CURRENT CHOLERA OUTBREAK

What we know about it
2022 & 2023 Cholera situation overview
Cholera outbreak/cases by countries preliminary* data 2022/2023

- **31** Countries (2022/23)
- **20** Countries at direct risk
- **1 BILLION** People at risk
- **High CFR**

* Source: Official report and Event-Based surveillance
  GTFCC list of countries (2017)
Global situation of active epidemics of cholera and acute watery diarrhea as of March 20, 2023
Cholera

- Cholera is an **acute diarrhoeal infection** caused by eating food or drinking water that is contaminated with the bacterium *Vibrio cholerae*.

- Most of those infected will **have no or mild symptoms** and can be successfully treated by oral rehydration. However, **severe cases will need rapid treatment** with intravenous fluids and antibiotics.

- Access to safe water and sanitation is **critical** to prevent and control the transmission of cholera.

- Oral Cholera Vaccine (OCV) should be used in areas with **endemic cholera, in humanitarian crises** with high risk of cholera and **during cholera outbreaks**; always together with WASH strategies.
Background

- Cholera: disease of inequity & marker of poverty; affects world’s poorest, most vulnerable people
- Gross underreporting: average 2017–21: ~ 110,000 cases & 2,200 deaths/year
- Modeling of yearly estimate:
  - ~ 3 million cases
  - ~ 100,000 deaths
- Despite limits: Years of reduction of morbidity mortality

Source: WHO Global DON on Cholera February 2023
Background

⚠️ Since 2021, increased cases & deaths

- Global CFR (1.9%)
- Africa CFR 2.9%
- Mortality under-estimated (notably Asia)

Source: WER on Cholera 2021
Cholera drivers

Intrinsic factors
- Access to safe water
- Open defecation
- Accessibility of health care
- Poverty/vulnerability

Multiple external driving factors
- Conflict
- Humanitarian crises
- Natural disasters
- Hunger
- Trade, other

COVID Impact

Effect of climate change
PRIORITIZATION

At this point of time

- **Acute countries**: 9
- **Active countries**: 17
- **At direct risk countries**: 17

- List and prioritization regularly revised (based on epidemiology, response capacity and context)
- **Seasonality** – large part of word in low inter epidemic period will change in coming months

https://www.who.int/emergencies/disease-outbreak-news/item/2023-DON437
Most active East and Southern Africa

- 1999-2001: Large outbreaks linked to La Niña
- 3rd Consecutive La Niña into 2023 → Increase probability of cyclones (Freddy) & longer more severe drought and floods

▲ High regional risk of spread

Average reported incidence (per million) 1999-2001
Many other areas of concern

Austral and South Africa
  ▪ Rainy season, Cyclone Freddy, 3rd year of La Nina

Horn of Africa and East Africa
  ▪ Drought, population movement, conflict, humanitarian crisis

Europe and Middle East:
  ▪ End of winter, risk of increased transmission with spring, earthquake, conflict

Central East Asia:
  ▪ End of winter, risk in upcoming monsoon season

Hispaniola:
  ▪ Conflict, humanitarian crisis, hurricane season

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Cholera can be controlled by:

- **Strengthening surveillance and laboratory capacity** to better target interventions and prioritization of available resources
- **Mobilizing resources** for multisectoral control strategies
- **Urgent investment needed** TO PREVENT outbreaks
- **WASH, WASH + Surveillance, case management, community engagement**

All cholera deaths can be prevented. Treatment is easy and cheap, the issue is timely access.
Resources for outbreak response

- Cholera Outbreak Response Manual
  https://choleraoutbreak.org/
- The Cholera App
  (accessible offline)
Additional resources

- Open WHO online courses:
  - https://openwho.org/courses/cholera-introduction-en
  - https://openwho.org/courses/cholera-eprep

- GTFCC Resources:
  - https://www.gtfcc.org/resources/