

Key Figures					
Number of new suspected cases reported <sup>1</sup> in the last 7 days	7	Cumulative number of suspected cases	75	Cumulative number of cases	78
Number of new deaths reported in the last 7 days	00	Cumulative number of suspected deaths	06	Cumulative number of laboratory-confirmed cases	03

### Background:

On 21<sup>st</sup> December, 2023, the Ministry of Health received notification of a suspected case of viral hemorrhagic fever from Yambio County, Western Equatoria State. The suspected case was a 24-year<sup>2</sup>-old male from Kangura village in Gangura Payam, Yambio County, who presented symptoms including generalized body weakness, headache, epigastric discomfort, fever, vomiting of blood, and yellowish discoloration (jaundice) of the eyes.

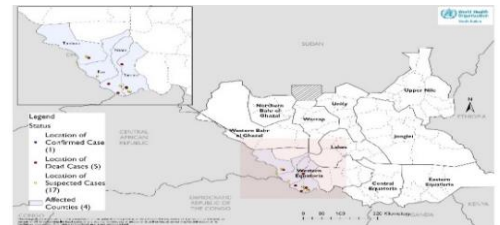


Figure 1: Location of Yellow fever outbreak in South Sudan

The patient was immediately placed under isolation at the health facility, and a sample was collected for further investigation. Subsequent testing conducted on the 24<sup>th</sup> December, 2023, at the National Public Health Laboratory confirmed a positive diagnosis of Yellow Fever.

The National Ministry of Health of the Republic of South Sudan officially declared a Yellow Fever outbreak on the 24<sup>th</sup> December, 2023, following confirmation of the case. The Public Health Emergency Operation Center (PHEOC) was immediately activated to facilitate a comprehensive, pillar-based approach to control and contain the outbreak. A multi-disciplinary team comprising representatives from the Ministry of Health, WHO, and partner organizations at both national and subnational levels was deployed to conduct an extensive epidemiological investigation, active case search, community mobilization, and sensitization efforts in Gangura Payam (the epicenter), Yambio County, Western Equatoria State, as well as surrounding Payams and Counties.

### Key highlights

Reporting period: 18<sup>th</sup> to 25<sup>th</sup> February 2024

- 25<sup>th</sup> February, 2024, marks 67 days since the first case of Yellow Fever was confirmed in Western Equatoria, South Sudan.
- Seven (07) new suspected Yellow Fever cases reported in the last 07 days. The cases were reported from Yambio (05), Ezo (01), and Nzara (01) counties.
- A cumulative total of seventy-eight (78) Yellow Fever cases (75 suspected and 03 confirmed) were reported from six counties in Western Equatoria state: Yambio (42), Tambura (15), Nzara (10), Ezo (06), Ibba (04), and Maridi Counties (01) as of 25<sup>th</sup> February 2024.

<sup>1</sup> Number of cases detected in the last 7 days. This includes both at the health facility and community

<sup>2</sup> Further verification by national rapid response team revealed the age of the index case to be 24 years rather than 18 years.

- No new deaths were reported in the last 07 days.
- A total of six (06) suspected deaths were reported<sup>3</sup>, giving a case fatality ratio of 7.7%.
- The Honorable Minister for Health launched a reactive Yellow Fever vaccination campaign on 13<sup>th</sup> February 2024.
- Three (03) out of the five (05) counties have started the reactive Yellow Fever campaign.
- A total of 351,131 individuals, representing 86.3% of the targeted population, have been vaccinated.
- Response activities (coordination, surveillance, laboratory, case management, risk communication and community engagement, vaccination, infection prevention and control etc.) are being reinforced by the State Ministry of Health and supported by partners (WHO, UNICEF, WVI-CGPP, CDTY, CMMB, Red Cross South Sudan, AMREF, JRS, IMA, and TRI-SS)
- Activeness surveillance is being strengthened in states and counties bordering Tambura and Ibba through guidance from the Ministry of Health and the State Ministry of Health with support from partners (WHO, UNICEF, CARE, Johanitter, AFOD, and CORDAID).

## Current updates

### Coordination

- Coordination meetings with stakeholders and key partners have transitioned from daily to a weekly frequency at the national level. However, daily meetings continue to be held at the sub-national level for enhanced collaboration and communication.

### Surveillance, Laboratory, and Reporting

- Seven (07) new suspected Yellow Fever reported during the last 07 days. The cases were reported from Yambio county (05), Ezo (01) and Nzara (01) counties.
- Cumulatively, seventy-eight (78) Yellow Fever cases (75 suspected and 03 confirmed), including 6 deaths, were reported as of 25 February 2024, giving a case fatality ratio of 7.7%.
- All cases were reported from six counties in Western Equatoria state: Yambio (42), Tambura (15), Nzara (10), Ezo (06), Ibba (04), and Maridi Counties (01) as of 25<sup>th</sup> February 2024.
- Out of the cumulative 78 cases (75 suspected and 03 confirmed), females accounted for 54%, and males accounted for 46%.
- Majority (87%) of the reported cases are 15 years and above, while 13% are noted to be among 1 to 4 years old.
- Sixty-eight (68) samples have been received at the National Public Health Laboratory (NPHL); 64 have been tested, and 04 were rejected because the samples were inadequate.

