

Summary of Priority Diseases and Events in Zambia

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

Malaria remained the dominant public health burden, with consistently high case counts throughout the year and pronounced increases between February and April, as well as a secondary rise from October to December. Tuberculosis was the second most reported condition, showing relatively stable monthly reporting with mild fluctuations. Diarrhoea, dog bites, bilharzia, and typhoid fever exhibited moderate but steady trends across the year. Vaccine-preventable and zoonotic diseases, including measles, Mpox, anthrax, and cholera, were reported at lower levels, with intermittent spikes suggestive of localized outbreaks (Table 1).

Table 1: Trends for Priority Diseases and Events in Zambia (January - December 2025)

Disease/Event	Months (January - December 2025)													Trend
	January	February	March	April	May	June	July	August	September	October	November	December	Total	
Malaria	1,408,377	1,308,805	1,469,939	1,467,076	1,736,582	1,178,402	1,272,163	727,408	643,632	843,004	703,867	869,207	13,628,462	
Tuberculosis	43,784	32,795	43,888	39,050	41,844	40,770	46,009	52,067	42,217	62,674	37,381	31,730	514,209	
Dysentery	7,575	5,871	4,749	4,135	4,990	4,597	7,302	7,277	10,086	12,838	7,418	4,601	81,439	
Dog Bite	3,077	2,331	2,195	2,097	2,536	2,133	2,659	2,300	2,437	3,161	2,521	2,575	30,022	
Bilharzia	2,096	2,118	2,085	1,891	2,132	1,802	2,336	2,099	2,227	3,104	1,717	1,542	25,149	
Meningitis (Neisseria)	63	68	38	86	56	55	83	90	121	71	21,186	32	21,949	
Typhoid Fever	531	591	622	497	694	742	754	627	839	1,013	868	666	8,444	
COVID-19	1,453	1,023	914	495	375	422	849	267	254	218	132	78	6,480	
Measles	242	247	381	294	390	174	83	139	244	148	102	105	2,549	
Mpox	72	60	70	134	128	144	235	217	415	189	58	23	1,745	
Cholera	136	266	117	55	29	57	1	68	234	123	76	86	1,248	
Anthrax	58	29	9	15	9	28	17	21	59	114	148	60	567	
AFP	28	25	29	25	24	26	26	19	36	25	20	19	302	

Source: Integrated Disease Surveillance and Response System (IDSR), 15th January 2026

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

Acute Flaccid Paralysis

Quarter 4 generally recorded lower or comparable case numbers than the first three quarters in most provinces, indicating a decline toward the end of the year. Provinces such as Eastern, Lusaka, and Copperbelt showed notable reductions in Quarter 4 compared with earlier peaks. Overall, Quarter 4 suggests stabilization or reduced AFP reporting following higher levels observed in Quarters 2 and 3 (Figure 1).

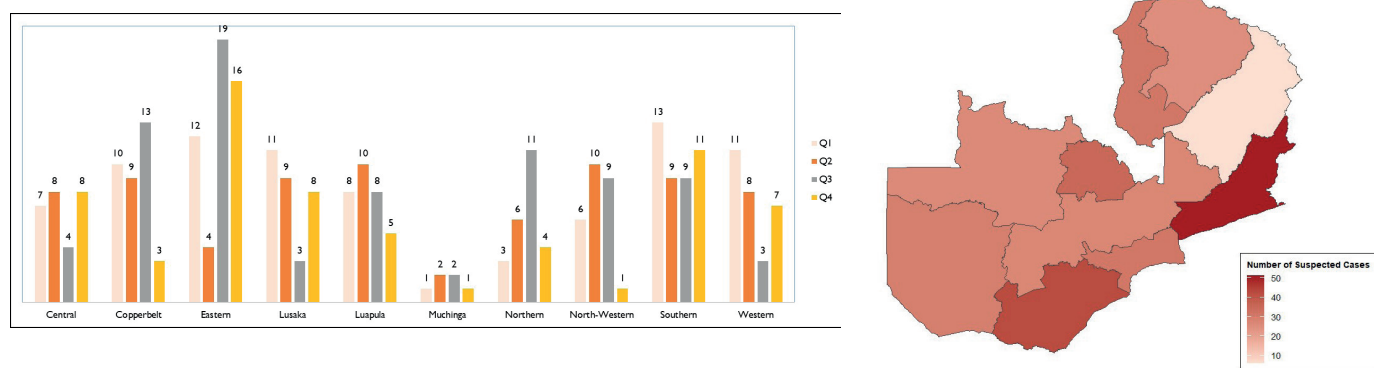


Figure 1: Suspected Acute Flaccid Paralysis (Poliomyelitis) Cases in Zambia by Province (January - December 2025)

Bilharzia

Quarter 4 showed generally lower bilharzia cases in most provinces, particularly in Eastern, Lusaka, and North-Western provinces, which had higher burdens earlier in the year. Provinces with lower cases, such as Muchinga and Northern, maintained minimal variation across quarters (Figure 2).

