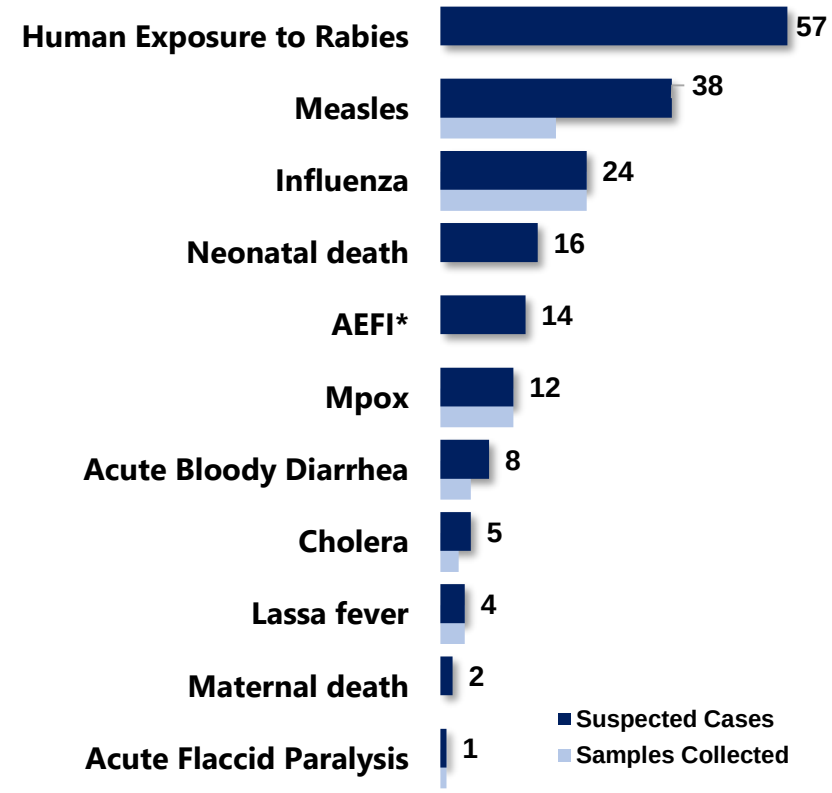
Liberia IDSR Epidemiology Bulletin

2025 Epi-week 11 (March 10 – 16, 2025)

Country Population: 5,737,021 | Volume 22 Issue 11 | March 10 – 16, 2025 | Data Source: CSOs from 15 Counties and Laboratory

Highlights

Figure 1. Public Health Events Reported



Adverse Event Following Immunization

Keynotes and Events of Public Health Significance

- **A total of 181 events** of public health importance, including **18 deaths** reported
- **Completeness and Timeliness** of health facility reports were **99%** and **99%,** respectively
- **Ongoing Lassa fever outbreak** in Grand Bassa County
- **Ongoing Measles outbreak** in five counties
- **Ongoing Mpox outbreak** in five counties

Reporting Coverage

Table 1. Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 11, 2025

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	64	63	63	99	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**	**942**	**938**	**99**	**99**

942(99%) Health facilities report IDSR data

98(100%) Health districts reported IDSR data

938(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

- Thirty-eight (38) suspected cases reported Nimba (13), Grand Kru (7), Bong (6), Sinoe (3), Grand Bassa (2), Montserrado (2), River Gee (1), Lofa (1), Gbarpolu (1), Rivercess (1), and Grand Gedeh (1) Counties
  - Nineteen (19) specimens were collected, seventeen received at the lab and pending testing
  - Fifty-seven percent (22/38) of the suspected cases were vaccinated for measles *(see Table 2)*
- Cumulatively, 400 suspected cases have been reported since Epi-week 1.
  - Proportion of suspected cases with sample collected 48% (193/400)

Table 2. Distribution and Vaccination Status of Measles Cases, Liberia, Epi-week 11, 2025

County	Reported cases	Vaccinated	Number of Doses Received		
			One Dose	*Two Doses*	*Doses Not Indicated*
Nimba	13	11	5	2	4
Grand Kru	7	4	4	0	0
Bong	6	0	0	0	0
Sinoe	3	1	1	0	0
Grand Bassa	2	2	0	1	1
Montserrado	2	2	1	1	0
River Gee	1	1	0	0	1
Lofa	1	0	0	0	0
Gbarpolu	1	1	0	1	0
Rivercess	1	0	0	0	0
Grand Gedeh	1	0	0	0	0
Total	**38**	**22**	**11**	**5**	**6**

