



SITUATION REPORT

Nigeria Centre For Disease Control and Prevention (NCDC)

NCDC.GOV.NG

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TITLE:	UPDATE ON MPOX IN NIGERIA
SERIAL NUMBER:	16
EPI-WEEK:	40
DATE:	October 6, 2024

Table 1: Summary

Reporting Year	Reporting week	Confirmed (Suspected) cases	Death (Confirmed cases)	Case Fatality Rate %(CFR)	States Affected (Confirmed cases)	LGAs Affected (Confirmed cases)
2024 Current	Week 40	6(47)	0	0.0	3 + FCT	6
2024 Cumulative	Week 1-40	94(1297)	0	0.0	25 + FCT	63
2023 Cumulative	Week 1- 52	98(1182)	2	2.0	25 +FCT	65

Highlights

- 47 new suspected cases were reported in Epi week 40, 2024, compared with 67[†] cases reported in the previous week (Epi week 39).
- Six (6) confirmed cases were reported in week 40 compared with ten (10)[†] confirmed case reported in week 39, 2024.
- Twenty-five (25) States + FCT have recorded at least one confirmed case across sixty-three (63) Local Government Areas in 2024
- Since September 2017, 5114 suspected cases have been reported from 36 states and FCT, with 1180 confirmed cases (23.1%) from 35 States and FCT with seventeen (17) deaths. Males (~70%) are predominantly affected.
- The National Mpx multi-sectoral & multi-partner Emergency Operation Centre (EOC) continues to coordinate the response.
- [†] Epi week 39 had a backlog of 13 reported cases (4 confirmed cases)

