NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES
Division of the National Health Laboratory Service

NOTIFIABLE MEDICAL CONDITIONS SURVEILLANCE SYSTEM

the National Institute for Communicable Diseases

Introduction

This report summarizes data from the National Notifiable Medical Conditions Surveillance System (NMCSS) on cases notified during **January 2024**. Additionally, this report includes information on the distribution of case notifications by sources, such as clinical or laboratory notifications, merged cases (**see Appendix no. 3**), and the number of reported deaths. It monitors the use of the electronic NMC Reporting Application (App) for notification, data quality, specifically the completeness and timeliness of clinical diagnosis and notifications over time, and back-captured cases notified in January 2024 (**see Appendix nos. 1 and 3**). Category 4 NMCs, COVID-19, and multi-system inflammatory syndrome (MIS-C) have been excluded from this report. For more notes on data interpretation please see NMCSS interpretation.

Highlights

- A total of 12 187 cases were notified in January 2024 and the majority were category 2 conditions.
- There were 414 average active users of the NMC App in January 2024
- Category 1 cases were reported in median (IQR) of 0 (0, 2) days.

NMC Reporting application

- NMC Reporting App. is available on both web and mobile platforms
- Use recommended browsers in order to access NMC reporting App for notifications, searching of cases and reports.
- Register if you have no NMC account and you can reset the password if you have not used the application over 12 months.

NOTES: For any additional information contact the NMC national technical team: NMCAppSupport@nicd.ac.za or NMC hotline 072 621 3805. Please refer to Appendices for NMC data flow, definitions and interpretation of epidemiology data in this report.

DATA IS CONTINUOUSLY CLEANED, DE-DUPLICATED, AND UPDATED, HENCE IS SUBJECT TO CHANGE. ALL NUMBERS REPORTED ARE PRELIMINARY UNLESS OTHERWISE STATED. DATE OF DIAGNOSIS IS USED FOR REPORTING.

Category 1 Conditions at a glance

Table 1: The number of notifications that are suspected and confirmed for category 1 conditions.

Condition	**Overall**, N = 1 206[1]	**Suspected**, N = 516[1]	**Confirmed**, N = 690[1]
Acute flaccid paralysis	23	23	0
Acute rheumatic fever	0	0	0
Anthrax	0	0	0
Botulism	0	0	0
Cholera	44	39	**5**
Congenital rubella syndrome	9	9	0
Crimean-congo viral haemorrhagic fever (human)	1	1	0
Diphtheria	3	3	0
Ebola virus (VHF)	0	0	0
Enteric fever (typhoid or paratyphoid fever)	19	10	**9**
Food borne illness outbreak	73	73	0
Haemolytic uraemic syndrome (HUS)	0	0	0
Listeriosis	7	3	**4**
Malaria	601	0	**601**
Marburg virus (VHF)	0	0	0
Measles	182	177	**5**
Meningococcal disease	23	19	**4**
Mpox	0	0	0
Pertussis	137	87	**50**
Plague	0	0	0
Poliomyelitis	0	0	0
Rabies	0	0	0
Respiratory disease caused by a novel respiratory pathogen	3	3	0
Rift valley fever (human)	0	0	0
Rubella	81	69	**12**
Smallpox	0	0	0
Waterborne illness outbreak - undefined	0	0	0
Yellow fever	0	0	0

[1]Suspected and confirmed cases are independent and are not totalled - suspected and confirmed cases are distinct.

NMC data summary, January 2024

A total of 12 250 cases were notified to the NMCSS in January 2024. There were 12 187 current notifications; the majority (10 828, 89%) were category 2 conditions. The provinces with the highest number of notifications were KZN (3 011, 25%), GP (2 939, 24%), and WC (2 198, 18%). The provinces with the least number of notifications were NC (455, 3.7%), and NW (493, 4.0%). (**Figure 1**) There were 63 back captured clinical notifications diagnosed between December, 2023 and January 2024 and only notified in January 2024 (See **Appendix no.3** for definitions). Most of those notifications were for "Pulmonary TB". (**See Appendix no.1**).

Most of the notified cases were males (7 227, 59%). Individuals in the 30-34 year age group represented the majority (1 396, 12%) of notified cases. At the time of notification, 2 676 (22%) of the notified cases were hospitalized, while 78 (0.6%) were transferred to another healthcare facility. There were 102 deaths notified during the reporting period with case fatality rate of 0.8%.

Distribution of Category 1 NMCs by province and case definition

Malaria made up the half (601, 50%) of category 1 notifications. The province with the highest number of notifications for Malaria was GP (201 ,33.4%).

Table 2: The number of notifications by province and number of notifications that are suspected and confirmed by vital status.

