

Republic of South Sudan

Measles Outbreak and Response Weekly Situation Update

Issue number 16

Issue Date 23 May 2023

Epidemiological week Week 20 (May 15 - 21, 2023)

Suspected Measles Cases

New (0) cases with date of onset in week 20

Cumulative (6,138) old and new cases

Lab Confirmed Cases

New (0)

Cumulative (610)

Deaths

New (0)

Cumulative (59)

Background

The Measles outbreak was declared on the 10th of December, 2022, by the South Sudan National Ministry of Health. Data obtained from January 1, 2022, to May 21, 2023, shows that a total of 68 counties across all 10 States have reported at least one suspected measles case, with confirmed outbreaks in 37 counties (23 in 2022 and 16 in 2023 including 2 counties from 2022). Twenty-two (22) counties conducted reactive campaigns with 984,539 children vaccinated. A cumulative sum of 6,138 suspected cases have been reported; 4,137 and 2,001 in 2022 and 2023, respectively.

Key weekly Situation Update as of 21 May 2023

- No new suspected case as well as death has been reported during the reporting week
- No new confirmed outbreak this week
- Five (5) new samples received from Duk 2, Blue Nile State (Kurumuk-Sudan) 2 and Abyei (case from Sudan) 1, but yet to be tested
- Viral Transport Media (VTM) distributed to selected counties and yet to receive any Nasopharyngeal or Throat Swab for sequencing

Key Update for 2023

- Fifty-eight (58) counties have reported suspected measles cases in 2023, of which forty (40) counties have at least one confirmed case
- Sixteen (16) counties (Mvolo, Mundri East, Pariang, Awerial, Rumbek Centre, Kapoeta South Tonj South, Tonj North, Bor South, Aweil Centre, Rumbek East, Gogrial East, Juba, Tonj East Wulu and Lafon) have confirmed outbreaks in 2023.
 - None of the above counties has reported suspected/lab-confirmed cases in the past five (5) weeks except Juba county
- Reactive vaccination campaigns were conducted in 22 counties (16 counties in 2022, 6 counties in 2023), with 858,274 and 984,539 children vaccinated, respectively
- EPI-TWG recommends no more reactive campaign rather the focus now is to support the ongoing national campaign (started 25th April, 2023)

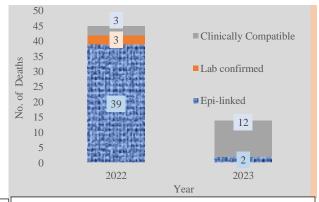
Summary of cases as of 21 May 2023

Table1: Yearly distribution of cases by final classification

FINAL	202	22	202	TOTAL	
CLASSIFICATION	NO. OF	%	NO. OF	%	•
	CASES		CASES		
Lab confirmed	392	9.5	218	10.9	610
Epi-linked	2,825	68.3	284	14.2	3,109
Clinically Compatible	391	9.5	1,362	68.1	1,753
Total	3,608	87.2	1,864	93.2	5,472
Discarded (-ve)	529	12.8	137	6.8	666
Grand Total	4,137	100.0	2,001	100.0	6,138

Out of the 6,138 suspected measles cases, 3,109(50.7%) are epi-linked, 610(9.9%) lab-confirmed, 1,753(28.5%) clinically compatible, and 666(10.8) discarded cases have been reported from epidemiological week 1, 2022, to week 19, 2023. A total of 209 rubella positive cases from the discarded (negative measles cases)

Figure 1: Deaths by year and final classification



A total of 59 measles-related deaths were reported since January 2022, with only 3 deaths among the lab-confirmed measles cases and 41 among the epi-linked cases.

