



Nigeria Centre for Disease Control

Protecting the health of Nigerians

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Lassa fever Situation Report

Epi Week 21: 18 – 24 May 2020

Key Points

Table 1: Summary of current week (21), cumulative from Epi week 01–21, 2020 and comparison with previous year (2019)

Reporting Period	Suspected cases	Confirmed cases	Probable cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases) State(s): 4 LGA(s): 7	
Current week (week 21)	80	9	0	2	22.2%		
2020 Cumulative (week 1-21)	4841	1015	14	197	19.4%	State(s): 27 LGA(s): 128	
2019 Cumulative (week 1-21)	2582	578	15	129	22.3%	State(s): 21 LGA(s): 82	

Highlights

- In week 21, the number of new confirmed cases increased from 6 cases in week 20, 2020 to 9 cases. These were reported from 4 States (Ondo, Edo, Benue and Ebonyi) (Table 3).
- Cumulatively from week 1 to week 21, 2020, 197 deaths have been reported with a case fatality rate (CFR) of 19.4% which is lower than the CFR for the same period in 2019 (22.3%).
- In total for 2020, 27 States have recorded at least one confirmed case across 128 Local Government Areas (Figure 2 and 3).
- Of all confirmed cases, 72% are from Ondo (33%), Edo (32%) and Ebonyi (7%) States.
- The predominant age-group affected is 21-30 years (Range: <1 to 78 years, Median Age: 33 years). The male to female ratio for confirmed cases is 1:1.2 (Figure 4).
- The number of suspected cases has significantly increased compared to that reported for the same period in 2019.
- One new Healthcare worker was affected from Ondo state in the reporting week 21.
- Lassa fever outbreak emergency phase declared over on the 28th of April 2020 based on composite indicators national threshold.
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels.

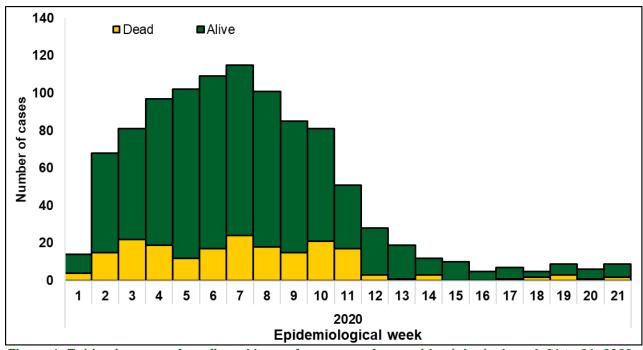


Figure 1. Epidemic curve of confirmed Lassa fever cases from epidemiological week 01 to 21, 2020

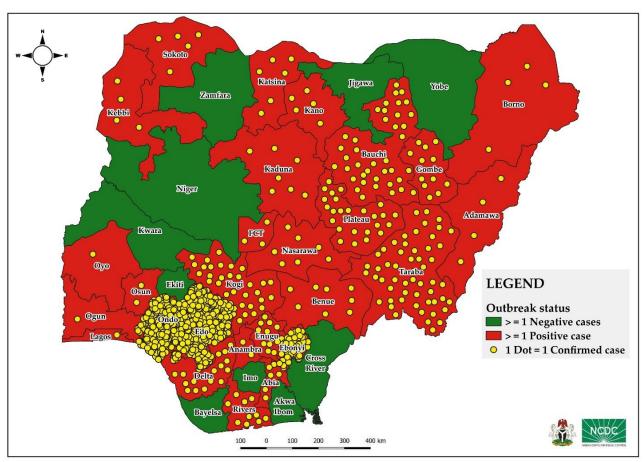
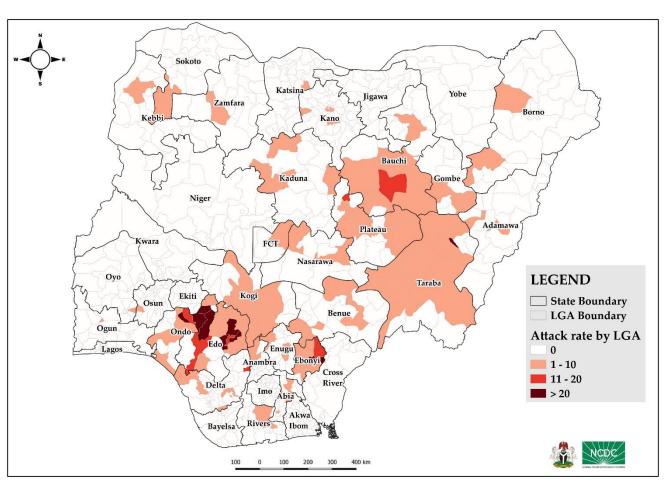


