

## ZAMBIA CHOLERA SITUATION REPORT #16

Disease Outbreak: Cholera  
Report date: 13/02/2025

Outbreak Declared: 24/12/2024  
Prepared by: ZNP HI

National response start date: 28/01/2025  
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### 1. SITUATION UPDATE

 **Cases: 259**  **Discharged: 240**  **Deaths: 09**

- As of 18:00hours on 12<sup>th</sup> February 2025, there were **06 new cases** reported with **zero deaths**. Cases were reported from Chililabombwe (5), and Chingola (1).
- Zero reporting:** This marks **day 14** for Lusaka, day 7 for Muchinga, Day 3 for N/western and Day 2 for Central.
- 7 patients were discharged, leaving 10 patients currently under admission.
- Cumulative cases** now stand at **259 with 9 deaths (7 BIDs, 2 facility deaths)** (CFR 3.5%; facility CFR 0.8%) and 240 discharged.

### BACKGROUND

Nakonde district in Muchinga reported the first three suspected cases of cholera on 24<sup>th</sup> December, 2024, while the Copperbelt reported one case on 18<sup>th</sup> January 2025, at Kasumbalesa market in Chililabombwe with no epi-linkage to the ongoing Muchinga outbreak. Chingola, Kitwe and Ndola also reported cases. New cholera outbreak districts include Solwezi and Kalumbila in North-western and Ngabwe in Central Province. Provincial IMS were activated to coordinate the response. The national IMS was activated on 28<sup>th</sup> January, 2025.

Table 1: Summary of cases reported as of 12<sup>th</sup> February 2025

Province	District	Last 24hrs			Currently Admitted	Cumulative			
		Cases	Deaths	Discharged		Cases	Discharged	Deaths	CFR(100%)
<b>Central</b>	Ngabwe	0	0	1	1	3	2	0	0%
<b>C/belt</b>	Chililabombwe	5	0	6	8	200	186	6	3%
	Chingola	1	0	0	1	14	13	0	0%
	Kitwe	0	0	0	0	8	6	2	25%
	Ndola	0	0	0	0	2	2	0	0%
<b>Lusaka</b>	Matero	0	0	0	0	1	1	0	0%
<b>Muchinga</b>	Nakonde	0	0	0	0	27	26	1	4%
<b>N/Western</b>	Kalumbila	0	0	0	0	3	3	0	0%
	Solwezi	0	0	0	0	1	1	0	0%
<b>Total</b>		<b>6</b>	<b>0</b>	<b>7</b>	<b>10</b>	<b>259</b>	<b>240</b>	<b>9</b>	<b>3%</b>

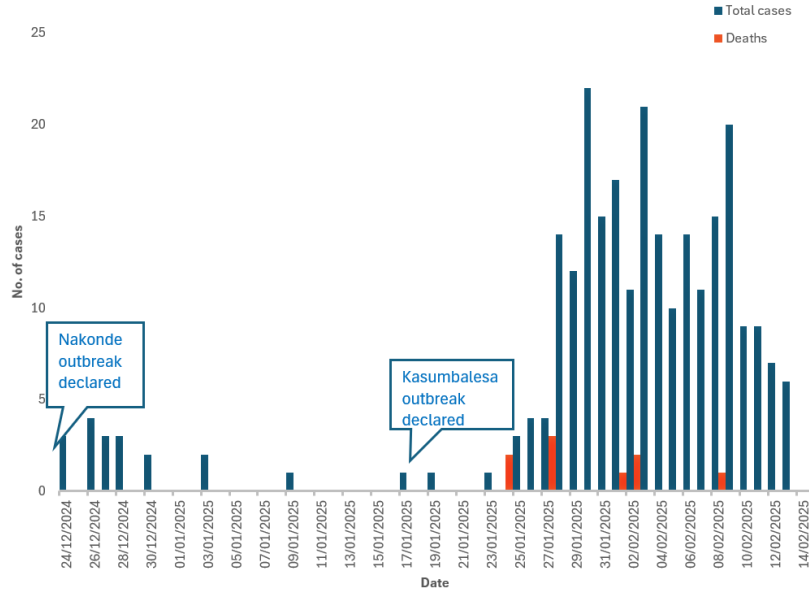


Figure 1: Epicurve of Cholera cases and deaths in Zambia, as of 12<sup>th</sup> February 2025

