



Liberia IDSR Epidemiology Bulletin

Epi-week 23 (June 1 – 7, 2026)

Country Population: 5,917,615

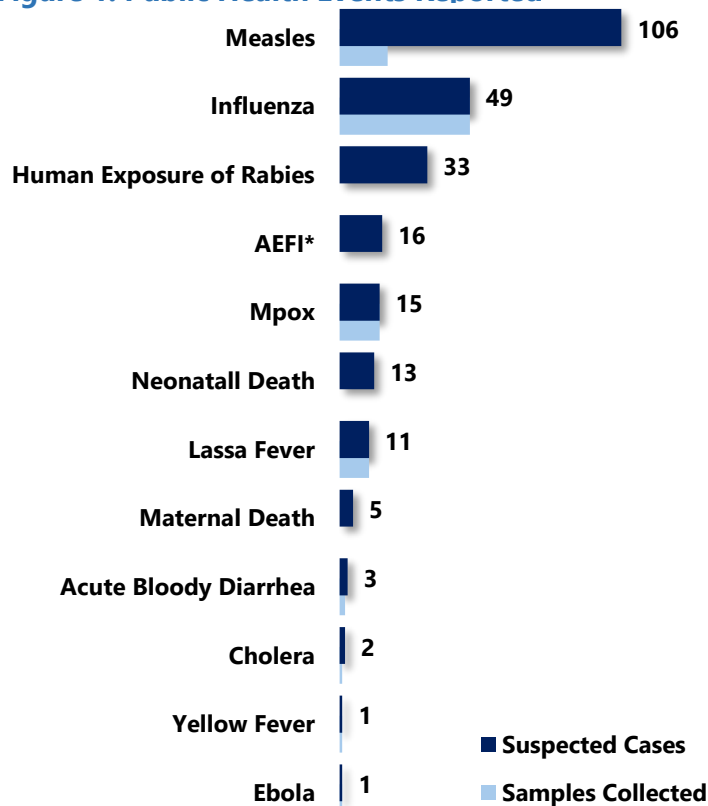
Volume 23 Issue 23

June 1 – June 7, 2026

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 255 events** of public health importance, including **20 deaths**, were reported
- ♦ **Completeness and Timeliness** of health facility reports were **99% and 98%** respectively
- ♦ **Ongoing Mpox outbreak** in seven counties
- ♦ **Ongoing Measles outbreak** in eleven counties
- ♦ **Ongoing Lassa fever outbreak** in three counties

Reporting Coverage

Table 1. Health Facility Weekly IDSR Reporting Coverage, Liberia, Epi-week 23, 2026

County	Expected Reports from Health Facility	Reports Received	Received on Time	Completeness (%)	Timeliness (%)
Bomi	33	33	33	100	100
Bong	63	62	62	98	98
Gbarpolu	18	18	18	100	100
Grand Bassa	48	48	48	100	94
Grand Cape Mount	38	37	37	97	97
Grand Gedeh	25	25	25	100	100
Grand Kru	25	25	24	100	96
Lofa	76	76	76	100	100
Margibi	68	67	67	99	99
Maryland	28	28	25	100	89
Montserrado	374	368	361	98	97
Nimba	108	108	108	100	100
Rivercess	22	22	22	100	100
River Gee	21	21	21	100	100
Sinoe	42	42	42	100	100
Liberia	989	980	969	99	98

980(99%)
Health facilities report IDSR data

98(100%)
Health districts reported IDSR data

969(98%)
Health facilities reported timely IDSR data

Legend:

≥80

<80

♦ The national target for weekly IDSR reporting is 80%. All counties reported on time except River Gee. Health facility timeliness is monitored at the health district level.

