

Continent	Country	Disease	New vs Update	lag
AFRICA	Algeria	Influenza cases rise		
		Measles outbreak		
	Congo (DRC)	Polio cases		
	Central African Republic	Monkeypox outbreak		
	Nigeria	Cholera outbreak		
		Meningites cases		
		Lassa Fever		
		Yellow fever		
	Somalia	Cholera outbreak		
	South Africa	Malaria Cases		
	South Africa & Namibia	Listeriosis outbreak		
	South Sudan	Rift Valley fever outbreak		
	Uganda	Cholera outbreak		
Zambia	Cholera outbreak			
Zimbabwe	Cholera			

Continent	Country	Disease	New vs Update	Flag
ASIA & PACIFIC	Philippines	Measles outbreaks		
	India	mosquito-borne diseases		
	Thailand	Rabies		
	Micronesia	Mumps outbreak		
	New Caledonia (France)	Dengue fever outbreak		

Continent	Country	Disease	New vs Update	Flag
MIDDLE EAST	Saudi Arabia	MERS-CoV		

Continent	Country	Disease	New vs Update	Flag
EUROPE	Servia	Measles Outbreak		
	Spain	Malaria Case		
	United Kingdom	Scarlet Fever		

Continent	Country	Disease	New vs Update	Flag
AMERICAS	Peru	Yellow fever		
	Venezuela	Measles outbreak		

Uganda: Cholera outbreak

During February, more than 27 000 Congolese refugees have crossed Lake Albert into Uganda and a outbreak of cholera has been declared in the Kyangwali refugee settlement, located in Hoima district, mostly affecting newly arrived refugees from DRC. Since the outbreak began in mid-February, more than **1,460 suspected cases**, including more than **30 deaths**, have been reported. Further cases have been reported in Kyaka II Refugee settlement in Kyegegwa District.

The settlements close to the landing sites at the shores of Lake Albert are most vulnerable to infection. Cholera cases have been detected in villages around Hoima district, including in the sub-counties of Buseruka, Hoima and Kabwoya.

The rapid escalation in cholera cases during this time could indicate a high transmission rate and is mainly due to poor water quality, sanitation and hygiene. A public health response is underway including the setup of treatment centres, efforts to improve water quality and sanitation, and enhanced surveillance

Venezuela: Measles outbreak

A measles outbreak which began in June 2017 continues around the country, with over **950 cases confirmed**. Bolivar State is the most affected, although cases have also been reported in the **Capital District and the states of Apure, Anzoategui, Delta Amacuro, Miranda, Monagas, Vargas, and Zulia**. Around 60% of cases have been reported in children under 5 years, and around 30% in children aged 6-15 years

The Ministry of Health is working with the World Health Organization to vaccinate children 6 months - 10 years as well as people aged 11 years and older who had contact with a confirmed cases

Measles is caused by a highly contagious virus that spreads from person-to-person via infected droplets. Outbreaks occur frequently in under-vaccinated populations.

Serbia: Measles outbreak

A measles outbreak which began in October 2017 continues around the country, with over 1,700 cases confirmed. Around 30% of all those infected were hospitalized for treatment. Several people have died, including one in Belgrade. This marks the nation's first death from measles in 20 years

Most cases have occurred among unvaccinated people or people who did not have a full vaccination series, especially children under 5 and adults over 30 years old.

Measles is caused by a highly contagious virus that spreads from person-to-person via infected droplets. Outbreaks occur frequently in under-vaccinated populations

The Institute of Public Health is working to vaccinate children under 14 years old in an attempt to control this outbreak. They have also increased surveillance measures

Spain: Single case of malaria

European health authorities have reported a confirmed case of malaria in a three-month-old baby from Madrid, Spain. The infant had been hospitalised several weeks with an unrelated health condition and had no history of travel to a malaria area

The source of infection is being investigated by authorities. There is no indication of an outbreak

Malaria is spread through mosquito bites and can be fatal unless promptly treated

Spain declared the elimination of malaria in 1964. The majority of malaria cases reported in Spain are acquired abroad

United Kingdom: Increase in Scarlet Fever

Since the start of the season in September 2017, more than **11,000 cases** of scarlet fever have been documented. The case numbers are higher than the number reported for the same time period in the previous four years.

Scarlet fever is a bacterial infection most common in children, although anyone can be infected.

The disease is very contagious and is spread from one person to another through infected droplets. It is treated with antibiotics. There is no vaccine for scarlet fever.

Philippines: Measles outbreaks

Since the beginning of 2018, more than 870 cases of measles including at least 12 fatalities have been recorded. The case numbers are significantly higher compared with the same period last year. Most affected areas include Autonomous Region in Muslim Mindanao, Zambaonga Peninsula and Davao Region

Authorities have implemented vaccination campaigns. Measles is caused by a highly contagious virus that spreads from person-to-person via infected droplets. Outbreaks occur frequently in under-vaccinated populations.