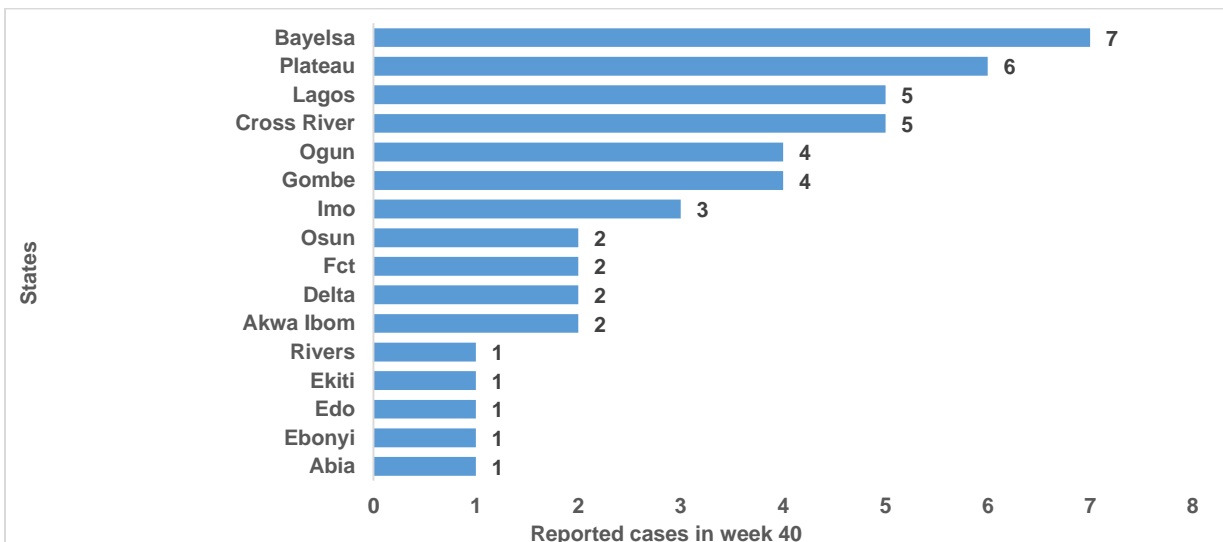


Fig 1: Suspected cases recorded in Week 40

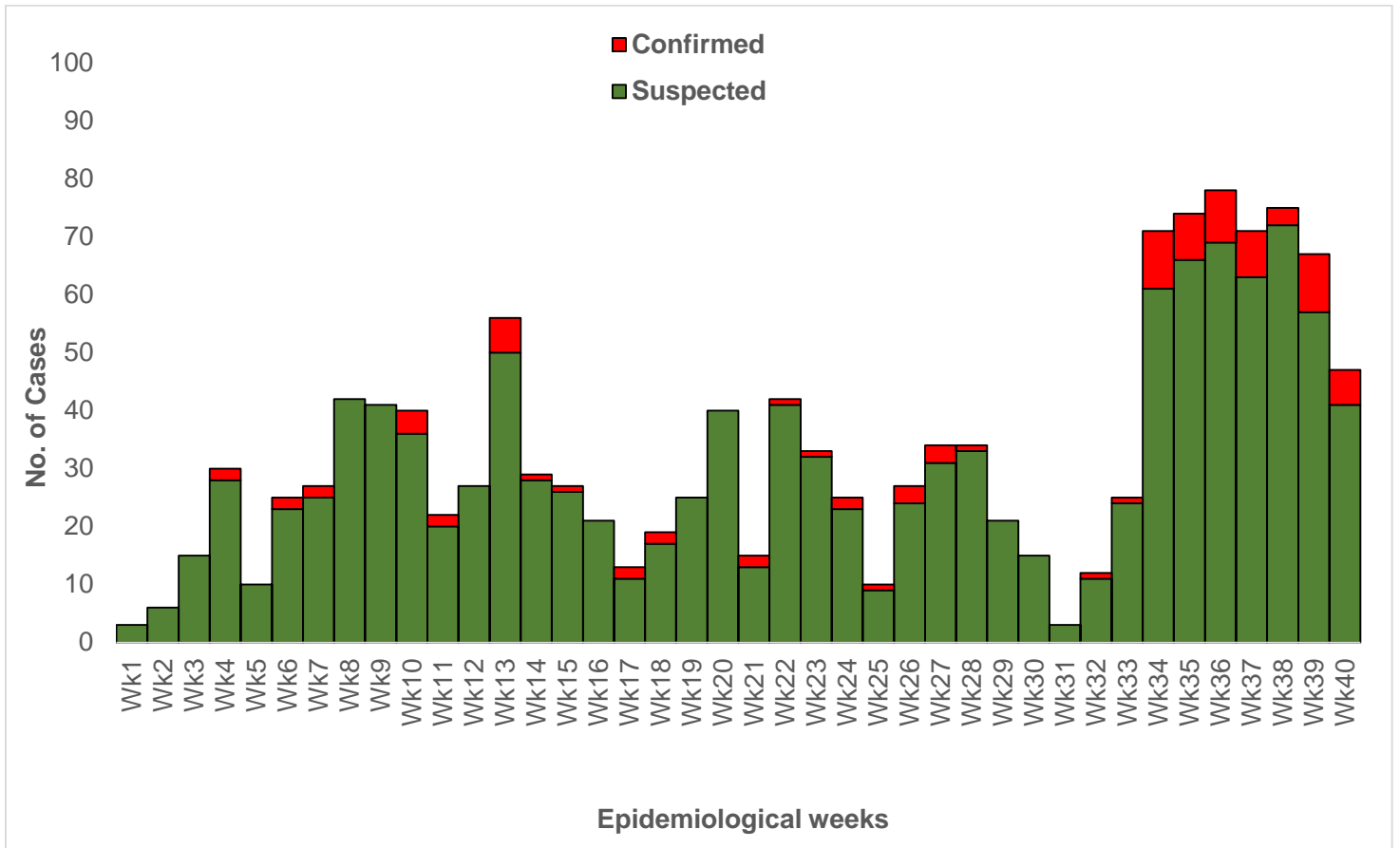


Fig 2: Epidemic curve of suspected and confirmed Mpox cases from January 2024 to date.