Vaccine-Preventable Diseases

Measles

One hundred six (106) suspected cases were reported (*see Outbreak section*): Bong (28), Montserrado (25), Grand Bassa (14), Maryland (7), Rivercess (5), Gbarpolu (5), Grand Gedeh (5), Nimba (4), Grand Cape Mount (3), Bomi (3), River Gee (3), Lofa (2), and Grand Kru (2) Counties

(Samples are not collected in outbreak districts)

- Forty-seven percent (50/106) of the suspected cases were vaccinated for measles (*see Table 2*)
- Cumulatively, five thousand ninety-five (5,095) suspected cases have been reported including 21 deaths since Epi-week 1
- Lab confirmed-411, Epi-linked- 468, Clinically compatible-3,956, non-measles discarded-242, indeterminate-10 and 8 rejected
- Proportion of suspected cases with specimen tested: 62% (663/1066)
- Proportion of non-measles discarded tested for Rubella 97% (235/242)
 - Negative – 217 and positive – 18
- Liberia's annualized non-measles febrile rash illness rate is now 9.2 per 100,000 population

Table 2: Distribution and Vaccination Status of Measles Cases, Liberia, Epi – week 23, 2026

County	Reported cases	Vaccinated	Number of Doses Received		
			One Dose	Two Doses	Doses Not Indicated
Bomi	3	1	1	0	0
Bong	28	10	9	0	1
Gbarpolu	5	4	4	0	0
Grand Bassa	14	3	1	0	2
Grand Cape Mount	3	2	2	0	0
Grand Gedeh	5	4	4	0	0
Grand Kru	2	1	1	0	0
Lofa	2	1	1	0	0
Maryland	7	2	2	0	0
Montserrado	25	17	8	2	7
Nimba	4	1	1	0	0
River Gee	3	3	0	0	3
Rivercess	5	1	1	0	0
Total	106	60	35	2	13

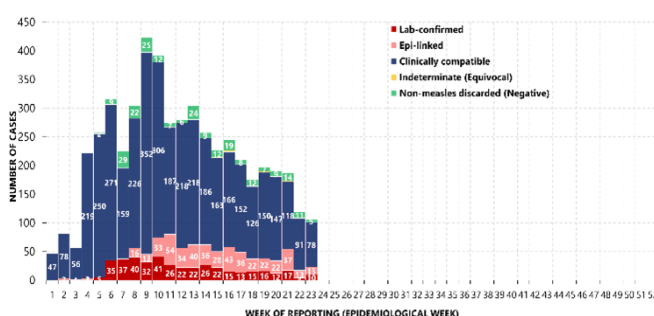


Figure 2: Distribution of Measles Cases by Reporting Week and Epi-classification, Liberia, Epi-week 1 – 23, 2026

Table 3: Classification of Measles, reporting rate, and annualized non-measles rash illness rate per 100,000 populations by county, Liberia, Epi-week 1 – 23, 2026

Reporting County	Epi-classification					Cumulative	Annualized Non Measles Febrile Rash Illness Rate
	Lab confirmed	Epi-linked	Clinically compatible	Indeterminate (Equivocal)	Discarded (Negative)		
Bomi	35	0	83	0	10	128	14.8
Bong	25	1	1078	1	12	1117	5.3
Gbarpolu	15	111	25	0	8	159	18.1
Grand Bassa	88	75	310	2	38	513	27.0
Grand Cape Mount	28	0	26	0	15	69	17.2
Grand Gedeh	10	16	14	1	19	60	16.9
Grand Kru	6	0	21	0	4	31	6.9
Lofa	63	19	98	2	41	223	23.3
Margibi	38	110	67	0	12	227	8.0
Maryland	1	6	4	0	2	13	2.4
Montserrado	21	2	1874	0	9	1906	0.9
Nimba	36	67	164	1	30	298	10.0
River Gee	9	0	15	2	7	33	10.6
Rivercess	14	41	160	0	3	218	7.0
Sinoe	22	20	25	1	32	100	42.9
Liberia	411	468	3964	10	242	5095	9.2
Target Achieved	≥2		Below Target		<2		

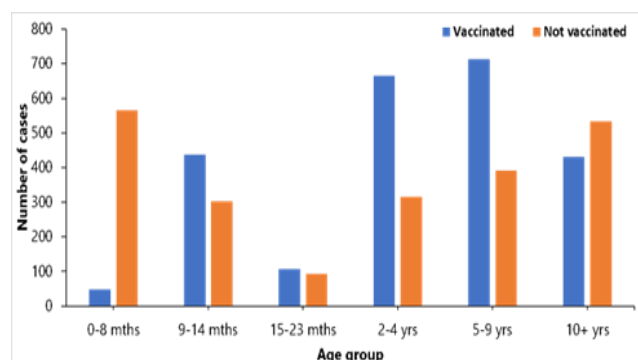


Figure 3: Vaccination status of suspected Measles Cases by Age-group, Liberia, Epi-week 1 – 23, 2026