	Provinces									Case		Deaths	
Condition	EC[1]	FS[1]	GP[1]	KZN[1]	LP[1]	MP[1]	NC[1]	NW[1]	WC[1]	Suspected[1]	Confirmed[1]	Suspected[1]	Confirmed[1]
Acute flaccid paralysis	5	1	6	9	2	0	0	0	0	23	0	0	0
Acute rheumatic fever	0	0	0	0	0	0	0	0	0	0	0	0	0
Anthrax	0	0	0	0	0	0	0	0	0	0	0	0	0
Botulism	0	0	0	0	0	0	0	0	0	0	0	0	0
Cholera §	0	0	15	0	29	0	0	0	0	39	5	0	0
Congenital rubella syndrome	0	1	1	1	0	1	1	0	4	9	0	0	0
Crimean-congo viral haemorrhagic fever (human)	0	0	1	0	0	0	0	0	0	1	0	0	0
Diphtheria *	1	0	0	1	0	0	0	1	0	3	0	1	0
Ebola virus (VHF)	0	0	0	0	0	0	0	0	0	0	0	0	0
Enteric fever (typhoid or paratyphoid fever)	1	0	8	1	0	1	1	3	4	10	9	0	0
Food borne illness outbreak	19	3	10	19	8	14	0	0	0	73	0	4	0
Haemolytic uraemic syndrome (HUS)	0	0	0	0	0	0	0	0	0	0	0	0	0
Listeriosis	2	0	2	1	0	1	0	0	1	3	4	0	1
Malaria	8	16	201	108	76	114	6	33	39	0	601	0	1
Marburg virus (VHF)	0	0	0	0	0	0	0	0	0	0	0	0	0
Measles	4	0	21	10	2	2	11	1	131	177	5	0	0
Meningococcal disease	4	1	4	2	1	0	3	0	8	19	4	0	1
Mpox	0	0	0	0	0	0	0	0	0	0	0	0	0
Pertussis	13	8	49	30	5	3	2	3	24	87	50	0	0
Plague	0	0	0	0	0	0	0	0	0	0	0	0	0
Poliomyelitis	0	0	0	0	0	0	0	0	0	0	0	0	0
Rabies	0	0	0	0	0	0	0	0	0	0	0	0	0
Respiratory disease caused by a novel respiratory pathogen	0	0	2	1	0	0	0	0	0	3	0	0	0
Rift valley fever (human)	0	0	0	0	0	0	0	0	0	0	0	0	0
Rubella	3	3	7	5	0	0	3	0	60	69	12	0	0
Smallpox	0	0	0	0	0	0	0	0	0	0	0	0	0
Waterborne illness outbreak - undefined	0	0	0	0	0	0	0	0	0	0	0	0	0
Yellow fever	0	0	0	0	0	0	0	0	0	0	0	0	0

[1]n(%);

* Toxin producing results not available on NMC;

§ Serotype information not available on NMC;

** Merged case represents a clinical and laboratory notification of the same person and was successfully linked and made into a single notification

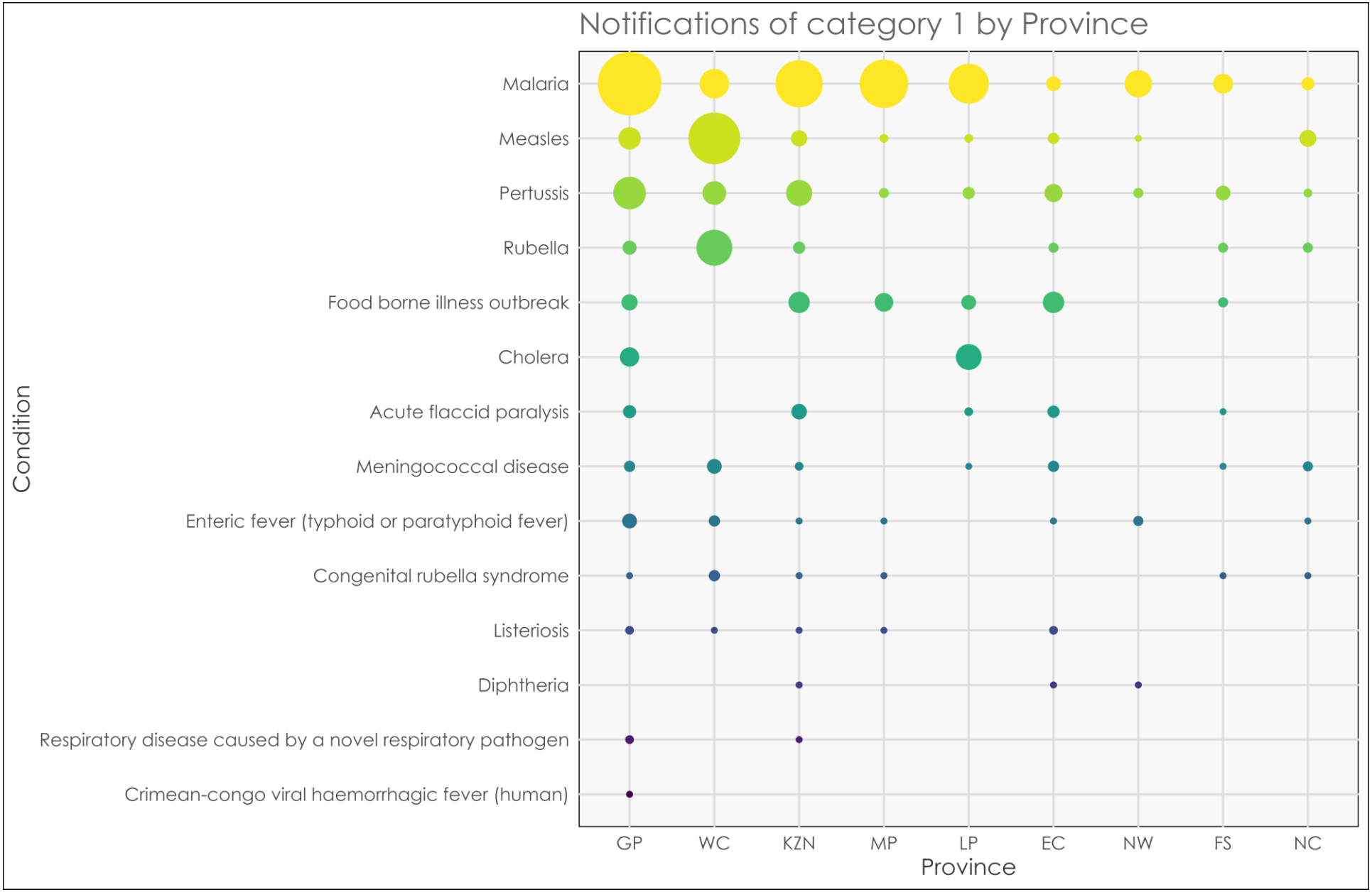


Figure 1: Distribution of Category 1 NMC notifications by province. Notifications include suspected and confirmed cases.