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 01-21, 2020



Epi Week: 21 2020

Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 01-21, 2020

Table 2: Key indicators for current week 2020 and trend compared to previous week, Nigeria

Indicator	Number for current week	Trend from previous week	Cumulative number for 2020	
Probable cases	0	←→	14	
Health Care Worker affected	1	↑	38	
Cases undergoing treatment in Treatment centres	11	↑	1043	
Contact tracing				
Cumulative contact listed	18	\	9697	
Contacts under follow up	74	↓	74	
Contacts completed follow up	19	↑	9561	
Symptomatic contacts	0	←→	170	
Positive contacts	0	←→	55	
Contacts lost to follow up	0	←→	7	

Key

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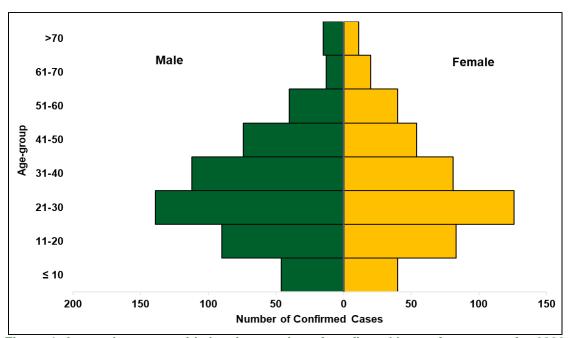
Increase Decrease No difference

Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2020

Epi Week: 21 2020

		Current week: (Week 21)						Cumulative (Week 1 - 21)				
	States		Ca	ses		Deaths			Cases			Deaths
	States	Suspected	Confirmed	Trend	Probable	HCW	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW	(Confirmed Cases)
1	Abia	1						53	5			2
2	Adamawa							18	4			1
3	Akwa Ibom							12				
4	Anambra							27	2			1
5	Bauchi	1		•				317	44	3	7	20
6	Bayelsa							6				
7	Benue	4	1	A			1	39	9		1	4
8	Borno							30	4		1	1
9	Cross River							13				
10	Delta	4						119	16		3	3
11	Ebonyi	7	1	A				287	75		1	16
12	Edo	32	2	▼				1872	328	1	10	39
13	Ekiti							14				
14	Enugu							62	10			2
15	FCT							69	3			2
16	Gombe							45	9	1	1	2
17	lmo	1						20				
18	Jigawa							28			1	
19	Kaduna							127	7	2	1	5
20	Kano							13	5	2	3	1
21	Katsina							46	6	1	1	2
22	Kebbi							30	4			2
23	Kogi							109	38	1		8
24	Kwara							14				
25	Lagos							32	1			
26	Nasarawa							46	9			4
27	Niger							9				
28	Ogun							36	1			
29	Ondo	23	5	A		1	1	971	332	1	7	48
30	Osun							31	2			
31	Оуо							12	1			
	Plateau	3						128	30			7
33	Rivers							21	9			3
34	Sokoto							23				3
35	Taraba	4						139	56	2	1	21
36	Yobe							5				
	Zamfara							18				
	Total	80	9	A	0	1	2	4841	1015	14	38	197

Key▼ Decrease
Increase



Epi Week: 21 2020

Figure 4. Age and sex pyramid showing number of confirmed Lassa fever cases for 2020

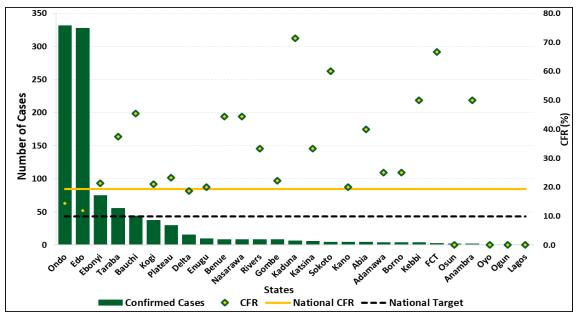


Figure 5: Number of confirmed cases with case fatality rate (CFR) by state, week 01-21, 2020

