

# Zambia Cholera Outbreak | Situation as of 6th September 2023



## **National** | Northern Province (Nsama)

As at 18 hours 6th September 2023, New cases 7 | Cumulative cases: 113 | Cumulative Deaths 5 | CFR: 4.4% | Currently admitted in CTCs: 6 | Discharged: 5 | New Admissions: 7

Risk Level: High;

# **Grade 3 Event**

## **Epidemiological Overview**

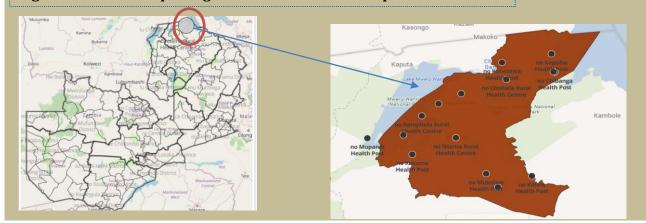
#### **Background:**

On 5th August 2023, Nsumbu Rural RHC notified Nsama DHO of having an increasing number of diarrhoea cases with suspected cases of Cholera at the facility. 5 stool samples were sent for laboratory confirmation and culture on the 5<sup>th</sup> of August 2023 with confirmation received on the 10<sup>th</sup> of August via culture, biochemical tests, serotyping and sensitivity. The index case was a male aged 49 years from Kabamba Village. He was brought to the health facility around 14:10hrs on 5<sup>th</sup> August, 2023 presenting with Dehydration and a history of watery acute diarrhoea with vomiting.

Cases were initially being managed successfully by the District rapid response team with support from the Provincial Health Office with additional support from the National Level Cholera IMS. The rapid escalation of cases and protraction of the outbreak warrants a robust National Activation of the Public Health Emergency Operations Centre with a need for a galvanized multisectoral response.

Nsama is one of the 9 districts across the country that has been experiencing sporadic outbreaks since 21<sup>st</sup> January 2023. Preparedness and Response activities, whilst ongoing, must also entail recalibration of Cholera Elimination activities for the country as a whole.

Figure 1: Districts Reporting Cholera Cases As at 6<sup>th</sup> September 2023



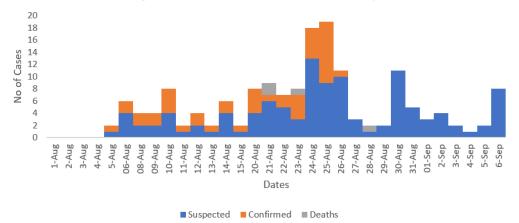
#### **NORTHERN PROVINCE**

#### NSAMA DISTRICT

#### (Affected: Chibanga, Kapisha & Nsumbu health facility Catchments)

- A total cumulative 113 cases including 45 culture positive for Vibrio Cholera, Serotype inaba 01
- Facility Catchment Areas: Nsumbu -8570, Chibwensolo-3592, Nsama District (74108)
- AR per 100,000 population: 933.4-Nsumbu, 918.7-Chibwensolo and 152.4-Nsama district as a whole
- New Mortality reported for 60 year of man brought in dead around 18hrs. Rectal swab RDT positive, culture pending
- Heightened surveillance occurring in Kaputa and Mpulungu for suspected cases
- Case fatality rate now at 4.4% which is way above target of <2%
- Geographical spread of cases continues as RCCE messaging due to inadequate support fo CBVs and limited access to safe water
- National staff deployment with support from DMMU
- National Cumulative Cases in 2023: 870 cases, 19 deaths, CFR 2.2% Nationally for 2023

Cholera Cases By Date of Onset from 5.8.2023 to 6.9.2023, Nsama District

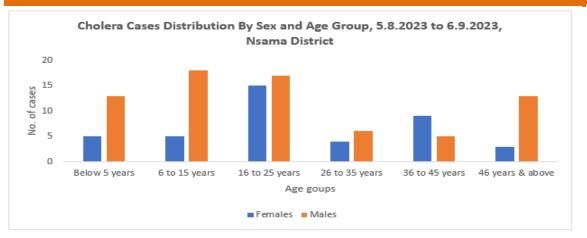




# Zambia Cholera Outbreak | Situation as of 6<sup>th</sup> September 2023



### National | Northern (Nsama) Risk Level: High | Grade 3 Event



#### **Operational Response Gaps**

- Rocky terrain makes some areas impassable hence water bowser not being used to provide clean water
- Shortage of transport for contact tracing(Motor vehicles, motor bikes, boats for marine transport)
- Only 20 Community-Based Volunteers available for the response due to lack of motivation and limited incentives,
- Need for additional support for surge staff from within other parts of Nsama and neighbouring districts to avoid burn out for the HCW who have been in the fore of this protracted response
- Inadequate laboratory supplies and reagents for water quality testing

#### **Public Health Actions**

- 1. Heightened surveillance throughout the district and neighbouring especially the high-risk districts
- 2. Enhanced WASH interventions including distribution of domestic Chlorine by CBVs
- 3. Procured 2000 shippers of chlorine which are now en route to the district
- 4. Preparations underway for reactive Oral Cholera Vaccination campgain to be conducted in the Nsama, Nchelenge and Chiengi
- 5. Intensified risk communication and community engagement

### **Recommendations**

- Mobilize more resources to assist districts and provinces with operational costs, especially for community-based interventions. Enhance community engagement, especially of the traditional and civic leaders to raise awareness and risk perception among their subjects
- 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
- 4. Hold National Epidemic Preparedness Prevention Control and Management Committee for enhanced multi-sectoral outbreak coordination and resource mobilization

Clockwise from the right

(i) Door-to-door distribution of household chlorine in Chandwe village

(ii) Chisala stream where villagers continue to collect water from due to limited sources for clean water