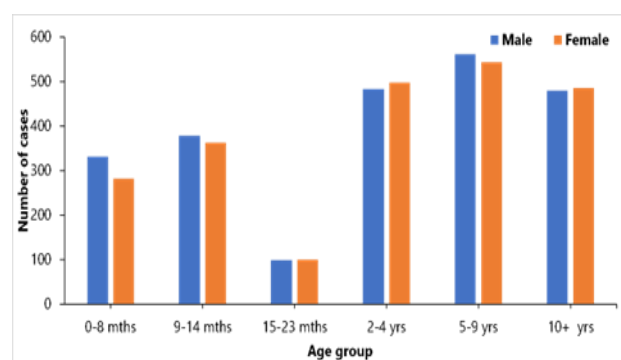


Figure 4: Suspected Measles Cases by Age-group and Sex, Liberia, Epi-week 1 – 23, 2026

Outbreak Section (December 13, 2021 – June 11, 2026)

- Eighty-eight (88) new confirmed cases reported: Bong-25, Montserrado-25 *including 1 death*, Grand Bassa-13, Maryland-6, Gbarpolu-5, Rivercess-5, Nimba-4, Bomi-3 Lofa-2, Counties
- A total of 20,843 confirmed cases including 117 deaths have been reported.
- Cumulative Case Fatality Rate (CFR): 0.5% (117/20,843)

Table 4. Measles Outbreak by County and Case Status, Liberia, December 13, 2021 – June 11, 2026

County	Total Cases	Active	Recovery	Deaths	No. of Districts
Montserrado	7,718	24	7,616	78	7/7
Nimba	2,455	4	2,446	5	11/11
Grand Bassa	1,534	13	1,514	7	8/8
Margibi	1067	0	1064	3	4/4
Bong	1,775	25	1,740	10	7/9
Maryland	1,456	6	1450	0	1/6
Lofa	692	2	689	1	4/6
Grand Kru	1,199	0	1,197	2	0/5
Grand Cape Mount	316	0	313	3	0/5
Bomi	321	3	313	5	4/4
Rivercess	353	5	346	2	6/6
Gbarpolu	272	5	266	1	3/5
Grand Gedeh	822	0	822	0	0/6
River Gee	346	0	346	0	0/6
Sinoe	517	0	517	0	4/10
Total	20,843	87	20,639	117	59/98

PUBLIC HEALTH ACTION

Coordination

- The County Health Teams have led the response with technical and logistical support from the NPHIL, MoH, and partners.

Epidemiological Surveillance

- Forty-four (44) contacts undergoing follow up from: Bong – 27, Grand Bassa – 24 and Lofa – 20

Case management

- Cases are undergoing treatment with Antibiotics, PCM, Calamine Lotion and Vitamin A.
- Six (6) cases are admitted in health facility from Bong County, while 81 cases are managed through home-based care

Immunization

- Routine immunization ongoing across the Country

Laboratory

- NPHRL continues to test measles specimens

Risk Communication & Community Engagement

- Health facilities are educating patients and caregivers on measles signs and symptoms during outpatient visits.
- Community Health Workers are mobilizing communities and creating awareness on the prevention and control of measles across affected towns and villages.

