

www.ncdc.gov.ng

PLOT 800 EBITU UKIWE STREET, JABI ABUJA, NIGERIA. TOLL FREE CALL: 0800-970000-10. E: info@ncdc.gov.ng 💅 f @NCDCgov

TITLE:	2019 LASSA FEVER OUTBREAK SITUATION REPORT
SERIAL NUMBER:	51
EPI-WEEK:	51
DATE:	22 nd December 2019

HIGHLIGHTS

- In the reporting week 51 (16th 22nd December, 2019) **seven** new confirmedⁱⁱ cases were reported from Ondo(5), Ebonyi(1) and Edo(1) with three new deaths from Ondo state
- From 1st January to 22nd December 2019, a total of 4967 **suspected**ⁱ **cases** have been reported from 23 states. Of these, **817 were confirmed positive**, 19 probable and 4131 <u>negative</u> (not a case)
- Since the onset of the 2019 outbreak, there have been **170** deaths in confirmed cases. Case fatality ratio in confirmed cases is 20.8%
- Twenty-three (23) States (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Plateau, Taraba, Adamawa, Gombe, Kaduna, Kwara, Benue, Rivers, Kogi, Enugu, Imo, Delta, Oyo, Kebbi, Cross River, Zamfara, Lagos and Abia) have recorded at least one confirmed case across 86 Local Government Areas -*Figure 1*
- 94% of all confirmed cases are from Edo (37%), Ondo (34%), Ebonyi (7%), Bauchi (7%), Taraba(5%) and Plateau (4%) states- *Figure 1*
- Predominant age-group affected is 21-40 years (Range: >1 month to 98 years, Median Age: 34 years) Figure 6
- The male to female ratio for confirmed cases is 1:1 Figure 6
- In the reporting week 51, one new health care worker was affected. A total of twenty health care workers have been infected since the onset of the outbreak in ten States Edo (6), Ondo (5), Ebonyi (2), Enugu (1), Rivers (1), Bauchi (1), Benue (1), Delta (1), Plateau (1) and Kebbi (1) with two deaths in Enugu and Edo States-
- Thirteen (13) patients are currently being managed at various treatment centres across the country: Irrua Specialist Teaching Hospital(ISTH) treatment Centre (3), Federal Teaching Hospital Abakaliki (1) and Federal Medical Centre, Owo (9)
- A total of **9367** contacts have been identified from 21 States. Of these 393(4.2%) are currently being followed up, 8894(95.1%) have completed 21 days follow up, while 12(0.1%) were lost to follow up. 144 symptomatic contacts have been identified, of which **68(**47.2%) have tested positive
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate response activities at all levels

WICH UK-PHRST AMPLICA COC



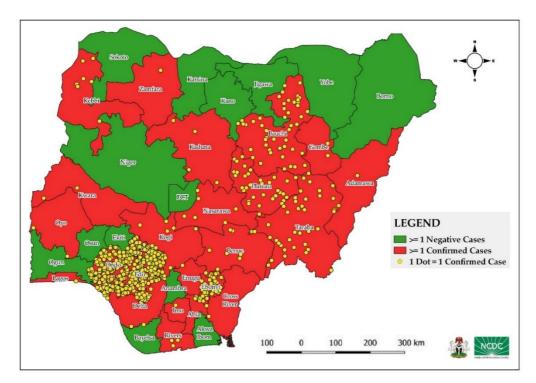


Figure 1. Randomised distribution of confirmed Lassa fever cases in Nigeria as at 22nd December, 2019

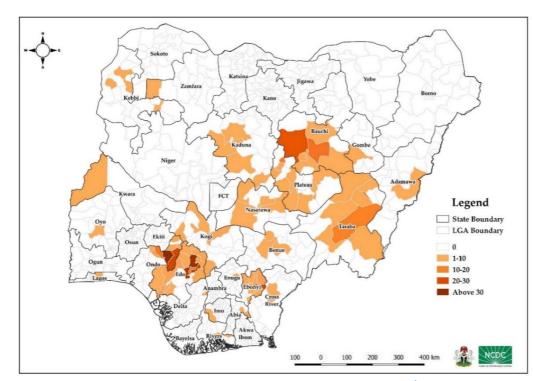


Figure 2. LGAs with confirmed Lassa fever cases in Nigeria as at 22nd December, 2019