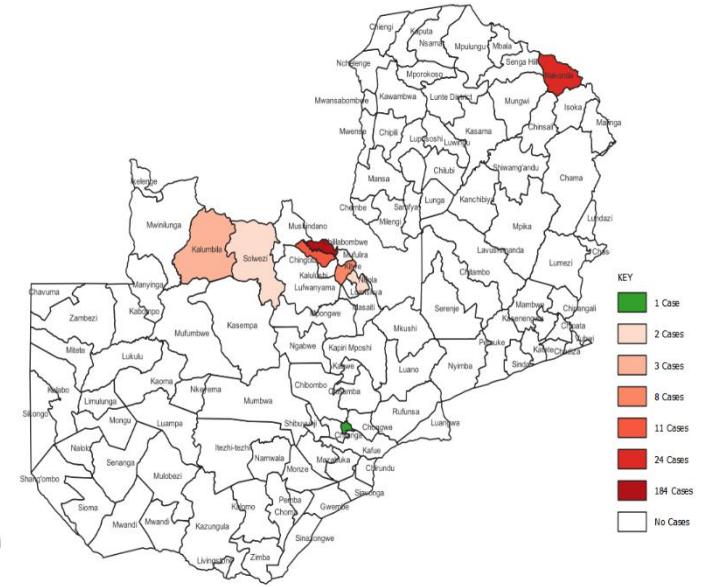
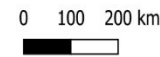


Figure 2: Distribution of cases by district, as of 12<sup>th</sup> February 2025

The majority of the cases recorded to date are aged between 20 and 40 years, and are male.

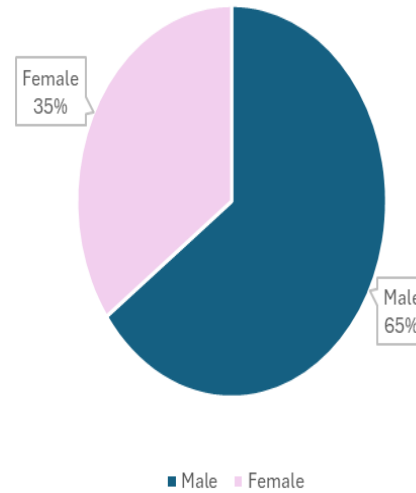
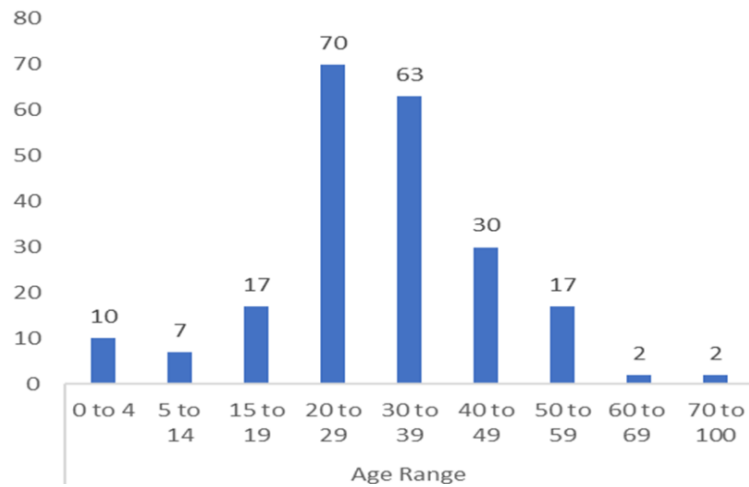


Figure 3: Age and gender distribution of recorded cases, as of 12<sup>th</sup> February 2025