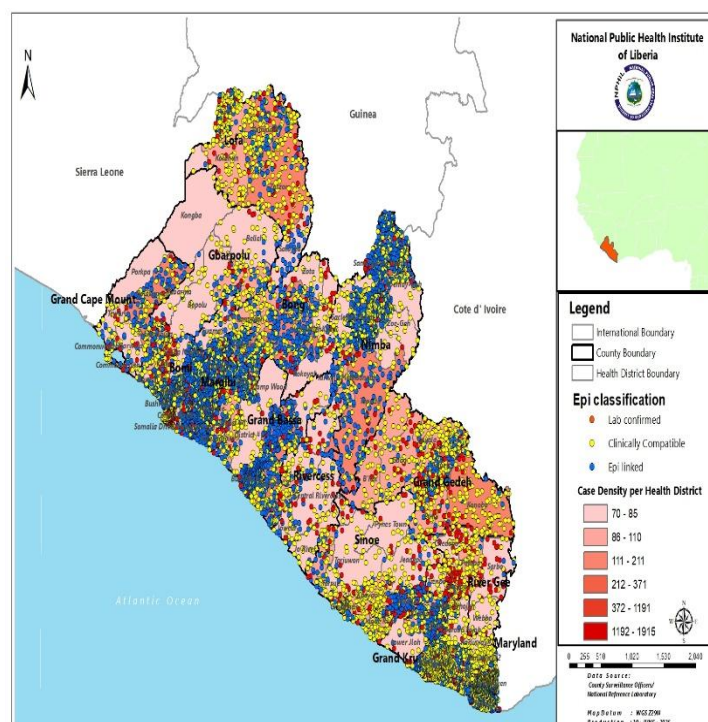


Figure 5: Geographical Distribution of Confirmed Measles Cases by Health District, Liberia, December 28, 2021 – June 11, 2026

Neonatal Tetanus

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

Acute Flaccid Paralysis (AFP)

- Zero suspected cases were reported
- Cumulatively, nine (9) cases have been reported since Epi-week 1

Yellow Fever

- One suspected case was reported from Grand Kru
 - Specimen was collected and pending testing
- Cumulatively, twenty (20) suspected cases have been reported since Epi-week 1
 - 1 presumptive positive, and 15 negatives

Mpox

- Fifteen (15) suspected cases were reported: Montserrado (5), Bomi (3), Grand Bassa (3), Grand Kru (2), Nimba (1) and Margibi (1) Counties
 - Fifteen specimens were collected: 14 negatives and 1 pending testing
- Cumulatively, eight hundred sixty-five (865) suspected cases have been reported since Epi-week 1
 - Eight hundred fifty-four (854) specimens collected, 799 received at the NRL, tested: 163 positive and 607 negative, 13 indeterminate and 16 rejected

Mpox Outbreak Section (December 31, 2025 – June 11, 2026)

- One (1) new confirmed case reported from Lofa County
- Eight (8) new suspected cases were reported: Montserrado (6), Bomi (1) and Lofa (1) Counties
- One thousand six hundred seventy-two (1,672) total confirmed cases reported since declaration of Mpox as Public Health Emergency of Continental and International Concern by the Africa CDC and WHO, respectively

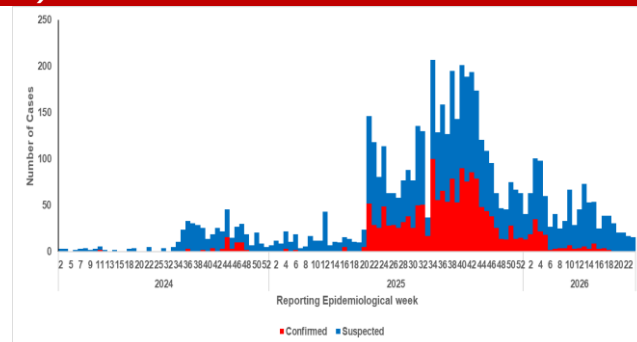


Figure 6: Epi-curve of suspected and confirmed Mpox cases, Liberia, December 29, 2025 – June 11, 2026

PUBLIC HEALTH RESPONSE

I. Coordination

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

II. Epidemiological Surveillance

- Active media scanning and community case finding continue through EIOS platform
- Continuous follow-up with response counties to obtain updates on status of Mpox outbreak
- Thirty-four (34) contacts undergoing follow up in Nimba (30) and Lofa (4) Counties

III. Case management

- One (1) confirmed active case in isolation in Nimba County
- Cases are being managed in isolation facilities and home-based across the country

IV. Laboratory

- Sequencing results showed Mpox virus Clade IIa and Clade IIb
- The National Public Health Reference Laboratory continues the testing of Mpox specimens

V. Risk Communication & Community Engagement

- Ongoing community awareness via community radio stations in partnership between the RCCE team and affected County Health teams

