



## Mpox Situation Report 012

### 26<sup>th</sup> August 2024

#### Key Highlights

- Kenya declared Mpox (Formerly Monkeypox) outbreak on **31<sup>st</sup> July 2024**
- Cumulatively, **two (2)** cases have been confirmed in Kenya; **Taita Taveta (1)** and **Busia (1)**. Both cases were detected at One-Stop Border Points (OSBP)
- **Zero (0)** Mpox cases have been reported since the last update
- Cumulatively, sixty-two (**62**) samples have been received in the laboratories for Mpox testing; two (**2**) have tested positive, fifty-six (**56**) have tested negative and four (**4**) are being tested
- Seventeen (**17**) contacts associated with the second case are currently being followed up in **Busia** and **Mombasa** counties
- Since the last update, **20,581** travellers have been screened at the Points of Entry; the cumulative number of travellers screened is **510,618**



## 1. EPIDEMIOLOGY

- Kenya confirmed a second Mpox case on 23<sup>rd</sup> August 2024. The case is a 40-year-old Male truck driver from Kwale County. He has a *history of travel to DRC and Uganda*. He was in DRC from 1<sup>st</sup> – 3<sup>rd</sup> August 2024 and in Uganda from 3<sup>rd</sup> – 6<sup>th</sup> August 2024.
- He travelled to Mombasa from Uganda arriving on 8<sup>th</sup> August 2024. He stayed with his family in the Mikindani area of Mombasa County until 15<sup>th</sup> August 2024. He left Mombasa on 15<sup>th</sup> August 2024 and arrived in Malaba Town on 19<sup>th</sup> August 2024. The onset of symptoms was on 19<sup>th</sup> August 2024. He presented with *Sore Throat, Headache, Rashes, and Coughing*.
- He was identified on 20<sup>th</sup> August 2024 at the Malaba one-stop border point by the Port Health Officials He was picked up by the Sub County Disease Surveillance Team, admitted, and managed under isolation at *Kocholia Sub-County Hospital* in Teso North Sub County, Busia County.
- The index case is a 42-year-old Kenyan male, a long-distance truck driver who travelled from *Kampala, Uganda to Mombasa, Kenya* on 12<sup>th</sup> July 2024 through the main A104 (Kampala-Malaba-Eldoret- Nakuru-Nairobi-Mombasa) corridor.
- The patient was traveling to Rwanda through Tanzania. He was detected and isolated on 22<sup>nd</sup> July 2024 at the Taita Taveta One-Stop Border Point (OSBP).
- From the date of onset on 3<sup>rd</sup> July 2024, the patient was presenting with *septic spots on the face, neck, forearms, back, chest, feet, and private parts*.

## 2. KEY ACTIONS

### a) Coordination

- The National Public Health Emergency Operations Center (PHEOC) has been activated.
- The National Incident Management System (IMS) has been constituted to coordinate response to the outbreak.
- The National Mpox Response Plan has been developed.
- An Mpox Stakeholders Meeting was held on 12<sup>th</sup> August 2024.



### b) Surveillance

- The Case definition has been developed and shared to guide case detection in health facilities and the community.
- Disease Surveillance has been enhanced in all counties.
- Forty-five **(45)** contacts have been listed; twenty-eight **(28)** have been followed up for 21 days since the last contact with the confirmed case and have not developed Mpox symptoms, while seventeen **(17)** contacts to the second case are on follow-up.
- Contact tracing is ongoing in Busia and Mombasa Counties.
- A total of **510,618** travelers have been screened at the Points of entry, and no suspected Mpox cases have been detected yet.
- Seventy-six thousand, six hundred and forty-three **(76,643)** persons, including travellers, truckers and the POE community have cumulatively been sensitized on Mpox.
- National Rapid Response Team has been deployed to provide technical support to Taita-Taveta County.
- The distribution of confirmed and suspected cases in Kenya is shown in **Figure 1** below.

