

Zambia Cholera Outbreak | Situation as of 8th October 2023

National | Northern Province (Nsama)

As at 18 hours 8th October 2023, New cases 0 |Cumulative cases: 175 |Cumulative Deaths 5 | CFR: 2.9% | Currently admitted in CTCs: 0 | Discharged: 0 |New Admissions: 0

Risk Level: High;

Grade 3 Event

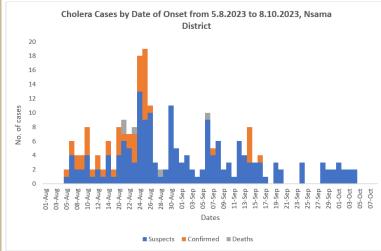
Epidemiological Overview

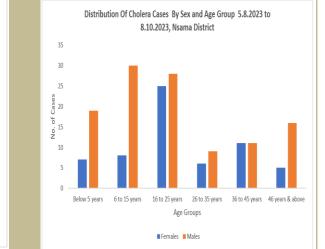
Background:

- On 5th August 2023, Nsumbu Rural RHC notified Nsama DHO of having an increasing number of diarrhea cases with suspected cases of Cholera at the facility. The first case was confirmed on 10 August 2023
- To date a total cumulative 175 cases including 53 culture positive for Vibrio Cholera, Serotype Inaba 01
- Affected: Chibanga, Kapisha, Chibwensolo & Nsumbu health facility Catchments
- No new cases in the last 24 hours (Day 4 of Zero Reporting)
- The current outbreak case fatality rate stands at 2.9%,
- National Cumulative Cases in 2023:932 cases, 19 deaths, CFR 2.0% Nationally for 2023
- Nsama is one of the 9 districts across the country that has been experiencing sporadic outbreaks since 21st January 2023. Preparedness and Response activities, whilst ongoing, must also entail recalibration of Cholera Elimination activities for the country as a whole.

Figure 1: a. Epicurve of Cholera Cases as of 8th October 2023

Figure 2: b. Cases by age and sex





Public Health Actions

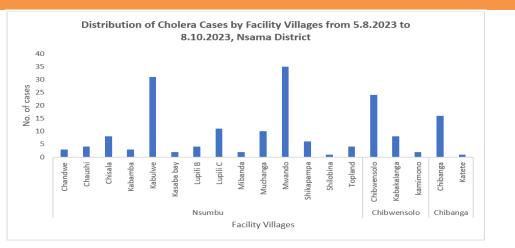
- 1. Enhanced WASH interventions with a100% distribution of domestic Chlorine for water Treatment at households' level in affected Areas.
- 2. Heightened surveillance throughout the district and neighboring especially the high-risk communities and districts (Monitoring of Acute watery diarrhea diseases)
- 3. Enhanced stakeholder engagement and risk communication

Operational Response Gaps

- 1. Defective Porta lab and no laboratory supplies, and reagents for water quality monitoring
- 2. Shortage of transport for response activities (vehicles, boats, and motorbikes),
- 3. inadequate resources allowances for staffs, and Community Based Volunteers.

Recommendations

- 1. Mobilize more resources to assist districts and provinces with operational costs, especially for community-based interventions.
- 2. Mobilize transport from key line ministries and partners through District and Provincial Epidemic Preparedness Prevention Control and Management Committees
- 3. Engage all key line ministries through the Committee of Permanent Secretaries and the Office of Vice President





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