VI. Immunization

- Mpox vaccination exercise ongoing in affected counties targeting contacts

Influenza-Like Illnesses

Influenza

- Forty-nine (49) suspected cases were reported: Montserrado (33), Maryland (9), Nimba (4), Bong (3) and Counties
 - Specimens were collected: 34 tested negative, 1 positive and 14 pending testing
- Cumulatively, four hundred twenty-one (421) suspected cases have been reported since Epi-week 1.
 - Four hundred-twenty (420) specimens were collected, 4 tested positive, 4 indeterminates, 373 negative and 10 samples were discarded

COVID – 19

- Zero suspected cases were reported
- Cumulatively, zero suspected case was reported since Epi-week 1

Viral Haemorrhagic Fever

Lassa fever

- Eleven (11) suspected cases were reported: Bong (4), Nimba (2), Montserrado (2), Margibi (1), Lofa (1) and Grand Bassa (1) Counties
 - Specimens were collected: 8 negative, 2 positive and 1 pending testing
- Cumulatively, one hundred-three (103) suspected cases have been reported since Epi-week 1
 - Proportion of suspected cases with specimen collected (101/103) 98%
 - Proportion of suspected cases with specimen received by Lab: (94/101) 93%
 - Proportion of suspected cases with specimen tested (93/101) 92%
 - Twenty-three (23) positive, including **9 deaths**, (70) negative
 - Case Fatality Rate: 38%



Figure 7: Geospatial distribution of confirmed Lassa fever by Health District, Liberia, Epi-week 23, 2026

Lassa fever Outbreak Section (January 6, 2022 – June 10, 2026)

- Two (2) new confirmed case reported: Nimba and Bong Counties
- One new death reported from Nimba County
- Six (6) new suspected cases from: Nimba (2), Montserrado (2), Bong (1) and Grand Bassa (1) Counties
- Total of 58 contacts undergoing 21 days follow up
- Total of 242 confirmed cases, including 75 deaths, reported since January 2022 to June 10, 2026
- Cumulative Case Fatality Rate (CFR): 31% (75/245)
- Three counties (Bong, Nimba and Grand Bassa) are currently in outbreak

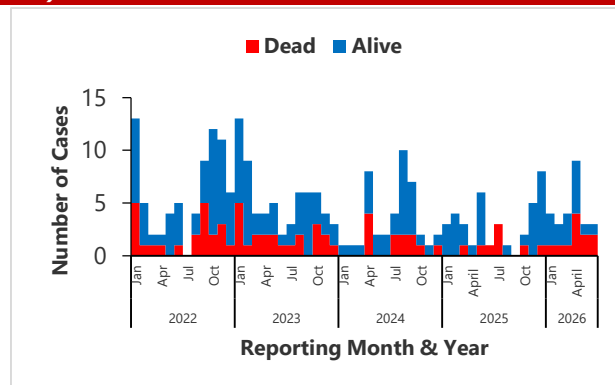


Figure 8: Epi-curve of Confirmed Lassa fever cases, Liberia, January 6, 2022 – June 10, 2026

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

- Continuous follow up with the counties in response mode for updates on status of Lassa fever outbreak
- Active case search ongoing in affected communities
- There are 58 active contacts undergoing 21 days follow up (Nimba – 17, Bong – 29 and Bassa – 12)
- Three counties (Bong, Nimba, Grand Bassa) are currently in outbreak
- Developed and disseminated weekly sitreps to stakeholders

- NPHIL is conducting a training for 48 healthcare workers from June 8–12, 2026, at Kendeja RLJ Resort and Villas to strengthen case detection and management, with support from the Africa Centers for Disease Control and Prevention.

III. Risk Communication and Community Engagement

- Community engagement and health education conducted in affected district/communities

IV. Case management

- There is one active case undergoing treatment at Phebe Hospital in Bong County

V. Dead Body Management

- A total of 75 deaths 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 specimens

Dengue

- ☞ Zero suspected cases were reported
- ☞ Cumulatively, zero suspected cases have been reported since Epi-week 1

Ebola Virus Disease/Marburg

- ☞ One suspected case was reported from Lofa County
 - Specimen was collected and tested negative
- ☞ Cumulatively, one suspected case has been reported since Epi-week 1

Diarrheal Diseases

Acute Bloody Diarrhoea (Shigellosis)

