



# Yobe State Cholera Outbreak Situation Report

No. 37: 26th October 2018

Yobe State Ministry of Health

## Highlights:

- 6 new cases were reported on 26th October 2018 from 2 LGAs (Gulani and Damaturu).
- 0 death was reported.

## Epidemiological Summary:

The total number of suspected cholera cases reported in Yobe state is 1,689 with 61 associated deaths (CFR 3.61%). In the state, up to 551 cases have been reported in Gulani LGA, 478 cases in Gujba LGA and 412 cases in Damaturu LGA. In Fune LGA, 181 cases were reported and 67 cases were reported in Potiskum LGA (from 10 wards).

Out of 73 samples collected and tested using cholera RDTs, 58 (79.5%) were positive and 15 (21%) were negative. Again, 9 (47%) out of 19 samples cultured were positive for *Vibrio Cholerae*. However, the 9 positive samples were taken to national reference laboratory for quality checks and further analysis samples and *Vibrio Cholerae* O1 (Inaba) serotype was isolated in 4 out of the 9 samples.

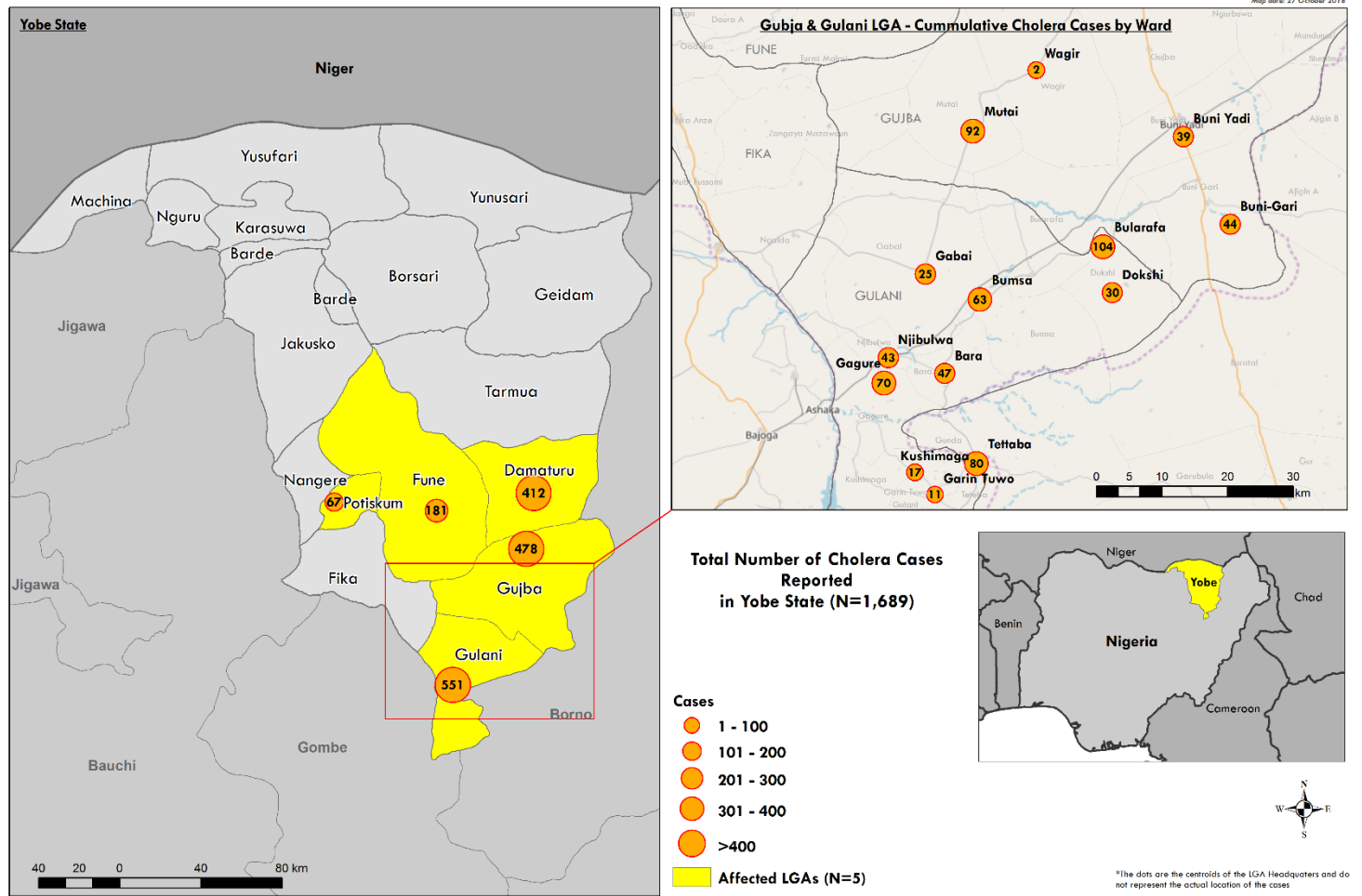
Table 1: Summaries of suspected cholera cases in Yobe State from July to 26<sup>th</sup> October 2018.