## 2. RESPONSE ACTIONS TO DATE

### 2.1 Leadership and Co-ordination

- The Minister of Health visited Kasumbalesa on 3<sup>rd</sup> January 2025, along with the Chililabombwe mayor, District Commissioner, Provincial Health Director, heads of government departments and representatives from cooperating partners.
- The national IMS has been meeting daily since 28<sup>th</sup> January 2025 (see Annex 1 for structure).
  - IMS meetings have continued at the provincial and district level in both Muchinga and Copperbelt provinces.
  - Stakeholder meetings have been held with the Provincial Minister, DC, Council Chairperson, PHO, DHO, Immigration, and Customs officials, among others

### 3.2 Lab, EPR, Surveillance & Case management

- **Laboratory:** Verification of Abbott and ICT diagnostic RDT kits was carried out by the FETP; and found both tests had 100% sensitivity and 100% specificity.
- **EPR/Surveillance/Case management:**
  - Line listing of cases, active case search, and contact tracing are ongoing
  - Distribution of chlorine to the contacts and households within the CATI ring has continued
  - Oral Rehydration points (ORPs) have been established in high-risk areas with the support of UNICEF. All clients are provided with IEC materials in cholera.
  - Risk factors include poor waste management, mobile/migratory population and unsanitary living conditions including makeshift containers with no sanitary facilities.

Table 2: Kasumbalesa ORP Summary, 13<sup>th</sup> February 2025

ORP statistics	
# seen in the last 24hrs	501
# presenting with diarrhoea	70
# referred to CTC/HF	2
# admitted	2
# given ORS	9
# of nurses on duty	15
# of CBVs on duty	16

### 3.3 Immunisation

- **Chililabombwe:** the vaccination campaign has been closed out after all 130,000 assigned doses were administered

Table 3: Chililabombwe OCV campaign summary, 13<sup>th</sup> February 2025

Day of campaign	# vaccinated
Day 1	32,166
Day 2	37,425
Day 3	55,762
Day 4	4,068
Day 5	579
<b>Total</b>	<b>130,000</b>

- **Kitwe:** vaccination teams have been oriented with cascade training planned for other facilities. The campaign is scheduled to start on Monday 17<sup>th</sup> February, 2025.

### 3.4 IPC/Water, Sanitation and Hygiene

- **Inspections:** 35 facilities (including shops, restaurants, butcheries and bars) were inspected. Of these, 30 were compliant and 5 were closed.
  - Of 13 food items inspected, four were seized.
  - 44 toilets in Chebele area were disinfected
- 1000-litre water bowsers have been installed in the high-risk areas with the support of DMMU and ZNS.
- Distribution of home chlorine using door to door method
- Disinfection of public and private premises and houses and cleaning of market
- Water quality monitoring is being conducted in the affected areas.

### 3.4 Risk Communication and Community Engagement

- RCCE activities are ongoing with support from Zambia Red Cross Society and UNICEF:
  - RCCE team is on the ground working closely with the market committee to ensure that control measures are accepted by traders, travellers, and customers
  - Door to door sensitisation, as well as sensitisation in schools, churches, markets, and bus stops. Also being conducted are community meetings,

meetings with religious and traditional leaders, radio programmes and distribution of IEC materials such as posters, brochures and fliers.

### 3.5 Logistics

- The following have been dispatched to Chililabombwe to support response efforts:
  - **ZAMMSA:** work suits; disinfectant, chlorine, sanitiser, gumboots, gloves (heavy duty and examination), ORS, case management supplies and 200 cholera beds.
  - **UNICEF** has provided tents, hand-washing tanks, posters, chlorine, buckets, soap, and cleaning supplies
  - **Zambia Red Cross:** has supplied 10,000 bottles of 750mls chlorine and 1000 shippers of 750mls chlorine



Figure 5: Part of the logistics delivered to Kasumbalesa

#### 4. Gaps and Challenges

- Limited availability of antisera for laboratory
- Poor water supply
- Sample transfer delays

#### 5. Recommendations & priority follow up actions

- Ongoing training for healthcare workers
- Improved availability of cholera RDTS
- Strengthen sample courier service for improved turnaround time
- Implement standardized stool sample collection

### Annex 1: Cholera IMS

