



Zambia Cholera Outbreak | Situation as of 18th October 2023



Risk Level: High; Grade 3 Event Sitrep No.46

Situation Awareness/ Highlights

Data as 18th October 2023

District Reporting Cases; 2

Cumulative Cases; 938

Cumulative cases Nsama; 176
New:0

Cumulative cases Lusaka;5
New;4

Cumulative Deaths Nsama;5
CFR:2.8%

Cumulative Death Lusaka;1
CFR;0

Cumulative cases culture confirmed Nsama- 54

Cumulative cases culture confirmed Lusaka- 1

Dischargers in Nsama CTC
0

Discharges in Lusaka CTC
0

Currently Admitted in CTC Nsama
0

Currently Admitted in Lusaka CTC
0

Epidemiological overview

Currently, two (2) Districts in Zambia are responding to Cholera which are Nsama and Lusaka District. Nsama has been reporting cholera cases since confirmation on 10th August 2023, culminative cases seen is 176 whilst Lusaka received a Cholera alert from Kanyama Sub-district with the first case being identified on 14.10.23 and culture-confirmed as Vibrio Cholera O1 Ogawa on 15.10.23. **As at 18 hours 18th October 2023, we had 3 new suspected cases who met the case definition and 1 BID, 6 cumulative deaths representing a case fatality of 2.8%, the country has recorded a cumulative 938 cases since onset of outbreak this year.**

Lusaka district recorded the first confirmed on 15th October 2023 and this case was managed at Kanyama hospital. A BID which was discovered during contact tracing kept at UTH mortuary. This was closely linked to the index case. RDT test for the BID came-out positive. A rectal swab done for culture waiting for results. The RRT team engage the mourners gathered at the funeral to disperse. Another team follow-ups on at the deceased's workplace. This was successively done and a line list of 77 developed to closely monitor these contacts.

Note: Nsama 9 days Zero Reporting

LUSAKA DISTRICT

Planned activities for October 2023

- Provide safer alternative of water supply to areas that have erratic supply of water
- Surveillance, case management, community engagement and other Operational field response teams to have onsite and virtual trainings to be updated on case definitions
- Established Acute Watery Diarrhea (AWD) surveillance system to be strengthened
- Lobby and support the district with logistical supply
- Enhanced stakeholder engagement commenced with partners, other line ministries, and non-governmental organizations to ensure continued multisectoral response.
- Engage clinicians and other frontline health workers to increase the index of suspicion of cholera
- Enhance risk communication and community engagement especially on good hygiene practices



Ongoing community sensitization and disinfection of latrines in Kanyama

Current operational Gaps:

- Low index of suspicion by Clinicians and other frontline health care workers
- Erratic supply of water in areas serviced by Lusaka Water and Sewerage and the line is been engaged
- Inadequate water testing kits (RDT) for water quality monitoring
- Inadequate support for Community-Based Volunteers for enhanced community interventions.
- Accumulation of Historical solid waste in most parts of the community
- Communities using water from untreated shallow wells and borehole
- Inadequate sanitary facilities, households use shared toilets and flying (use of small containers) person toilets