Outbreak Section (January 6, 2022 – March 16, 2025)

- Nineteen (19) new clinically confirmed cases reported from Nimba (11), Bong (4), Grand Bassa (2), and Grand Kru (2) Counties
- A total of 13,598 confirmed cases including 95 deaths have been reported
- Cumulative Case Fatality Rate (CFR): 0.7% (95/13,598)
- Five counties currently in outbreak (Nimba, Bong, Grand Kru, Grand Bassa, and Maryland)

Table 3. Measles Outbreak by County and Case status, Liberia December 13, 2021 – March 16, 2025

County	Total Cases	Active	Recovery	Deaths	No. of Districts
Montserrado	5,373	0	5,304	69	0/7
Nimba	1,692	11	1,677	4	6/11
Grand Bassa	941	2	932	7	0/8
Margibi	803	0	802	1	0/4
Bong	593	4	586	3	1/9
Maryland	1,325	0	1,325	0	1/6
Lofa	292	0	292	0	0/6
Grand Kru	1,111	2	1,107	2	1/5
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	**13,598**	**19**	**13,484**	**95**	**9/98**

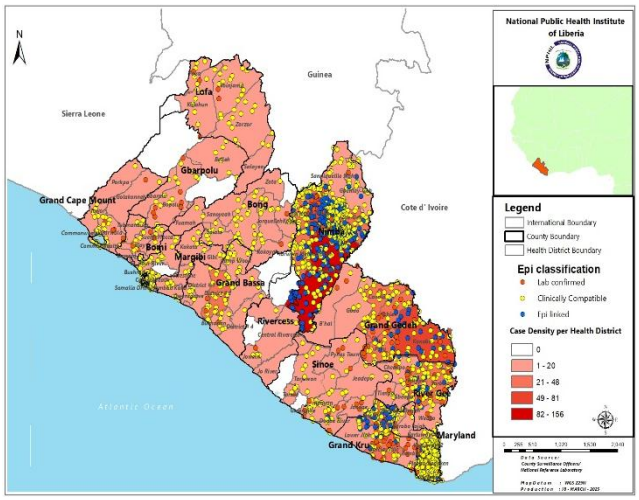


Figure 2. Measles outbreak by County and Case Status, Liberia, December 13, 2021 – March 16, 2025

PUBLIC HEALTH ACTION

I. Coordination

- The response has been led by the County Health Teams with technical support from the NPHIL, MoH, and partners.
- IMS meetings are being held for coordination and mobilization of resources in affected Counties

II. Epidemiological Surveillance

- Active case search ongoing in Nimba, Bong, Grand Kru and Maryland counties

III. Case management

- Cases are being treated on OPD basis and sent home for home-based care

IV. Immunization

- Routine immunization ongoing across the Country
- A one-day outreach plan for March 18, 2025, to vaccinated children 9-59 months in affected communities with support from WHO in Grand Bassa County

V. Laboratory

- Specimens were collected from Suakoko, Bain-Garr, Campwood, and Zoe-Geh districts, and pending testing

VI. Risk Communication & Community Engagement

- Awareness and health education on the prevention and control of measles ongoing in affected counties

Challenges

- Delay testing of samples from NPHRL
- Limited support for response

Neonatal Tetanus

- Zero cases were reported
- Cumulatively, 2 cases have been reported since Epi-week 1.

Acute Flaccid Paralysis (AFP)

- One (1) case was reported from Bong County
  - One specimen was collected and pending shipment
- Cumulatively, 14 cases have been reported since Epi-week 1.
  - 6 tested negative, 1 NPENT, 1 rejected, and 6 pending testing

Yellow Fever

- Zero suspected cases were reported
- Cumulatively, 14 suspected cases have been reported since Epi-week 1.
  - Proportion of suspected cases with samples collected (13/14) 93%

Mpox

- Twelve (12) suspected cases were reported from Grand Gedeh (4), River Gee (2), Grand Bassa (2), Maryland (1), Grand Kru (1), Margibi (1), and Bong (1) Counties
  - Specimens were collected and received at the lab, 8 tested negative, and 4 pending testing
- Cumulatively, 124 suspected cases have been reported, 114 samples collected with 100 tested: 7 positive and 93 negative

Outbreak Section (January 1, 2024 – March 16, 2025)

- **No new confirmed case reported**
- All contacts completed 21 days of follow-up
- A total of 70 confirmed cases were reported, with no death recorded
- Five (5) counties (Grand Bassa, Bong, Nimba, Montserrado, and Rivercess) are in the countdown.

