



World Health Organization

YELLOW FEVER OUTBREAK IN ANGOLA

INCIDENT MANAGEMENT SITUATION REPORT 8 May 2016

Vol: 5-01

I. Key Highlights

- ♦ MoH and WHO started preparation for the next phase of vaccination campaign, to include 4 provinces
- ♦ Angola will receive 2,434,900 doses of yellow fever vaccine on 12 May 2016 from the Institute Pasteur Dakar and Sanofi (France)
- ♦ Benguela ends vaccination campaign in three districts with a coverage of 88%; Huambo continues vaccination campaign rural areas

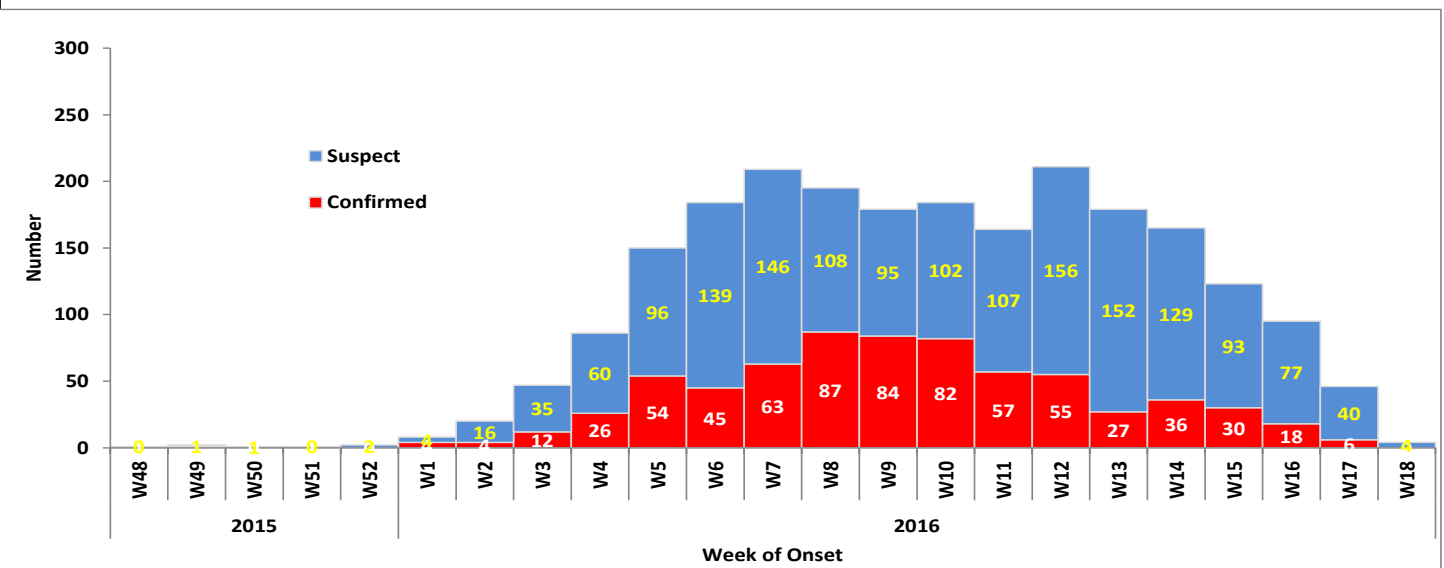
II. Epidemiological Situation as of 8 May 2016

- ♦ A cumulative total of **2,267** suspected cases with **293** deaths have been reported, of which **696** were confirmed cases including **93** confirmed deaths
- ♦ Of the **696** confirmed cases, **445** were from Luanda province and the remaining **251** from other provinces.
- ♦ A new province (Namibe) and five (5) new districts (Kissama, Bailombo, Bailundo, Ukuma and Namibe) are added to list of districts with local transmission
- ♦ Sixty nine (**69**) districts have laboratory confirmed cases in **14** out of the **18** provinces in the country
- ♦ A total of **48** confirmed cases of local transmission have been identified in **21** districts in **7** provinces (see Table 3)

Table 1: National summary of Yellow fever outbreak from 5 Dec 2015— 8 May 2016

Total suspected cases	2,267
Total confirmed cases	696
Total deaths	293
Total deaths from confirmed cases	93
Total districts with suspected cases	101
Total districts with confirmed cases	69
Total provinces with suspected cases	18
Total provinces with confirmed cases	14
Total districts with local transmission out of Luanda	20
Total provinces with local transmission out of Luanda	6
Total number of districts in Angola	166
Total number of provinces in Angola	18
Target population for vaccination (Luanda, Huambo & Benguela)	8,582,197
Total population vaccinated (Luanda, Huambo & Benguela)	7,735,714
SIAs administrative coverage	90.1%

Fig. 1: National Epi Weekly trend of yellow fever suspected and confirmed cases in Angola, 5 Dec 2015— 8 May 2016



* Data for last two weeks is incomplete due to lags between onset of symptoms and reporting.