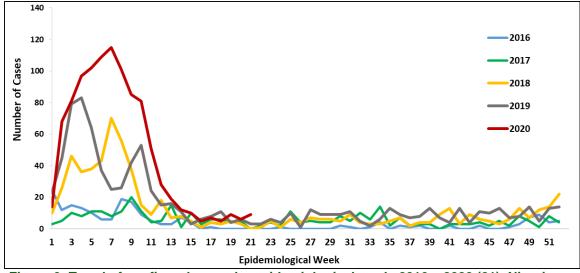


Figure 6: Trend of confirmed cases by epidemiological week, 2016 - 2020 (21), Nigeria

Table 5: Response activities

Pillar	Activities to date	Next steps
Coordination	 The National Emergency Operations Centre was activated on 24th January, 2020 for effective multisectoral, multi-disciplinary coordination of Lassa fever response Incident Action Plan developed NCDC National Rapid Response Team(RRT) deployed to Ondo, Ebonyi, Enugu, Katsina, Taraba, Delta, Edo, Kano, Borno and Bauchi 	Resource mobilisation Finalisation of the Lassa fever five-year Strategic plan
Case management	 Confirmed cases are treated at identified treatment centres across the states Dissemination of reviewed case management and safe burial practices guidelines Surge capacity deployed to ISTH and FMC Owo Training on Lassa fever IPC and case management for Enugu, Delta, Abia and Anambra 	 Pilot indigent patient treatment scheme through the basic healthcare provision funds Mortality review of Lassa fever deaths In-depth investigation of healthcare worker infections
Infection Prevention and Control and Safe burial	 Dissemination of reviewed IPC guideline Dissemination of health facility IPC advisory Dissemination of Lassa fever Healthcare worker advisories 	IPC training for Healthcare workers
Laboratory	Diagnosis of all samples in the five Lassa fever testing laboratories across the country Establishment of Lassa fever testing Laboratory in FMC Owo	Harmonisation of laboratory and surveillance data ongoing
Logistics	Response commodities -PPEs, Ribavirin (injection and tablets), beds, tents, body-bags, thermometers, hypochlorite hand sanitizers, IEC materials, guidelines and SOPS distributed to states and treatment centres	
Research Pillar	Lassa fever proposal development workshop for national level staff	
Risk communication	 Implementation of targeted risk communication activities in most affected States Dissemination of media content including press releases, tweets, public advisories etc. Lassa fever awareness and prevention campaign in FCT, Edo and Ondo supported by Hypo 	
Surveillance	 Update of VHF Case Investigation Form (CIF) database Enhanced surveillance (contact tracing and active case finding) in affected states Cross border collaboration with Benin Republic on newly reported Lassa fever cases 	
State Response	 Multi-sectoral Public Health Emergency Operation Centres (PHEOC)activated in affected States High level advocacy visit by the Honourable Minister of Health and DG NCDC to Kano State Ondo State Governor provided two new Hilux vehicle for surveillance activities and 20 beds for treatment centre Edo State Governor inaugurated Lassa fever Task force to tackle Lassa fever in Edo state, provided PPE to ISTH Red Cross currently supporting six high burden states with surveillance and rodent control and risk communications activities 	 Support states to develop and implement Lassa fever response sustainability plan Operationalisation of LGA Sanitation desks by Environmental health officers in all states
Federal Ministry of Environment	Implementation of Lassa fever Environmental response campaign in high burden states	Implementation of regular sanitation exercise in all States

Epi Week: 21 2020

Challenges

- Sustainability of Lassa fever outbreak response by States
- Poor environmental sanitation conditions observed in high burden communities
- Poor risk communication activities at the State level leading to late presentation of cases
- Poor IPC institutionalisation at State level and treatment centres.

Notes on this report

Data Source

Information for this disease was case based data retrieved from the National Lassa fever Emergency Operations Centre.

Case definitions

- Suspected case: 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.
- Confirmed case: any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)
- Probable case: any suspected case (see definition above) who died or absconded without collection of specimen for laboratory testing
- Contact: Anyone who has been exposed to an infected person, or to an infected person's secretions, excretions, or tissues within three weeks of last contact with a confirmed or probable case of Lassa fever
- *Healthcare workers(HCW) infections may not necessarily be of nosocomial origin, proposed study to differentiate nosocomial healthcare worker infection from community infection

Calculations

Case Fatality Rate (CFR) for this disease is reported for confirmed cases only

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