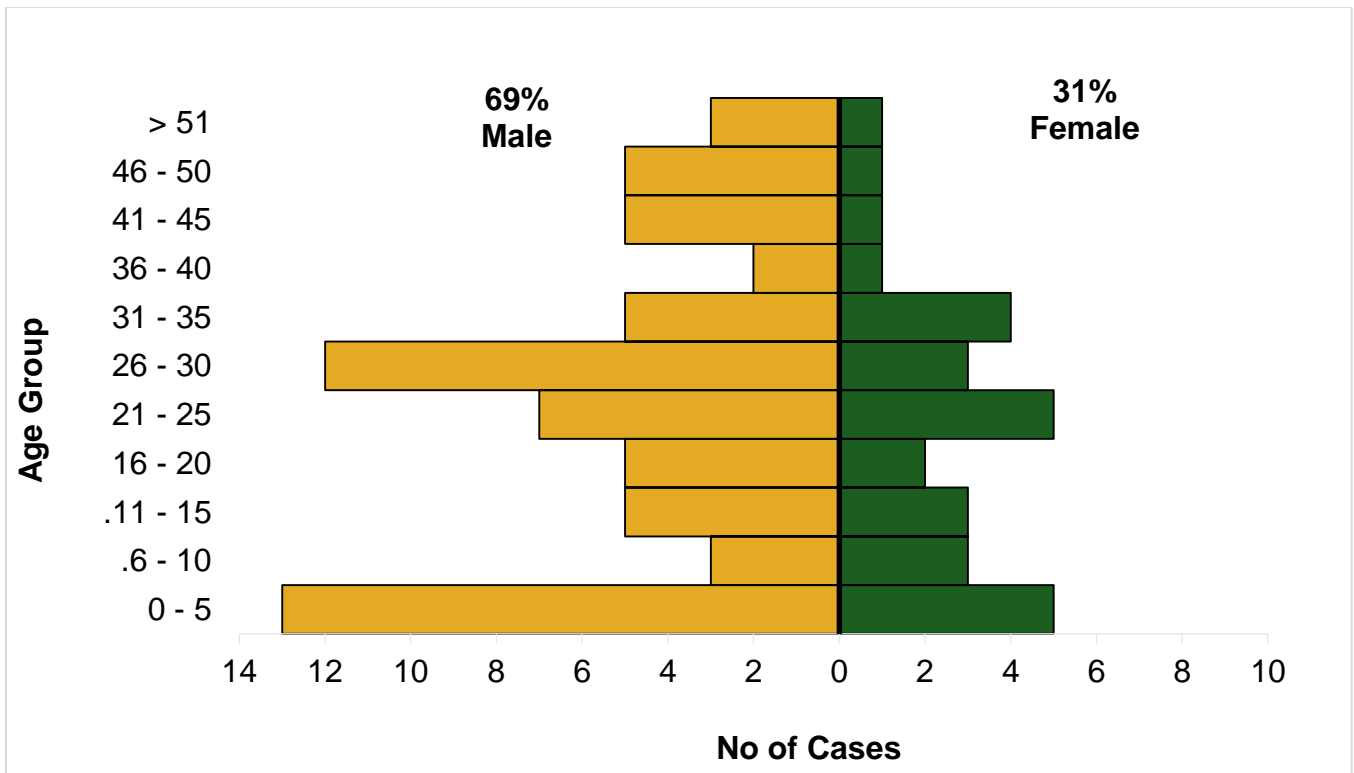


Fig 3: Age and sex distribution of Nigeria confirmed Mpox cases from January 2024 to date.

