# **Summary of Priority Diseases and Events in Zambia**

#### Trends for Priority Diseases and Events in Zambia (January - September 2025)

Between January and September 2025, malaria remained the leading cause of reported illness among the priority diseases and events tracked by ZNPHI, accounting for over 11 million suspected cases, followed by tuberculosis and diarrhoea with blood. Other frequently reported conditions included dog bites and bilharzia. Vaccine-preventable and zoonotic diseases such as measles, anthrax, Mpox, and cholera occurred sporadically. Overall, disease trends showed seasonal peaks, particularly for malaria in mid-year, while most other conditions/events remained stable or fluctuated slightly across quarters, with no sustained upward trend (Table one).

	Months (2025)									
Disease/Event	January	February	March	April	May	June	July	August		Total Trend
Malaria suspected	1,143,002	1,316,943	1,210,194	1,037,529	1,033,767	1,370,063	1,328,821	1,250,644	1,363,852	11,054,815
Tuberculosis suspected	39,159	43,169	44,933	48,601	41,037	38,567	43,013	40,557	43,041	382,077
Diarrhoea with blood suspected	6,873	5,483	6,351	7,025	6,457	5,737	5,311	6,379	5,981	55,597
Dog Bite	2,597	2,420	2,398	2,309	2,295	2,391	2,555	2,264	2,456	21,685
Bilharzia suspected	1,869	2,069	2,506	1,817	2,127	2,358	2,067	1,854	2,057	18,724
COVID-19 suspected	402	602	929	276	636	744	1,309	640	592	6,130
Typhoid fever suspected	913	707	729	717	534	573	454	687	609	5,923
Measles	241	225	343	276	390	174	83	139	242	2113
Mpox suspected	186	184	251	215	186	216	131	61	92	1,522
Cholera suspected	22	87	235	103	247	45	288	12	22	1,061
Bacterial meningitis suspected	57	74	113	83	74	39	139	30	114	723
Anthrax suspected	45	8	25	11	22	55	10	39	31	246
AFP (Poliomyelitis) suspected	30	22	21	27	30	31	18	27	24	230

Trends for Priority Diseases and Events in Zambia by Province (January - September 2025)

# **Acute Flaccid Paralysis**

Suspected Acute Flaccid Paralysis (AFP) cases have varied across provinces and quarters. Eastern, Copperbelt, and Western provinces recorded the highest numbers, with peaks in Quarter 2. Compared to the first two quarters, Quarter 3 showed a general decline in suspected cases in most provinces, though Southern and North-Western maintained steady reporting (Figure 1).

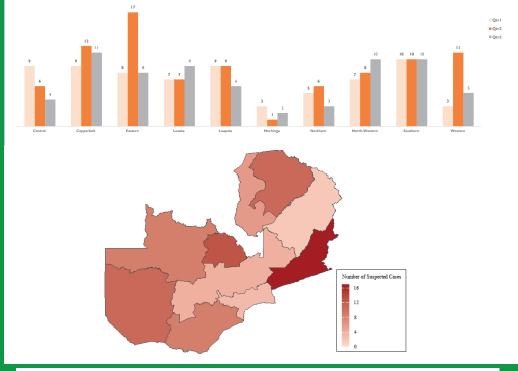


Figure 1: Suspected Acute Flaccid Paralysis (Poliomyelitis) Cases in Zambia by Province (January - September 2025)

### **Anthrax**

Suspected anthrax cases in 2025 have been largely confined to Southern and Western provinces, with Southern recording the highest numbers, peaking at 62 cases in Quarter 2. Cases declined slightly in Quarter 3 across most affected provinces compared to the earlier quarters. Few cases were reported in Eastern, Lusaka, Northern, and Copperbelt, while the remaining provinces reported none, indicating localized transmission mainly in the southern regions (Figure 2).