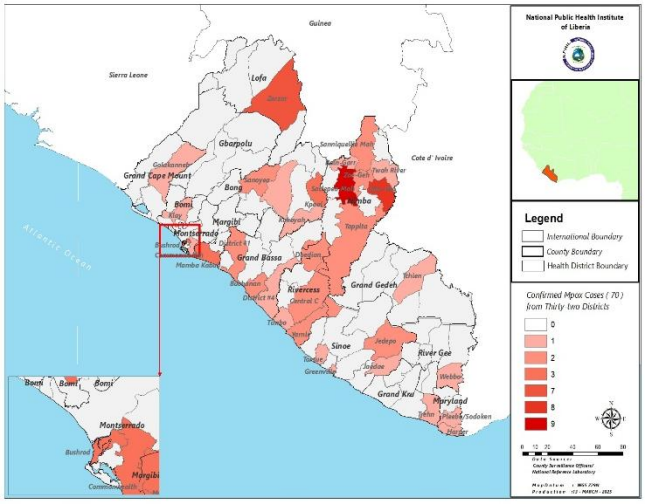
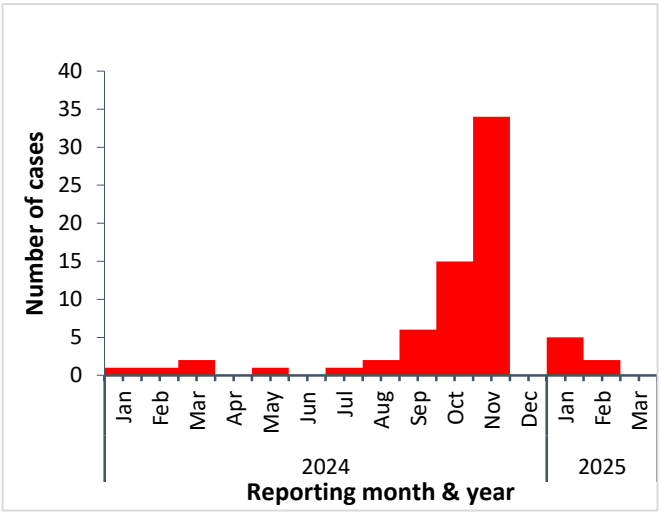


Figure 6. Distribution of Lab-confirmed Mpox cases by Health District, Liberia, January 1, 2024 – March 16, 2025



Epi-curve of Confirmed Mpox cases, Liberia, January 1, 2024 – March 16, 2025

PUBLIC HEALTH RESPONSE

I. Coordination

- Conduct regular IMS meetings at the national level to direct response efforts
- Production and dissemination of Sitreps

II. Epidemiological Surveillance

- Active media scanning and community case finding continue through the EIOS platform
- Continue to follow up with response counties to obtain updates on the status of the Mpox outbreak
- All contacts completed 21 days of follow-up

III. Case Management

- No confirmed case currently in isolation

IV. Laboratory

- Sequencing results showed Monkeypox virus Clade IIa and Clade IIb
- 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

NEXT STEPS

- Continue active case search in the affected communities
- Follow-up contacts that have been line listed

Dengue

- ☞ Zero suspected cases were reported
- ☞ Cumulatively, one (1) suspected cases were reported

Influenza-Like Illnesses

Influenza

- ☞ Twenty-four (24) cases were reported from Montserrado County
  - Specimens were collected, 21 tested negative, and 3 pending testing
- ☞ Cumulatively, 78 suspected cases reported since Epi-week 1.
  - Seventy-eight specimens were collected, 1 tested positive, 71 negative, 2 rejected, and 4 pending testing

Viral Haemorrhagic Fever

Lassa fever

- ☞ Four (4) suspected cases were reported from Montserrado (2) and Grand Bassa (2) Counties
  - Specimens were collected, 1 tested positive, 2 negative, and 1 pending testing
- ☞ Cumulatively, 41 suspected cases have been reported
  - Proportion of suspected cases with sample collected (41/41) 100%.
  - Proportion of suspected cases with sample tested (35/41) 85%
    - Nine positive and 26 negative

