

ZAMBIA CHOLERA SITUATION REPORT #23

Disease Outbreak: Cholera
Report date: 27/02/2025

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

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

 **Cases: 294**

 **Discharged: 284**

 **Deaths: 09**

- Between Tuesday 25th and Thursday 27th February, there were **three new cases** reported, all from Chililabombwe.
- Five patients were discharged (from Chililabombwe).
- There were **zero deaths**.
- There is currently **only one case in admission**, in Chililabombwe.
- Zero reporting:** Today marks Day 7 of zero reporting for Central, following the two cases recorded in Kabwe. Eastern, Lusaka, N/western and Muchinga are all beyond two weeks of zero reporting.
- Cumulative cases** stand at **294 with 9 deaths (7 BIDs, 2 facility deaths)** (CFR 3.1%; facility CFR 0.7%) and 284 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.

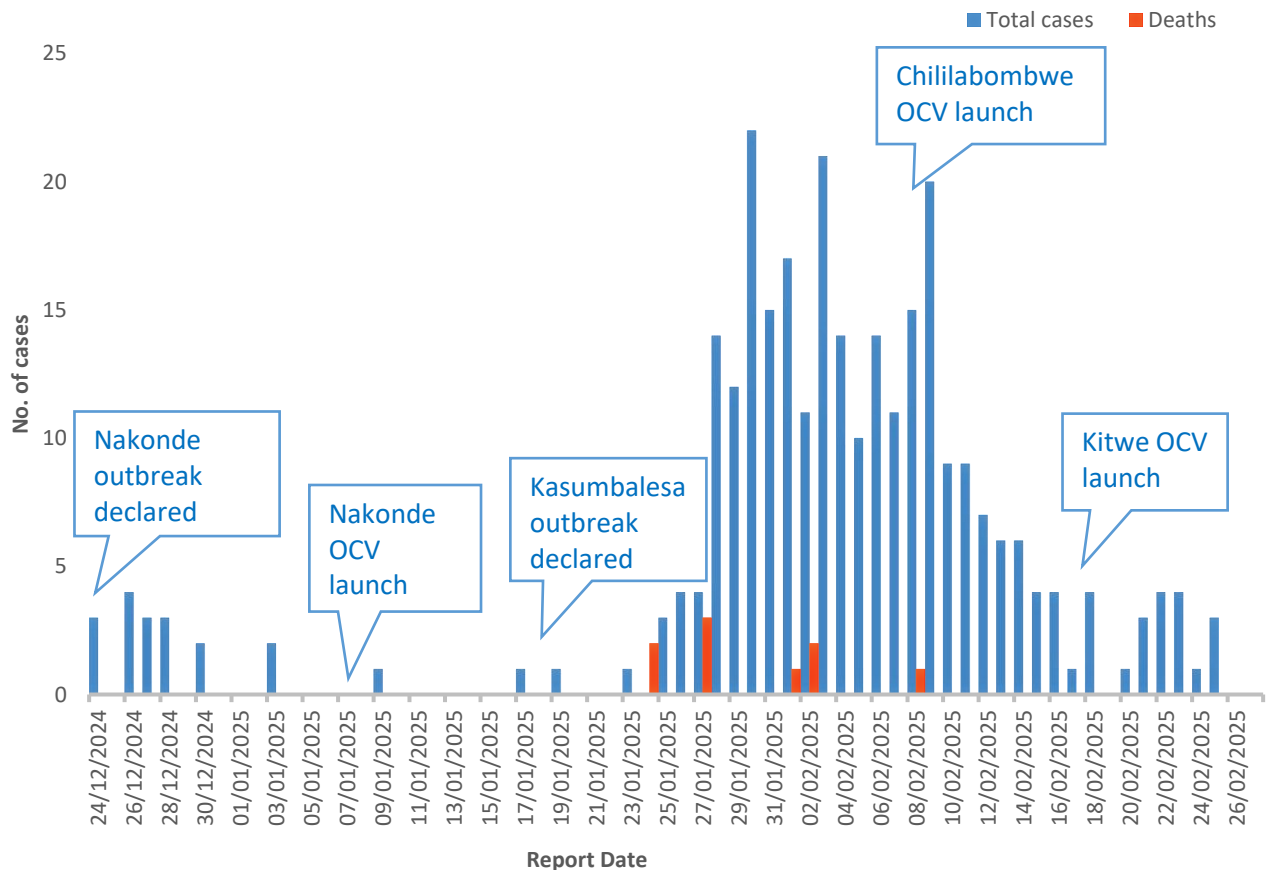


Figure 1: Epicurve of cases and deaths recorded, as of 27th February 2025

Table 1: Breakdown of cases reported by province and district, as of 27th February 2025

Province	District	Betwn 25-27 Feb			Currently Admitted	Cumulative			
		Cases	Deaths	Discharged		Cases	Deaths	Discharged	CFR(100%)
Central	Kabwe	0	0	0	0	2	0	2	
	Ngabwe	0	0	0	0	3	0	3	0%
C/belt	Chililabombwe	3	0	5	1	227	6	220	3%
	Chingola	0	0	0	0	14	0	14	0%
	Kitwe	0	0	0	0	11	2	9	18%
	Lufwanyama	0	0	0	0	1	0	1	0%
	Mufulira	0	0	0	0	1	0	1	0%
	Ndola	0	0	0	0	2	0	2	0%
Eastern	Katete	0	0	0	0	1	0	1	0%
Lusaka	Matero	0	0	0	0	1	0	1	0%
Muchinga	Nakonde	0	0	0	0	27	1	26	4%
N/Western	Kalumbila	0	0	0	0	3	0	3	0%
	Solwezi	0	0	0	0	1	0	1	0%
Total		3	0	5	1	294	9	284	3%

