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Event-Based Surveillance Report 11 November 2025

Contents

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Global

Rift Valley fever (RVF), West Africa, November 2025

Overview: Rift Valley fever (RVF) is a zoonotic, viral haemorrhagic fever that is endemic across numerous regions of Africa, including East, Southern, and West Africa (WHO, 2025; WOAH, 2025). This disease periodically triggers large-scale epizootics in livestock, which are then followed by subsequent human outbreaks (WHO, 2025). The causative agent is the Rift Valley Fever virus (RVFV), which is a *Phlebovirus* (WHO, 2025). RVF outbreaks are linked to environmental drivers: they are often associated with heavy seasonal rains or floods which create optimal breeding sites -for *Aedes* and *Culex* mosquito vectors, leading to their proliferation and intensified transmission (WHO, 2025). Humans contract the infection through two primary routes: either via vector-borne transmission, specifically the bite of infected mosquitoes, or through direct contact with the blood or organs of infected animals, particularly during high-risk activities such as slaughtering, butchery, or assisting with animal birthing (WHO, 2025). Person-to-person spread of RVF has not been documented (WHO, 2025).

Between 20 September – 30 October 2025, RVF outbreaks were reported in Mauritania and Senegal [404 confirmed human cases and 42 deaths (aggregate Case Fatality Rate (CFR) of 10.4%)], with recent animal detections in The Gambia reported in late October 2025. Senegal reported the majority of the burden, with 358 confirmed cases and 28 deaths (CFR of 7.8%), whereas Mauritania reported 46 confirmed cases and 14 deaths, reflecting a higher CFR of 30.4% (WHO, 2025).

Senegal: The Ministry of Health in Senegal first reported concentrated RVF cases along the Senegal River / Saint-Louis and northern livestock districts on 21 September 2025. This river region borders Mauritania (WHO, 2025). During the rapid risk assessment (RRA) reference window of 20 September – 8 October 2025, a total of 119 confirmed human cases and 16 deaths were officially noted (WHO, 2025). Subsequently, the outbreak in Senegal escalated in intensity, with a cumulative 358 confirmed human cases and 28 deaths by 30 October 2025 (WHO, 2025), a marked increase observed within two weeks.

The outbreak is concentrated in the Saint-Louis region in the north but has shown spread to other administrative regions (districts) (WHO, 2025). Furthermore, the epizootic component reported 160 confirmed animal cases and 640 animal abortions reported as of 29 October 2025 (WHO, 2025). This current event is the most sizeable outbreak witnessed in northern Senegal in decades, surpassing previous intermittent cases (2022 and early 2025), though RVF is considered endemic in parts of the country, following the major historic epizootic in 1987 which impacted the Senegal-Mauritania border area (WHO, 2025).

Mauritania: Mauritania declared an RVF outbreak on 31 October 2025 across several regions, namely Brakna, Trarza, Assaba, Nouakchott Ouest, and Guidimagha (U.S. Embassy, 2025). The zoonotic cycle began earlier, with animal cases reported from August 2025 and human cases confirmed across September and October 2025, leading the Ministry of Health to notify the World Organization for Animal Health (WOAH) in October 2025 (WHO, 2025). By 5 October 2025, noted 17 confirmed human cases and 8 deaths (WHO, 2025). The national CFR was reported as a high 30.4% (WHO, 2025).

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However, the RRA noted an even higher CFR of 47% in the early phase of the investigation (27 September – 5 October 2025), reflecting a severe presentation of the disease and potential challenges in clinical management or case detection (WHO, 2025). RVF is endemic in Mauritania, which has experienced repeated, episodic outbreaks (1987, 2010, 2012, 2015, 2020, and 2022), with the 2022 event resulting in approximately 47 human cases and 23 deaths (WHO, 2025a).

The Gambia: In The Gambia, the first confirmed animal cases were reported on 31 October 2025 in the North Bank Region (Chissay Majaw / Jokadu) (The Alkamba Times, 2025). This initial animal outbreak (cattle) resulted in the activation of veterinary control measures (The Alkamba Times, 2025). While human cases were not widely reported at the time of initial notification, this detection increases the regional epizootic risk in the West African region. Given The Gambia's limited historic reports of RVF compared to its neighbours, this late-October 2025 animal outbreak signals an expansion of the west-coastal epizootic and necessitates close surveillance for possible human spill-over (The Alkamba Times, 2025).

