PUBLIC HEALTH EMERGENCY OPERATIONS CENTRE (PHEOC)

Daily Situation update on the Yellow Fever outbreak in Western Equatoria State, South Sudan

Date: 11 January 2024

Situation Report Number 020

Key Figures

<table>
<thead>
<tr>
<th></th>
<th>Number of new suspected cases reported in the last 24 hours</th>
<th>Cumulative number of labs confirmed cases</th>
<th>Cumulative number of suspected deaths</th>
<th>Cumulative number of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of new deaths reported in the last 24 hours</td>
<td>0</td>
<td>01</td>
<td>05</td>
<td>20</td>
</tr>
</tbody>
</table>

Highlights

- No yellow fever suspected case was reported on 11 January 2024.
- A cumulative of twenty (20) Yellow Fever cases (19 suspected and 01 confirmed) were reported from three counties in Western Equatoria state: Yambio County (10), Nzara County (05), and Tambura County (05) as of 10 January 2024.
- As of 11 January 2024, a total of 05 yellow fever suspected deaths reported.¹
- One case was confirmed positive for Yellow Fever at the National Public Health Laboratory (NPHL) on 24 December 2023.
- A rapid response team has been deployed to investigate the suspected outbreak.
- The Public Health Emergency Operations Centre (PHEOC) has been activated at the national level.
- Vaccine request Submitted to ICG
- Incident action plan, Interim case management guide and revised terms of reference for field outbreak investigation were endorsed.

Background

- On 21 December 2023, the Ministry of Health was notified a suspected case of viral hemorrhagic fever from Yambio County, Western Equatoria State. The suspected case was a 24-year²-old male from Kangura village in Gangura Payam, Yambio County who presented with generalized body weakness, headache, epigastric discomfort, Fever, vomiting of blood and yellowish discoloration (Jaundice) of eyes.
- He was isolated at the health facility, and a sample was taken for further investigation. It tested positive for Yellow Fever on 24 December 2023 at the National Public Health laboratory.
- Additional suspected cases of Yellow Fever have been reported in two other counties (Nzara and Tambura) in Western Equatoria state.

Current update as of 10 January 2024

Coordination

- Hon. Yolanda Awel Deng Juach, Minister, Ministry of Health of the Republic of South Sudan, declared the Yellow Fever outbreak in South Sudan Western Equatoria State and gave a press release to the media house on 24 December 2023.
- The PHEOC has been activated with all pillars to facilitate the coordination of activities.
- Daily coordination meeting with stakeholders and key partners is being conducted at the PHEOC.
- Similar coordination structures have been activated at the state and county levels.

¹ A death reported from Yambio with an onset of fever on September 15, 2023, was excluded as it did not meet the revised outbreak case definition.
² Further verification by national rapid response team revealed the age of the index case to be 24 years rather than 18 years.
Pillar leads and co-leads have been identified and requested to update the National Steering Committee daily.

Incident action plan, Interim case management guide and revised terms of reference for field outbreak investigation were endorsed.

Members of national Rapid Response Team to be deployed in Nzara and Tambura to establish coordination mechanism.

**Surveillance, Laboratory, and Reporting**

- One (01) yellow fever Suspected case was reported from Nzara in the last 24 hours.
- Cumulatively twenty (20) Yellow Fever cases (19 Suspected and 01 Confirmed) including five deaths (05) were reported as of 10 January 2024 giving a Case Fatality rate 25%.

All cases were reported from three counties of Western Equatoria state: Yambio County (10), Nzara County (05) and Tambura County (05).

From the reported cases, 70% (14) were males, and females accounted for 30% (06).

The Median age is 26 years with the range of 02-58 years.

on 10th of January 2024 a National Public Health Laboratory (NPHL) received 03 samples (02 Tambura and 01 Yambio county). Currently 09 Samples are undergoing serological testing at NPHL.

