

# **GTFFCC Cholera Guidance: Tool to align testing strategy for Malawi**

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GLOBAL TASK FORCE ON  
**CHOLERA CONTROL**



# Importance and principles of cholera surveillance

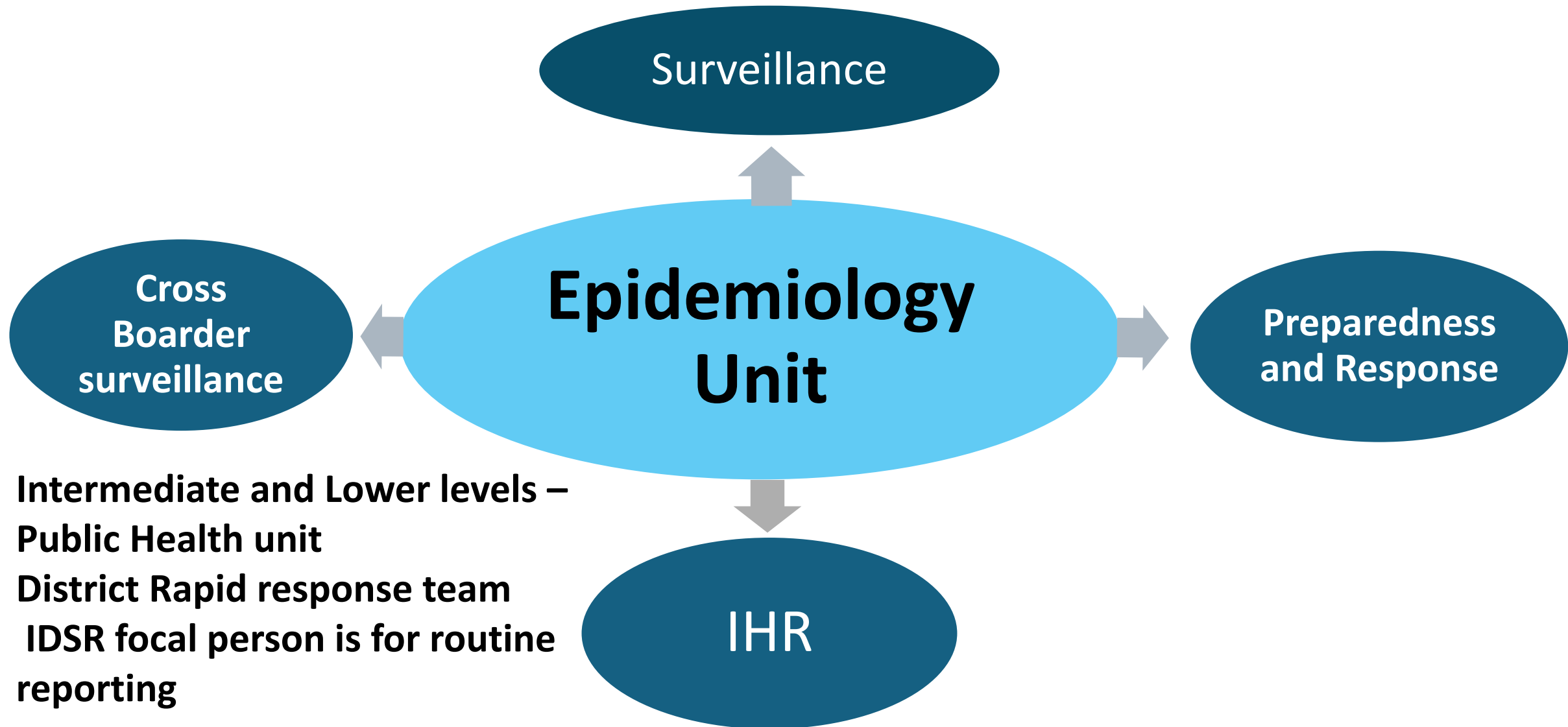
- Cholera is acute diarrheal disease caused by ingestion of *Vibrio cholera* serogroup O1 or O139.
- Short incubation period may lead to exponential rise in cases during outbreaks.
- Disproportionally impacts poorest and most vulnerable populations.
- Should be integrated into a country's existing national public health surveillance system

# Cholera Situation in Malawi

- First outbreak in Malawi 1973
- Since 1998, Cholera has been endemic in Malawi with seasonal outbreaks in the southern region; prone to floods.
- The 2022 cholera outbreak was the worst so far that extended through the dry season.
- Cyclones; floods, lack of access to safe water, sanitation, and hygiene.