Abnormally high seasonal rains and subsequent flooding in parts of the Senegal River basin and adjacent Sahelian zones (September – October 2025) created favourable vector breeding sites (WHO, 2025). This rainfall, considered more than usual for the period, led to the flooding of dambos (vector habitats), which is the principal trigger for mosquito proliferation (WHO, 2025c). Concurrent livestock movements, particularly transboundary grazing, exacerbated the situation by increasing animal-to-animal spread and subsequent human exposure through the handling of sick or deceased animals (WHO, 2025). The Senegal River border area has been highlighted as the principal eco-zone linking the Senegal and Mauritania outbreaks (WHO, 2025).

The proximity of cases along the Senegal River (border districts of Saint-Louis, Podor, Richard-Toll, and Dagana in Senegal, and Brakna/Trarza in Mauritania) indicates a probable mechanism of cross-border transmission, facilitated by livestock movement and shared vector habitats (WHO, 2025). The RRA flagged areas of Mali bordering those countries as high-risk for potential spread (WHO, 2025). The newly reported first animal detections in The Gambia (North Bank) and the animal positives in Mauritania/Senegal (reported to the World Organization for Animal Health/WAHIS) collectively suggest wide regional epizootic circulation, rather than isolated single-country outbreaks. Multiple animal outbreaks, characterised by high rates of abortions and livestock deaths, are serving as important sentinel events that necessitate heightened human surveillance for possible spill-over infections (WHO, 2025).

Public Health Actions: National and regional public-health actors are actively monitoring and supporting the response (WHO, 2025). Locally, veterinary and public health measures including enhanced surveillance, restrictions on animal movement, and active case-finding were activated to control the epizootic and protect human populations from exposure (WHO, 2025).

The World Health Organization (WHO) has classified this event as a high-impact national epizootic with moderate regional spread potential (WHO, 2025). However, a Public Health Emergency of International Concern (PHEIC) has not been declared (WHO, 2025). The WHO and partners

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recommend a strengthened multi-sectoral response and surveillance activities rather than imposing international trade or travel bans at present (WHO, 2025).

Implications for South Africa: The risk of direct importation of human cases to South Africa is low as there is no evidence of sustained human-to-human transmission, and cases are concentrated in West Africa (WHO, 2025). Importation risk via travel (infected travellers), animal trade or informal livestock movement is possible but unlikely to be a major pathway to South Africa given the long distances and existing trade patterns (WHO, 2025).

RVF in humans is a Category 1 notifiable medical condition in South Africa (NICD, 2025). Clinicians and travel clinics in South Africa are advised to maintain a high index of suspicion in patients presenting with fever, flu-like illness, or severe cases with haemorrhagic fever, encephalitis or ocular disease who have a recent travel history to the affected West African regions and animal exposures (WHO, 2025). South Africa has strict import requirements, including a veterinary import permit and health certificate, to prevent disease (Government of South Africa, 2025). The country does not import livestock and animal products from West Africa or via regional intermediaries in that region; imports primarily come from neighbouring countries (e.g., Namibia, Botswana, Lesotho, and Eswatini) and from countries outside the continent (e.g., Argentina, Brazil, and Australia) (Government of South Africa, 2025).

To mitigate the potential risk posed by this regional outbreak, South Africa should enhance its preparedness measures by strengthening linkages between human and animal health surveillance to ensure a cohesive One Health response (Africa CDC, 2025). This requires increasing vector surveillance in high-risk, flood-prone provinces, such as Limpopo and the North-West, while utilising climate and hydrology data to map rainfall and flooding anomalies to identify and monitor hotspots for mosquito amplification (Africa CDC, 2025). Furthermore, it is critical to issue targeted risk communication and community engagement (RCCE) messages to high-risk occupational groups, including cattle herders, slaughterhouse workers, veterinarians, and abattoir operators, focusing on the safe handling of animals, the correct use of personal protective equipment (PPE) during slaughter, the avoidance of raw or undercooked meat, and the immediate reporting of livestock abortions. Targeted RCCE messages for travellers, diaspora communities and importers should be strengthened to raise awareness regarding safe animal handling practices and the prompt recognition of RVF symptoms (Africa CDC, 2025).

References

- Africa CDC. (2025). Epidemic Intelligence Weekly Report October 2025. Retrieved from africacdc.org.
- Government of South Africa. (2025). Import animals and animal products. Retrieved from [https://www.gov.za/services/import/import-animals-and-animal-products#:~:text=If%20you%20want%20to%20import%20live%20animals%2C,product%20is%20shipped%20from%20the%20exporting%20country](https://www.gov.za/services/import/import-animals-and-animal-

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products#:~:text=If%20you%20want%20to%20import%20live%20animals%2C,product%20is%20shipped%20from%20the%20exporting%20country).