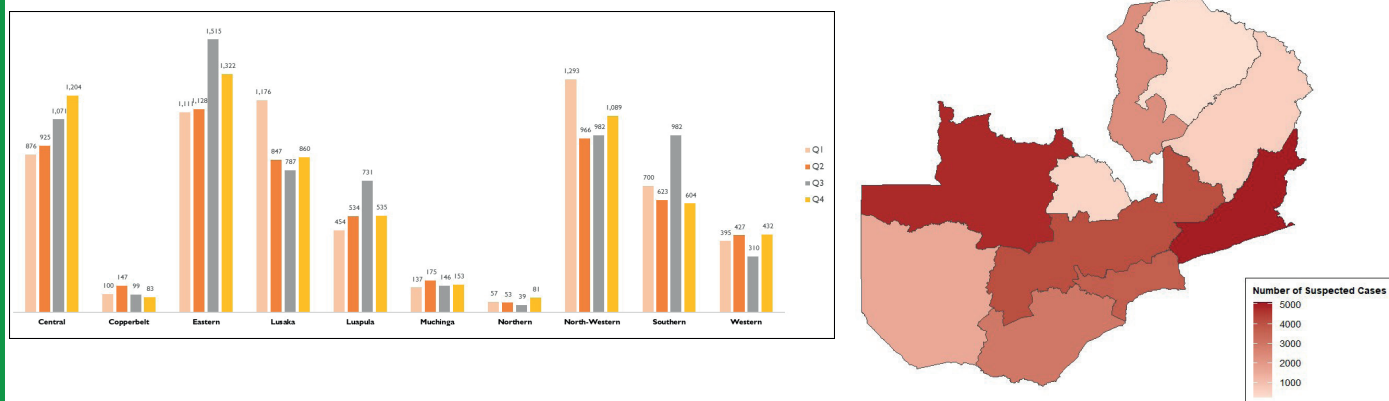


Figure 2: Suspected Bilharzia Cases in Zambia (January - December 2025)

Mpox

Compared with the earlier quarters, Quarter 4 recorded mixed trends, with notable increases in Western Province and sustained reporting in Muchinga following a peak in Quarter 3. In contrast, several provinces such as Lusaka, Eastern, and Northern showed lower case in Quarter 4 than in Quarters 2 and 3 (Figure 3).

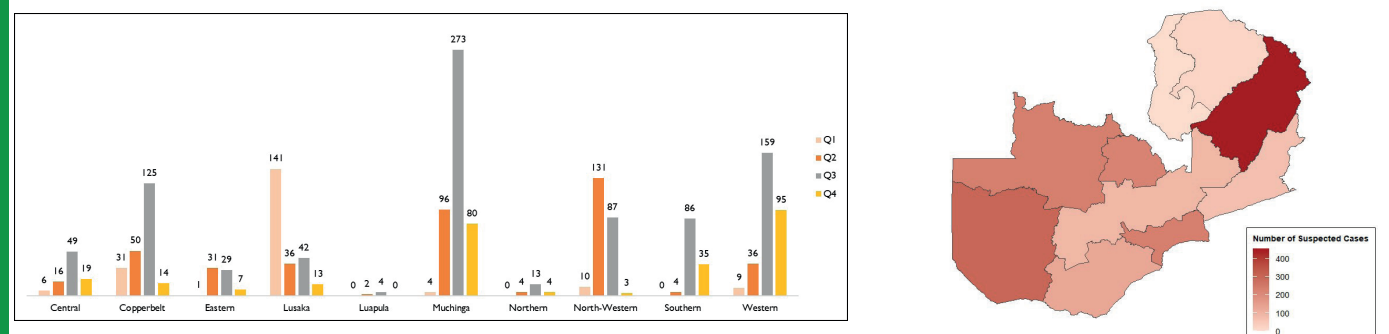


Figure 3: Suspected Mpox Cases in Zambia by Province (January - December 2025)

Typhoid Fever

Quarter 4 recorded higher cases of suspected typhoid fever than the earlier quarters in Lusaka and North-Western provinces, indicating a late-year increase. In contrast, most other provinces showed low and relatively stable reporting across all four quarters (Figure 4). Overall, Quarter 4 suggests a localized rise in typhoid fever, rather than a nationwide increase, following lower levels earlier in the year.