	Gulani	Gujba	Damaturu	Fune	Potiskum	Total
<b>Cases</b>						
New suspected cholera cases	1	0	5	0	0	6
Cumulative suspected cholera cases	551	478	412	181	67	1689
Number of wards in the LGA	12	10	11	13	10	56
Number of wards affected	10	8	11	9	10	48
<b>Deaths</b>						
New deaths	0	0	0	0	0	0
Cumulative deaths	20	19	6	12	4	61
<b>Laboratory</b>						
Number of specimen tested (RDT)	18	12	31	12	0	73
Specimen Positive RDT	15	11	23	9	0	58
Pending result for RDT	0	0	0	0	0	0
Number of samples cultured	5	8	5	1	0	19
Specimen Positive Culture	2	4	2	1	0	9
Pending result for Culture	0	0	0	0	0	0

Six (6) new suspected cholera cases reported in Yobe state on 26<sup>th</sup> October 2018, showing a 57% decrease in the number of cases reported compared to that of the previous day (Fig. 2). Only one (1) of the new cases reported was from Gulani LGA (Fig 4) while Five (5) cases were reported from Damaturu (Fig. 10). No case was reported from Gujba (Fig 6) and none too from from Fune (Fig 8) while Potiskum has not reported any case in over 4 weeks (Fig. 12).



Yobe State, Nigeria - Number of Cholera Cases Reported from 22nd August to 26th October 2018



Data source:  
Yobe State Ministry of Health  
World Health Organization, OpenStreetMap

World Health Organization (WHO)  
Map production: WHO Health Emergencies Programme

The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status

Figure 1: Map of Yobe State showing number of suspected cholera cases in affected wards and LGAs