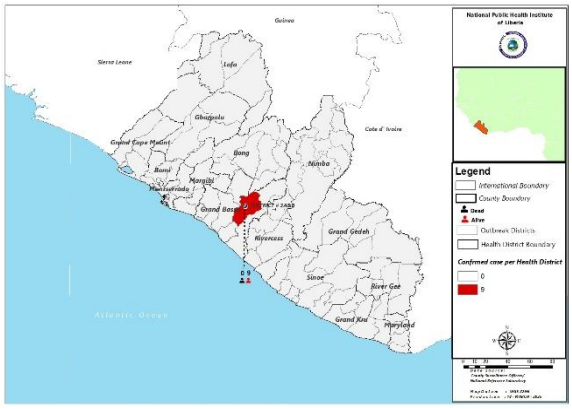


Figure 3. Geospatial distribution of confirmed Lassa fever by Health District, Liberia, Epi-week 11, 2025

Outbreak Section (January 6, 2022 – March 16, 2025)

- ☞ **One new confirmed case reported from Grand Bassa County**
- ☞ Six (6) contacts line listed undergoing 21 days follow-up
- ☞ A total of 186 confirmed cases including 56 deaths reported
- ☞ Cumulative Case Fatality Rate (CFR): 30% (56/186)
- ☞ One county is currently in the outbreak (Grand Bassa County)

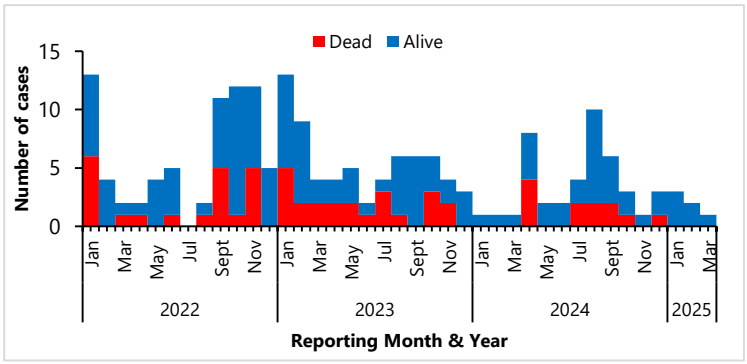


Figure 4: Epi-curve of Confirmed Lassa fever cases, Liberia, January 6, 2022 – March 16, 2025

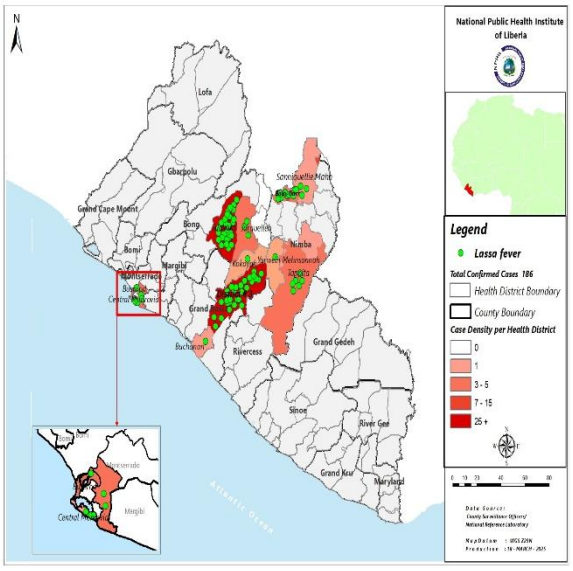


Figure 5. Geospatial distribution of outbreak district with number of confirmed Lassa fever cases, Liberia, January 6, 2022 – March 16, 2025

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
- Six (6) contacts line listed and undergoing 21 days follow up

- Grand Bassa County is currently in outbreak
- Weekly sit-reps developed and disseminated to stakeholders

III. Risk Communication and Community Engagement

- Risk communication and community engagement is being conducted in the affected communities

IV. Case management

- Ribavirin distributed to affected counties
- There is one confirmed case currently in isolation at LAC Hospital (Grand Bassa County)

V. Dead Body Management

- A total of 56 deaths have been recorded among confirmed cases
- Safe and dignified burials conducted for the deceased cases

VI. Laboratory

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 186 Lassa fever cases have been confirmed since this outbreak

Challenges

- There is currently limited ribavirin supply in the country
- Limited logistics (gasoline, communication cards, fuel, etc.) to support active case-finding
- Lack of support for contact training and active case search/investigation in affected counties

Table 4: Summary of Lassa fever Outbreak, Liberia, January 6, 2022 – March 16, 2025