- ☞ Two (2) suspected case was reported from Sinoe and River Gee Counties
 - Specimens were collected and pending testing
- ☞ Cumulatively, one hundred-sixteen (116) suspected cases have been reported since Epi week 1
 - Ninety (90) specimens were collected, 60 received at the lab, 50 tested negative and 10 rejected

Severe Acute Watery Diarrhoea (Cholera)

- ☞ Three (3) suspected cases were reported: Bong (2) and Rivercess (1) Counties
 - One specimen was collected and pending testing
- ☞ Cumulatively, eighty-four (84) suspected cases have been reported since Epi week 1
- ☞ Fifty-four (54) specimens were collected, 41 received at the Lab, 33 negative and 8 rejected

Events of Public Health Importance

Maternal Mortality

- ☞ Five (5) deaths were reported: Montserrado (3), Margibi (1) and Grand Bassa (1) Counties
- ☞ Primary causes of death were: Eclampsia (1), prolonged labor (1), and (3) pending investigation
- ☞ Eighty percent of the death occurred at Health facility
- ☞ Cumulatively, one hundred thirty-five (135) deaths have been reported since Epi week 1, of which 122/135 (90%) were reported from health facilities
- ☞ Proportion of deaths reviewed: 115/135 (85%)

Neonatal Mortality

- ☞ Thirteen (13) deaths were reported: Montserrado (7), Grand Kru (3), Sinoe (1), Bomi (1) and Gbarpolu (1) Counties ([see Table 4](#))
- ☞ Primary causes of death were: Birth Asphyxia (11), Sepsis (1), and Malaria in pregnancy (1),
- ☞ hundred percent of the death occurred at Health facility
- ☞ Cumulatively, four hundred thirty-six (436) deaths have been reported since Epi-week 1
- ☞ Proportion of deaths reviewed is 279/436 (64%)

Table 5. Distribution of Neonatal Mortality per county and category, Epi-Week 23

County	Neonatal Death	Perinatal Death	Still Birth
Montserrado	0	7	0
Grand Kru	0	3	0
Sinoe	0	1	0
Bomi	1	0	0
Gbarpolu	1	0	0
Total	2	11	0

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

- Sixteen (16) events were reported: Sinoe (5), Grand Gedeh (4), Montserrado (2), Rivercess (1), Bomi (1), Gbarpolu (1), Grand Bassa (1) and Nimba (1) Counties
- All reported events were categorized as **non-serious**
- Related vaccines included: Penta (5), Measles (5), OPV (2), Pneumo (2), Yellow Fever (1) and Typhoid Conjugate (1)
- Cumulatively, four hundred sixty-six (466) **non-serious** events have been reported since Epi-week 1

Other Reportable Diseases

Animal bite (Human Exposure to Rabies)

- Thirty-three (33) dog bite cases were reported: Montserrado (9), Nimba (6), Margibi (6), Sinoe (3), Lofa (3), Maryland (2), Bomi (1), Grand Kru (1), Gbarpolu (1) and Grand Cape Mount (1) Counties
- Proportion of cases investigated is 61% (20/33)
- PEP administered to 2 persons in Montserrado County
- Cumulatively, nine hundred-sixteen (916) cases have been reported including **2 deaths** since Epi-week 1

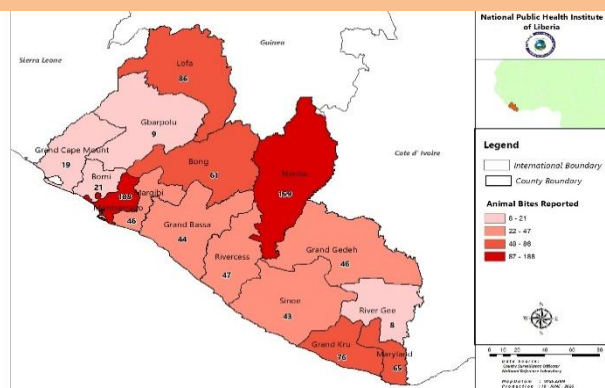


Figure 9: Geospatial distribution of Human Exposure to Rabies Cases by County, Liberia, Epi-week 1-23, 2026

Meningitis

- Zero suspected case were reported
- Cumulatively, five suspected cases have been reported since Epi-week 1
 - Five (5) specimens collected, 2 received at the NRL, tested: 1 positive and 1 negative

Buruli Ulcer

- Zero suspected cases were reported
- Cumulatively, zero suspected cases have been reported since Epi-week 1

Unexplained Cluster of Death

- Zero suspected cases were reported
- Cumulatively, zero suspected cases have been reported since Epi-week 1

Border Surveillance Update

- A total of 7,054 travellers were screened at eight (8) designated out of forty-five (45) official Points of Entry, with incoming travellers accounting for 50% (3,492/7,054) (Table 4).