Distribution of Category 2 NMCs by province and case definition

Pulmonary TB made up most (6 146, 57%) of category 2 notifications. The province with the highest number of notifications for Pulmonary TB was GP (1532, 14.1%).

Table 3: The number of notifications by province and number of notifications that are suspected and confirmed by vital status.

	Provinces									Case		Deaths	
Condition	**EC**[1]	**FS**[1]	**GP**[1]	**KZN**[1]	**LP**[1]	**MP**[1]	**NC**[1]	**NW**[1]	**WC**[1]	**Suspected**[1]	**Confirmed**[1]	**Suspected**[1]	**Confirmed**[1]
Agricultural or stock remedy poisoning	6	11	44	1	9	4	0	0	10	85	0	3	0
Bilharzia (schistosomiasis)	37	0	39	298	203	97	1	3	11	651	38	0	0
Brucellosis	0	0	2	2	0	0	1	0	0	5	0	0	0
Congenital syphilis	65	18	61	223	10	20	12	12	78	428	71	1	1
Haemophilus influenzae type B	2	0	0	1	0	0	1	2	0	2	4	0	0
Hepatitis A	89	33	183	150	71	52	13	32	128	605	146	0	1
Hepatitis B	114	47	79	756	6	19	6	56	15	1 058	40	1	1
Hepatitis C	0	1	13	2	1	0	0	0	2	18	1	0	0
Hepatitis E	0	1	4	0	0	0	0	0	1	5	1	0	0
Lead poisoning	0	0	0	0	0	0	0	0	0	0	0	0	0
Legionellosis	1	0	0	1	0	0	0	0	1	0	3	0	1
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0
Maternal death (pregnancy, childbirth and puerperium)	0	0	3	1	0	0	0	0	0	4	0	4	0
Mercury poisoning	0	0	0	0	0	0	0	0	0	0	0	0	0
Soil transmitted helminths	0	0	1	1	0	0	0	0	0	2	0	0	0
Tetanus	0	1	2	1	0	3	0	0	0	7	0	0	0
Tuberculosis: extensively drug - resistant (XDR -TB)	1	1	4	1	0	0	1	0	6	14		1	
Tuberculosis: multidrug- resistant (MDR -TB)	25	2	53	43	2	5	5	4	38	177		4	
Tuberculosis:extra-pulmonary	129	77	572	179	44	30	37	58	191	1 317		16	
Tuberculosis:pulmonary	727	322	1 532	1 149	295	127	349	282	1 363	6 146		59	

[1]n;

* TB module is under development to align with laboratory confirmed TB cases.