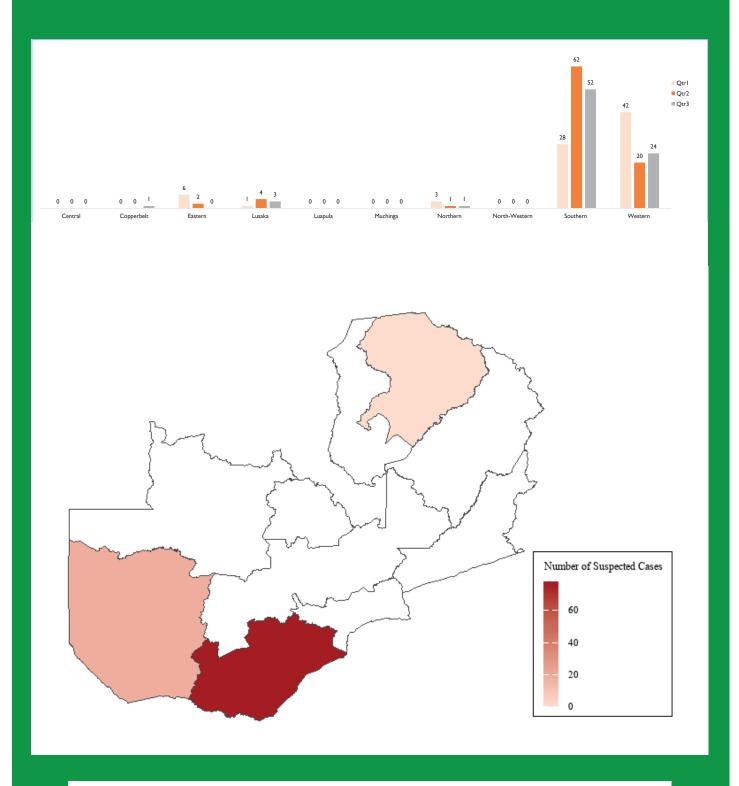


Figure 2: Suspected Anthrax Cases in Zambia by Province (January - September 2025)

### **Bilharzia**

Figure 3 shows the quarterly trends in suspected Bilharzia cases across Zambia's provinces in 2025. Overall, cases declined in Quarter 3 compared to earlier quarters. Eastern Province, which peaked in Quarter 2, saw a notable drop in Quarter 3. Most other provinces, including Central and Southern, also declined, while Western and Luapula recorded slight increases.

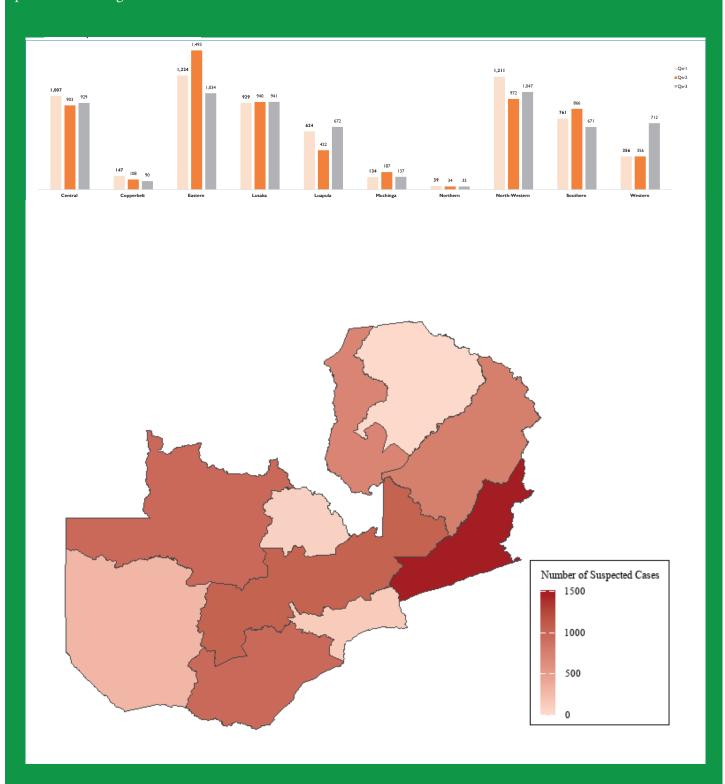


Figure 3: Suspected Bilharzia Cases in Zambia (January - September 2025)

## Мрох

Figure 4 shows a sharp decline in suspected Mpox cases across most provinces in Quarter 3 of 2025. Muchinga, Northern, and Western provinces recorded the largest drops after earlier peaks. Lusaka and Copperbelt also declined moderately, while Central and Eastern showed slight increases. Overall, Mpox cases decreased nationwide in Quarter 3.