Table 6. Cross-border activity at the POE for incoming and outgoing travelers, Liberia, Epi-week 23, 2026

Type of Ports	Point of Entry	Weekly Total	Arrival	Departure	Total travellers with YB	Yellow Book Damage	Card Replaced	Travelers Vaccinated against YF & Issued book	Alerts detected/ Verified
Airport	James S. Paynes	45	25	20	0	0	0	0	0
	Robert Int'l Airport	4,767	2,385	2,382	4,731	0	39	9	0
Seaport	Freeport of Monrovia	328	164	164	328	0	0	0	0
	Buchanan Port	180	90	90	180	0	0	0	0
Ground Crossing	Bo Water Side	683	329	354	653	0	30	0	0
	Ganta	341	153	188	125	0	0	10	0
	Yekepa	290	117	173	43	0	0	0	0
	Loguatu	400	229	171	380	0	19	20	0
Total		7,034	3,492	3,542	6,440	0	88	39	0

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

Public Health Measures

National level

- Heightened screening at RIA for travelers including Hajj returnees
- Conducted training for Port Health staff on the use of electronic health declaration forms
- Ongoing Ebola Virus disease preparedness coordination meeting
- Ongoing weekly IMS coordination meetings for Mpox
- Conducted weekly Epi Bulletin Review Meeting to harmonize and validate reports.
- Production and Dissemination of Weekly Epidemiological Bulletin
- Production and dissemination of situation reports (Lassa fever, Measles and Mpox)

County-level

- **Surveillance**
 - Heightened screening at all official Points of Entry
 - Ongoing active case search and investigation for Mpox, Measles and Lassa fever outbreaks in affected counties
 - Production of situational reports
 - Continual follow-up with CHAs, CHPs, and CHSSs to heighten surveillance activities in the community
 - Awareness and sensitization of Mpox surveillance is ongoing across the 15 counties
- **Case Management**
 - Isolation, management, treatment, and active case search for Lassa fever, Mpox, and Measles cases are ongoing in affected counties
- **Immunization**
 - Ongoing vaccination for contacts

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			0	0	0	8	5	6	5	6	4	6	7	11	6	6	10	98		
Vaccine Preventable Diseases	Acute Flaccid Paralysis (Suspected Polio)	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	9	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Measles	A	3	28	5	14	3	5	2	2	0	7	24	4	5	3	0	105	5,095	411
		D	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	1	21	0
	Neonatal Tetanus	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
		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	1	0	0	0	0	0	0	0	0	1	20	1
		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	A	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	1	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	4	0	1	0	0	0	1	1	0	2	1	0	0	0	10	103	23
		D	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	9	9
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	3	0	0	0	0	0	0	0	9	33	4	0	0	0	49	421	4
		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	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	2	116	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	2	0	0	0	0	0	0	0	0	0	0	1	0	0	3	84	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	1	0	0	0	0	1	0	3	0	0	0	0	5	135	
	Neonatal Mortality	D	1	0	1	0	0	0	3	0	0	0	7	0	0	0	1	13	436	
	Adverse Events Following Immunization (AEFI)	A	1	0	1	1	0	4	0	0	0	0	2	1	1	0	5	16	466	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	Mpox	A	3	0	0	3	0	0	2	0	1	0	5	1	0	0	0	15	865	163
		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	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	0	1	0	1	0	1	3	6	2	9	6	0	0	3	33	916	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2	0
	Meningitis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	5	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			9	37	8	20	4	9	9	7	9	18	86	18	7	4	10	255	8705	611

D = Dead A = Alive

- ☞ **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 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: $\geq 2/100,000$)
- ☞ **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 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 are 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.