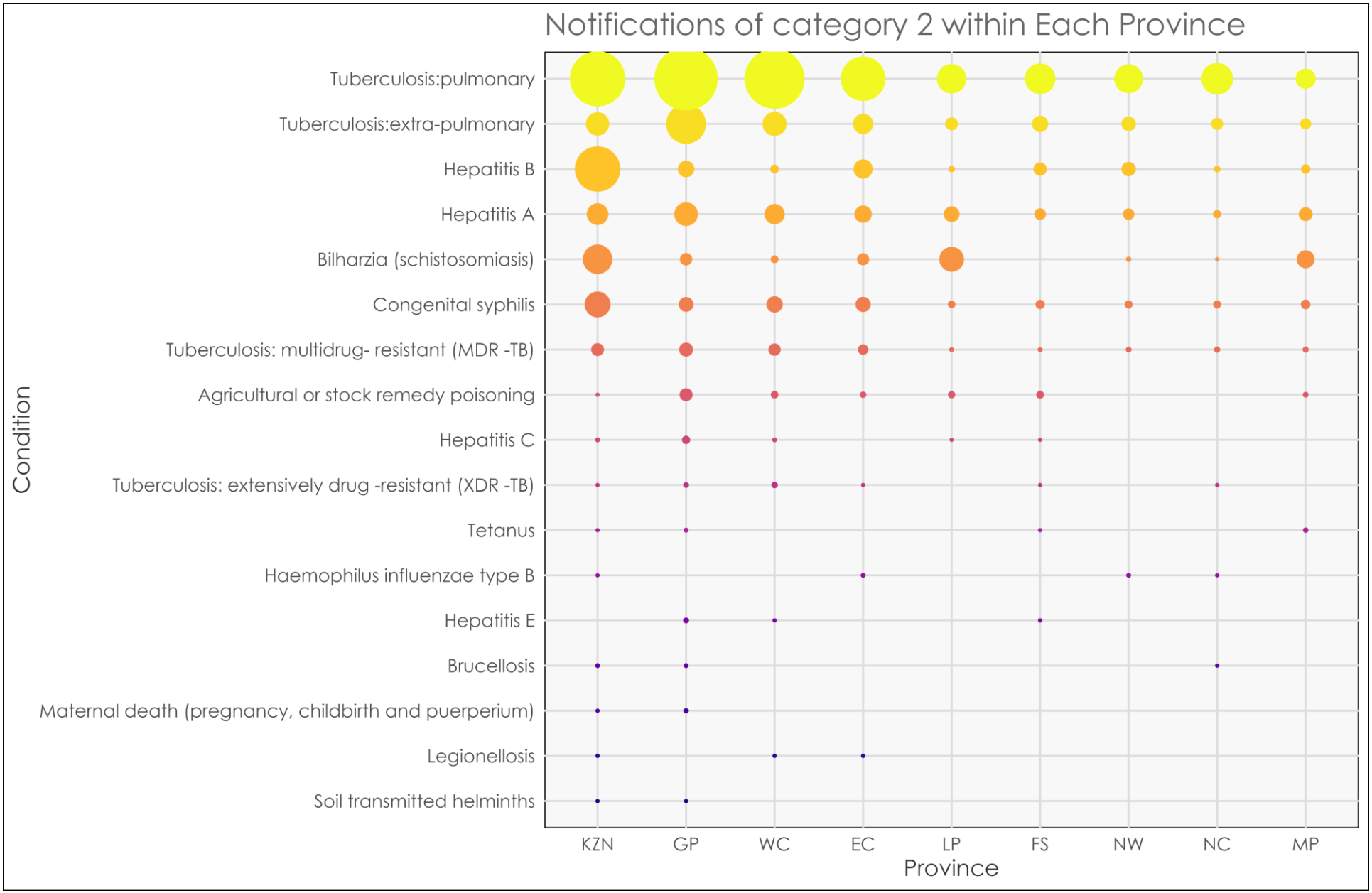


Figure 2: Distribution of Category 2 NMCs by province

NMC app use statistics

Table 4: Description of NMC notifications by case source

NMC Category	**Overall**, N = 12 187	**Clinical notifications**, n = 8 680	**Laboratory notifications**, n = 2 968	**Merged Cases**, n = 539
Category 1	1 206 (9.9%)	562 (6.5%)	428 (14%)	216 (40%)
Category 2	10 828 (89%)	8 118 (94%)	2 411 (81%)	299 (55%)
Category 3	153 (1.3%)	0 (0%)	129 (4.3%)	24 (4.5%)

