

Current major event

Update on the ongoing outbreaks in Sudan

Multiple concurrent outbreaks of emerging infectious diseases that were reported in Sudan in 2021 have continued into the first 11 weeks of 2022 including COVID-19, hepatitis E virus, dengue fever, malaria and measles. WHO is working closely with the Federal Ministry of Health and partners to scale up the response interventions to contain the above outbreaks and minimize their impact.

Editorial note

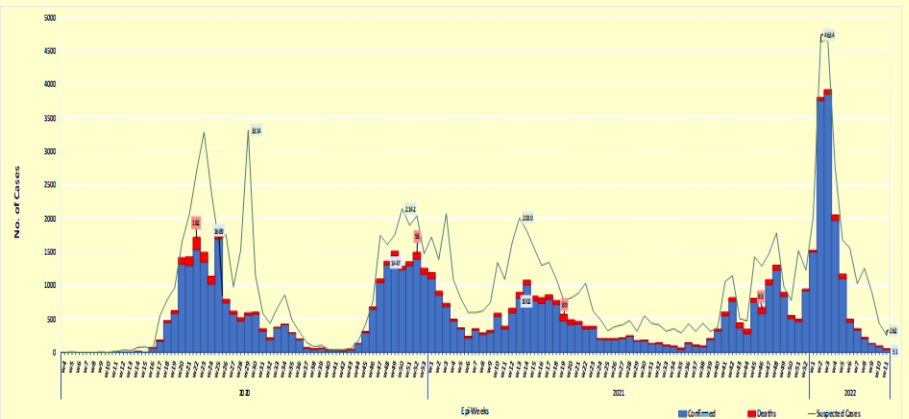
As of 18 March 2022, a total of 111 396 suspected COVID-19 cases were reported from Sudan with 61 834 (55.6%) cases being confirmed including 4897 associated deaths, giving a case-fatality ratio (CFR) of 7.9%. The most affected states are Khartoum, River Nile, Northern State, Gezira, Sinnar, Gedarf and White Nile. COVID-19 infections among health care workers represent 1.7% (1070) of the total confirmed cases. Male patients represent 57.5% of the total confirmed cases and the 20–29.9 age group is the most affected of the total confirmed case (representing 19.2%) while 75% of the total deaths detected are above 60 years old. As of 1 March 2022, 4 669 563 people representing 10.5% of the population were fully vaccinated.

As of 18 March 2022, 2128 suspected hepatitis E virus (HEV) cases including 24 associated deaths were reported in Sudan (attack rate 0.4/1000, CFR 1.1%). Gedarf State reported the highest number of cases, followed by South Darfur then North Darfur (75.7%, 16.9% and 4% respectively). North Darfur State reported the highest number of HEV-associated deaths, accounting for 87.5% of all such deaths. Of the states reporting deaths, 13 were associated with pregnancy (62%) and 10 were reported from one health facility in Dar Al-Salam locality (77%). Male patients constituted 60.7% of the total HEV cases, with the most affected age group being the 15–29.9 year-olds (49%).

The current outbreak of dengue fever started in August 2021. As of week 6, 2022, the total number of reported cases has reached 1118 including four deaths, (AR 0.5/10 000; CFR 0.4%). A total of 156 specimens collected from suspected dengue fever patients were confirmed by RT-PCR at the National Public Health Laboratory. The outbreak is being reported by 31 localities in seven states. Kassala State represents 77.3% of the total reported cases, followed by North Darfur at 13% and North Kordofan at 7.3%. Females represent 51% of cases, with cases aged 20–29 years being the most frequently reported (21.5%). The most frequently reported symptoms include fever (92.3% of the cases), headache (85.2%), joint pain (84.4%) and bleeding (17.8%).

In 2021, an upsurge of measles case was reported in nine states of Sudan (15 localities in total). The total number of suspected cases reached 1611, with 415 cases confirmed by PCR testing and 256 cases being epi-linked. The outbreak in Red Sea State started in

Weekly epidemiological curve of COVID-19 in Sudan 2020–2022



Reported outbreaks in Sudan As of March 18 2022

Disease	Suspected cases	Confirmed cases	Deaths	CFR
COVID-19	111 396	61 834	4897	7.9%
Hepatitis E virus	2128		24	1.1%
Dengue	1118	156	4	0.4%
Measles	2163	415	13	0.6%
Malaria	431 325		23	0.01%

week 42, 2021 and a total of 395 cases with four associated deaths were reported as of week 10, 2022 (CFR 1%). Over 93% of the cases from Red Sea State were reported from Port Sudan locality. The majority of the cases are children below 5 years of age. Male cases represent 53% of the total cases while 62% were not vaccinated.

In East Darfur, the first measles outbreak started in week 3, 2022, and the total suspected cases reached 157 including five associated deaths (CFR 3.1%). The majority of cases were reported from Funga area, Alfridose locality. Suspected measles cases were also reported from South Darfur, River Nile, Northern State, White Nile, West Darfur, North Darfur, Blue Nile and Khartoum. Vaccination coverage in Sudan for Measles-containing-vaccine first-dose (MCV1) and Measles-containing-vaccine second-dose (MCV2) were 78% and 60%, respectively. None of the localities achieved 95% coverage for MCV2.

Until week 8, 2022, a total of 431 325 malaria cases including 23 deaths were reported from all the 18 states (AR 10.4/1000; CFR 0.01%). Of these cases, 69% were reported among the above five year-olds. In 2022, nine states crossed malaria epidemic threshold during at least 2 weeks. White Nile, Sinnar, Kassala, River Nile and West Kordofan states are above the epidemic threshold since the beginning of the year. Red Sea, Gedarf, and South Darfur states remain below the epidemic threshold since week 1, 2022. Malaria incidence during the first eight weeks of 2022 shows a 15% average increase compared to similar weeks in 2021.

Update on outbreaks in the Eastern Mediterranean Region

COVID-19 in 22 EMR countries

Current public health events of concern [cumulative N° of cases (deaths), CFR %]

Coronavirus disease 2019 (COVID-19): 2019–2022

Afghanistan	[177 116 (7654), 4.3%]
Bahrain	[544 851 (1465), 0.3%]
Djibouti	[15 573 (189), 1.2%]
Egypt	[500 889 (24 361), 4.9%]
Iran (Islamic Republic of)	[7 141 033 (139 610), 2%]
Iraq	[2 316 044 (25 129), 1.1%]
Jordan	[1 689 314 (14 003), 0.8%]
Kuwait	[627 342 (2553), 0.4%]
Lebanon	[1 088 196 (10 248), 0.9%]
Libya	[501 015 (6374), 1.3%]
Morocco	[1 162 497 (16 052), 1.4%]
occupied Palestinian territory (oPt)	[654 954 (5641), 0.9%]
Oman	[387 505 (4250), 1.1%]
Pakistan	[1 521 888 (30 329), 2%]
Qatar	[359 956 (677), 0.2%]
Saudi Arabia	[749 597 (9028), 1.2%]
Somalia	[26 410 (1361), 5.1%]
Sudan	[61 842 (4897), 7.9%]
Syrian Arab Republic	[26 410 (3127), 5.6%]
Tunisia	[1 029 762 (28 065), 2.8%]
United Arab Emirates	[887 732 (2302), 0.3%]
Yemen	[11 801 (2140), 18.2%]