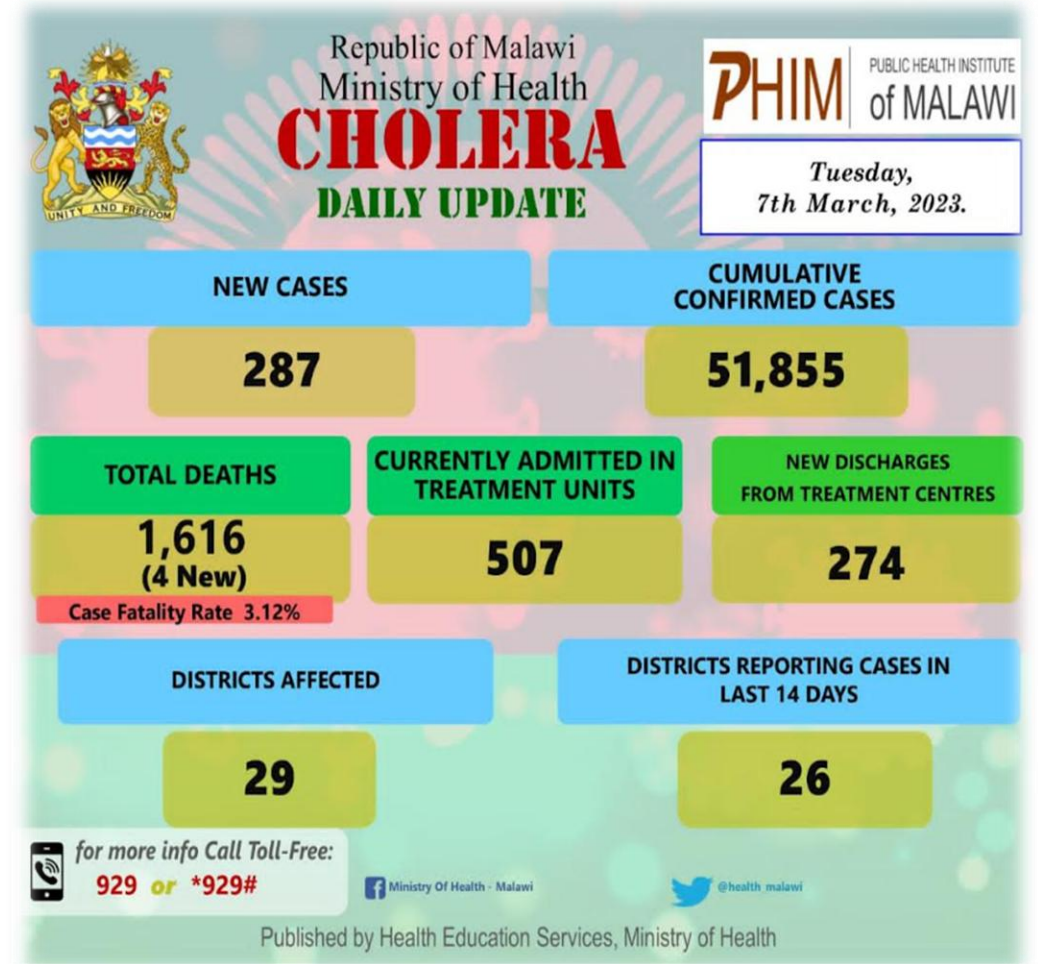


# Malawi National Surveillance Unit



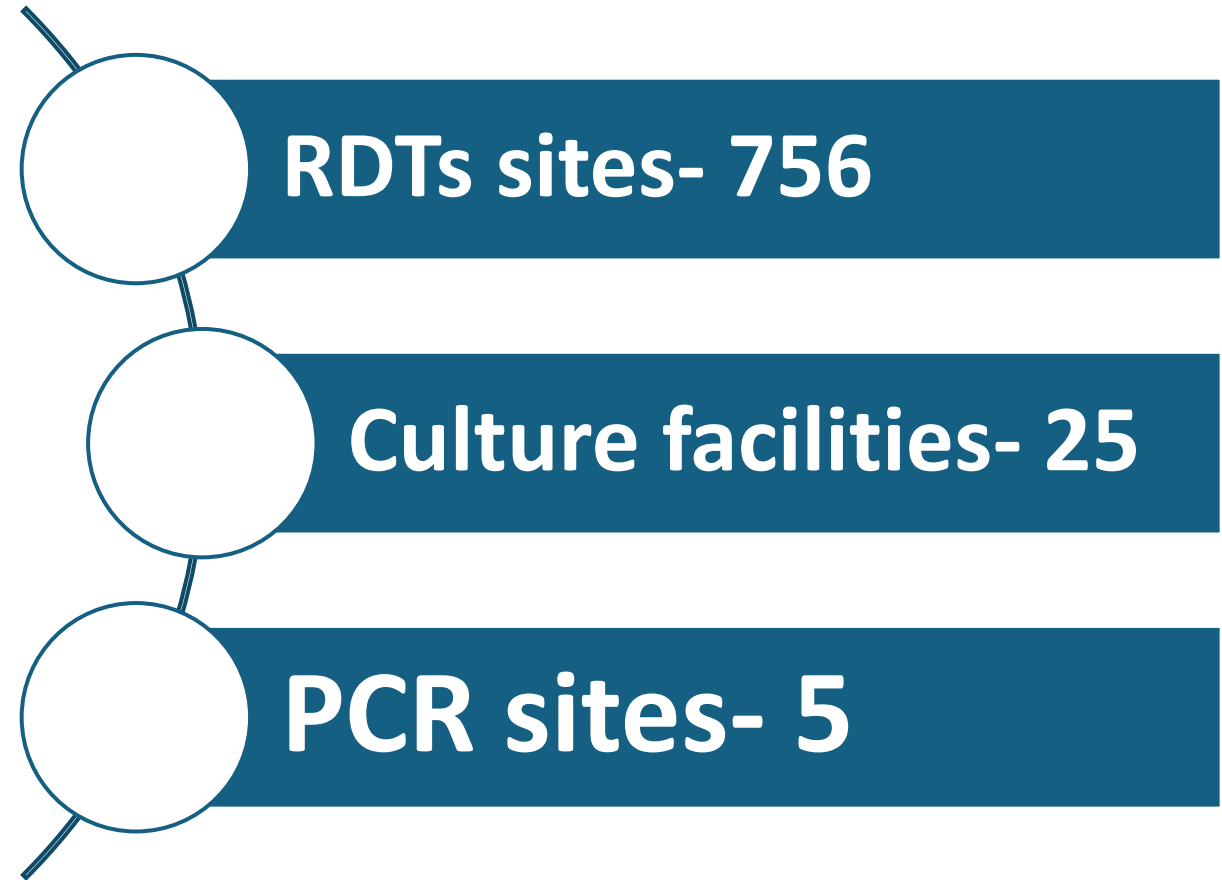
# Surveillance objectives

- Deeper insights into the epidemiological patterns of cholera in Malawi
- Ongoing data collection and analysis, and situation reports are being produced and published regularly.
- Real time reporting and public updates to inform public health interventions



# Testing Methods

- Rapid Diagnostic Tests (RDTs)- screening tool, non – confirmatory
- Culture- Diagnostic tool for confirmation of VC01/0139
- Polymerase Chain Reaction (PCR)-Diagnostic tool for confirmation of VC01/0139



# Implementation/planning of use of RDT deployed through GAVI

- Expansion of health facilities to be screening for suspects of cholera.
- Received 9520 cholera test kits as of the end of March 2024.
- Distributed 320 cholera test kits to hot spots across the country.
  - Currently distribution is on demand since cases have gone down
  - Some hot spot districts are still reporting cases on daily basis
  - Distribution to all health facility in the country in readiness of the next coming rainy season planned for October

## Cholera case definitions (absence of an outbreak)

**Suspected cholera case in a surveillance unit where there is no probable or confirmed cholera outbreak**

- A person aged **two years and older**:
  - with **acute watery diarrhoea** and **severe dehydration**  
or
  - who **died from acute watery diarrhoea** with no other known cause of death.



## Cholera case definitions (during an outbreak)

**Suspected** cholera case in a surveillance unit where there is a **probable or confirmed cholera outbreak**

- Any person with or dying from **acute watery diarrhoea**.

**Confirmed** cholera case in a surveillance unit where there is no confirmed cholera outbreak

- Any person infected with *Vibrio cholerae* O1 or O139 confirmed by culture/seroagglutination or PCR.