- National Institute for Communicable Diseases (NICD). (n.d.). *Rift Valley Fever*. Retrieved [8 November 2025], from https://www.nicd.ac.za/diseases-a-z-index/rift-valley-fever/
- Manneh, K. A. (2025, November 4). *Gambia confirms first Rift Valley Fever outbreak in animals and humans*. The Alkamba Times. https://alkambatimes.com/gambia-confirms-first-rift-valley-fever-outbreak-in-animals-and-humans/
- U.S. Embassy in Mauritania. (2025, October 31). *Health Alert: Rift Valley Fever Outbreak – U.S. Embassy Nouakchott, Mauritania*. U.S. Embassy & Consulate in Mauritania. https://mr.usembassy.gov/health-alert-rift-valley-fever-outbreak-u-s-embassy-nouakchott-mauritania/
- U.SWHO. (2025). Rift Valley fever - Mauritania and Senegal. (WHO Disease Outbreak News). Retrieved from https://www.who.int/emergencies/disease-outbreak-news/item/2025-DON584
- WHO. (2025). Rift Valley fever. Retrieved from https://www.who.int/news-room/fact-sheets/detail/rift-valley-fever
- World Health Organization, Food and Agriculture Organization of the United Nations, & World Organisation for Animal Health. (2025). Joint FAO/WHO/WOAH Rapid Risk Assessment of Rift Valley fever (RVF) in Senegal and Mauritania: Implications for public health and animal health. World Health Organization. https://www.who.int/publications/m/item/joint-fao-who-woah-rapid-risk-assessment-of-rift-valley-fever-(rvf)-in-senegal-and-mauritania--implications-for-public-health-and-animal-health
- WOAH. (2025). Rift Valley fever. Retrieved from https://www.woah.org/en/disease/rift-valley-fever/

South Africa

Mpox Case Confirmed in KwaZulu-Natal Province, South Africa – November 2025 Update

Overview: On 06 November 2025, the KwaZulu-Natal (KZN) Provincial Department of Health (PDoH) reported a laboratory-confirmed mpox case in a 40-year-old male residing in uMgungundlovu district, KZN province. The case first presented to a local clinic on 16 October with fever, rash, headache and myalgia. A diagnostic specimen was confirmed on 24 October as mpox clade 1b. The patient remains isolated in hospital; four close contacts have been identified and are being monitored. No secondary transmission has been reported as of 07 November 2025 (Channel Africa, 2025; IOL, 2025; The Citizen, 2025).

This case represents the second laboratory-confirmed mpox case detected in KwaZulu-Natal since 1 January 2025 (IOL, 2025). The earlier 2025 case in the province was reported previously; however, the exact date of confirmation has not been specified in public health reports. Nationally, 12 confirmed mpox cases have been reported in 2025 (The Citizen, 2025).

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Public health actions: The KZN PDoH initiated field investigation and contact tracing following confirmation of the case. Four close contacts have been identified and placed on a 21-day monitoring. Infection prevention and control measures ((IPC)) have been reinforced in health facilities across the district, and healthcare workers have been advised to maintain heightened clinical suspicion for febrile rash illnesses consistent with mpox (The Citizen, 2025). The KZN PDoH has assessed the overall public health risk to the general population as low (IOL, 2025; Channel Africa, 2025; The Citizen, 2025).

Implications for South Africa: The detection of this mpox case in KZN indicates an ongoing sporadic virus transmission in the country. Although the overall case burden remains low, the public health event signals that local transmission chains can reappear in the absence of sustained community spread, particularly if surveillance sensitivity declines or if cases go undetected.

The current mpox event highlights the importance of maintaining clinician awareness, prompt sample collection for suspected rash illnesses, and strong coordination between clinical, laboratory and surveillance systems (The Citizen, 2025). The KZN PDoH assessed the overall health risk to general population as low and that IPC capacity within healthcare facilities is adequate (The Citizen, 2025). Based on the Africa Centres for Disease Control and Prevention's risk assessment algorithm, the current risk of mpox transmission in South Africa is considered moderate (Africa CDC, 2023). While the risk of widespread community transmission is considered as low to modearte, continuous monitoring is essential, particularly given the potential for severe disease among immunocompromised individuals.

