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

Date: 20 March 2024
Situation Report Number 034

Key Figures

| Number of new suspected cases reported\(^1\) in the last 7 days | 9 | Cumulative number of suspected cases | 93 | Cumulative number of cases | 96 |
| 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 December 21, 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\(^2\)-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.

The patient was immediately placed under isolation at the health facility, and a sample was collected for further investigation. Subsequent testing conducted on December 24, 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 December 24, 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: 11 to 17 March 2024

- Nine (09) new suspected Yellow Fever cases reported in the last 07 days. The cases were reported from Yambio (4), Maridi (3) Tambura (1), and Ezo (1) counties.
- As of 17 March 2024, ninety-six (96) Yellow Fever cases (93 suspected and 3 confirmed) were reported from six counties in Western Equatoria state: Yambio (46), Tambura (23), Nzara (11), Ezo (08), Ibba (04), and Maridi (04) Counties.
- No new deaths were reported in the last 07 days.

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

2 Further verification by national rapid response team revealed the age of the index case to be 24 years rather than 18 years.
• A total of six (06) suspected deaths were reported\(^3\), giving a case fatality ratio of 6.3%.
• The Honorable Minister for Health launched a reactive Yellow Fever vaccination campaign on 13 February 2024.
• A total of 288,068 individuals\(^4\), representing 71% of the targeted population, were vaccinated in phase 1 of the YF campaign.
• 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

- Nine (09) new suspected Yellow Fever reported during the last 07 days.
- The cases were reported from Yambio (4), Maridi (3) Tambura (1), and Ezo (1) counties.
- Cumulatively, ninety-six (96) Yellow Fever cases (93 suspected and 03 confirmed), including 6 deaths, were reported as of 17 March 2024, giving a case fatality ratio of 6.3%.
- All cases were reported from six counties in Western Equatoria state: Yambio (46), Tambura (23), Nzara (11), Ezo (08), Ibba (04), and Maridi (04) counties (1).
- Out of the cumulative 96 cases (93 suspected and 03 confirmed), females accounted for 54%, and males accounted for 46%.
- Majority (71%) of the reported cases are 15 years and above, while 10%...\(^3\) 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.
\(^4\) Some data cleaning was conducted at the field level, leading to downward adjustments in the number of vaccinated individuals and the overall coverage rate.
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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 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

- Phase 2 of the Yellow Fever campaign started on 19 and 20 March 2024 in Ibba and Ezo, respectively, with the campaign scheduled for ten days based on lessons learnt in Phase 1
- Preliminary data shows 5% coverage for Ibba and 4% for Ezo.
- A post-campaign coverage survey is planned.

Table 1: Vaccination status and coverage by county***

<table>
<thead>
<tr>
<th>State</th>
<th>County</th>
<th>Target population (9 moths++)</th>
<th>Total vaccinated</th>
<th>Coverage</th>
<th>Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>WES</td>
<td>Yambio</td>
<td>226,864</td>
<td>165,790</td>
<td>73%</td>
<td>Completed</td>
</tr>
<tr>
<td>WES</td>
<td>Nzara</td>
<td>97,755</td>
<td>63,451</td>
<td>65%</td>
<td>Completed</td>
</tr>
<tr>
<td>WES</td>
<td>Tambura</td>
<td>82,080</td>
<td>58,827</td>
<td>72%</td>
<td>Completed</td>
</tr>
<tr>
<td>WES</td>
<td>Ezo</td>
<td>138,859</td>
<td>5,101</td>
<td>4%</td>
<td>Ongoing</td>
</tr>
<tr>
<td>WES</td>
<td>Ibba</td>
<td>62,711</td>
<td>3,027</td>
<td>5%</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

*** vaccination coverage per county changed following data cleaning

Table 2: 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>
</tbody>
</table>
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Case Management: MOH, WHO, MSF-Spain, CMMB, and CGPP-WVI


Infection Prevention and Control (IPC): MOH, WHO


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

- Current Measles outbreak ongoing in Yambio, Nzara, Ibba and Tambura with responses been planned
- Lack of partners' support to carry out vector control activities to reduce the risk of yellow fever transmission.

Next steps

- Improve on quality of campaign via strengthening supportive supervision
- Ensure daily data is uploaded to monitor campaign progress and make needed interventions
- Hold daily evening review meeting to assess the status of campaigns and support needed
- 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 coverage survey.

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