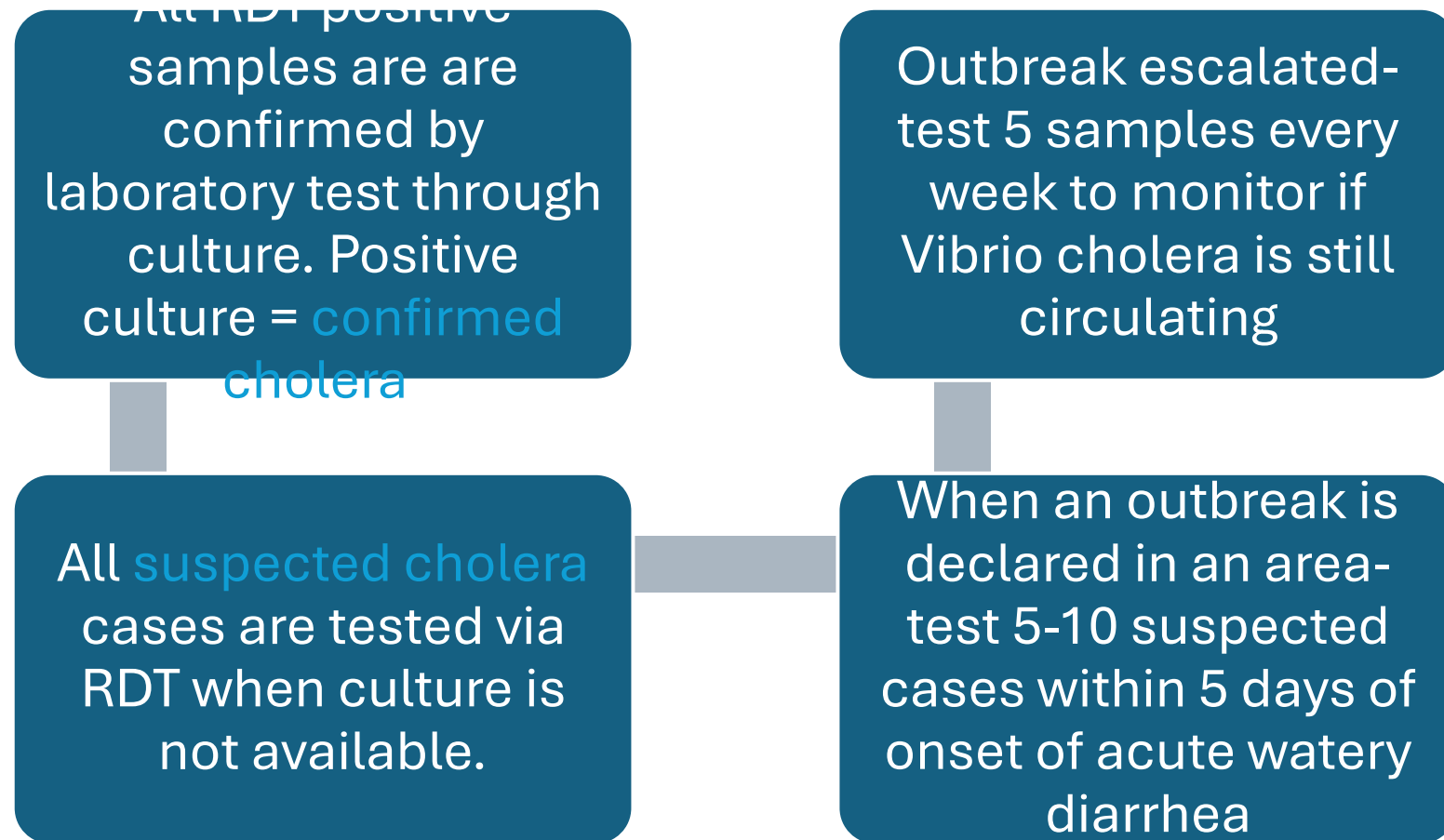
# Suspected cholera outbreak definition tailored to Malawi

- **One suspected cholera case with a positive RDT result (RDT+):**
  - Trigger cholera alert,
  - Communicate with the next level; through Phone, WhatsApp,
- Specimen is referred to a culture testing laboratory for confirmation.
- Cholera outbreak -At least **one confirmed cholera case locally acquired.**
  - Confirmed by **culture or PCR**
- **Probable outbreak is when an RDT test positive of a Suspect outbreak**

# Cholera testing during outbreaks tailored to Malawi

- All suspected cholera cases are screened with RDT to the areas where it has not been confirmed using culture
- When an outbreak is declared in an area- test 5-10 suspected cases within 5 days of onset of acute watery diarrhea
- Outbreak escalated- every week 5 samples are tested

# Cholera testing strategy in Malawi



# Cholera reporting system in Malawi...

Cholera surveillance is integrated into IDSR.

The intermediate facilities collect and analyse data for the district

World Health Organization

National Level

Intermediate/ district level

Health Facility/ peripheral

Community- Evidence based surveillance

Reporting is weekly and monthly using phone calls, WhatsApp, Reporting tools soft copy)  
WHO is through updates

Notification is immediate or within 24 hours

# Challenges with Cholera surveillance in Malawi

- Surveillance data collecting tools for surveillance (Line list) not interfaced with Laboratory data (LIMS)
- Patient information data not completely filled/collected
- Support for deliver of RDTs is mostly not available
- Periodically monitor and verify the testing procedures in the facilities
- Specimen referral for confirmation is a challenge.

# Acknowledgements

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