 $Table\ 2.0:\ Distribution\ of\ measles\ cases,\ deaths,\ attack\ rates,\ CFR,\ response\ by\ counties\ and\ their\ outbreak\ status,\ 2022\ -\ 2023$

State	County with confirmed outbreak	Cases	Lab- confirmed cases	Deaths	CFR %	Attack rate/1000pop	Date of onset _1st Case	Date of onset _Latest Case	Date of response/Campaign	Campaign coverage (%)	Outbreak Status
CES	Juba	1,147	18	19	1.6	1.7	16/01/2022	03/05/2023	29 Aug-29 Oct	69-98%	Active with Response
	Terekeka	65	17	0	0.0	0.3	09/05/2022	19/01/2023	2-9 Nov	106%	Controlled with Response
EES	Torit	49	24	2	4.1	0.3	18/01/2022	12/02/2023	9-31 Mar	95%	Controlled with Response
	Kapoeta South	7	6	0	0.0	0.0	01/012023	04/02/2023			Controlled without Response
	Lafon	6	4	0	0.0	0.0	03/03/2023	08/03/2023			Controlled without Response
JONGLEI	Nyirol	124	27	1	0.8	0.7	02/11/2022	17/03/2023	Ongoing		Controlled with Response
	Bor South	28	18	0	0.0	0.1	23/03/2022	14/02/2023			Controlled with Response
LAKES	Cueibet	186	19	9	4.9	0.8	24/01/2022	09/02/2023	18-24 Jan	88%	Controlled with Response
	Yirol West	449	24	6	1.3	2.3	20/05/2022	15/03/2023	18-24 Jan	129%	Controlled with Response
	Rumbek Centre	18	6	0	0.0	0.1	01/01/2023	07/02/2023			Controlled without Response
	Rumbek East	8	4	0	0.0	0.0	26/02/2022	22/02/2023			Controlled without Response
	Yirol East	126	4	2	1.6	1.0	12/04/2022	05/03/2023	18-24 Jan	141%	Controlled with Response
	Awerial	21	6	0	0.0	0.2	14/10/2022	14/03/2023			Controlled without Response
	Wulu	30	16	0	0.0	0.4	06/03/2022	18/03/2023			Controlled without Response
UNITY	Leer	24	11	1	4.2	0.2	11/05/2022	29/01/2023		95%	Controlled with Response
	Rubkona (Bentiu IDP)	449	21	4	0.9	2.4	23/09/2022	23/04/2023	22-29 Nov	77.2	Controlled with Response
	Panyijar	179	1	1	0.6	1.8	09/02/2022	17/02/2023			Controlled without Response
	Pariang	94	28	0	0.0	0.6	17/12/2022	15/02/2023			Response Recently Conducted