Notification types and merging

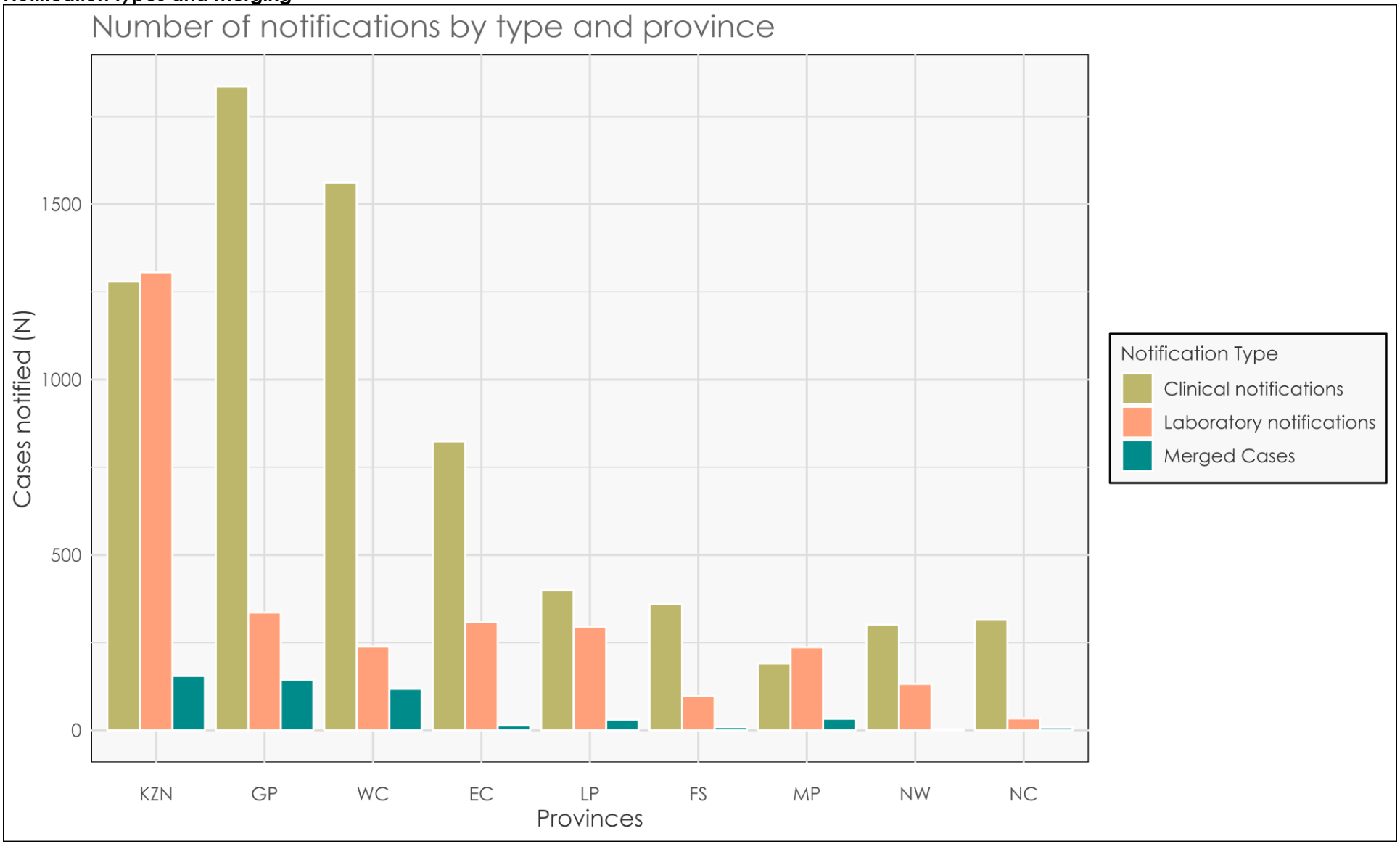


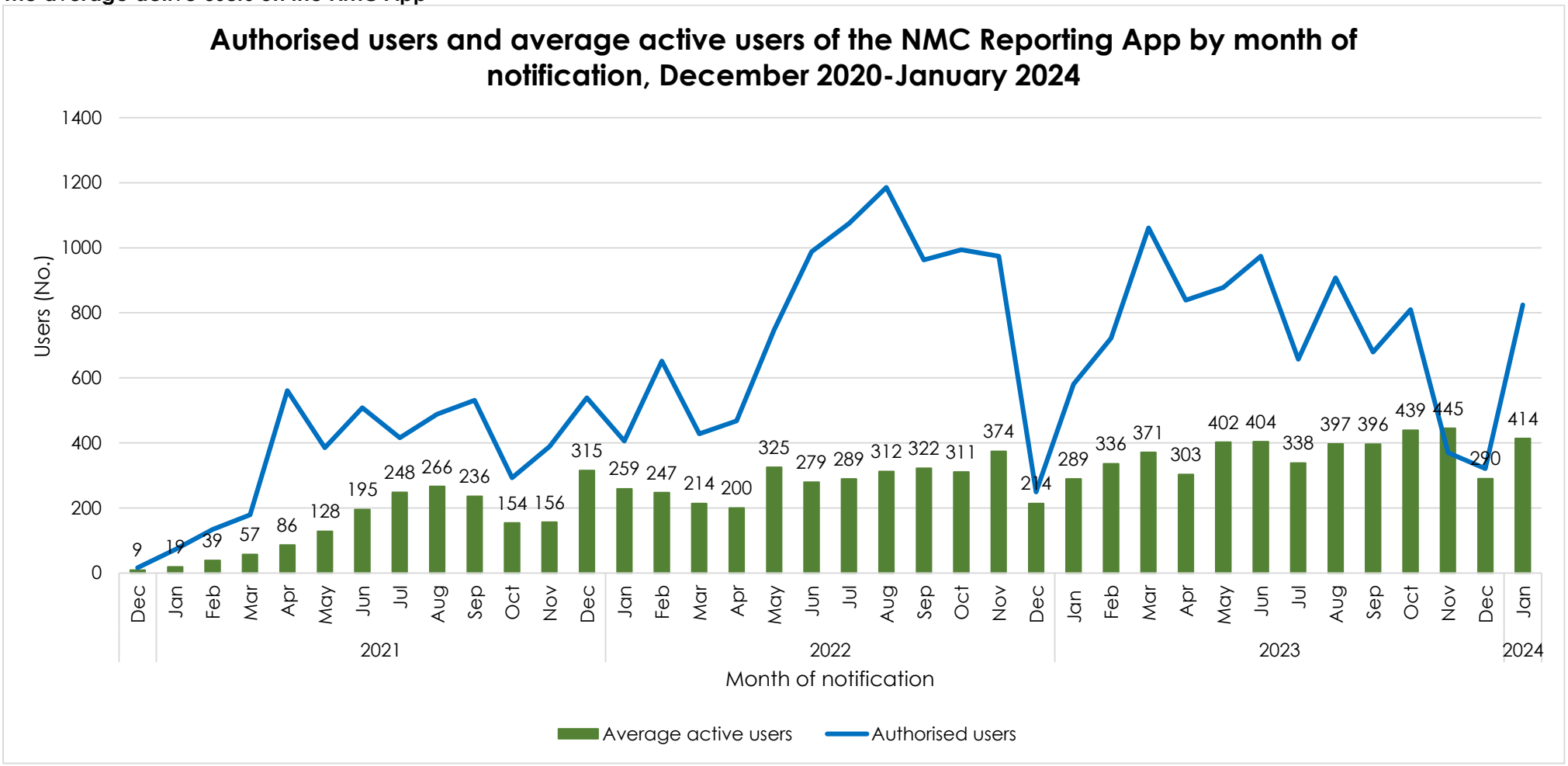
Figure 3: Distribution of notifications by province and notification type

There were 760 (8.2%) clinical notifications from the private sector (i.e. private hospitals, private practice and mining industry) compared to 8 455 (92%) in the public sector. Clinical notifications using the NMC Reporting Application made up 8576 (70%) (more details in Table 5).

Table 5: Clinical notifications notified by provinces, reporting platform, and sector

Province	**Overall**, N = 8 734	**App - Private**, n = 748	**App - Public**, n = 7 828	**Paper-based - Private**, n = 12	**Paper-based - Public**, n = 146
GP	2 472 (100%)	244 (9.9%)	2 216 (90%)	11 (0.4%)	1 (<0.1%)
WC	1 862 (100%)	103 (5.5%)	1 700 (91%)	0 (0%)	59 (3.2%)
KZN	1 550 (100%)	149 (9.6%)	1 384 (89%)	0 (0%)	17 (1.1%)
EC	964 (100%)	66 (6.8%)	853 (88%)	0 (0%)	45 (4.7%)
FS	448 (100%)	52 (12%)	392 (88%)	1 (0.2%)	3 (0.7%)
LP	442 (100%)	25 (5.7%)	417 (94%)	0 (0%)	0 (0%)
NC	414 (100%)	21 (5.1%)	392 (95%)	0 (0%)	1 (0.2%)
NW	359 (100%)	42 (12%)	303 (84%)	0 (0%)	14 (3.9%)
MP	223 (100%)	46 (21%)	171 (77%)	0 (0%)	6 (2.7%)

The average active users on the NMC App



Data quality

Completeness

Completeness refers to the proportion of complete data entries per variable in the dataset among clinical and merged notifications. Laboratory notifications which are automated and sometimes updated manually, generally have poorer completeness of Symptom onset date, date of diagnosis and vital status compared to the app and paper-based clinical notifications.