---

**Fig 1:** County reported Yellow Fever outbreak cases South Sudan 10 Jan 2024

**Fig 2:** Suspected & confirmed Yellow Fever cases by reported date, South Sudan, 10 Jan 2024
A rapid response team is on the ground conducting an outbreak investigation, active case search, community-based surveillance.

MSF to support community-based surveillance to improve case detection.

**Case management**

- All facilities have been alerted to screen and triage for suspected cases using the outbreak case definition.
- An Interim Case management guide has been developed to support health care workers in management of patients.
- MSF willing to support case management through PHCCs in Gangura and Sakure payams.

**Risk communication and community engagement (RCCE)**

- Partners have started community engagement through their home health promoters and community key informants.
- Enhancing RCCE activities during church services and market days to sensitize community members on reporting suspected cases is ongoing.
- Stakeholders’ mapping has been completed, and key messages on Yellow Fever prevention, control and reporting have been prepared.
- 75,000 flyers and 2,500 posters printed and dispatched from Juba.
- Radio talk shows ongoing.
- Radio spot broadcasting on Yellow Fever prevention and control in progress. Request has been submitted to Eye Radio.

**Vaccination**

- The Ministry of Health, with support from WHO and partners, has submitted a request of 314,265 dose of Yellow Fever vaccine to ICG for three affected counties.
- MSF willing to support Yellow Fever vaccination.

**Logistics and supplies**

- Supplies were prepositioned and additional Logistics mobilization is underway, and some personal protective equipment (PPEs) have been distributed to health facilities in the affected counties.
- Vehicle secured to facilitate movement of entomologist in the field.

**Implementing Partners by Pillar**

<table>
<thead>
<tr>
<th>Pillar</th>
<th>Partner supporting</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination</td>
<td>MOH, WHO</td>
</tr>
<tr>
<td>Surveillance</td>
<td>MOH, WHO and CGPP-WVI</td>
</tr>
<tr>
<td>Case Management</td>
<td>MOH, WHO, CMMB</td>
</tr>
<tr>
<td>Water, Sanitation, and Hygiene (WASH)</td>
<td>MOH, IOM, ICRC, CGPP-WVI, UNICEF, WHO</td>
</tr>
<tr>
<td>Infection Prevention and Control (IPC)</td>
<td>MOH, WHO</td>
</tr>
<tr>
<td>Risk Communication and Community Engagement (RCCE)</td>
<td>MOH, WHO, CGPP-WVI, TR_SS, CMMB and UNICEF</td>
</tr>
<tr>
<td>Vaccination</td>
<td>MOH, WHO, UNICEF</td>
</tr>
<tr>
<td>Vector Control</td>
<td>MOH, Malaria Consortium</td>
</tr>
<tr>
<td>Logistics</td>
<td>MOH, WHO, UNICEF</td>
</tr>
</tbody>
</table>
Daily Situation update on the Yellow Fever outbreak in Western Equatoria State, South Sudan  
Date: 11 January 2024  
Situation Report Number 020

### Pillar leads and co-leads

<table>
<thead>
<tr>
<th>Pillar</th>
<th>Lead (MOH)</th>
<th>Co-lead</th>
</tr>
</thead>
<tbody>
<tr>
<td>Coordination</td>
<td>Dr John Rumunu/Atem Mayen</td>
<td>Dr Aggrey/ Kwuakuan (WHO)</td>
</tr>
<tr>
<td>Surveillance</td>
<td>Dr Lasu Joseph/Agnes Jokodu</td>
<td>Sheila Baya (WHO)</td>
</tr>
<tr>
<td>Laboratory</td>
<td>James Ayei</td>
<td>Andrew Baguma (WHO)</td>
</tr>
<tr>
<td>Case Management</td>
<td>Dr Harriet Pasquale /Dr Yohana</td>
<td>Richard Lobuya (WHO)</td>
</tr>
<tr>
<td>IPC/WASH</td>
<td>Nyankiir Ajing</td>
<td>Abraham (WHO)</td>
</tr>
<tr>
<td>RCCE</td>
<td>Mary Obat</td>
<td>Aping (UNICEF)</td>
</tr>
<tr>
<td>Vaccination</td>
<td>George Legge</td>
<td>Dr Anthony (WHO)</td>
</tr>
<tr>
<td>Vector Control</td>
<td>Constantino Doggale</td>
<td>Malaria Consortium/Mentor Initiative)</td>
</tr>
<tr>
<td>Logistics and Supplies</td>
<td>Hillary Hakim</td>
<td>WHO</td>
</tr>
</tbody>
</table>