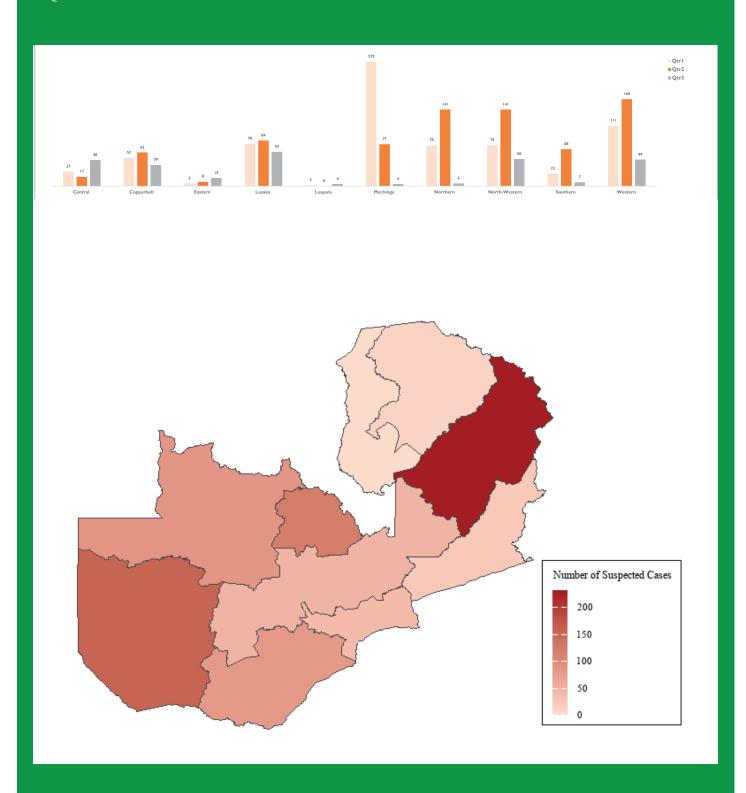


Figure 4: Mpox Cases in Zambia by Province (January - September 2025)

# Typhoid Fever

Figure 5 shows that suspected typhoid fever cases declined in most provinces in Quarter 3 of 2025. Northern Province was an exception, recording a sharp rise to 3,911 cases. Lusaka and North-Western declined moderately, while Copperbelt slightly increased. Most other provinces reported few or no cases.

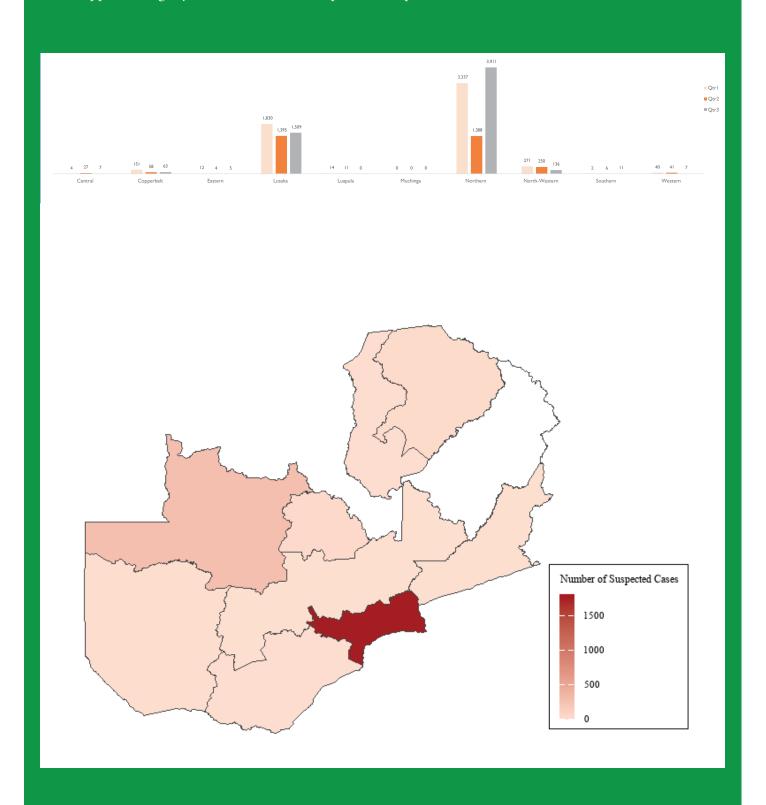


Figure 5: Suspected Typhoid Fever Cases in Zambia by Province (January - September 2025)

#### Measles

Figure 6 shows quarterly trends in suspected measles cases across Zambia's provinces in 2025. Overall, cases declined in Quarter 3 compared to the first two quarters. Northern, Southern, and Western provinces recorded the largest drops, while Eastern and Luapula showed slight increases. North-Western was the only province with a notable rise in Quarter 3, reaching its highest level for the year.