YELLOW FEVER OUTBREAK DAILY SITUATION REPORT, INCIDENT MANAGEMENT TEAM ANGOLA

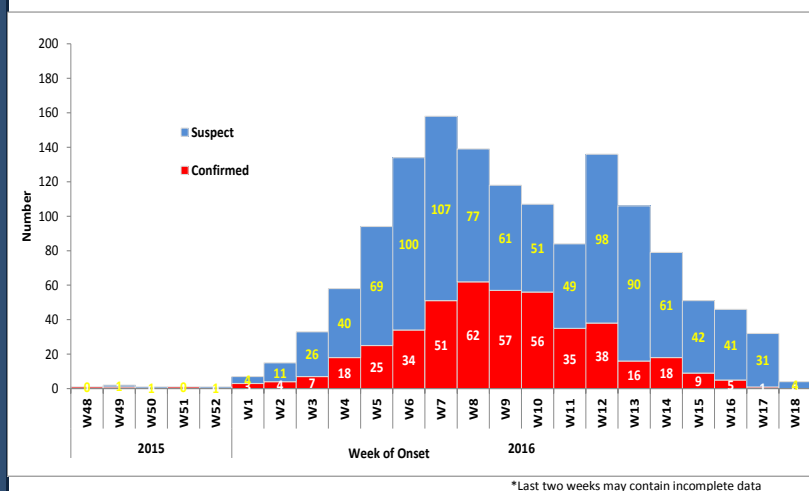
Table 2: Distribution of confirmed yellow fever cases and vaccination coverage in Angola, as of 8 May 2016

