

ZAMBIA CHOLERA SITUATION REPORT #17

Disease Outbreak: Cholera
Report date: 14/02/2025

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

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

 **Cases: 265**

 **Discharged: 252**

 **Deaths: 09**

- As of 18:00hours on 13th February 2025, there were **06 new cases** reported with **zero deaths**. The cases were reported from Chililabombwe (6)
- Zero reporting:** Today marks day 8 for Muchinga, Day 4 for N/western and Day 3 for Central.
- 12 patients were discharged (Chililabombwe 10, Chingola 1, Ngabwe 1), leaving 4 patients currently under admission (all in Chililabombwe).
- Cumulative cases** now stand at **265 with 9 deaths (7 BIDs, 2 facility deaths)** (CFR 3.4%; facility CFR 0.8%) and 252 discharged.

BACKGROUND

Nakonde district in Muchinga reported the first three suspected cases of cholera on 24th December, 2024, while the Copperbelt reported one case on 18th 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 28th January, 2025.

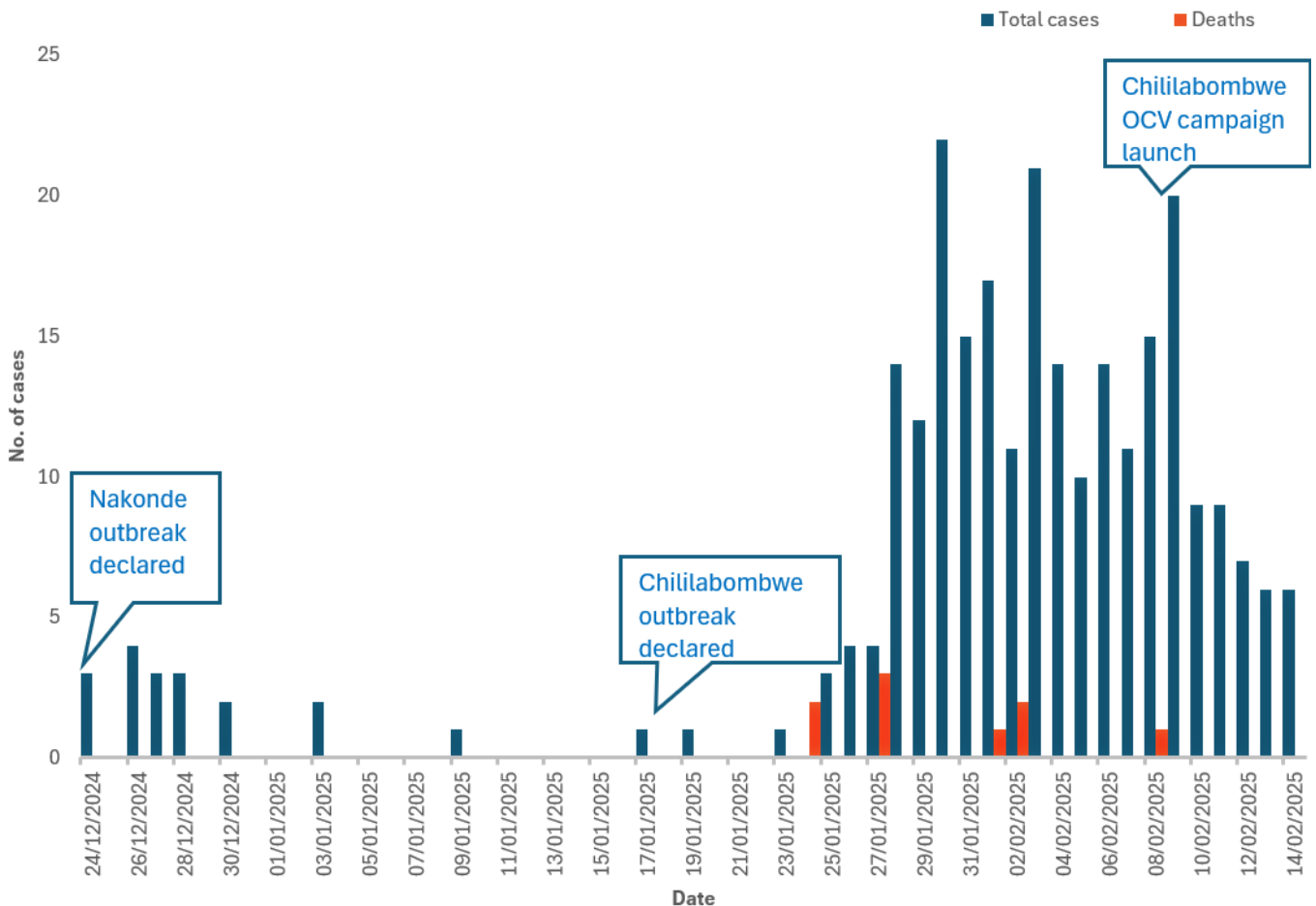


Figure 1: Epicurve of cases and deaths recorded, as of 13th February 2025

Table 1: Summary of cases reported as of 13th February 2025

Province	District	Last 24hrs			Currently Admitted	Cumulative			
		Cases	Deaths	Discharged		Cases	Discharged	Deaths	CFR(100%)
Central	Ngabwe	0	0	1	0	3	3	0	0%
C/belt	Chililabombwe	6	0	10	4	206	196	6	3%
	Chingola	0	0	1	0	14	14	0	0%
	Kitwe	0	0	0	0	8	6	2	25%
	Ndola	0	0	0	0	2	2	0	0%
Lusaka	Matero	0	0	0	0	1	1	0	0%
Muchinga	Nakonde	0	0	0	0	27	26	1	4%
N/Western	Kalumbila	0	0	0	0	3	3	0	0%
	Solwezi	0	0	0	0	1	1	0	0%
Total		6	0	12	4	265	252	9	3%