References

- Africa Centres for Disease Control and Prevention. (2023). Africa CDC event-based surveillance framework (2nd ed.). Africa CDC. https://africacdc.org/download/africa-cdc-event-based-surveillance-framework-2/
- Channel Africa. (2025, November 7). SA Man Treated for Mpox. Retrieved from https://www.channelafrica.co.za/channelafrica/news/sa-man-treated-for-mpox/
- IOL. (2025, November 7). Mpox Alert in Pietermaritzburg: 40-year-old Man Tests Positive. Retrieved from https://iol.co.za/news/south-africa/2025-11-07-mpox-alert-in-pietermaritzburg-40-year-old-man-tests-positive/
- National Institute for Communicable Diseases (NICD). (2025, October 28). Mpox Situation Update – South Africa. Retrieved from https://www.nicd.ac.za/diseases-a-z-index/mpox-2/
- The Citizen. (2025, November 7). No Need for Panic After Mpox Case Confirmed in Pietermaritzburg – Department. Retrieved from https://www.citizen.co.za/network-news/lnn/article/no-need-for-panic-after-mpox-case-confirmed-in-pietermaritzburg-department/

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Table 1. Summary of queries logged on the Query Logging System, 30 October – 05 November 2025

Disease Query	Number	Percentage (%)
Rabies Post-exposure prophylaxis	7	53.85
Patient(s) investigation (diagnostic/clinical advice)	4	30.77
Lab-confirmed case for clinical/public health management	1	7.69
Administrative	1	7.69
Province		
Western Cape	7	53.85
Gauteng	3	23.08
Kwa Zulu Natal	2	15.38
Eastern Cape	1	7.69
Sector		
Private	9	69.23
Public	4	30.77
Total	13	100

Unfolding events

Environmental Health Alert: Potential dam chemical contamination, Hartebeespoort Dam, North West, South Africa

Overview: On 23 October 2025, a media report by The Kormorant reported hundreds of dead and dying fish along the eastern shore of Hartbeespoort Dam, particularly near Venice Village, with raw sewage entering the dam via the Swartspruit due to a malfunction at the Ifafi pump station (The Kormorant, 2025). During Epidemiological Week 44 (27 October – 2 November 2025), the Department of Water and Sanitation (DWS), with Rand Water and the North West Department of Agriculture, conducted an aquatic weed control operation at Hartbeespoort Dam using approved herbicides to curb the spread of invasive water hyacinth. Following the treatment, mass fish mortality was observed in some sections of the dam, attributed to temporary oxygen depletion in treated zones (Mamelodi News SA, 2025). On 05 November 2025, media outlets reported that some of these fish were being illegally collected and sold in Hartbeespoort and nearby townships, posing serious health risks from

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possible sewage contamination, herbicide residues, or bacterial growth (Mashamba Media, 2025; Mamelodi News SA, 2025).

Public health actions: The DWS, in collaboration with Rand Water, the North West Department of Agriculture, and local environmental health authorities, is conducting active environmental surveillance, including daily water quality monitoring in affected zones. Access to treated and contaminated areas has been restricted, and enforcement activities target the illegal harvesting and sale of dead fish, with sanctions applied to violators (Mashamba Media, 2025; Mamelodi News SA, 2025). Risk communication messages have been disseminated to the public, advising against consumption of fish from unverified sources due to exposure risks from herbicide residues, microbial contamination, and chemical pollutants. A multisector coordination continues to mitigate potential foodborne and environmental health risks (The Kormorant, 2025).

Implications for South Africa: The reservoir Hartbeespoort Dam has a documented history of dead fish events caused by low oxygen and nutrient overload, including a major die-off in October 1999 linked with organic loading (van Ginkel, Hohls & Vermaak, 2005) and another in April 2023 linked with high nutrient levels and invasive-plant proliferation to oxygen depletion (DWS, 2023). The current event, involving sewage inflow through the Swartspruit, herbicide treatment for aquatic weeds, and illegal collection and sale of dead fish, poses a human health risk, with potential for acute poisoning, chronic toxicity, and other adverse outcomes from consuming or handling contaminated fish. Because the dam has a history of ecological instability, this event requires increased environmental surveillance, a ban on fishing in affected areas, and clear communication to communities about the health risks of eating fish from unverified sources.