Provinces	Districts	Epidemiology			SIAs			
		Confirmed cases	Date of onset first case	Date of onset of last case	Target Population	Launching date	Population vaccinated	%
LUANDA	Cazenga	100	18-01-2016	17-04-2016	867,659	29-Feb-16	805,456	93%
	Viana	91	05-12-2015	23-04-2016	1,535,102	02-Feb-16	2,141,565	140%
	Cacuaco	74	28-01-2016	20-04-2016	887,829	29-Feb-16	773,805	87%
	K. Kiaxi	57	06-12-2015	18-04-2016	640,006	10-Mar-16	210,755	33%
	Belas	47	15-01-2016	07-04-2016	1,071,662	19-Feb-16	1,296,413	121%
	Sambizanga	27	23-01-2016	09-04-2016	433,970	20-Mar-16	120,959	28%
	Maianga	25	08-02-2016	02-04-2016	660,884	14-Mar-16	289,905	44%
	Rangel	14	29-01-2016	17-04-2016	136,031	28-Mar-16	24,815	18%
	Ingombota	4	01-02-2016	15-03-2016	89,556	24-Mar-16	42,852	48%
	Samba	4	10-02-2016	20-03-2016	160,174	24-Mar-16	29,725	19%
Icolo e Bengo	1	08-03-2016	08-03-2016	75,103	28-Mar-16	30,408	40%	
Kissama	1	24-04-2016	24-04-2016	25,240	28-Mar-16	14,100	56%	
Outros (Hospitais)						254,456		
TOTAL LUANDA		445			6,583,216		6,035,214	92%
BIE	Andulo	6	14-02-2016	17-03-2016	236,236			
	Camacupa	1	19-03-2016	19-03-2016	142,633			
	Chinguar	2	02-02-2016	23-03-2016	118,593			
	Cuito	3	30-01-2016	12-04-2016	426,780			
	Cunhinga	1	01-03-2016	01-03-2016	69,664			
CUNENE	Nharea	1	22-02-2016	22-02-2016	114,351			
	Ombadja	3	01-02-2016	11-03-2016	291,861			
BENGUELA	Cahama	4	28-02-2016	12-03-2016	69,519			
	Baia Farta	6	08-04-2016	25-04-2016	103,623			
	Balombo	2	25-04-2016	25-04-2016	99,932			
	Benguela	20	15-02-2016	25-04-2016	531,744	12-Apr-16	375,732	71%
	Caimbambo	1	26-02-2016	26-02-2016	81,212			
	Catumbela	0			173,601	13-Apr-16	188,440	109%
	Chongoroi	4	26-02-2016	07-04-2016	81,977			
	Cubal	3	05-02-2016	10-03-2016	289,703			
	Ganda	3	10-02-2016	28-02-2016	226,051			
	Lobito	12	22-01-2016	21-04-2016	335,601	13-Apr-16	355,367	106%
HUAMBO	Bailundo	11	05-02-2016	25-03-2016	283,887			
	Caala	24	28-01-2016	22-04-2016	268,734	13-Apr-16	222,811	83%
	Catchiungo	1	18-03-2016	18-03-2016	116,334			
	Ekunha	17	17-01-2016	17-04-2016	79,334			
	Huambo	37	20-01-2016	22-04-2016	689,301	13-Apr-16	558,150	81%
	Londuibali	6	17-02-2016	13-04-2016	125,214			
	Longonjo	9	09-02-2016	29-03-2016	87,329			
	Mungo	2	06-02-2016	01-03-2016	111,109			
	Tchikala	3	17-03-2016	07-04-2016	102,541			
	Tchindjendje	1	01-04-2016	01-04-2016	28,371			
Kuanza Norte	Ukuma	4	22-02-2016	19-04-2016	42,950			
	Ambaca	1	21-03-2016	21-03-2016	61,209			
KUANZA SUL	Cazengo	2	23-02-2016	27-02-2016	166,860			
	Amboim	2	23-01-2016	05-04-2016	236,339			
	Cassongue	2	02-02-2016	02-02-2016	141,452			
	Cela	1	04-02-2016	04-02-2016	219,850			
	Ebo	4	17-01-2016	16-04-2016	159,024			
	Libolo	1	05-04-2016	05-04-2016	85,630			
	Seles	3	05-02-2016	24-03-2016	176,058			
CABINDA	Sumbe	1	02-03-2016	02-03-2016	269,341			
	Cabinda	1	25-01-2016	25-01-2016	601,892			
HUILA	Caconda	10	05-01-2016	20-03-2016	160,892			
	Cacula	2	23-02-2016	23-02-2016	129,201			
	Caluquembe	2	04-03-2016	21-03-2016	170,463			
	Chibia	1	08-02-2016	08-02-2016	182,548			
	Chicomba	1	02-02-2016	02-02-2016	128,056			
	Gambos	1	24-02-2016	24-02-2016	76,456			
	Humpata	2	09-02-2016	09-02-2016	83,267			
	Lubango	4	30-01-2016	05-02-2016	736,077			
	Quilengues	4	21-02-2016	10-03-2016	69,105			
	Quipungo	3	02-02-2016	05-02-2016	147,818			
BENGO	Ambriz	1	04-04-2016	04-04-2016	21,940			
	Dande	3	05-02-2016	10-04-2016	219,270			
MALANGE	Malange	1	21-02-2016	21-02-2016	489,867			
	Cahombo	1	20-03-2016	20-03-2016	22,251			
NAMIBE	Namibe	1	17-04-2016	17-04-2016	283,792			
ZAIRE	Nzeto	1	05-02-2016	05-02-2016	44,714			
	Soyo	1	10-02-2016	10-02-2016	219,536			
	Cuimba	1	24-03-2016	24-03-2016	65,011			
UIGE	Negage	2	03-02-2016	10-04-2016	136,323			
	Uige	4	02-02-2016	16-04-2016	496,567			
TOTAL OUT OF LUANDA		251	TOTAL OF HUMABO AND BENGUELA		1,998,981		1,700,500	85.1%
TOTAL		696			8,582,197		7,735,714	90.1%
1 new province and 3 new districts affected								

Source: MOH, Angola

Fig 2: Weekly trend of yellow fever suspected and confirmed cases in Luanda, 5 Dec 2015— 8 May 2016

Table 3: Local transmission YF confirmed cases out of Luanda as of 8 May 2016



Provinces	Districts	Target Population	Confirmed cases with local transmission	
Huambo	Caala	268,734	2	
	Ukuma	42,950	1	
	Bailundo	283,887	1	
	Huambo	689,301	11	
Cuanza sul	Ekunha	79,333	1	
	Amboim	236,340	1	
	Cassongue	141,452	1	
	Libolo	85,630	1	
Uige	Ebo	159,024	3	
	Seles	176,058	1	
Benguela	Negage	136,323	3	
	Baia Farta	103,623	5	
	Benguela	531,744	6	
	Balombo	99,932	1	
	Chongoroi	81,977	1	
	Cubal	289,703	1	
Luanda	Lobito	335,601	3	
	Kissama	25,240	1	
Namibe	Namibe	283,792	1	
Huila	Quiungo	147,818	2	
	Caconda	160,892	1	
Total:	7	21	4,359,354	48

III. Response Interventions

Coordination

- ◆ Three persons from CDC China arrived on 5 May 2016 to support the response activities
- ◆ An epidemiologist and a logistician have been added to the team for the yellow fever response
- ◆ A team of public health and humanitarian experts from the European Commission together with the European Centre for Disease Prevention and Control (ECDC) will be arriving in Angola this week to assess the situation and the risk of spread of yellow fever to Europe and to explore ways to support the response in Angola
- ◆ The Director of the WHO Global Malaria Programme will be visiting Angola to evaluate the current malaria situation.
- ◆ Daily incident management coordination meetings held at WHO EPI meeting room. IM established Tuesday meeting for presentation of weekly objectives by team leaders
- ◆ Technical partners are invited to the Thursday meetings. *Technical partners are welcomed to provide updates to be included in the IMS SitRep* (send to Incident Manager or Ms. Conteh; emails available at end of this SitRep)