Table 6: NMC data completeness of clinical notifications on both reporting platforms

	App, N = 8 579	**Paper-based**, N = 159	**Laboratory notification**, N = 3 449
Folder Number	6 749 (79%)	108 (68%)	2 917 (85%)
First Name	8 579 (100%)	159 (100%)	3 448 (100%)
Surname	8 579 (100%)	159 (100%)	3 447 (100%)
Symptom Onset Date	8 536 (99%)	155 (97%)	1 092 (32%)
Date of Diagnosis	8 579 (100%)	159 (100%)	480 (14%)
Vital Status	8 426 (98%)	142 (89%)	424 (12%)

ID number completeness

Table 7: Length of ID numbers inputted on NMC system

Length of ID number	**Android**, N = 2 867[1]	**Microstrategy/SDW**, N = 3 449[1]	**Paper-based**, N = 159[1]	**Web**, N = 5 218[1]	**iOS**, N = 494[1]
Not complete	1 139 (40%)	3 350 (97%)	88 (55%)	1 572 (30%)	194 (39%)
5	0 (0%)	0 (0%)	0 (0%)	3 (<0.1%)	0 (0%)
6	0 (0%)	5 (0.1%)	0 (0%)	448 (8.6%)	50 (10%)
7	0 (0%)	0 (0%)	0 (0%)	15 (0.3%)	1 (0.2%)
8	1 (<0.1%)	0 (0%)	0 (0%)	44 (0.8%)	1 (0.2%)
9	0 (0%)	0 (0%)	0 (0%)	9 (0.2%)	0 (0%)
10	0 (0%)	8 (0.2%)	0 (0%)	116 (2.2%)	2 (0.4%)
11	0 (0%)	0 (0%)	0 (0%)	8 (0.2%)	0 (0%)
12	0 (0%)	0 (0%)	0 (0%)	50 (1.0%)	5 (1.0%)
13	1 727 (60%)	86 (2.5%)	71 (45%)	2 953 (57%)	241 (49%)

[1]n (%)

Hospital Form Completeness

Table 8: Completion of hospitalisation form for notifications reported as inpatients with category 1 conditions. Complete refers to >80% of variables completed.

Hospital Form Completed	**Complete**, n = 44 (12%)	**Incomplete**, n = 68 (18%)	**Only Symptoms completed**, n = 178 (47%)	**Not Attempted**, n = 88 (23%)
Tuberculosis:pulmonary	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Tuberculosis:extra-pulmonary	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Tuberculosis: multidrug- resistant (MDR -TB)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Tuberculosis: extensively drug -resistant (XDR -TB)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Tetanus	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Soil transmitted helminths	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Shigellosis	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Rubella	1 (2.3%)	0 (0%)	0 (0%)	2 (2.3%)
Respiratory disease caused by a novel respiratory pathogen	0 (0%)	0 (0%)	2 (1.1%)	1 (1.1%)
Pertussis	11 (25%)	22 (32%)	31 (17%)	17 (19%)
Non-typhoidal salmonellosis	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Non-endemic arboviral diseases : dengue fever virus	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Meningococcal disease	2 (4.5%)	8 (12%)	3 (1.7%)	5 (5.7%)
Measles	2 (4.5%)	0 (0%)	9 (5.1%)	1 (1.1%)
Maternal death (pregnancy, childbirth and puerperium)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Malaria	22 (50%)	17 (25%)	90 (51%)	49 (56%)
Listeriosis	1 (2.3%)	1 (1.5%)	0 (0%)	2 (2.3%)
Legionellosis	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Hepatitis E	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Hepatitis C	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Hepatitis B	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Hepatitis A	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Haemophilus influenzae type B	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Food borne illness outbreak	1 (2.3%)	10 (15%)	17 (9.6%)	4 (4.5%)
Enteric fever (typhoid or paratyphoid fever)	2 (4.5%)	2 (2.9%)	1 (0.6%)	3 (3.4%)
Endemic arboviral diseases chikungunya virus	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Diphtheria	0 (0%)	0 (0%)	1 (0.6%)	0 (0%)
Crimean-congo viral haemorrhagic fever (human)	0 (0%)	0 (0%)	1 (0.6%)	0 (0%)
Congenital syphilis	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Congenital rubella syndrome	0 (0%)	1 (1.5%)	0 (0%)	0 (0%)
Cholera	0 (0%)	0 (0%)	11 (6.2%)	2 (2.3%)
Brucellosis	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Bilharzia (schistosomiasis)	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Agricultural or stock remedy poisoning	0 (0%)	0 (0%)	0 (0%)	0 (0%)
Acute flaccid paralysis	2 (4.5%)	7 (10%)	12 (6.7%)	2 (2.3%)

Timeliness

Timeliness is measured by the number of days from the date of diagnosis of the NMC to the date of notification to get time to notifications. Laboratory notifications that are not updated do not have a diagnosis date and we classify these as current. Overall, it took a median (IQR) of 0 (0, 2) days to report category 1 NMCs. Some category 1 disease are back captured, meaning there was more than 7 days between the date of diagnosis and the date of notification. For more definitions, please see **Appendix no.3.**

Table 9: Symptoms of patients clinically notified and merged with lab notifications to the NMC

Characteristic	**Catgegory 1**, n = 1 269	**Catgegory 2**, n = 10 828	**Catgegory 3**, n = 153
Time to Notification	0 (0, 2)	2 (0, 8)	4 (3, 6)
Unknown	375	1 934	1
Back Capture Classification			
Back capture	63 (5%)	0 (0%)	0 (0%)
Current	1 078 (85%)	8 598 (79%)	127 (83%)
Delayed	128 (10%)	2 230 (21%)	26 (17%)

Conclusion

The majority of notifications were clinical notifications. Patients who are hospitalized with a category 1 condition and notified still have poor completeness of the hospital form with most notifications only having symptom completed. ID numbers are poorly completed in notifications from SDW.