Saudi Arabia: MERS-CoV

In January, a man who performed Umrah was diagnosed with MERS-CoV after return to Malaysia in December. He was known to have had contact with camels and had consumed raw camel milk. New cases of MERS-CoV are reported almost every week - in people who have contact with camels, some who have had exposure to household contacts with MERS-CoV, occasionally in healthcare workers, and for some no risk factor has been identified. Almost all regions have reported cases.

The virus is present in camels and can be transmitted to people who have direct contact or consume raw camel product

Some people who have tested positive for the virus have no symptoms, some have had a mild illness, while others develop a severe illness, and fatalities continue to be reported. Saudi Arabia has recorded **over 1,815 human cases since 2012, of which more than 736 have been fatal**. Several hospital-based outbreaks have occurred

Algeria: Influenza cases rise

A significant rise in influenza case numbers has been recorded since the first week of 2018.

Most cases tested positive for influenza B and A(H1N1)pdm09 strains of the virus. The current northern hemisphere influenza vaccine protects against these strains. Influenza is a viral illness, most cases are mild although some can be severe or even fatal. Pregnant women, adults over 65 and young children are at higher risk of severe illness.

Somalia: Cholera outbreak

Over **1,100 cases** of cholera including at least 8 deaths have been reported since January, 2018. Due to lack of safe drinking water and uncontrolled movement of people, the outbreak, which began in the Beletweyne district of the Hiran region, has spread across 16 districts in the Banadir region. The Banadir region is highly populated and includes the capital city of Mogadishu. Cases have also been reported in Lower Juba and Middle Shabelle

Cholera is endemic in Somalia and spreads via contaminated food and water. In 2017, a large outbreak, across Somalia and Ethiopia, affected almost 80,000 people and recorded over 1,150 deaths.

The World Health Organization and Ministry of Health are working together to prevent further spread of the disease, including the development of regional cholera treatment centres

Tanzania: Cholera

Since the beginning of 2018, around **1,400 cases** and **27 deaths** have been reported. Active transmission continues in Dodoma, Iringa, Morogoro, Rukwa and Ruvuma regions. At least 26 of the 31 regions have reported cholera cases

Cholera spreads via contaminated food and water.

Cholera treatment centres have been set-up in affected areas, and efforts to improve water quality have been scaled up.

Cholera outbreaks are common in Tanzania, and there are ongoing outbreaks in neighbouring countries Kenya, Malawi, Mozambique, Uganda and Zambia

Zambia: Cholera outbreak

More than **4,400 confirmed and suspected cases** of cholera, including at least **89 deaths**, have been reported in the country, with the majority from the capital city Lusaka, in Lusaka Province. The initial outbreak began late September 2017 and has had two phases. The larger second phase began surging in November, with **new weekly cases declining since mid-January**. Heavily affected areas include the Lusaka sub-districts of; Bauleni, Chawama, Chelston, Chipata, Kanyama and Matero. Other districts in Central, Copperbelt, Eastern, North-Western and Southern Provinces have also reported recent cases.

The majority of cases have been recorded in children. Cholera outbreaks are a regular occurrence in Zambia and the disease is spread via contaminated food and water.

Health authorities with support from the WHO have launched a campaign to vaccinate people in Lusaka.

Screening measures have been put in place by the neighbouring country Zimbabwe to prevent outbreak spreading in to the country.

South Sudan: Rift Valley fever outbreak

As of 9 March 2018, a total of 40 human cases of Rift Valley fever (RVF) have been reported in Yiro East and Yiro West Counties, Eastern Lakes State, including four fatalities.

Of the fatalities, the first case was a 30-year-old pregnant woman who fell ill on 7 December and died on 19 December. Two other teenagers from the same village died in late December. Although the cases did not have close contact with each other, they are linked by time of symptom onset and location

Six cases have been confirmed, three cases are probable, 12 cases are suspected with laboratory results pending. Nineteen cases have been excluded as non-cases following negative laboratory results for RVF.

Testing of samples continues. The disease can be transmitted to humans via contact with the blood, organs, or bodily fluids of infected animals. Infection can also occur through the bite of an infected mosquito or other bloodsucking insects.

The Ministry of Health is working with the World Health Organization and other partners to determine the cause. Local animals have also shown evidence of a haemorrhagic fever and some samples have also tested positive for previous Rift Valley Fever infection

South Africa, Namibia: Listeriosis outbreak

More than 945 cases of listeriosis have been confirmed since the beginning of 2017, over ten times the usual 60-80 cases recorded per year. At least 180 deaths have occurred

An Enterprise Foods production facility in Polokwane has been linked to the outbreak. Authorities have urged people to avoid all ready-to-eat meat products until further notice. Another manufacturer, Rainbow chicken limited (RCL), is also being investigated.

