Conductors:

- Provincial Departments of Health
- National Department of Health
- National Institute for Communicable Diseases
- International Organizations & NGOs
- World Health Organisation

Areas: Limpopo, Gauteng, Mpumalanga, Kwa-Zulu Natal, Eastern Cape, Western Cape, Northwest, Free State and Northern Cape Provinces

1. HIGHLIGHTS

1.1. The national Multi-Sectoral cholera outbreak committee held its 4th meeting today 22nd December 2008. Outputs of the meeting:

1.1.1. Continue support to Limpopo Province to maintain focus on the fight against cholera. In the light of the declaration of a disaster in the Vhembe District it is important to support the health cluster to place emphasis on health issues in the district disaster plan.

1.1.2. The Deputy Director General - Strategic Programmes of the National Department of Health will be visiting the District on 23 December 2008. He, among other activities, will be attending the first Disaster Management Committee meeting to be held in Musina.

1.1.3. A committee of five has been appointed to finalize the National Cholera Outbreak Response Action plan and all partners are being requested to make their contributions available before Christmas.

1.2. Gauteng Province:

1.2.1. The patient that was visited by the Medical Advisor at Tshwane district hospital, who was sleeping in the street, before hospitalization and was critically ill, has died on 21 December 2008.

1.2.2. Twenty two (22) children complained of food poisoning in COJ, but the cases of diarrhoea are not cholera related.

1.2.3. A joint visit of Environmental Health and Health Promotion to Tshwane district, in Marabastad is planned, date will be confirmed.
2. **EPIDEMIOLOGICAL DATA:**
Date: 22\textsuperscript{th} December 2008.

<table>
<thead>
<tr>
<th></th>
<th>Limpopo</th>
<th>Gauteng</th>
<th>Mpumalanga</th>
<th>Kwa Zulu Natal</th>
<th>North west</th>
<th>East Cape</th>
<th>Northern Cape</th>
<th>Western Cape</th>
<th>Free State</th>
<th>Total</th>
<th>Comments/ CFR</th>
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</thead>
<tbody>
<tr>
<td><strong>Cumulative number of cases</strong></td>
<td>1072</td>
<td>76</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1157</td>
<td>1.04%</td>
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<tr>
<td><strong>Cumulative number of deaths</strong></td>
<td>8</td>
<td>3</td>
<td>0</td>
<td>1</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>12</td>
<td></td>
</tr>
<tr>
<td><strong>Cumulative number lab confirmed</strong></td>
<td>50</td>
<td>21</td>
<td>1</td>
<td>2</td>
<td>2</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>1</td>
<td>80</td>
<td></td>
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<tr>
<td>Patients in the wards</td>
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<td>1</td>
<td>pending</td>
<td>Pending</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>16</td>
<td></td>
</tr>
<tr>
<td>New cases of the day</td>
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<td>1</td>
<td>pending</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>17</td>
<td></td>
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<tr>
<td>Discharged today</td>
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<td>pending</td>
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<td>0</td>
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<td>0</td>
<td>0</td>
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<td>0</td>
<td></td>
</tr>
<tr>
<td>Cumulative total &lt; 5 years</td>
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<td>1</td>
<td>pending</td>
<td>pending</td>
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<td>pending</td>
<td>pending</td>
<td></td>
<td></td>
<td>91</td>
<td></td>
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</table>
3. DATA ANALYSIS

Cholera case Distribution by Age, Musina and Madimbo

The proportion of children affected seems to rise as the outbreak progressed. Is it possible that our intervention measures are not adequately addressing young children? Common Childhood diarrhoea however, is not usually due to cholera.

4. COMMENTS

The National Department of Health, in the light of the challenger of early diagnosis and the need to mop up the outbreak and prevent further spread is requesting provincial and district departments and partners to report on all cases of acute watery diarrhoea.

NB: Inputs from partners to be reflected in the sitrep on daily basis should be sent through Provincial outbreak response teams or through the National Coordinating team by e-mail: [mugerc@health.gov.za; Tel 0763932438] and [harryopata@yahoo.com Tel: 0798848339]

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