



**General Country Information:**

The Republic of Congo also known as Congo-Brazzaville is located in central-western Africa, and borders Gabon, Cameroon, Central African Republic, Democratic Republic of the Congo, Angola with a west coast along the Gulf of Guinea. It is divided in 10 regions and one commune, the capital Brazzaville, which is also the largest city.

From the 15<sup>th</sup> century and until early 19<sup>th</sup> century, the coastal area was a major source for the transatlantic slave trade. Congo became a French colony in 1891 and gained its independence in August 1960.

A majority of the population of Congo (~85%) lives in a few urban areas: Brazzaville, Pointe Noire or in smaller cities along the 530 kms rail-road connecting the two cities. The northern areas (mainly tropical jungle) are for the most uninhabited.

Its economy is mainly based on agriculture and handicraft. The petroleum industry allowed the government of Congo to finance large-scale development projects in the early eighties when the country had a GDP growth of 5% (one of the highest in Africa). From June 1997 to December 1999, a civil unrest erupted between partisans of the two presidential candidates.

The Republic of Congo was subject to ebola haemorrhagic fever outbreaks in 2003, 2004 and 2005 with very high case fatality rates.

**Cholera Background History:**

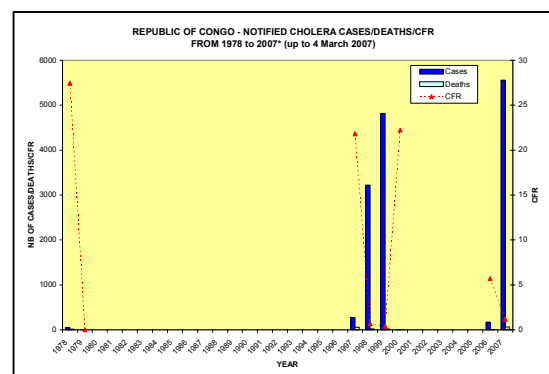
The first cholera outbreak was reported in 1978. Between 1978 and 1996, no cholera case was reported.

The first major outbreak occurred in November 1997 and continued until July 1998. Cumulative number of cases and deaths notified during those years are illustrated in the table. The first cases reported in November 1997 occurred in the district of Pointe Noire in the region of Kouilou (southern part of the country, bordering Angola).

From November 1997 to February 1998, the case fatality rate was very high (20%). Four areas in the city of Pointe Noire were affected, the worst being Arrondissement III and IV where water quality and sanitary conditions are extremely poor. Cholera outbreaks have also been reported from Madingo-Kayes district neighboring Pointe-Noire district and Kaka Mueka district also neighboring Pointe Noire (Kouilou region). Unfortunately exact figures for these areas are not available.

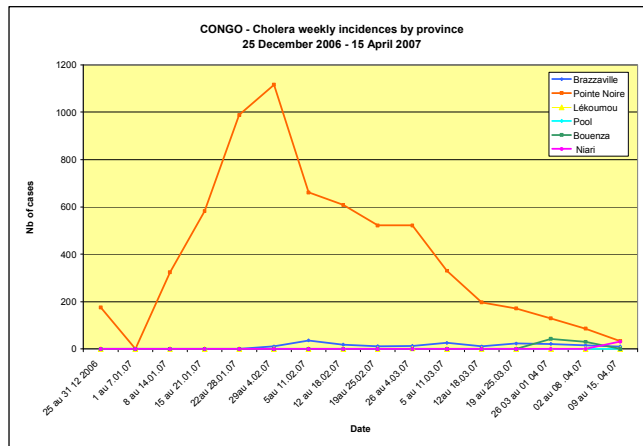
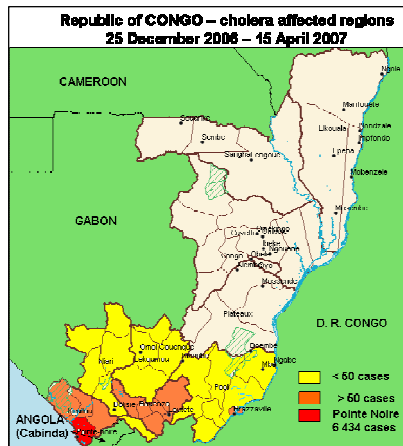
In March 1999, cholera cases were confirmed in the capital city of Brazzaville but further information is not available. Cases had already been reported since December 1998 but additional information is not available.

	1997	1998	1999	2000	2006	2007
<b>Cases</b>	275	3222	4813	9	175	7295
<b>Deaths</b>	60	22	20	2	10	110
<b>CFR%</b>	21.8	0.7	0.4	22.2	5.71	1.5
	One outbreak				One outbreak	



**Cholera outbreak in 2006/2007:**

In December 2006, a large outbreak hit the country, affecting 7 098 people with 101 deaths over a period of 5 months (the geographic spread and epicurve are illustrated on page 2). Again the index case was reported in Pointe Noire and occurred during the rainy season (October to May). The outbreak had potentially spread from neighbouring Angola, (Cabinda province). It cannot be excluded that a similar pattern occurred in 1997, since Angola reported 1306 cases and 42 deaths in 1996, but no case in 1997.



**WHO-MoH Support Actions:**

- Set-up of a national coordination committee
  - at national level under the presidency of Prime Minister
  - at local level under the presidency of departments prefets.
- Set up of a contingency plan at the highest government level
- Reinforcement of integrated disease surveillance with the organisation of training sessions for health workers

**Demographic and Socio-Economic Data:**

<b>Geography</b>	Total surface Capital Provinces Official Language	342 000 km <sup>2</sup> (coastline of 169 km) Brazzaville (population in Brazzaville: 1 262 000 ) 10 regions French
<b>Environment</b>	Climate Rainy season Floods and droughts Desertification Natural resources	Tropical; dry season from June to October March to June Seasonal flooding Deforestation petroleum, timber, potash, lead, zinc, uranium, copper, phosphates, gold, magnesium, natural gas, hydropower
<b>Demographics</b>	Population Religions Ethnic groups Migrants	3,800,610 (annual population growth 2.63% in 2007) 50% Christian, 48% indigenous religion, 2% Muslim 48% Kongo, 20% Sangha, 12% M'Bochi, 17% Teke, 3% Europeans and other Refugees from Angola and Rwanda and Democratic Republic of Congo 7 800 IDPs (2006)
<b>Economy</b>	Industry Farming	Petroleum, cement, lumber, brewing, sugar, palm oil, soap, flour, cigarettes cassava (tapioca), sugar, rice, corn, peanuts, vegetables, coffee, cocoa; forest products
<b>Health Indicators</b>	Per capita total expenditure on health Life expectancy at birth (yrs) Under 5 mortality (per 1000)	30\$ (2004) Males: 54      Females: 55 (2005) 108 (2004)
<b>Communicable Diseases</b>	Bacterial diarrhea, hepatitis A, and typhoid fever, malaria (2007) HIV prevalence: 4.73% (2005)	
<b>Risk Factors for Cholera</b>	Population with access to improved drinking water source Population with access to proper sanitation facilities Chronic Malnutrition	84% (urban), 27% (rural), 2004 28% (urban), 25% (rural), 2004 33 % (2001-2003)

Sources for Document: WHO, UN (MDG), UNHCR, UNICEF, UNDP



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