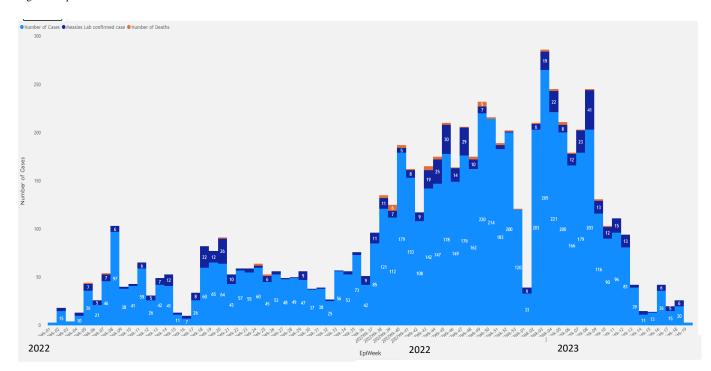
Republic of South Sudan

Measles Outbreak and Response Weekly Situation Update

UPPER NILE	Maban	202	6	0	0.0	2.5	02/01/2022	16/11/2022	7-15 Mar	98%	Controlled with Response
	Melut	163	12	0	0.0	1.5	18/10/2022	16/02/2023	16-24 Dec	114%	Controlled with Response
	Malakal	130	11	0	0.0	0.6	08/07/2022	01/02/2023		73%	Controlled with Response
WARRAP	Gogrial West	94	19	0	0.0	0.2	02/01/2022	01/01/2023	1-8 Jun	95%	Controlled with Response
	Tonj North	52	0	0	0.0	0.2	10/03/2022	21/01/2023			Controlled without Response
	Tonj South	8	3	0	0.0	0.0	20/04/2023	10/01/2023			Controlled without Response
	Gogrial East	14	12	0	0.0	0.1	10/02/2023	21/02/2023			Controlled without Response
	Tonj East	10	8	0	0.0	0.0	11/02/2023	16/03/2023			Controlled without Response
WBeG	Jur River	72	5	0	0.0	0.3	29/01/2022	28/10/2022	Not done		Controlled without Response
	Raja	50	16	0	0.0	0.5	08/01/2022	21/11/2022	2 May-5 Jul	70%	Controlled with Response
	Wau	195	16	0	0.0	0.7	09/01/2022	22/12/2022	Not done		Controlled without Response
WES	Tambura	37	6	0	0.0	0.4	13/02/2022	28/09/2022	1-6 Apr	102%	Controlled with Response
	Mvolo	33	5	1	3.1	0.4	26/05/2022	11/03/2023			Controlled without Response
	Mundri East	23	3	0	0.0	0.4	18/04/2022	23/02/2023			Controlled without Response
NBeG	Aweil Center	393	73	1	0.4	3.8	21/03/2022	25/03/2023	14-22 Jun	155%	Controlled with Response
	Aweil East	431	29	4	0.9	0.8	10/03/2022	03/03/2023	13-26 Aug	91%	Controlled with Response
	Aweil North	71	15	0	0.0	0.3	03/03/2022	07/03/2023	14-21 Jul	97%	Controlled with Response
	Aweil South	156	17	3	1.9	1.2	20/04/2022	07/03/2023	13-26 Aug	97%	Controlled with Response
	Aweil West	722	27	3	0.4	2.5	06/01/2022	03/03/2023	14-22 Jun	94%	Controlled with Response

Note: Cueibet (4.9%) and Leer (4.2%) are the counties with the highest case fatality rates while Aweil Centre (3.8 cases per 1000 pop) and Maban (2.5 cases per 1000 pop) have the highest attack rates.

Figure 2: Epidemic curve of measles cases in South Sudan from 2022 to 2023



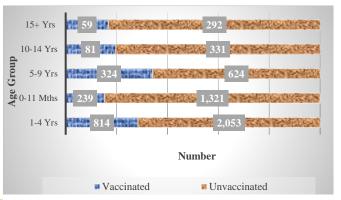
Note: Measles cases have been reported from different counties throughout 2022 and week seven of 2023. The observed peaks are driven by different counties that experienced surge in measles cases at different times.

Table 3: Distribution of reported measles cases and deaths by age groups in South Sudan, 2022-2023

		202	22		2023					
Age Groups	No. of cases	%	Deaths	%	No. of cases	%	Deaths	%		
0-11 mths	1,137	27.5	10	0.9	423	21.1	2	0.5		
1-4 yrs	1,931	46.7	27	1.4	936	46.8	8	0.9		
5-9 yrs	612	14.8	4	0.7	336	16.8	3	1.0		
10-14 yrs	277	6.7	2	0.7	135	6.7	1	0.8		
15+ yrs	180	4.4	2	1.1	171	8.5	0	0.0		
Total	4,137	100.0	45	1.1	2,001	100.0	14	0.7		

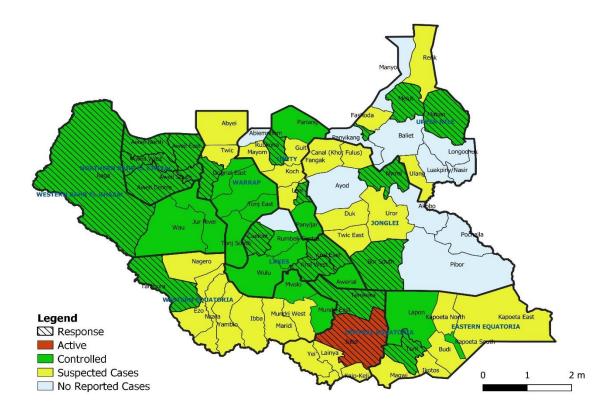
Note: Majority 4,427(72.1%) of all the measles cases are children below 5 years of age considering both years. The case fatality rate is highest (1.4% and 1.0%) among children age 1-4 years in 2022 and 5-9 years in 2023. 47 out of the 59 deaths were among children below age 5 years

Figure 3: Distribution of measles cases and their vaccination status, 2022-2023



Note: Generally, 4,621(75%) were unvaccinated (zero, unknown) including 3,374(73%) children <5 years. Among children less than one year old (1,560 cases), 84.6% (1,321 cases) have not been vaccinated against measles compared with 239(15.4%) vaccinated. This trend is observed across all the age groups.