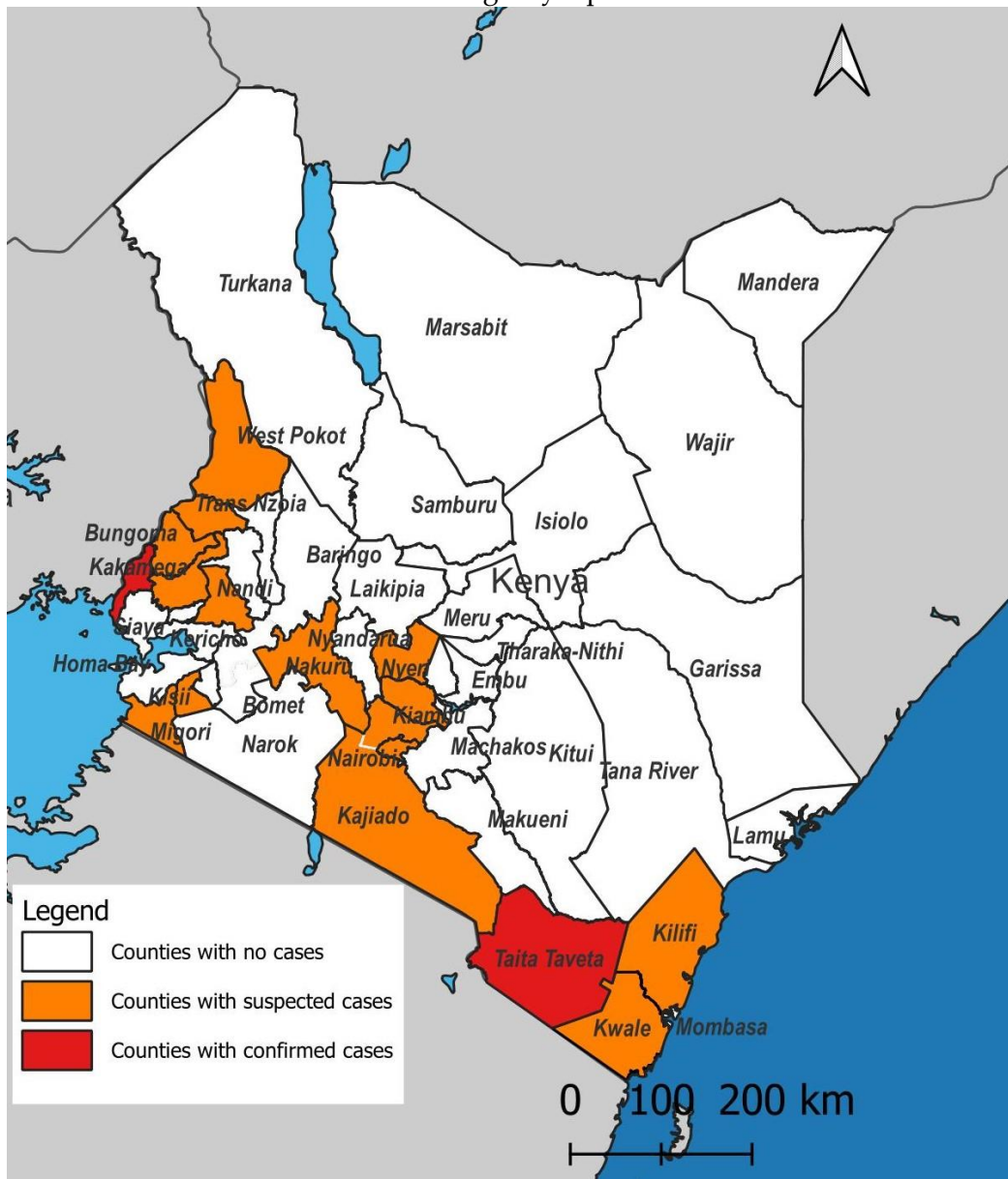


Figure 1: Distribution of Mpox confirmed and Suspected cases in Kenya, August 2024

### c) Laboratory

- Suspected sample testing is being done at the National Public Health Laboratory (NPHL) and KEMRI, Walter Reed and CDC laboratories.
- Sixty-two (62) samples; (Nairobi: 18, Nakuru: 12, Kiambu: 4, Kwale: 4, Kilifi: 4, Taita Taveta: 3, Kajiado: 3, Kisii: 2, Migori: 2, Kakamega: 2, Nyeri: 2, Murang'a: 1, Nandi: 1, Bungoma: 1, West Pokot: 1, Busia: 1, and Trans Nzoia: 1) have been received in the laboratories for Mpox testing. Of these, two (2) have tested positive, fifty-six (56) have tested negative and four (4) are being tested
- The status of all samples is summarized in the table below.



*Table 1: Summary of Mpox samples in Kenya, August 2024*

SNo.	County	Confirmed	Negative	Pending	Total No. of samples
1	Nairobi	0	17	1	18
2	Nakuru	0	12	0	12
3	Kiambu	0	4	0	4
4	Kwale	0	4	0	4
5	Kilifi	0	3	1	4
6	Taita Taveta	1	2	0	3
7	Kajiado	0	3	0	3
8	Kisii	0	2	0	2
9	Migori	0	2	0	2
10	Kakamega	0	2	0	2
11	Nyeri	0	1	1	2
12	Murang'a	0	1	0	1
13	Nandi	0	1	0	1
14	Bungoma	0	1	0	1
15	West Pokot	0	1	0	1
16	Busia	1	0	0	1
17	Trans Nzoia	1	0	1	1
	<b>Total</b>	<b>2</b>	<b>56</b>	<b>4</b>	<b>62</b>

#### d) Case Management/Infection Prevention and Control (IPC)

- Symptomatic management of the confirmed case at Taveta Sub-County hospital
- Draft Case management and IPC guidelines have been developed

#### e) Risk Communication and Community Engagement (RCCE)

- The Ministry of Health has issued advisories to healthcare workers and members of the public on case detection, management, prevention and control of Mpox
- Mpox articles, press releases and media talks continue to be issued to members of the public through print and broadcast media houses
- Risk Communication plan has been finalized
- Kenya Redcross will support bulk sms for Mpox messaging
- Routine RCCE meetings are ongoing



### f) Logistics

- Health Products and Technologies needs assessment is ongoing

### g) Training

- Capacity building of HCWs in Taita-Taveta, Kilifi, Nakuru and Homa Bay counties on Mpox
- An Mpox training needs assessment has been conducted
- The National training plan is being finalized

## 3. CHALLENGES

- Low public risk perception of Mpox.
- Unavailability of Mpox vaccines in the country.
- Inadequate isolation facilities at POEs.
- Inadequate resources for response.
- Inadequate training of healthcare workers and community health promoters on Mpox detection, reporting and management.

## 4. NEXT STEPS

- Enhanced Risk Communication and Community Engagement activities.
- Engagement of WHO and Africa CDC to access global Mpox vaccine and other therapeutics stockpiles.
- Counties requested to identify and prepare isolation centres for anticipated case management.
- Continued resource mobilization to support Mpox Response Plan.
- Training frontline healthcare workers on Mpox.

FOR MORE INFORMATION and NOTIFICATION:

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