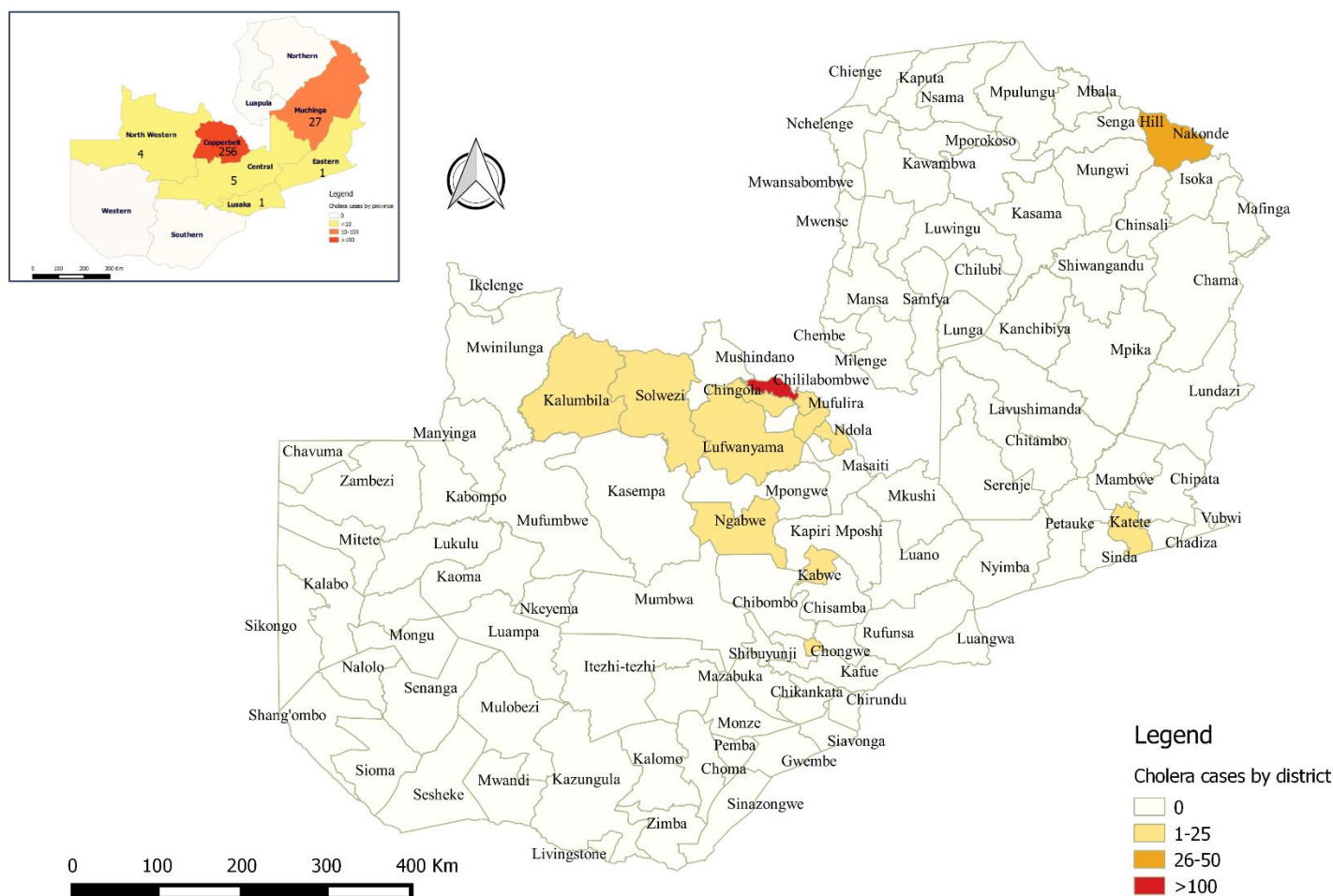


Figure 2: Distribution of recorded cholera cases by district, 27th February 2025 (insert provincial distribution)

2. RESPONSE ACTIONS TO DATE

2.1 Leadership and Co-ordination

- The national IMS has been meeting 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

- **EPR/Surveillance/Case management:**
 - 294 cases have been recorded countrywide to date, with 284 discharged and 9 deaths; **one case is currently in admission** in Chililabombwe. Of the cases recorded, the majority are males, and most cases are aged between 20-39. See age and sex distribution below:

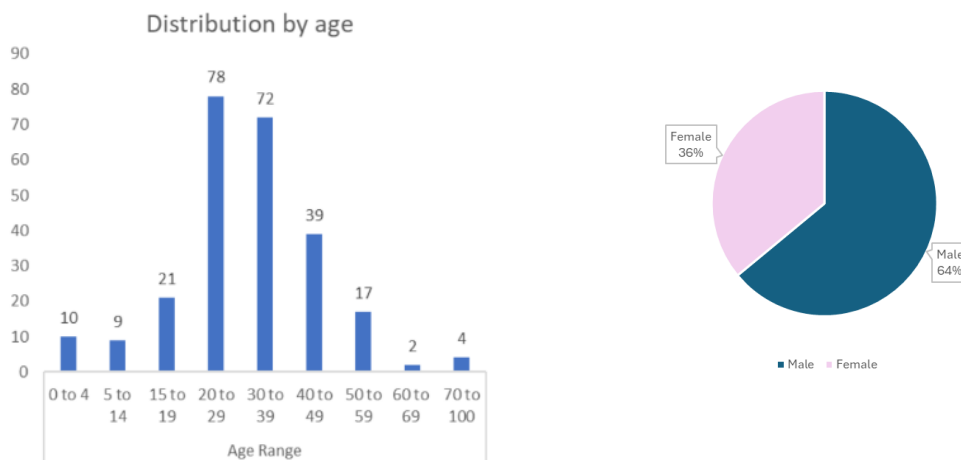


Figure 3: Age and sex distribution of cholera cases recorded on the Copperbelt

- Line listing of cases, active case search, and contact tracing are ongoing
- **Oral Rehydration points (ORPs)** have been established in high-risk areas with the support of UNICEF and Redcross. All clients are provided with IEC materials in cholera. Once assessed, those needing admission are referred to the CTC.
 - Today is Day 8 since the re-orientation of CBVs RedCross and the team continues to implement community case management of non-severe cases. There are currently **16 ORPs** set up.