Figure 4: A map showing counties affected by measles and their outbreak status in 2022 and 2023



Note: All the 10 states have been affected as the measles virus spread across the counties in 2022/2023

Coordination

- Incident management system in place to respond to the Measles outbreak
- The measles outbreak and its response have been adopted as a standing agenda in different fora (National Steering Committee, EP and R, HCC, and EPI TWG).
- Emergency Preparedness and Response (EP&R), EPI-TWG, and Health Cluster forums discuss the response's technical and operational issues, challenges, and gaps.
- MOH (state and county) to lead coordination activities of the planned measles campaign
- Partners Measles sitrep sent on weekly basis
- The Measles Outbreak Strategic Response Plan (MOSRP) for 2023/2024 has been validated and awaiting approval by the MOH

Surveillance and Laboratory

- Enhanced surveillance ongoing in silent counties
- Sample collection on hold till 30 days after the nationwide campaign
- Set up enhanced screening post at all boarders
- Ensure weekly reporting (including zero dose reporting where applicable)

Case Management

The MOH, WHO, and partners are intensifying measles case management (including vitamin A administration), surveillance, and risk communication in locations with suspected and confirmed outbreaks

Vaccinations

- Nationwide measles campaign ongoing
 - The campaign kicked off on the 25th of April in three states (CES, NBG, and Lakes). The remaining seven states launched the campaign from the 28th to the 1st of May 2023
 - Seventy-five (75) Counties already completed the campaign as of 16th May 2023
 - Five (5) Counties in UNL, Jonglei, Rewung and Abeyi administrative area due to delayed supply distribution and other operational challenges
 - Three states (CES, EES and WES) integrated Periodic Intensification of Routine Immunization (PIRI) with IMFUP camping with the support of World Vision/CORE Group
 - Current data 2,218,381 (85.4%) were vaccinated with Measles vaccines, 1,421,228 received Vitamin A, 58,274 deworming, and 1,074,067 MUAC screening as at 17 May, 2023

Deamand Generation/ Communication

 Demand generation activities ongoing for the planned measles follow up campaign (radio talk shows and jingle broadcast)

Adverse Events Following Immunization (AEFI)

- Strengthening AEFI reporting network from national to payam level ongoing.
- One (1) serious AEFI reported during the campaign and managed.

Operational challenges and gaps

- Inadequate detailed investigation of suspected measles cases and deaths in counties reporting
- Inadequate sample collection for laboratory confirmation and classification cases of suspected measles cases
- A high proportion of unvaccinated/unknown status children (75.3%) was detected among the cases, noting routine immunization gaps.
- Post Campaign Evaluation to be conducted to determine the quality of the campaign
- Areas of low coverage planned for a Mop Up Routine Immunization (MURI)
- Plan for Response where Measles cases occur
- Refugee Situation with cases already reported from the Blue Nile (Guideline issued on Immunization) to be addressed

Way Forward

- MOH and partners to support ongoing nationwide measles campaign
- State and County MOH to continue weekly reporting of measles cases (including zero reporting where applicable)
- Prompt detection and management of measles cases
- Strengthen routine immunization

For more information, please contact:

To more information, preuse contact.										
Dr. John Rumunu	Dr. Joseph Lasu	South Sudan PHEOC	Dr Aggrey Bategereza							
Incident Manager	Emergency Preparedness & Response	E: sspheoc@gmail.com	EP&R TL, WHO							
E: ori.moiga@gmail.com	Director	P: +211 925 851 662/	E: bategerezaa@who.int							
P: +211 924 767 490	E: josh2013.lasu@gmail.com	+211 917 235 355	P: +211 924222030							
	P· +211 921 395 440		1							

This report was prepared with technical support from World Health Organization, Juba.