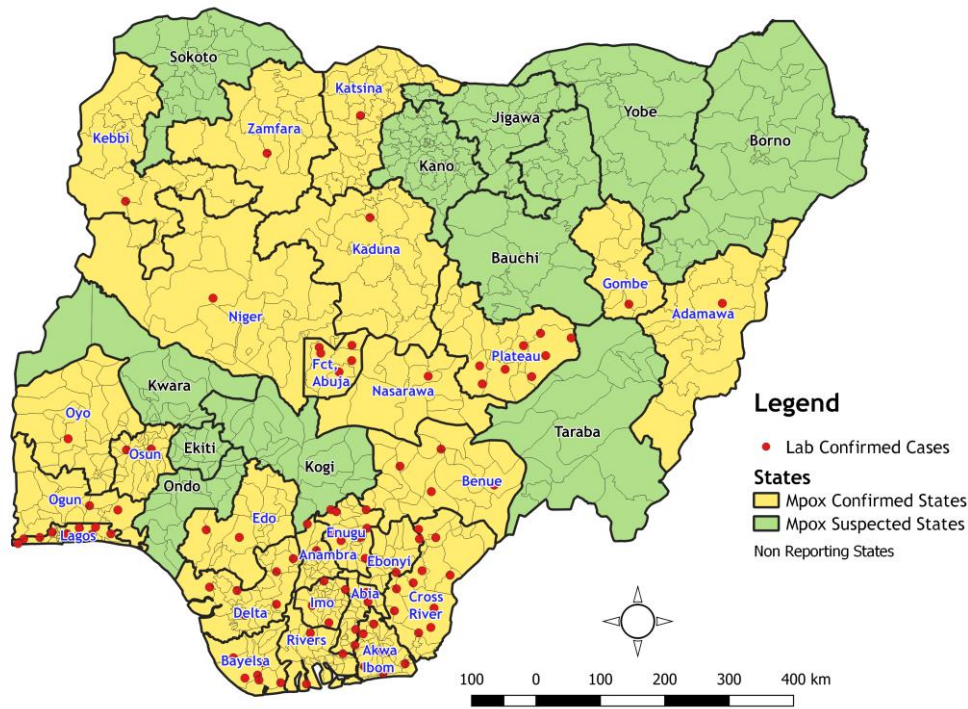


Fig 4: Map of Nigeria showing States with suspected and confirmed Mpox Cases from January 2024 till date.