Recommendations

- We recommend that clinicians should complete all patient clinical and demographic details to improve hosptial form completeness.
- We strongly recommend complete ID number capture in the SDW system to improve data quality and the ability for the NMCSS to merge clinical and laboratory notifications.
- We encourage filling in of the hospitalisation form for all hospitalised category 1 cases
- We welcome stakeholders to send feedback and suggestions for the report. We also encourage reaching out for ingestion of data from data from data sources that existed prior to the launch of the NMCSS. Feel free to reach out to **brianb@nicd.ac.za** .

Appendices

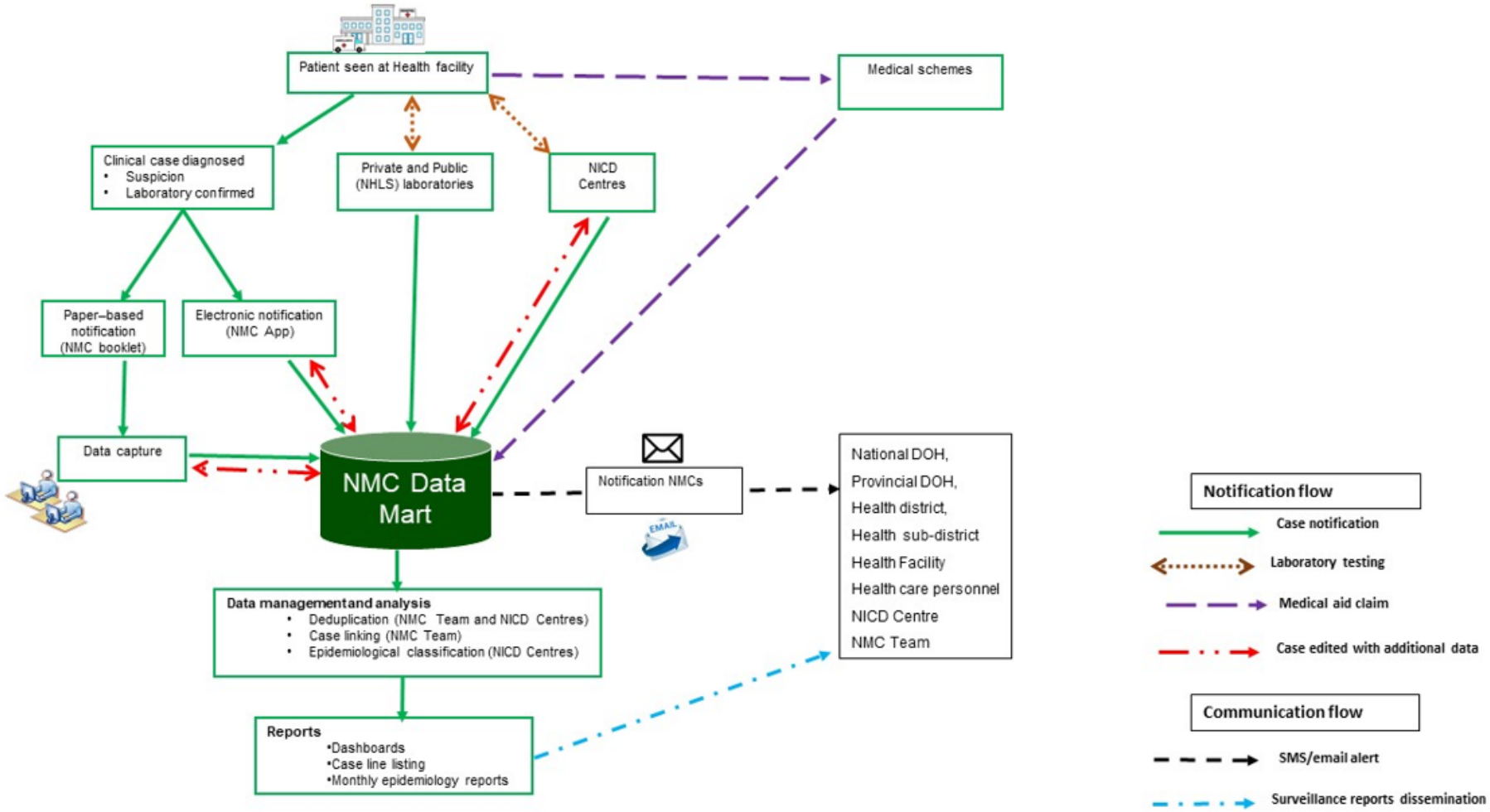
Appendix no.1: Back captured clinical notifications