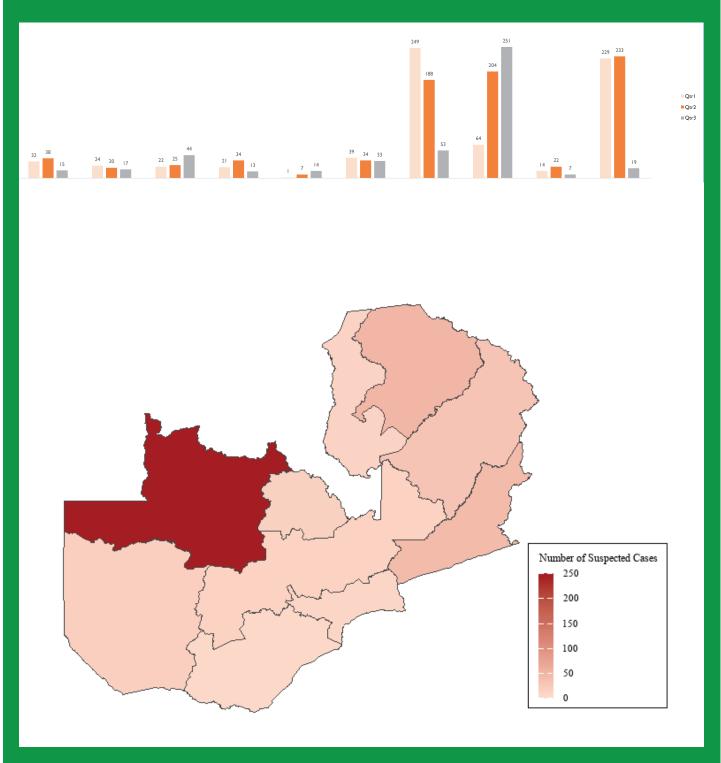
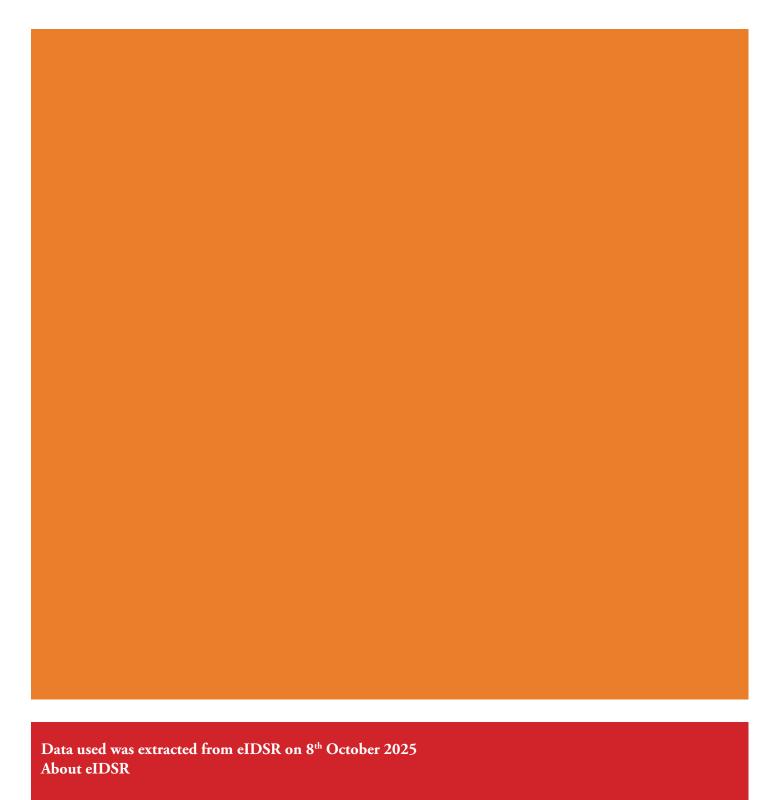


Figure 6: Measles Cases in Zambia by Province (January - September 2025)



The Electronic Integrated Disease Surveillance and Response System (eIDSR) is a disease surveillance system that is used to continuously and systematically collect, analyse, interpret, and visualize public health data. Data is collected at facility level and captured by district surveillance officers. The data reported in this bulletin was extracted from the system (except were indicated otherwise) on the aforementioned date.

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