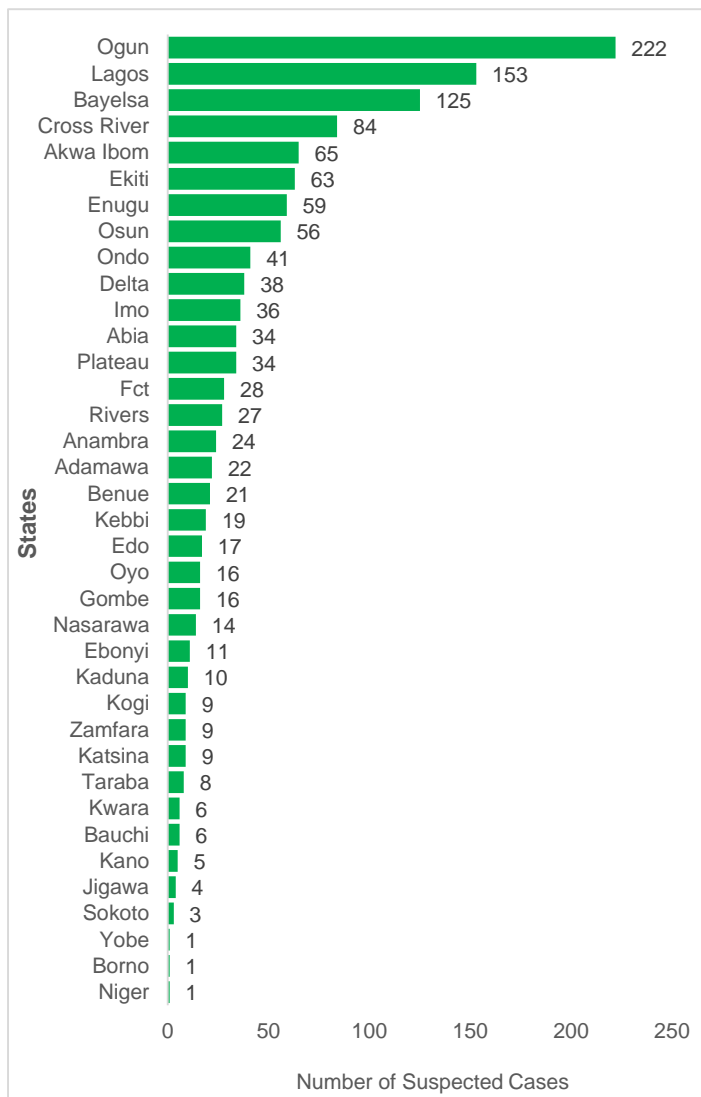


Fig 5: Suspected cases recorded from Epi Week 1 to 40

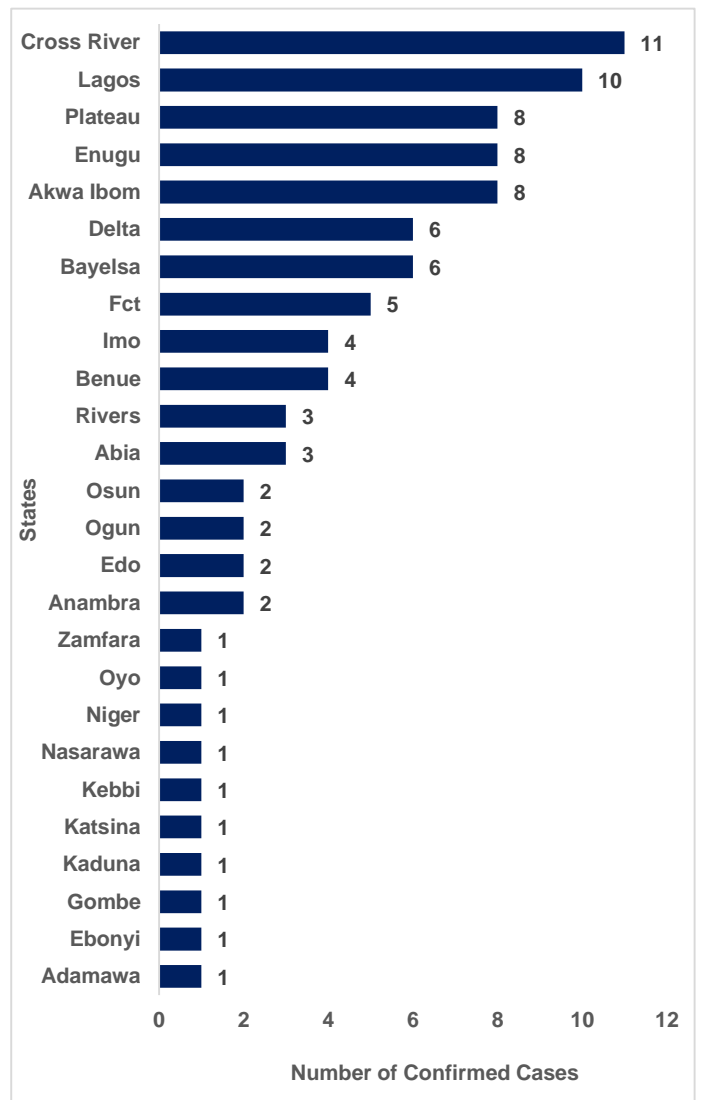


Fig 6: Confirmed cases recorded from Epi Week 1 to 40

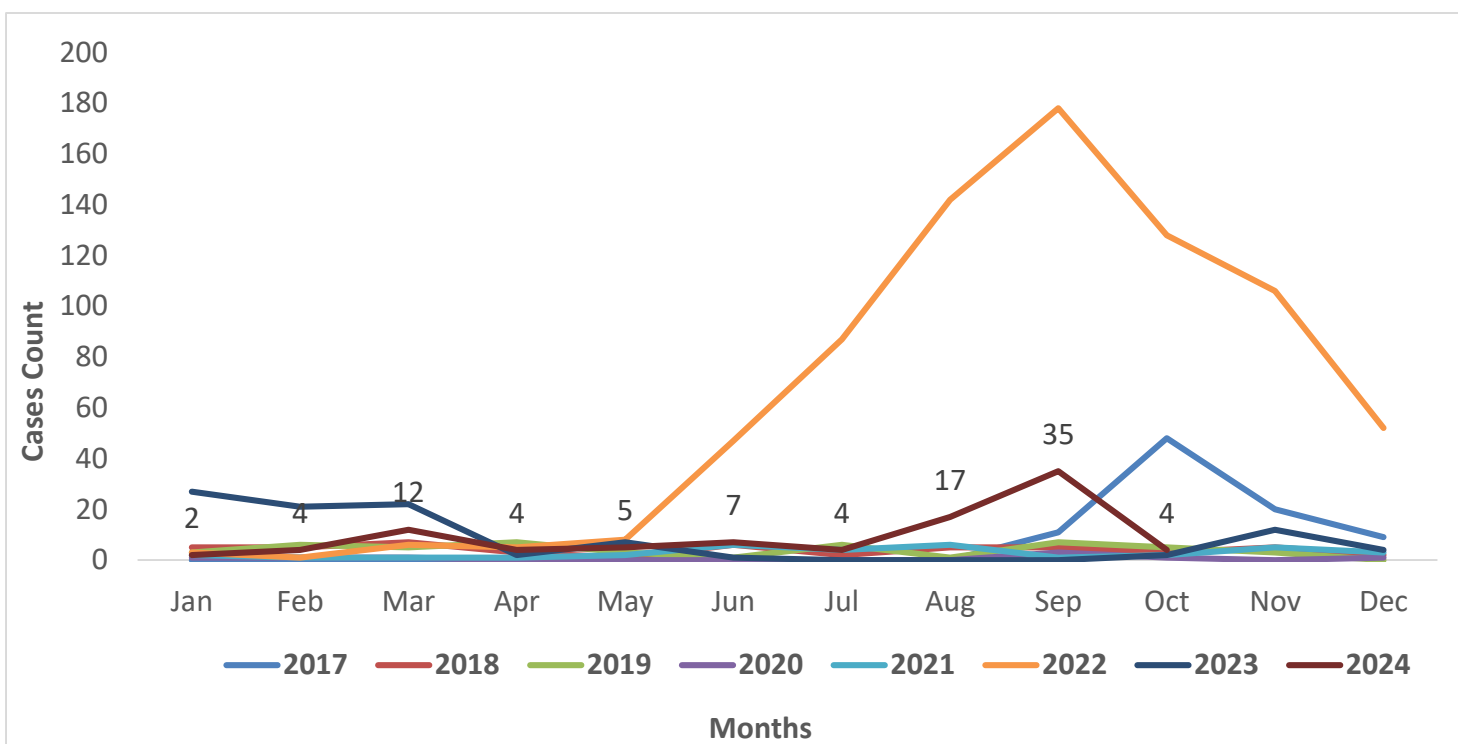


Fig 7: Nigeria confirmed Mpox cases by the year of incidence- Sept. 2017 to 6th October. 2024

Table 2: Age distribution of cumulative number of confirmed mpox cases Sept. 2017 – 6th October. 2024

Age Group	2017	2018	2019	2020	2021	2022	2023	2024	Total
0-10 Years	7	5	1	0	1	125	21	24	184
11-20 Years	12	4	1	0	4	123	8	15	167
21-30 Years	34	13	13	4	10	187	24	25	310
31- 40 Years	26	17	22	4	13	205	21	14	322
41-50 Years	9	10	9	0	5	89	17	12	151
> 50 Years	0	0	1	0	1	33	7	4	46
Total	88	49	47	8	34	762	98	94	1297

Notes on this report.

Data Source

Information for this disease was case-based data retrieved from the National Mpox Emergency Operations Centre.

Mpox Case definitions

Suspected case

- An acute illness with fever, headache, lymph node enlargement, back pain, and myalgia, followed by a progressively developing rash often beginning on the face (most dense) and then spreading elsewhere on the body & may soles of feet and palms of the hand.

Probable case

- A case that meets the clinical case definition and has an epidemiological link to a confirmed case.

Confirmed case.

- A clinically compatible case that is laboratory-confirmed

Contact