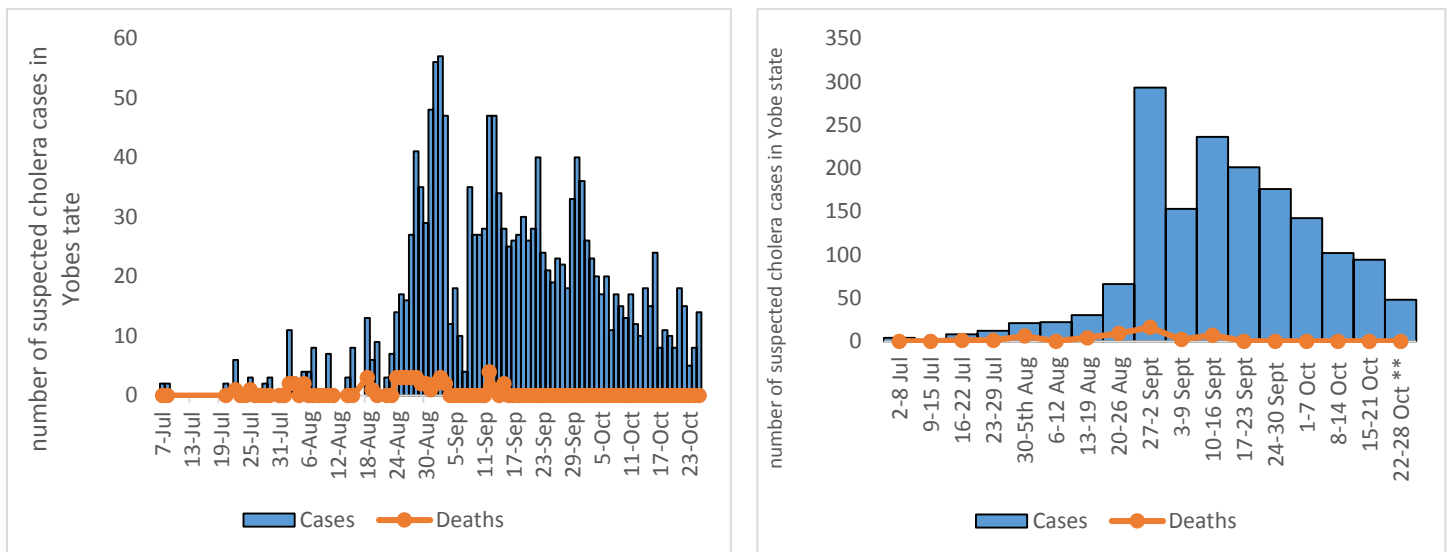


Figure 2: Epi-curve of suspected cholera cases in Yobe state.

Figure 3: Epi-curve of suspected cholera cases in Yobe state.

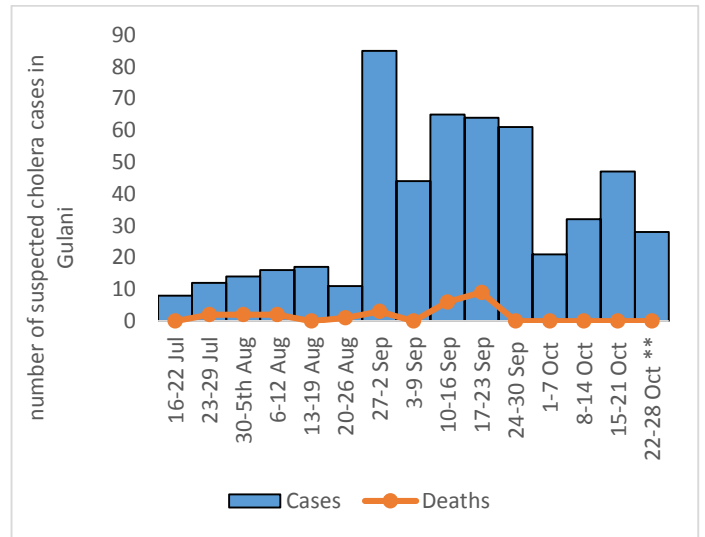
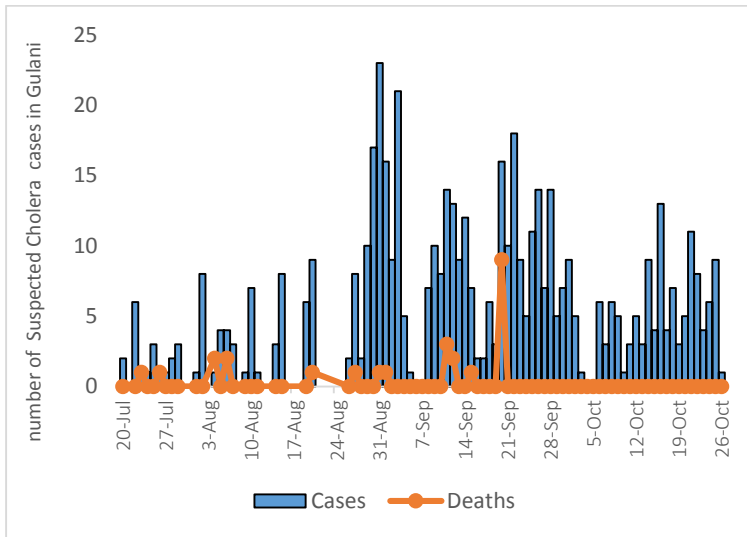


Figure 4: Epi-curve of suspected cholera cases in Gulani LGA.

Figure 5: Weekly Epi-curve of suspected cholera cases in Gulani LGA.