References

- Department of Water and Sanitation (DWS). (2023, April 13). Water and Sanitation conducts investigations to determine cause of dead fish at Hartbeespoort Dam. Retrieved from https://www.gov.za/news/media-statements/water-and-sanitation-conducts-investigations-determine-cause-dead-fish
- Department of Water and Sanitation (DWS). (2023, April 26). Water and Sanitation releases investigation report on cause of fish-kill at Hartbeespoort Dam. Retrieved from https://www.gov.za/news/media-statements/water-and-sanitation-releases-investigation-report-cause-fish-kill
- Mashamba Media. (2025, November 5). Warning for Hartbeespoort and Pretoria Residents: Potential Health Risk from Roadside Fish Sales. Retrieved from https://www.facebook.com/mashambamedia
- Mamelodi News SA. (2025, November 5). Health Alert: Dead Fish from Harties Dam Sold Illegally – Do Not Consume. Retrieved from https://www.facebook.com/mamelodinewsSA/photos/health-alert-dead-fish-from-harties-dam-sold-illegally-do-not-consumeresidents-i/845064807908992

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+27 11 386 6002
(NICD) 24-hour hotline number: 0800 212 552

- The Kormorant. (2025, October 23). Masses of fish dead – again! Retrieved from https://kormorant.co.za/masses-of-fish-dead-again/
- van Ginkel, C. E., Hohls, B. C., & Vermaak, E. (2005). A fish kill in the Hartbeespoort Dam, South Africa, October 1999. Institute for Water Quality Studies, Department of Water Affairs and Forestry. Retrieved from https://www.dws.gov.za/iwqs/reports/carin/fishkill1/index.htm

Severe Weather Warning, South Africa, November 2025

On 6 and 7 November 2025, the South African Weather Service (SAWS) issued a severe weather warning for Gauteng, forecasting thunderstorms accompanied by hail and localised flooding. Heavy rainfall has already been reported in several areas, including Alberton, Bedfordview (N3/Gilloolys), Crown Mines, Primrose, Krugersdorp, Buccleuch and Sunninghill in Sandton. These weather conditions have led to localised flooding on roads, affecting motorists and increasing the risk of further flooding in low-lying areas. Similar conditions are also expected over parts of the North West, the Highveld region of Mpumalanga, and the north-eastern parts of the Northern Cape (News24, 2025) (SAWS, 2025).

The warning comes during the ongoing rainy season, which typically increases the risk of flooding and associated public health challenges. Residents were advised to evacuate early and move to higher ground if flooding persists and to avoid walking or driving through floodwaters, as even shallow, moving water can be dangerous (Citizen, 2025). Emergency teams responded to distress calls yesterday after heavy rains caused damage in parts of the province.

Floods pose a burden on the healthcare system due to an influx of injuries and medical emergencies. They can also disrupt infectious disease surveillance and response efforts, potentially overwhelming healthcare facilities. This is of particular concern given the ongoing typhoid fever outbreak in parts of Gauteng, including Hammanskraal and Bronkhorstspruit, where investigations into possible environmental sources are underway (SAnews, 2025). Heavy rainfall and flooding can further intensify the spread of waterborne diseases such as typhoid, cholera, and diarrhoeal illnesses, especially where sanitation systems are compromised.

In addition to waterborne infections, floods and population displacement increase the risk of outbreaks of measles, respiratory illnesses, hepatitis A, and rabies due to increased contact between humans and displaced animals (NICD, 2023). Disruptions to infrastructure and clean water supply further compound these risks, highlighting the importance of coordinated public health and environmental management efforts during the current rainy season. During floods reported within the last 12 months, no instances of infectious disease outbreaks were documented. https://www.nicd.ac.za/wp-content/uploads/2022/04/NICD-Monthly-Communique-April-17-20.pdf.

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- Citizen. (2025, November 7). *Watch: Heavy rain causes flooding in parts of alberton*. Retrieved November 7, 2025, from https://www.citizen.co.za/alberton-record/news-headlines/local-news/2025/11/06/watch-heavy-rain-causes-flooding-in-parts-of-alberton/
- News24. (2025, November 6). *Friday weathe heatwave hits western cape severe thunderstorm persis in most parts*. Retrieved November 7, 2025, from https://www.news24.com/southafrica/weather/fridays-weather-heatwave-hits-western-cape-severe-thunderstorms-persist-in-most-parts-20251106-0874
- NICD. (2023, April). *Health risk associated with floods disaster Cutaneous infections Respiratory Infectionss*. Retrieved November, 2025, from https://www.nicd.ac.za/wp-content/uploads/2022/04/NICD-Monthly-Communique-April-17-20.pd
- SAnews. (2025, November 5). *City of Tshwane commended for swift response to Typhoid outbreak*. South African Government News Agency. Retrieved November 7, 2025, from https://www.sanews.gov.za/south-africa/city-tshwane-commended-swift-response-typhoid-outbreak
- SAWS. (2025, November). *South African Weather Service*. Retrieved November 7, 2025, from https://x.com/SAWeatherService