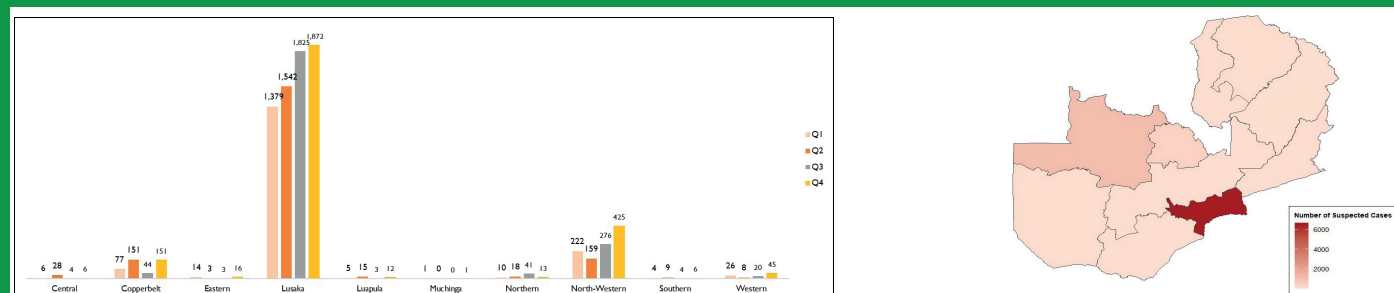


Figure 4: Suspected Typhoid Fever in Zambia by Province (January - December 2025)

Anthrax

Quarter 4 recorded a pronounced increase in the number of suspected Anthrax cases, particularly in Southern Province, which peaked sharply compared to the first three quarters. Western Province also showed higher reporting in Quarter 4, while most other provinces recorded few or no cases throughout the year (Figure 5). Generally, Quarter 4 highlights a late-year surge concentrated in the southern regions.

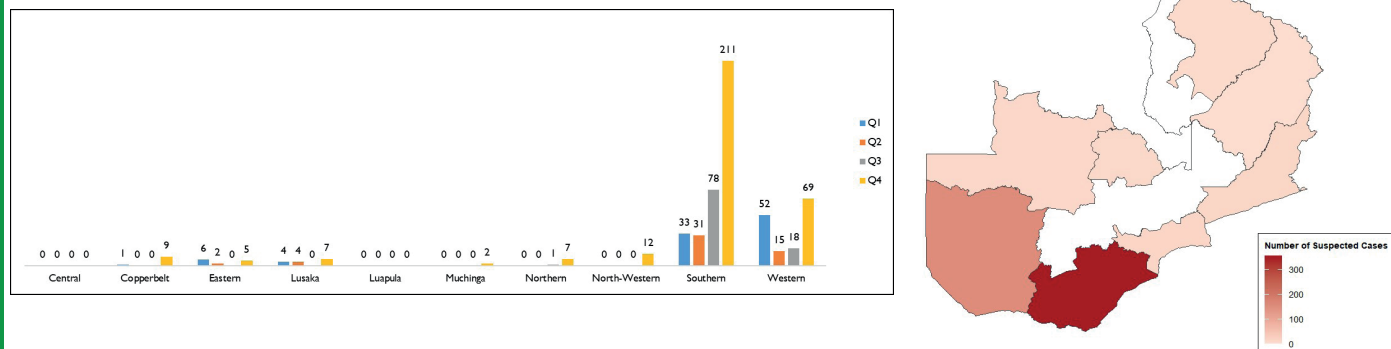


Figure 5: Suspected Anthrax Cases in Zambia by Province (January - December 2025)

Measles

Quarter 4 recorded lower cases of measles in most provinces compared with earlier quarters, particularly following peaks observed in Quarter 2 and Quarter 3 in Northern, North-Western, and Western provinces. Lusaka also showed a decline in Quarter 4 after higher reporting earlier in the year.

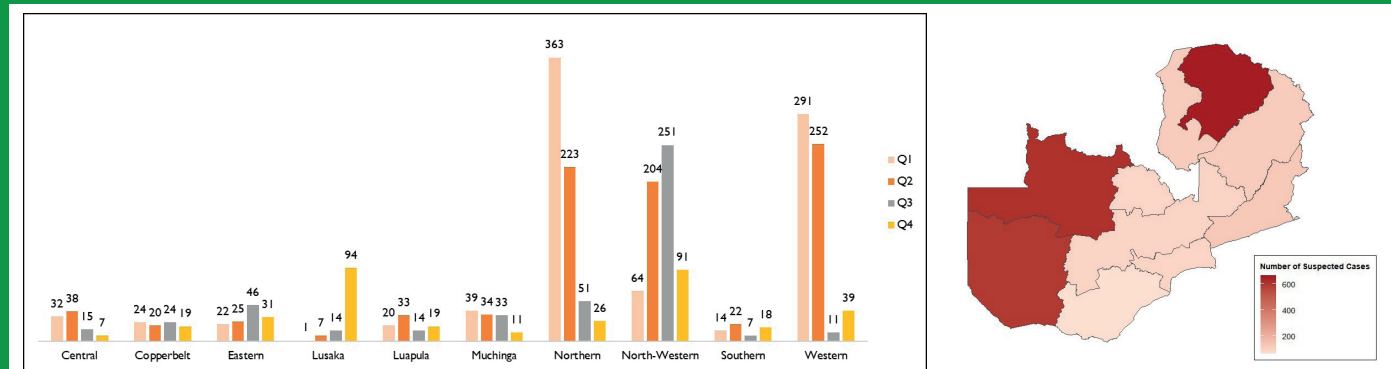


Figure 6: Suspected measles Cases in Zambia by Province (January - December 2025)