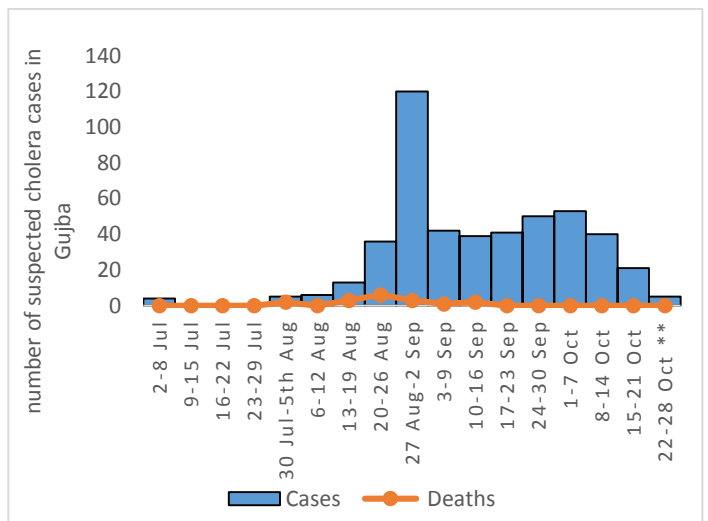
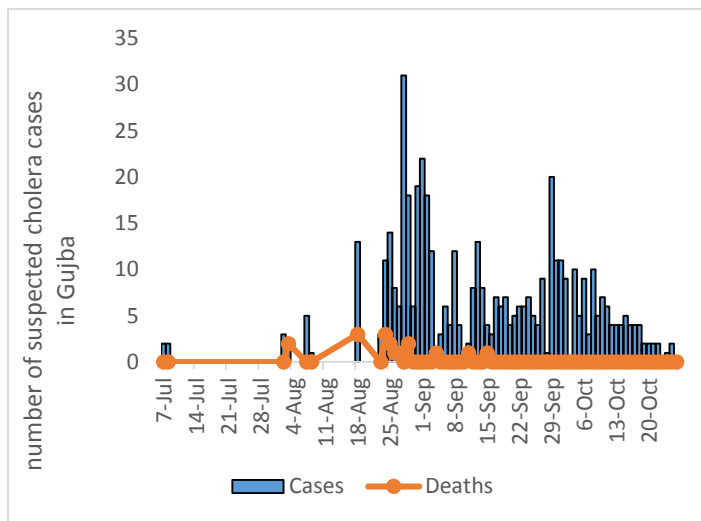


Figure 6: Epi-curve of suspected cholera cases in Gujba LGA.

Figure 7: Weekly Epi-curve of suspected cholera cases in Gujba LGA.

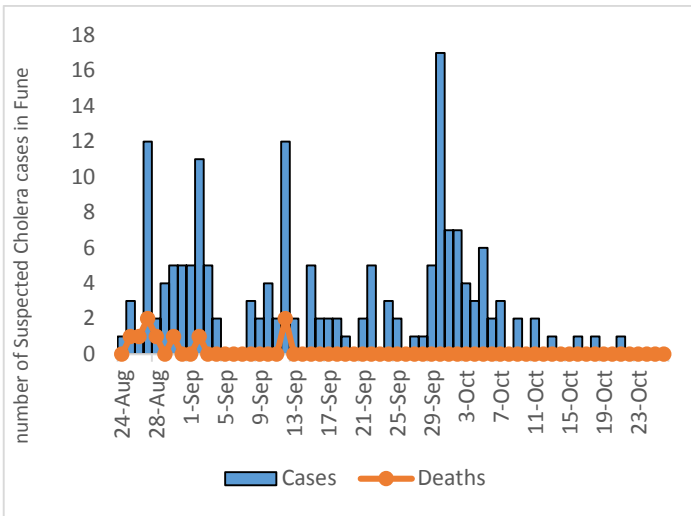


Figure 8: Epi-curve of suspected cholera cases in Fune LGA.