### Challenges
- Limited partners on the ground to support the response.
- Community perceptions regarding patients with jaundice, particularly their preference for traditional healers.
- Limited capacity to manage severe cases at the available health facilities and difficulty in follow-up of suspected cases at home.
- Weak surveillance in some counties in Western Equatoria State.
- Limited capacity at health facilities for sample collection, packaging, and transportation.
- No Refresher training to RRTs, Social mobilizers.

### Next steps
- Strengthen coordination at the national, state, and county levels.
- Continue monitoring and analysis of surveillance data, active case search, investigation of alerts.
- Conducting Entomological surveillance in the affected areas
- Capacity building for health workers on sample collection, packaging, transportation, case management, and case detection and reporting.
- Finalize the Yellow Fever outbreak response plan.
- Follow up vaccine requested to ICG
- Disseminate information, education, and communication materials on Yellow Fever transmission and control.
- Engage more partners and other stakeholders for resource mobilization.
- Need engagement of the private facilities
  - Distribution of the CIF and case definition for yellow fever
  - Training on the CIF
- Engagement of traditional healers
- SOPs for all pillars to standardize the process of removing duplicates and replacing them with new cases
- Refresher training to RRTs, Social mobilizers, and BHI.
## PUBLIC HEALTH EMERGENCY OPERATIONS CENTRE (PHEOC)

### Daily Situation update on the Yellow Fever outbreak in Western Equatoria State, South Sudan

**Date:** 11 January 2024  
**Situation Report Number:** 020

### For more information, please contact

<table>
<thead>
<tr>
<th>Role</th>
<th>Name</th>
<th>Email</th>
<th>Phone</th>
</tr>
</thead>
<tbody>
<tr>
<td>Incident Manager</td>
<td>Dr. John Rumunu</td>
<td><a href="mailto:ori.moiga@gmail.com">ori.moiga@gmail.com</a></td>
<td>+211 924 767 490</td>
</tr>
<tr>
<td>Emergency Preparedness &amp; Response Director</td>
<td>Dr. Joseph Lasu</td>
<td><a href="mailto:josh2013.lasu@gmail.com">josh2013.lasu@gmail.com</a></td>
<td>+211 921 395 440</td>
</tr>
<tr>
<td>South Sudan PHEOC</td>
<td>E: <a href="mailto:sspheoc@gmail.com">sspheoc@gmail.com</a></td>
<td>P: +211 925 851 662/ P: +211 917 235 355</td>
<td></td>
</tr>
<tr>
<td>National Public Health Laboratory</td>
<td>Gregory Wani</td>
<td>E: <a href="mailto:wamgregory@gmail.com">wamgregory@gmail.com</a></td>
<td>P: +211912806376/0927040622</td>
</tr>
<tr>
<td>South Sudan PHEOC</td>
<td>Dr. BATEGEREZA, Aggrey Kaijuka</td>
<td>WHO-EPR Team Lead</td>
<td>E: <a href="mailto:bategerezza@who.int">bategerezza@who.int</a></td>
</tr>
</tbody>
</table>

### Editorial team

- MOH: Dr John Rumunu, Dr Joseph Lasu and Mabior Kiir
- WHO: Dr Bategereza Aggrey, Dr Rurangwa, Eric, Dr Mukesh Prajapati, Dr Abraham Adut, Dr Mustafa Lasu, Dr Wurda Tony, Dr Kwuakuan Yealue, Ms Sheila Baya, Malick Gai
- ICAP: Dr. Kennedy Muni
- Africa CDC: Dr Zerihun Kassa, Hamad Nimbo