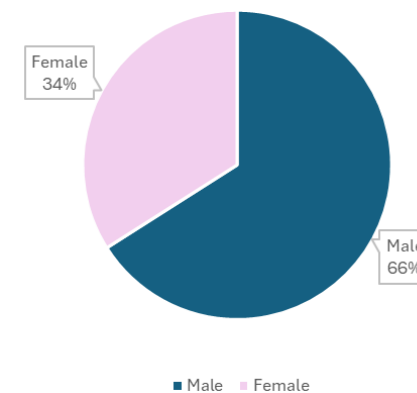


Figure 2: Distribution of cases recorded by Gender

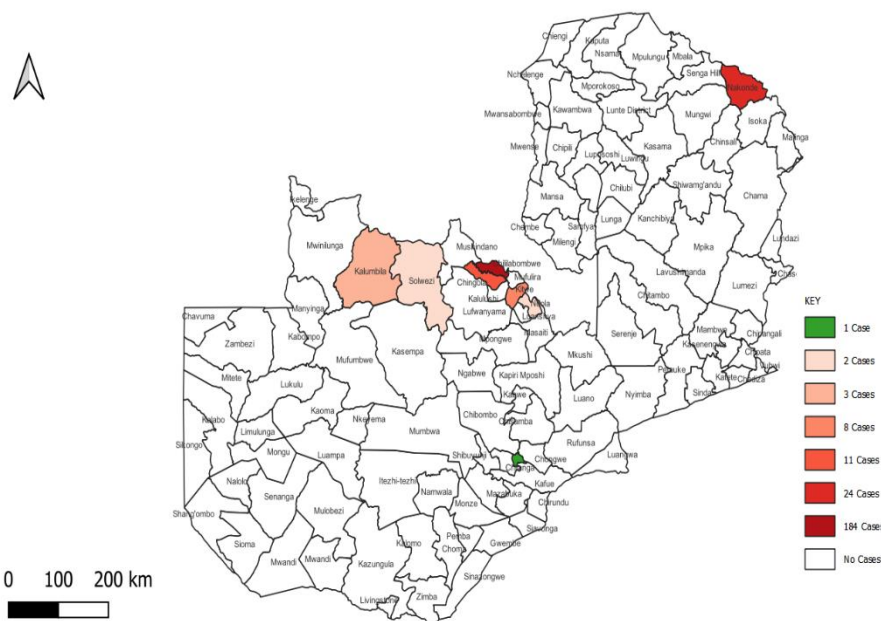


Figure 3: Distribution of cases by district, as of 13th February 2025

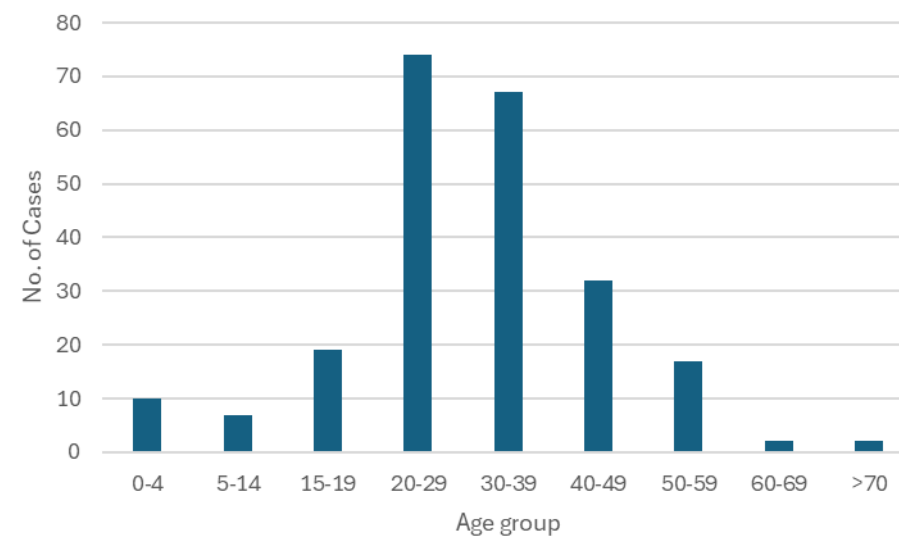


Figure 4: Age distribution of Copperbelt cases, as of 13th February 2025

2. RESPONSE ACTIONS TO DATE

2.1 Leadership and Co-ordination

- The Minister of Health visited Kasumbalesa on 3rd 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 28th 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

2.2 Lab, EPR, Surveillance & Case management

- **Laboratory:** Verification of Abbott and ICT diagnostic RDT kits was carried out by the FETP; 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.

2.3 Immunisation

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

Table 3: Chililabombwe OCV campaign summary, 13th 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
Total	130,000

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

2.4 IPC/Water, Sanitation and Hygiene

- Ongoing 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.

2.5 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
 - 130 social mobilisers are conducting door to door sensitisation to drive OCV demand. Ongoing sensitisation in schools, churches, markets, and bus stops. community meetings, meetings with religious and traditional leaders, radio programmes are also being conducted as well as distribution of IEC materials such as posters, brochures and fliers.
 - **Chililabombwe:** 523 people sensitised out of a daily target of 4,080.
 - **Province RCCE activities:** 1,943 people out of a targeted 5,578 were sensitised.
 - Some of the activities being conducted are captured in the pictures below.





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

Annex 1: Cholera IMS