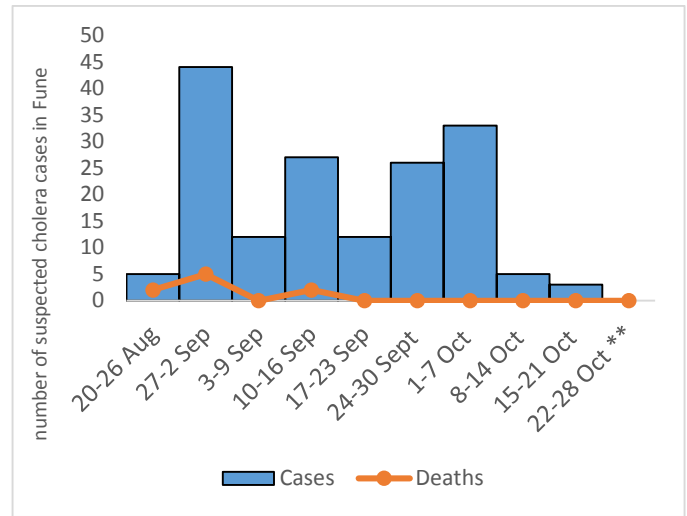


Figure 9: Weekly Epi-curve of suspected cholera cases in Fune LGA

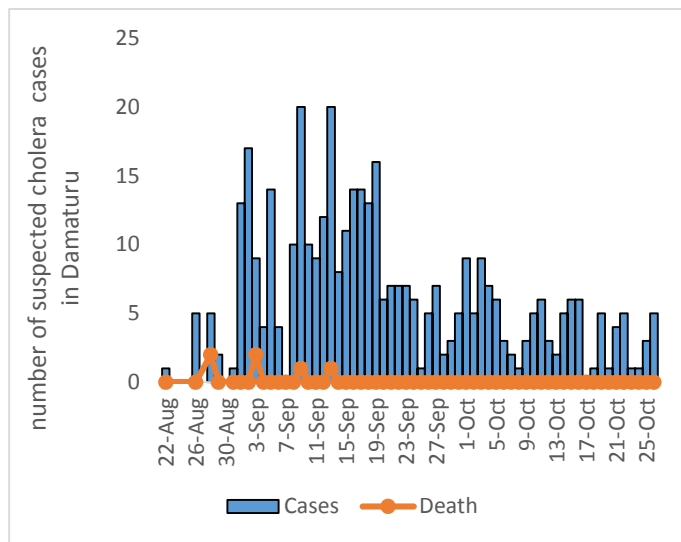


Figure 10: Epi-curve of suspected cholera cases in Damaturu LGA.

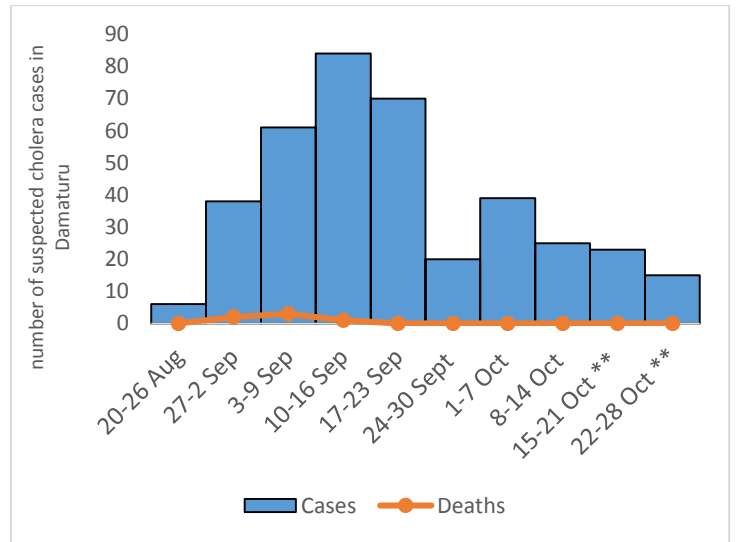


Figure 11: Weekly Epi-curve of suspected cholera cases in Damaturu LGA

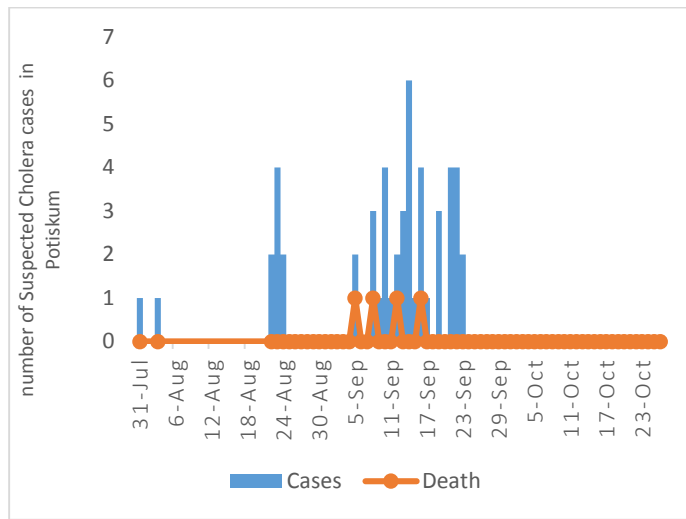


Figure 12: Epi-curve of suspected cholera cases in Potiskum.