Table 2: Chililabombwe ORP (N=16) functionality, between 24th and 26th February 2025

Indicator	24/02/25		25/02/25		26/02/25	
	(below 5yrs)	(above 5yrs)	(below 5yrs)	(above 5yrs)	(below 5yrs)	(above 5yrs)
# seen	88	494	56	418	70	595
# with signs & symptoms	27	80	21	81	37	117
# with moderate symptoms	58		58		73	
# with severe symptoms	0		2		0	
# referred to CTC	1	0	0	3	0	0
# admitted	0		3		0	
# given ORS	31	79	24	59	37	106

- Distribution of chlorine to the contacts and households within the CATI ring has continued
- Risk factors include poor waste management, mobile/migratory population and unsanitary living conditions including makeshift containers with no sanitary

2.3 Vaccination

- Vaccination campaigns have been carried out in Nakonde, Chililabombwe and Kitwe districts.
 - During the recent Kitwe campaign, 259 initial refusals were recorded, of which 254 were subsequently resolved. Further, 4 AEFIs were recorded.

Table 1: Summary of vaccination campaign statistics for Nakonde, Chililabombwe and Kitwe, as of 27th February 2025

Location	Target	Vaccinated	% achieved	Campaigns dates
Nakonde	183,506	200,878	109%	07-13 Jan
Chililabombwe	129,837	133,525	103%	07-13 Feb
Kitwe	337,697	341,038	101%	17-23 Feb
Total	651,040	675,441	104%	

2.4 IPC/WASH/Environmental Health

- The teams have continued to implement environmental health and WASH measures in Lusaka, Copperbelt and Muchinga

Location	Intervention	Target	Achieved	Comment
Kanyama	WQM (bacteriological)	55	1	Heavy rainfall, no running water affecting sampling
Kanyama	WQM (residual chlorine)	150	119	64/119 were satisfactory for residual chlorine
Chililabombwe	Chlorine distribution	Received: 250mls=10,884 750mls=10,024 5L=72 Sachets=12,000	Distributed: 250mls=10,812 750mls=3,941 5L=72 Sachets=7,920	More stocks required
	Chlorination of wells		21	16 wells had residual chlorine
	Inspections	32	32	No warnings or closures made

2.5 Risk Communication and Community Engagement

- Team are on high alert following flooding around the country following heavy rains. CBVs are raising awareness around the dangers of these behaviours.
- AfCDC is supporting the development of IEC material in Swahili and French
- Intensified sensitisation by a combined team of MoH, ZNP HI, ZANIS, DMMU, and Ministry of Agriculture following the contamination event following the tailings dam leak in Kitwe
- Ongoing sensitisation in schools, churches, markets, door to door, radio and TV, and at bus stops. Community meetings are also being conducted as well as distribution of IEC materials such as posters, brochures and fliers.

3. ASKS/CHALLENGES

- Concerns around risky behaviours including swimming and waddling through flood waters in affected areas, as well as indiscriminate disposal of waste in the flood water

- Heavy rainfall hampering water quality monitoring sample collection. Additionally, there are low H₂S supplies and unavailability of running water to sample
- Continued use of water from shallow wells in unplanned settlements and erratic water supply to households
- Provision of PPE, disinfectants and WQM reagents.
- Continued capacity building for CBVs, and provision of vehicles and fuel for response activities.

4. RECOMMENDATIONS/FOLLOW-UP ACTIONS

- Distribution of additional chlorine supplies to sustain WASH efforts
- Sinking of boreholes to increase/supplement water supply
- Roll out of OCV campaign to other at risk districts
- Provision of additional handwashing points for Nc'wala ceremony
- Heightened health education (through media, door to door churches, schools, PA system etc), inspection and disinfection of premises
- Continued compliance inspections of schools and public premises, WQM, and liming of pit latrines

Annex 1: Cholera IMS