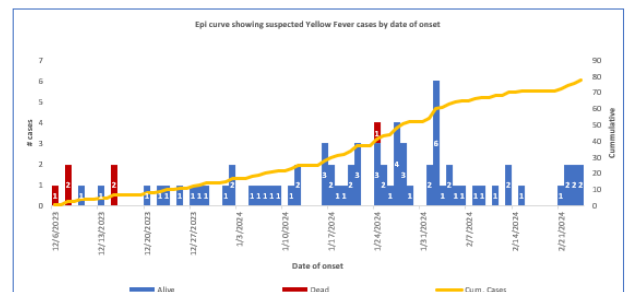


Figure 1: Epi curve showing suspected Yellow Fever cases in Ezo, Tambura, Nzara and Yambio 2023 to 2024 by date of onset

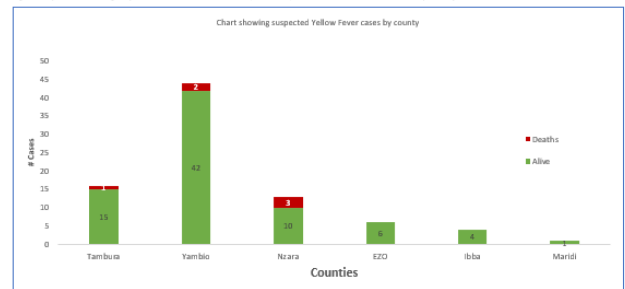


Figure 2: Chart showing suspected Yellow Fever cases in Tambura, Nzara, Ibba, Ezo and Yambio, 2023 to 2024

<sup>3</sup> 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.



- Twenty-three (23) samples were referred to the regional collaborating laboratory, the Uganda Virus Research Institute (UVRI), Uganda, for further verification.
- Only 03 out of the 68 samples tested positive for Yellow Fever. Of the 03 samples, 02 were positive at the NPHL and 03 at UVRI.

Case management

- MSF-Spain provided healthcare workers with training on managing Yellow Fever cases. The training aims to enhance their knowledge and skills in effectively diagnosing, treating, and responding to Yellow Fever cases, ultimately leading to improved patient care.
- Health facilities in affected counties have been notified to screen and categorize individuals based on the outbreak case definition for suspected cases.
- An interim case management guide was developed to support healthcare workers in the management of patients.

Risk communication and community engagement (RCCE)

- Partners continue to engage the community 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 and preparing the yellow fever vaccination campaign is ongoing.
- Twenty-seven (27) healthcare workers oriented on Yellow fever outbreak response focusing on risk communication and community engagement for vaccine uptakes (Tambura, Nzara, and Yambio)
- Radio spot broadcasting on Yellow Fever prevention and control continues to be produced.

Vaccination

- Yellow Fever campaign completed in Yambio, Nzara, and Tambura on 21<sup>st</sup> Feb 2024, data collation ongoing.
- Current data shows 351,131 individuals, representing 86.3% of the targeted population, have been vaccinated
- The balance of 223,743 doses of Yellow Fever vaccine for Ibba and Ezo arrived in the country on the 27<sup>th</sup> February 2024

Table 1: Vaccination status and coverage by county

State	County	Target population (9 moths ++)	Total vaccinated	Coverage	Status
WES	Yambio	226,864	192,753	85%	Completed
WES	Nzara	97,755	87,468	90%	Completed
WES	Tambura	82,080	70,910	86%	Completed
WES	Ezo	138,859			Yet to commence
WES	Ibba	62,711			Yet to commence

Implementing Partners by Pillar

Pillar	Partner supporting
Coordination	MOH, WHO
Surveillance	MOH, WHO and CGPP-WVI
Case Management	MOH, WHO, MSF-Spain, CMMB, and CGPP-WVI
Water, Sanitation, and Hygiene (WASH)	MOH, IOM, ICRC, CGPP-WVI, UNICEF, WHO
Infection Prevention and Control (IPC)	MOH, WHO



**PUBLIC HEALTH EMERGENCY OPERATIONS CENTRE (PHEOC)**

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

*Date: 28 February 2024*

*Situation Report Number 031*



Risk Communication and Community Engagement (RCCE)	MOH, WHO, CGPP-WVI, UNICEF, CDTY, TRI-SS, CMMB , Red cross South Sudan
Vaccination	MOH, WHO, UNICEF, CGPP-WVI, AMREF, CMMB and CDTY, CRSO,HPF
Vector Control	MOH, and WHO
Logistics	MOH, WHO, UNICEF, MSF-Spain, WVI

**Challenges**

- Delay in data reporting (coverage, AEFI, Vac balance etc.), resulting in inadequate data for action.
- VPDs outbreaks (Polio, Measles) ongoing with planned responses competing with the YF response
- Lack of partners' support to carry out vector control activities to reduce the risk of yellow fever transmission.
- Limited partners are on the ground to support the response, especially RCCE activities in other counties.
- 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.
- Limited capacity at health facilities for sample collection, packaging, and transportation.

**Next steps**

- Discuss with the SMOH, the need for a mop-up based on coverage data and appropriate timelines while ensuring the polio campaign is not compromised.
- Validate the micro-plan for the Ibba and Ezo before the campaign, review the strategies, and incorporate lessons learnt in phase 01.
- Agree on dates for campaigns in Ibba and Ezo with the SMOH, and partners.
- Strengthen analysis of surveillance data, active case search, and investigation of alerts.
- Capacity building for health workers on sample collection, packaging, transportation, case detection and case management and reporting.
- Engage more partners and other stakeholders for resource mobilization.
- Plan and conduct a post-campaign evaluation campaign for the 03 counties that have already implemented the Yellow Fever vaccination campaign.

**For more information, please contact**

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