Although most cases have occurred in Gauteng (including in Johannesburg), Western Cape and KwaZulu-Natal, all nine provinces are affected. In March 2018, media sources reported that a man who ate sausage in Namibia had also become ill.

Listeriosis is caused by consuming foods contaminated with the *Listeria monocytogenes* bacteria. It can cause severe illness or can be fatal among people in high risk groups.

Affected people reported symptoms most commonly with "polony" (sausage meat), followed by viennas/sausages and other 'cold meats'. The products have been recalled and authorities have advised the public to not consume any ready-to-eat processed meat product until further notice.

The nation has restricted imports of some South African meat products, as has Botswana, Kenya, Malawi, Mozambique, Swaziland, Zambia and Zimbabwe

Congo (DRC): Polio cases

At least **22 cases** of circulating vaccine-derived poliovirus type 2 (cVDPV2) have been recorded since February 2017.

Cases have been confirmed in: Butumba, Lwamba, Malemba and Nkulu Mukanga health districts in Haut Lomani province; Kundu health district in Maniema province; Ankoro and Manono health districts of Tanganika province

The cVDPV strain can emerge in under-vaccinated populations. Cases of wild polio virus have not been recorded in the country since late 2011.

Polio is a contagious viral illness that causes paralysis and death. The infection is spread through ingestion of contaminated food or water, or directly from an infected person

On 13 February, the Ministry of Health declared a national public health emergency for the ongoing cVDPV2 outbreak. Surveillance has been increased and polio vaccination campaigns are being conducted in at risk health districts to limit the spread of disease.

Nigeria: Cholera outbreak

Over 500 suspected cases of cholera have been reported, some of which have been confirmed on testing. Kukawa Local Government Area is most affected

Half of all cases are in children under 5 years old.

Cholera spreads via contaminated food and water Authorities are responding by improving water supplies and sanitation, setting up treatment facilities, and educating the public on preventive measures.

Cholera is consistently present in Nigeria, and outbreaks are common. A large outbreak occurred in Borno in 2017

India: Increase in mosquito-borne diseases

An increase in mosquito-borne illnesses has been reported in Hyderabad possibly due to changes in weather conditions. These mainly comprise of dengue and malaria. Those affected may develop flu-like symptoms such as fever, head/body aches and generalised weakness. There is no specific treatment for dengue but there is medication available to prevent and to treat malaria. Although a vaccine for dengue has been developed, it is only available in a few countries and currently not used for travellers.

South Africa: Malaria cases

Two children who visited reserves near Vaalwater in the Waterberg region, Limpopo province, (where malaria is usually not present) were diagnosed with malaria after return to the United Kingdom. The family transited through Johannesburg and had not been to any areas where malaria is known to occur

Malaria is spread through mosquito bites and can be fatal unless promptly treated.

Prevent mosquito bites at all times while in South Africa.

Malaria is usually limited to low altitude areas along the border with Zimbabwe and Mozambique, in parts of the provinces of Mpumalanga, Limpopo and Kwazulu-Natal. The risk is highest from October to May

Central African Republic: Monkeypox outbreak

An outbreak of monkeypox has been reported in Ippy, Ouaka prefecture, affecting at least eight people. A 29-year-old fisherman in Djama Ngoundji village, Ouaka, and a 50-year-old woman living in a displaced persons camp in Kopia village are confirmed infected. At least six others have been hospitalised with symptoms. Investigations are underway to determine the source of exposure and the extent of the outbreak

The Nation's Health Minister has declared a monkeypox outbreak.

People can contract the virus from an infected animal. They may be bitten or come into contact with an infected animal's skin, blood or body fluids. Infected people can pass on the disease to others.

A United Nations source also reports that three possible cases are being investigated in Bria, in the eastern prefecture of Haute-Kotto. This area is near the site of the country's last monkeypox outbreak, in 2016

Nigeria: Meningitis cases

Nationally, more than **1,150 suspected cases of meningitis including at least 120 confirmed** have been reported since September 2017. Over half of the confirmed cases have tested positive for meningococcal meningitis. Zamfara state is worst affected. Other affected states include Adamawa, Bauchi, Borno, Cross River, Gombe, Jigawa, Kaduna, Katsina, Kano, Kebbi, Niger, Plateau, Sokoto and Yobe.

Meningococcal meningitis is a serious bacterial infection that can be rapidly life-threatening. It spreads from person-to-person via infected droplets.

Much of Nigeria lies in the 'meningitis belt' of Africa, and outbreaks of meningococcal meningitis are common, especially during the dry season (December through to June).