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 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
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	3	1	0	0	0	0%	8	0	0	0	8	Completed	Ended
	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
	Suakoko	19-Nov-24	3	2	0	1	0	50%	8	5	0	0	8	Completed	Ended
Grand Bassa	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
	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	Completed	Ended
	District 3A&B	20-Dec-24	8	8	0	0	0	0%	13	2	0	6	13	Active	Ongoing
Nimba	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
	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	0	173	Completed	Ended
River Gee	Putupo	25-Nov-22	2	1	0	1	0	100%	14	0	0	0	14	Completed	Ended
Total			543	186	22	56	3	30%	1550	602	62	6	1460		

Legend: Outbreaks in countdown stage in reporting districts; Active/ ongoing outbreaks not in countdown stage with active response interventions in reporting districts

Diarrheal Diseases

Acute Bloody Diarrhoea (Shigellosis)

- Eight (8) suspected cases were reported from Maryland (2), Bomi (1), Margibi (1), Sinoe (1), Lofa (1), River Gee (1), and Gbarpolu (1) Counties
  - Five specimens were collected, 2 tested negative, 1 positive, and 2 pending testing
- Cumulatively, 112 suspected cases have been reported since Epi week 1.
  - Sixty-nine (69) specimens were collected, 49 received at the lab, 43 tested negative, 4 positive, and 2 pending testing

Severe Acute Watery Diarrhoea (Cholera)

- Five (5) suspected cases were reported from Maryland (2), Lofa (2), and Rivercess (1) Counties
  - Three specimens were collected, 1 received at the lab, and 2 pending arrival at the Lab
- Cumulatively, 113 suspected cases have been reported since Epi week 1.
  - Fifty-two (52) specimens were collected, 23 received at the lab, 22 tested negative, and 1 pending testing

Events of Public Health Importance

Maternal Mortality

- Two (2) deaths were reported from Montserrado County
- Primary causes of death were sepsis (1) and 1 pending review
- Cumulatively, 40 deaths have been reported, of which (37/40) 92% were reported from health facilities.
  - Proportion of deaths reviewed (25/40) 62%.

Neonatal Mortality

- Sixteen (16) deaths were reported from Montserrado (9), River Gee (2), Grand Kru (2), and Grand Gedeh (1) Counties, including 2 accounting for perinatal deaths from Bong and Lofa
- Primary causes of death were asphyxia (12), sepsis (3), and preterm (1)
- Cumulatively, 188 deaths have been reported since Epi-week 1.
  - Proportion of deaths reviewed (118/188) 63%

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

- Fourteen (14) events were reported from Sinoe (4), Lofa (4), Rivercess (2), Gbarpolu (2), River Gee (1) and Montserrado (1) Counties
- Related vaccines included Penta (9), Pneumo (3), IPV (1), and Yellow fever (1)
- Cumulatively, 163 events have been reported since Epi-week 1.

Other Reportable Diseases

Animal bite (Human Exposure to Rabies)

- Fifty-seven (57) dog bite cases were reported from Montserrado (15), Nimba (10), Maryland (7), Bong (6), Sinoe (4), Margibi (3), Gbarpolu (3), Grand Cape Mount (2), Lofa (2), Grand Bassa (2), Bomi (1), Grand Kru (1) and Grand Gedeh (1) Counties
  - Proportion of cases investigated is 47% (27/57)
  - PEP was administered to 2 persons in Bomi County
- Cumulatively, 780 cases have been reported since Epi-week 1.

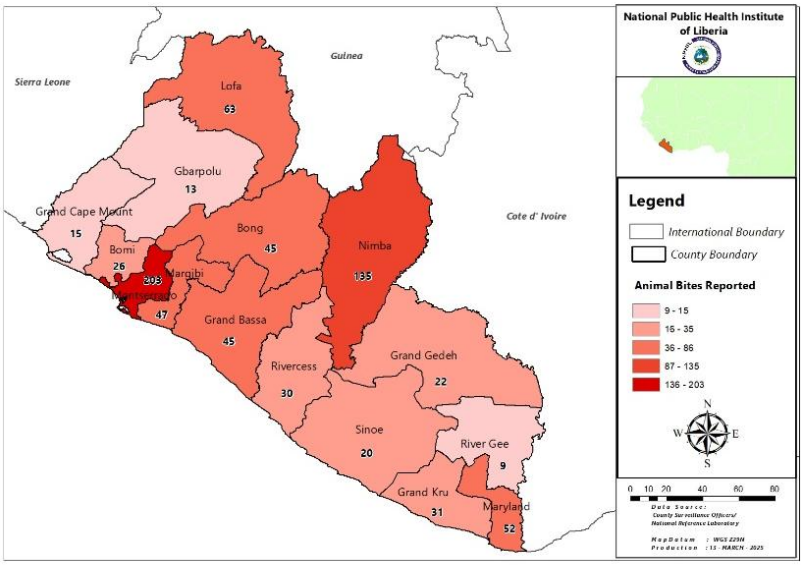


Figure 6. Geospatial distribution of Human Exposure to Animal Bites Cases by County, Liberia, Epi-week 1 - 11, 2025