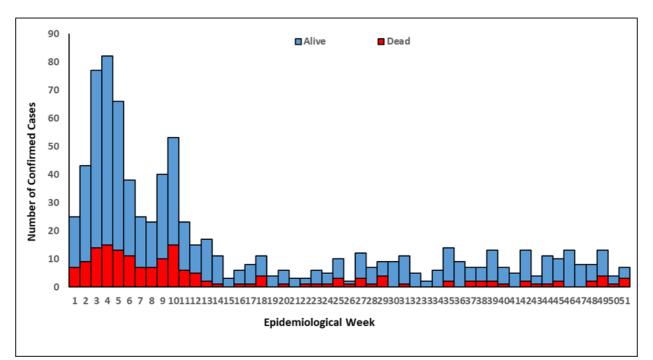


Figure 3. Epicurve of Lassa fever Confirmed Cases (817) in Nigeria - week 01-51, 2019

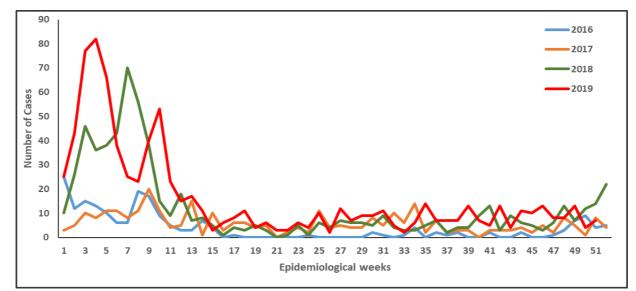
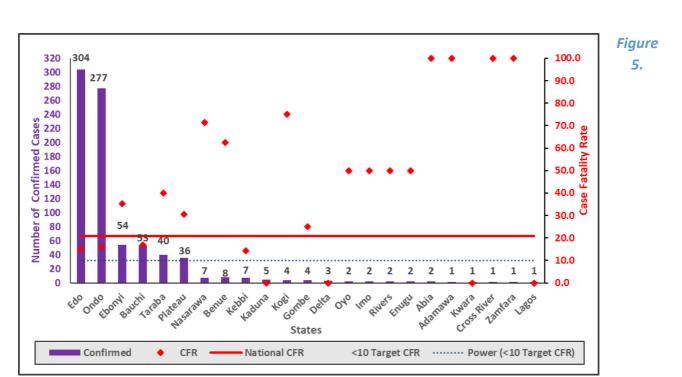


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016/week 01-2019/week 51

🚀 UK-PHRST MARCA COLOR 💭 🗰 🕞 CEEPI 🍙 🛨 C





Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 22nd December, 2019

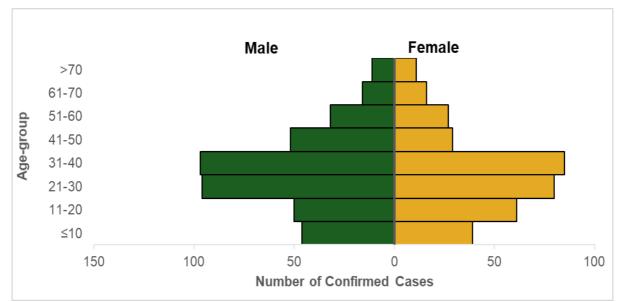


Figure 6. Age-Sex distribution of Confirmed Lassa fever cases in Nigeria as at 22nd December, 2019

ⁱSuspected case describes any individual presenting with one or more of the following: malaise, fever, headache, sore throat, cough, nausea, vomiting, diarrhoea, myalgia, chest pain, hearing loss and either a. History of contact with excreta or urine of rodents b. History of contact with a probable or confirmed Lassa fever case within a period of 21 days of onset of symptoms OR Any person with inexplicable bleeding/hemorrhagia.

- $^{\it ii} {\it Any}\ {\it suspected}\ {\it case}\ {\it with}\ {\it laboratory}\ {\it confirmation}\ ({\it positive}\ {\it IgM}\ {\it antibody},\ {\it PCR}\ {\it or}\ {\it virus}\ {\it isolation})$
- iiiAny suspected case (see definition above) who died or absconded without collection of specimen for laboratory testing
- ^{iv} "Active" means where there has been at least one confirmed case, and contacts within 21 days post exposure

<u>Disclaimer –</u> The information contained in this document is confidential, privileged and only for the intended recipient and may not be used, published or redistributed to the public. A redacted version is available on <u>http://ncdc.gov.ng/diseases/sitreps</u>

