

- Sixteen (16) events were reported from Maryland (4), Sinoe (3), Gbarpolu (3), Bong (2), Grand Gedeh (1), Rivercess (1), River Gee (1), and Lofa (1) Counties
- All reported cases were investigated and classified as non-serious. Related vaccines included Penta (8), Pneumo (3), Yellow fever (2), Malaria (1), OPV (1), and Rota (1)
- Cumulatively, nine hundred twenty-seven (927) 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 5,101 travellers' were screened from eight (8) designated out of Forty-five (45) official Points of Entry, with incoming travellers accounting for 50% (2560/5101) (*Table 10*).

Table 10. Cross-border activity at the POE for incoming and outgoing travelers, Liberia, Epi-week 43, 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
Airport	James S. Paynes	87	41	46	1	0	0	0	0
Airport	Robert Int'l Airport	3595	1815	1780	3507	0	88	0	0
Seaport	Freeport of Monrovia	296	148	148	296	0	0	0	0
	Buchanan Port	40	20	20	40	0	0	0	0
	Bo Water Side	424	278	146	409	0	15	0	0
Ground	Ganta	88	37	51	20	3	3	14	0
Crossing	Yekepa	175	28	147	31	3	0	0	0
	Loguatuo	396	193	203	378	0	0	0	0
Total		5,101	2560	2541	4682	6	106	14	0

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

Public Health Measures

National level

- ECOWAS One Health Simulation Exercise held at Murex Plaza Hotel & Suites in Monrovia
- Revision and validation of TORs for International Food Safety Authorities Network (INFOSAN) Focal Points and Case Definitions for Priority Foodborne Diseases was held at the Corina Hotel in Monrovia
- Ongoing IMS meeting for coordination and resource mobilization
- Produced and disseminated situation reports (Lassa fever, Measles, etc...)
- Produced and disseminated weekly bulletin
- Ongoing reclassification of suspected cases (Lassa fever, Yellow fever, AFP, and Measles) based on laboratory result

County-level

Surveillance

- Ongoing active case search and investigation for Mpox and AFP in Nimba, Lofa, and Grand Cape Mount Counties
- Production of situational reports
- Active case search ongoing in affected and surrounding communities
- o Multiple awareness on Mpox surveillance ongoing the 15 counties
- Maternal and new-born death review ongoing in counties

Case Management

- Administration of PEP
- Isolation, management, treatment, and active case search for Lassa fever and Measles cases ongoing in affected counties

Appendix

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

	of inimediately Reportable																			eq
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 Expect	ed 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		
ole	Acute Flaccid Paralysis (Suspected Polio)	A D	0	0	0 0	0	0	0	0	0	0	0	0	0	0 0	0	0	0	94 0	0
evental ases	Measles	A D	1 0	1 0	0	0	0	2	0	2	0	0 0	0	14 0	0	3	2	26 0	1596 0	195 0
Vaccine Preventable Diseases	Neonatal Tetanus	A D	0	0	0	0	0	0	0	0	0	0	0	0 0	0	0	0	1 0	21 10	0
Vac	Yellow fever	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	91 1	4
hagic	Dengue fever	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	6 0	0
Viral Hemorrhagic Fever	Ebola Virus Disease	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Viral H	Lassa fever	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2 0	180 30	27 11
enza- nesses	COVID-19	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	3	1
Influenza- Like Illnesses	Influenza	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	118 0	4 0
ses	Acute Bloody Diarrhoea (Shigellosis)	A D	0	0	0	1	0	0	2	9	0	0	0	0	2	2	2	18 0	344 0	17 0
Diarrheal Diseases	Severe Acute Watery Diarrhoea (Cholera)	A D	0	0	0	0	0	0	1	15 0	1	0	0	1	0	1	0	19 0	239 1	0
9	Maternal Mortality	D	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	255	Ť
blic	Neonatal Mortality	D	0	0	0	0	0	0	1	0	1	3	5	0	0	1	0	11	679	
Events of Public Heath Importanc	Adverse Events Following Immunization (AEFI)	A D	0	0	3	0	0	1	0	1	0	4 0	0	0	1 0	0	3	16 0	927 0	0
Even: Health	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
es	Мрох	A D	1 0	0	2	2	0	0	0	4 0	0	0	2	5	0	1	2	19 0	273 0	22 0
Diseas	Tuberculosis	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
ortable	Human Exposure to Rabies (Suspected Human Rabies)	A D	1	8	1	7	2	1	0	6	2	4	27 0	10 0	1	0	0	70 0	2502 2	0
Other Reportable Diseases	Meningitis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	21 0	2
\$	Unexplained Cluster of deaths	A D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
cal ses	Buruli Ulcer	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	123 0	2
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> TO	D	0	0 11	0 6	0 10	2	0 4	0 4	37	6	0 11	0 37	0 32	0	0	0	0 185	7516	287

D = Dead **A** = Alive

- **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
 - o County required on or before 5:00 pm every Monday to the national
- 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 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

Epidemiological bulletin published with support from WHO and CDC

For comments or questions, please contact

Alberta B. Corvah

Acting Director

Infectious Disease and Epidemiology Division National Public Health Institute of Liberia Republic of Liberia

Email: charleneout2011@hotmail.com

Phone: +231.77.030.3702 Website: <u>www.nphil.gov.lr</u>

National Public Health Institute of Liberia (NPHIL)

MISSION

To prevent and control public health threats by promoting healthy outcomes and serving as a source of knowledge

VISION

A centre of excellence to create health outcomes for Liberians through a strong preventive health system and expertise

EDITORIAL TEAM

DIDE / NPHIL

A. N. Mianah

J. S. Kokro

M.G. Jeuronlon

E. Dwalu

A.B. Corvah

S. K. Zayzay

T. L. Hall

S. L. Flomo

M. S. Quiah

J. O. Abel

P. J. Thomas

H. M. Sherman

M.D. Vaye

N. K. Dovillie

A. Coker

S. Nuwolo

M. Gbeyeah

E. Junius

H. Howard-Bridges

Ministry of Health WHO Liberia Office US CDC Liberia Office Africa CDC-Liberia Office

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.