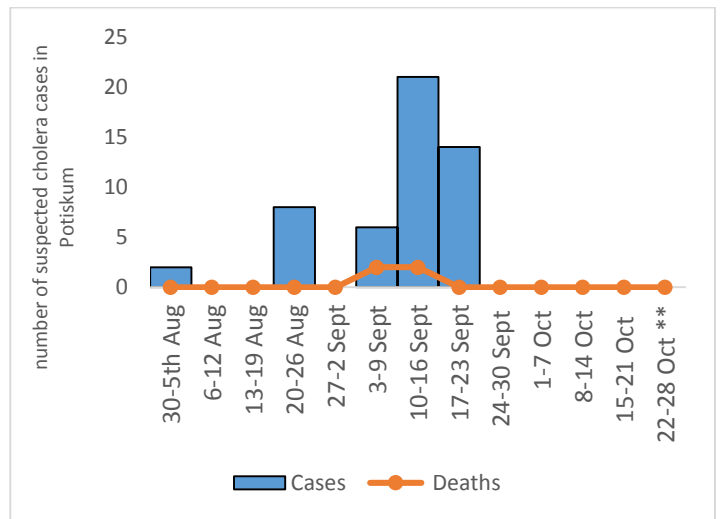


Figure 13: Weekly Epi-curve of suspected cholera cases in Potiskum.

## Response Activities

### Surveillance:

- Continues line listing of all suspected cholera cases within the city and neighboring communities.
- Active case search in communities and health facilities has been intensified through EHA, HTR and LGA RRT team in Gulani and Damaturu where active cases were currently being reported.
- Conducted investigation of new suspected cases from 3 LGAs (Gujba, Damaturu, and Gulani)
- WHO supported EHAs conducted house-house active case search in Gujba, Gulani, Fune, Potiskum and Damaturu reaching up to 158 households, no case was identified.
- Priority areas have been identified and communicated to WASH and risk communication teams to scale-up interventions.

### Case Management:

	Gulani	Gujba	Damaturu	Fune	Potiskum	Total
<b>Admissions</b>						
New admissions	1	0	5	0	0	6
New Discharges	7	0	2	0	0	9
On admission	3	0	5	0	0	8

- No suspected cholera case has been reported in Potiskum LGA since 24th September 2018.
- No mortality was reported in all affected LGAs.

### Risk Communication:

- Continues sensitization of Islamiyya and Tsangaya school is ongoing in Galani, Gujba and Damaturu.
- Airing of radio jingles by Yobe Radio Broadcasting Corporation has continued across the state.
- WHO and UNICEF field volunteers distributed 368 sachets of Aqua-tabs in Gulani, Damaturu and Gujba LGAs
- WHO HTR teams, CORPs, AAH, MSF, ICRC, Rescue and UNICEF supported volunteers continue to sensitized peoples on hygiene promotion and health education on hand washing, water purification and dangers on open defecation reaching up to 625 households in Damaturu, Gujba, Fune and Gulani LGAs.

### WASH:

- Distributions of NFIs such as Jerry cans, bucket detergent, antiseptic soaps, synthetic mats etc. to the affected high risk household is currently ongoing through the facilitation of Wash partners and WHO EHAs
- UNICEF, AHH, MWR and RUWASA have intensified wash activities through engaging additional staff to support ongoing bucket-to-bucket chlorination and disinfection of households in Gulani and Damaturu.
- Wash Teams and WHO supported volunteers have disinfected 56 households in Gulani and Damaturu.

**Coordination:**

- LGA RRTs in Gujba, Gulani, Damaturu and Fune LGA conducted daily local coordination meetings, and provided updates to state RRT to mobilize additional resources and technical supports
- Daily coordination meetings were consistently being chaired by SMOH at the state level to ensure robust and effective response activities.