Surveillance, Laboratory and Data management

- ◆ Final classification committee met on 4 May to classify 38 laboratory confirmed cases; 29 were confirmed for yellow fever, 8 classified as vaccine related and one pending further information. Of the 29 confirmed 5 were local transmission from districts in Benguela, Huambo, Namibe and Luanda provinces
- ◆ Joint laboratory, epidemiology and case management partners meeting held to discuss issues relating to additional differential diagnosis, including arboviruses, Hep E, Leptospirosis, Rickettsia and Malaria. A proposal for implementation will be submitted this week. WHO, CDC, MSF and IPD involved
- ◆ WHO data management team continue to support the MOH in data cleaning, analysis and production of bulletins
- ◆ Institute Pasteur Dakar and CDC training on PCR and ELISA testing is ongoing
- ◆ Review of data quality and consistency between EPI and LAB databases is ongoing, with CDC and WHO support
- ◆ MSF and WHO focal points reported discrepancies between cases databases held at province level and central database, reflecting unequal reporting criteria in some provinces. A plan to standardize reporting was developed and approved by MoH colleagues. It will start implementation this week

Vaccination

- ◆ Benguela province ends the vaccination campaign in three districts and has started the planning of the next phase of vaccination in Cubal and Baia Farta districts that also have local transmission of yellow fever cases
- ◆ Huambo continue vaccination in rural areas
- ◆ The total number of people vaccinated in the three provinces as of 8 May is 91% (7,735,714). Breakdown is as follows: Luanda 6,035,214 (92%), Huambo 780,961 (82%) and Benguela 919,539(88%)
- ◆ Partners in collaboration with MoH are preparing for the next phase of vaccination campaign, targeted districts are under discussion,
- ◆ Luanda province started plan to request yellow cards and vaccinate travelers

Social Mobilization and Risk Communication

- ◆ WHO provided technical support to the Luanda Provincial Health Directorate to develop a plan for districts with low vaccination coverage. An advocacy meeting was held with the MoH, the Governor and the Municipal Administrators of Luanda province
- ◆ Key messages on Yellow fever were disseminated to 25,000 people at a religious ceremony organized on Saturday in Luanda Province by the National Council of the Evangelic Churches
- ◆ WHO in collaboration with the Huambo provincial team trained five journalists on dissemination of key messages on yellow fever through the electronic media
- ◆ WHO and UNICEF social mobilization activities in Huambo and Caala districts focused on sensitization of unvaccinated population.
- ◆ WHO, UNICEF and other partners are supporting the preparation of the ministry of health provincial directorate in Huila for the coming vaccination campaign
- ◆ A deployment plan for all provinces starting vaccination campaigns was developed by UNICEF, WHO and other partners

Logistics

- ◆ Yellow fever vaccine stocks as of 8 May 2016 at the central store is 223,970 doses, with 3,295,500 AD Syringes, 210,500 mixing syringes (5ml), 466,240 safety boxes and 684,000 vaccination cards
- ◆ Vaccine stock in Luanda province is 109,700, Benguela 211,000 and Huambo 218,840.
- ◆ A total of 2,434,900 doses are expected in country by 12 May from two sources, Institute Pasteur Dakar and Sanofi (France).
- ◆ Logistics team started planning for future vaccination campaign in new provinces

Vector Control

- ◆ The MOH in collaboration with vector control partners reinforce activities in the districts of Cacucaco, Viana and Cazenga (Luanda province)
- ◆ Vector control activities in provinces with highest prevalence of autochthonous cases is ongoing

Border Health

- ◆ A preliminary report on border health situation was drafted. IM will share with WHO and partners in the coming week
- ◆ Border health team to visit train stations and other ports of entry this week to assess the screening process
- ◆ Additional meetings with authorities are planned
- ◆ Planning of visits to border provinces to assess surveillance and implement cross-border meetings is ongoing
- ◆ EU exploratory mission will focus on risk of international spread of the outbreak

VI. Key challenges

- ◆ Data cleaning and re-analysis issues due to inconsistent reporting criteria
- ◆ Potential unreported local transmission in Cabinda and may be in other provinces. Vaccination plans should consider this possibility, given the high risk of local transmission and the difficulty to document all cases
- ◆ Low number of cases with samples sent from the provinces
- ◆ Supervision from national level the IMS system structure is being reviewed to improve coordination of activities at the provincial level. An updated organizational chart and meeting schedule will start this week

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