Meningitis

- Zero suspected cases were reported
- Cumulatively, 6 suspected cases have been reported
  - Proportion of specimen collected (5/6) 83%,
  - Proportion of specimens tested (5/6) 83%

Border Surveillance Update

- A total of 6,597 travellers were screened at eight (8) designated out of forty-five (45) official Points of Entry, with incoming travellers accounting for 53% (3,496/6,597) (*Table 5*).

Table 5. Cross-border activity at the POE for incoming and outgoing travelers, Liberia, Epi-week 11, 2025

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	34	15	19	0	0	0	0	0
	Robert Int'l Airport	5003	2691	2312	4950	2	53	16	0
Seaport	Freeport of Monrovia	306	153	153	306	0	0	0	0
	Buchanan Port	162	81	81	162	0	0	0	0
Ground Crossing	Bo Water Side	458	251	207	453	0	5	0	0
	Ganta	107	46	61	33	0	0	0	0
	Yekepa	178	84	94	52	0	0	0	0
	Loguatuo	349	175	174	339	0	0	0	0
Total		**6,597**	**3,496**	**3,101**	**6,295**	**2**	**58**	**16**	**0**

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

Public Health Measures

National level

- Ongoing rollout training for Mpox Vaccination in Margibi County supported by WHO and African CDC
- Ongoing IDSR/EBS training in Grand Kru, Maryland, Sinoe, Rivercess, and River Gee Counties with support from Global Fund through PLAN International
- Ongoing IMS meeting for coordination and resource mobilization
- Produced and disseminated situation reports (Lassa fever and Mpox, etc...)
- Ongoing reclassification of suspected cases (Lassa fever, Mpox, AFP, and Measles)
- Production and Dissemination of Weekly Epidemiological Bulletin

County-level

- **Surveillance**
  - Ongoing active case search and investigation for Mpox in affected counties
  - Production of situational reports
  - Active case search ongoing in affected and surrounding communities
  - Awareness on Mpox surveillance ongoing across 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

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 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	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	14	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Measles	A	0	6	1	2	0	1	7	1	0	0	2	13	1	1	3	38	400	0
		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	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
	Mpox	A	0	1	0	2	0	4	1	0	1	1	0	0	0	2	0	12	124	7
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Yellow fever	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
Viral Hemorrhagic Fever	Dengue fever	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
	Ebola Virus Disease / Marburg 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	0	0	2	0	0	0	0	0	0	2	0	0	0	0	4	41	9
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Influenza-Like Illnesses	COVID-19	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
	Influenza	A	0	0	0	0	0	0	0	0	0	0	24	0	0	0	0	24	78	1
		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	1	0	0	0	0	1	1	2	0	0	0	1	1	8	112	4
		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	2	0	2	0	0	1	0	0	5	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Events of Public Health Importance	Maternal Mortality	D	0	0	0	0	0	0	0	0	0	0	2	0	0	0	0	2	0	
	Neonatal Mortality	D	0	1	0	0	0	1	2	1	0	0	9	0	0	2	0	16	188	
	Adverse Events Following Immunization (AEFI)	A	0	0	2	0	0	0	0	4	0	0	1	0	2	1	4	14	163	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Unexplained Cluster of Health Events/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
Other Reportable Diseases	Tuberculosis	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
	Human Exposure to Rabies (Suspected Human Rabies)	A	1	6	3	2	2	1	1	2	3	7	15	10	0	0	4	57	780	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Meningitis	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
	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			2	15	7	8	2	7	11	11	5	12	55	23	4	7	12	181	1900	21

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 12:00 noon 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 2025 (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

Ralph W. Jetoh, MD
Director
Infectious Disease and Epidemiology Division
National Public Health Institute of Liberia
Republic of Liberia
Email: ralphica2000@gmail.com
Phone: +231.77.737.2655/ +231.88.652.6388
Website: www.nphil.gov.lr

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

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.