- Any person who has been in direct or indirect contact with a confirmed case since the onset of symptoms, i.e., contact with skin lesions, oral secretions, urine, feces, vomitus, blood, sexual contact, sharing a common space (anyone who has been in proximity with or without physical contact with a confirmed case)

Calculations

- Case Fatality Rate (CFR) for this disease is reported for confirmed cases only.

Mpox Prevention Measures

To prevent the spread of Mpox:

- Avoid close contact with individuals showing symptoms, particularly those with rashes or skin lesions.
- Practice good hand hygiene by regularly washing hands with soap and water or using an alcohol-based hand sanitizer.
- Wear protective gear (gloves, masks) when caring for someone with suspected or confirmed Mpox.
- Avoid contact with animals that may harbor the virus, such as rodents and primates, especially in areas where Mpox is known to occur.
- Ensure meat is thoroughly cooked before consumption.

Actions for Healthcare Providers

- Be vigilant for patients presenting with fever, rash, and other Mpox symptoms, especially if they have a history of travel to affected areas or contact with suspected cases.
- Promptly isolate suspected cases to prevent transmission within healthcare settings.
- Notify the relevant public health authorities immediately upon identifying a suspected case.
- Educate patients on the importance of reporting symptoms early and adhering to isolation guidelines if diagnosed with Mpox.

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