Table 10: Back captured notifications by reporting province

Condition	Overall	Province								Case Source			
	Overall, (63)	**EC**, (5)	**GP**, (26)	**KZN**, (5)	**LP**, (3)	**MP**, (3)	**NC**, (1)	**NW**, (3)	**WC**, (17)	**Android**, (6)[1]	**SDW**, (26)[1]	**Web**, (29)[1]	**iOS**, (2)[1]
Pertussis	23 (37%)	4	11	1	2	2	0	2	1	1	16	6	0
Rubella	13 (21%)	1	1	0	0	0	1	0	10	0	4	9	0
Malaria	11 (17%)	0	10	0	0	1	0	0	0	1	3	6	1
Measles	5 (7.9%)	0	0	2	0	0	0	0	3	0	0	5	0
Acute flaccid paralysis	3 (4.8%)	0	1	1	1	0	0	0	0	2	0	0	1
Food borne illness outbreak	3 (4.8%)	0	1	0	0	0	0	0	2	1	0	2	0
Cholera	1 (1.6%)	0	1	0	0	0	0	0	0	1	0	0	0
Congenital rubella syndrome	1 (1.6%)	0	0	0	0	0	0	1	0	0	1	0	0
Enteric fever (typhoid or paratyphoid fever)	1 (1.6%)	0	1	0	0	0	0	0	0	0	1	0	0
Listeriosis	1 (1.6%)	0	0	1	0	0	0	0	0	0	1	0	0
Meningococcal disease	1 (1.6%)	0	0	0	0	0	0	0	1	0	0	1	0

[1]SDW – Surveillance data warehouse/ Microstrategy

Appendix no.2: Summary of NMCSS Data Flow



Appendix no.3: NMC Categories, and Case Classification definitions
NMC categories

Category 1: NMCs notified by the most rapid means available upon diagnosis, followed by a written or electronic notification to the Department of Health within 24 hours of diagnosis by healthcare providers, private health laboratories or public health laboratories. These conditions must be notified based on clinical suspicion irrespective of laboratory confirmation.

Category 2: NMCs notified through a written or an electronic notification to the Department of Health of clinical or laboratory diagnosis within 7 days by healthcare providers, private health laboratories or public health laboratories.

Category 3: NMCs notified through a written or electronic notification to the Department of Health within 7 days of diagnosis by public and private health laboratories.

Category 4: NMCs notified through a written or electronic notification to the Department of Health within 1 month of diagnosis by public and private health laboratories.

Case Classification definitions

Clinical case: are cases reported to the NMC by health care providers at facilities, either through completion of a paper form that is faxed, emailed to National Institute of Communicable Diseases (NICD), or by direct data entry into the NMC application on a PC, laptop or mobile device. The diagnosis is made by the clinician on the basis of case definitions published on the NICD website.

Laboratory case: are cases that are downloaded into the NMC database directly from the National Health Laboratory Services (NHLS) laboratory information system. The NMC application applies the case definitions that are published on the NICD website. Private sector data is being sourced.

Merged cases: are cases where a case was notified by health care provider at the facility (a 'clinical case') AND the laboratory issued a report with a positive result for the same case (a 'laboratory case). The NMC App is set up to automatically detect and link clinical and laboratory case notifications. The NICD specialist Centres and NMC data team review all cases and manually link any remaining clinical and laboratory cases

Notification capture times definitions

Current notification: Category 1 conditions notified within 2 days of diagnosis date. Category 2 and 3 conditions notified within 7 days of diagnosis. All lab notifications without diagnosis date are classified as current.

Delayed notification: Category 1 conditions notified within between 3 and 7 days of diagnosis date. Category 2 and 3 conditions notified between 8 and 30 days of diagnosis.

Back capture notification: Category 1 conditions notified more than 7 days of diagnosis date. Catgeory 2 and 3 conditions notified more than 30 days of diagnosis date.

Appendix no.4: IDSR reporting template for IDSR conditions existing on NMC by under-5 and 5-and-over years and vital status.

Table 11: The number of IDSR conditions laboratory notified to the NMC using the IDSR reporting template of under and 5-and-above years by vital status.

	Notified/Suspected				Confirmed
Condition	**Under 5 A**, N = 176[1]	**5 & over A**, N = 329[1]	**5 & over D**, N = 4[1]	**Under 5 D**, N = 1[1]	**N = 690**[1]
Acute flaccid paralysis	11	12	0	0	0
Acute rheumatic fever	0	0	0	0	0
Anthrax	0	0	0	0	0
Botulism	0	0	0	0	0
Cholera	2	37	0	0	5
Congenital rubella syndrome	8	0	0	0	0
Crimean-congo viral haemorrhagic fever (human)	0	1	0	0	0
Diphtheria	1	1	0	1	0
Ebola virus (VHF)	0	0	0	0	0
Enteric fever (typhoid or paratyphoid fever)	1	8	0	0	9
Food borne illness outbreak	7	62	4	0	0
Haemolytic uraemic syndrome (HUS)	0	0	0	0	0
Listeriosis	0	3	0	0	4
Malaria	0	0	0	0	601
Marburg virus (VHF)	0	0	0	0	0
Measles	68	108	0	0	5
Meningococcal disease	8	11	0	0	4
Mpox	0	0	0	0	0
Pertussis	54	32	0	0	50
Plague	0	0	0	0	0
Poliomyelitis	0	0	0	0	0
Rabies	0	0	0	0	0
Respiratory disease caused by a novel respiratory pathogen	1	2	0	0	0
Rift valley fever (human)	0	0	0	0	0
Rubella	15	52	0	0	12
Smallpox	0	0	0	0	0
Waterborne illness outbreak - undefined	0	0	0	0	0
Yellow fever	0	0	0	0	0

[1]A = Cases who are alive.

D = Cases who are deceased.

END