Nigeria: Lassa Fever

The current outbreak has been ongoing since December 2016. In 2018, over 1,490 cases of Lassa fever have been reported from at least 19 states, including more than 115 fatalities. Suspected and confirmed cases have been reported in the states of Anambra, Bauchi, Benue, Delta, Ebonyi, Edo, Ekiti, FCT, Gombe, Imo, Kaduna, Kogi, Lagos, Nasarawa, Ondo, Osun, Plateau, Rivers and Taraba. The southern states of Edo, Ondo and Ebonyi have reported most of the cases this year.

Lassa fever is a viral haemorrhagic fever. Humans can be infected via contact with excretions from infected rodents. During outbreaks, the disease can spread to people who have direct contact with the body fluids of an infected person.

Healthcare workers from six states have been affected, some of whom died. Some cases were exported from Nigeria and have been identified in Benin.

The Nigerian Centre of Disease Control (NCDC) is assisting several states in their response and surveillance activities. The Ministry of Health has implemented a rapid response and raising awareness in healthcare workers to use appropriate infection control procedures. Lassa fever is persistently present in Nigeria, and outbreaks are common

Nigeria: Yellow fever

The first yellow fever case was identified mid-September in Ifelodun Local Government Area of Kwara state. Since then, at least 96 confirmed positive cases have been reported in Kano, Kebbi, Kogi, Kwara, Nasarawa, Niger and Zamfara states, and over 1445 suspected cases have been reported in 30 states and FCT Abuja. The affected states include Abia, Akwa Ibom, Anambra, Bayelsa, Borno, Cross Rivers, Delta, Ebonyi, Edo, Ekiti, Enugu, Imo, Jigawa, Kaduna, Kano, Katsina, Kebbi, Kogi, Kwara, Lagos, Nasarawa, Niger, Ogun, Ondo, Oyo, Osun, Plateau, Rivers, Sokoto and Zamfara states. At least 45 deaths have been recorded.

Authorities are implementing measures to prevent further spread. Vaccination campaigns have been conducted and/or planned in high risk areas of Abia, Borno, Kogi, Kwara and Plateau states, to prevent spread of the disease in the affected area and surrounding communities

Yellow fever is a potentially severe viral illness, spread via mosquito bites. Vaccination and mosquito bite prevention can greatly reduce the chances of getting infected. Vaccination is recommended for all travellers over 9 months of age going to Nigeria.

Zimbabwe: Cholera

Another outbreak of cholera has been declared in in Chegutu Municipality, Mashonaland West Province, a month after the last case in the previous outbreak was detected. Cholera is a persistent threat in Zimbabwe and the disease is spread via contaminated food and water.

Peru: Yellow fever

Since the beginning of 2018, at least 22 suspected cases have been reported, of which eight have been confirmed. A majority of the cases are from the Calleria district, Coronel Portillo province in Ucayali department. The area is considered at-risk for yellow fever

It is a potentially severe viral illness, spread via mosquito bites.

Vaccination is recommended for anyone more than 9 months of age who will visit places below 2,300m (7,546ft.) elevation in the following region

Algeria: Measles outbreak

Since the beginning of 2018, more than 3,000 cases of measles including a few fatalities have been reported. Affected areas include Algiers, Biskra, Constantine, El-Bayadh, El Oued, Illizi, Medea, Ouargla, Relizane, Tamanrasset, Tebessa, Tiaret and Tissemsilt

Measles is caused by a highly contagious virus that spreads from person-to-person via infected droplets. Outbreaks occur frequently in under-vaccinated populations

Thailand: Rabies

At least five human fatalities have been reported and hundreds of people have required preventive treatment after an animal bite

Humans contract rabies when bitten, scratched or licked by an infected animal - such as dogs, cats and bats. All such exposures must be treated seriously. Post-exposure treatment is very effective in preventing rabies, if given promptly. Without treatment, the disease is invariably fatal.

Rabies activity has increased in the animal population with the majority of infections in dogs. **Over 35 provinces have been identified as rabies epidemic zones, locations where an infected animal or person have been reported.** Animal health authorities have been conducting mass vaccination of dogs in the affected areas

Micronesia: Mumps outbreak

An outbreak of mumps is ongoing in Chuuk state. Mumps is caused by a virus that spreads from person-to-person via infected droplets. It is highly contagious and nearly all cases occur among unvaccinated people. Serious complications can occur

New Caledonia (France): Dengue fever outbreak

An outbreak of dengue fever was declared on 22 February. Since the start of 2018, **more than 280 cases** have been detected nationwide. All areas are affected, including Noumea. The disease is spread by mosquitoes, and is present in both rural and urban areas. Health authorities are taking action to reduce mosquito breeding grounds and educate the public