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

ITUATION REPORT

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Nigeria Centre For Disease Control (NCDC)

TITLE:	2018 LASSA FEVER OUTBREAK IN NIGERIA
SERIAL NUMBER:	25
EPI-WEEK:	25
DATE:	24 th June 2018

HIGHLIGHTS

- In the reporting Week 25 (June 18-24, 2018) six new confirmed^{il} cases were reported from Edo(4) Ondo(1) and Plateau(1) state with two deaths in Plateau and Edo state
- From 1st January to 24th June 2018, a total of 2042 **suspectedⁱ cases** have been reported from 21 states. Of these, **444 were confirmed positive**, **10 are probable**, **1588** <u>negative</u> (not a case)
- Since the onset of the 2018 outbreak, there have been 111 deaths in confirmed cases and 10 in probable cases. Case Fatality Rate in confirmed cases is 25.0%
- 21 states have recorded at least one confirmed case across 71 Local Government Areas (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT, Gombe, Ekiti, Kaduna, Abia and Adamawa). Eighteen states have exited the active phase of the outbreak while three- Edo, Ondo and Plateau States remain active^{iv} -Figure 1
- In the reporting week 25, one new healthcare worker was infected with one death in Edo state. Thirty-nine health care workers have been affected since the onset of the outbreak in seven states –Ebonyi (16), Edo (14), Ondo (4), Kogi (2), Nasarawa (1), Taraba (1) and Abia (1) with ten deaths in Ebonyi (6), Kogi (1), Abia (1), Ondo (1) and Edo (1)
- 81% of all confirmed cases are from Edo (42%), Ondo (24%) and Ebonyi (15%) states
- Four patients are currently being managed at treatment Centres three at Irrua Specialist Teaching Hospital (ISTH) and one at the Federal Medical Centre Owo treatment Centre Table 1
- A total of **5618** contacts have been identified from 21 states. Of these **267**(4.8%) are currently being followed up, 5341(95.0%) have completed 21 days follow up while 10(0.2%) were lost follow up. 85 symptomatic contacts have been identified, of which **29** (34%) have tested positive from five states (Edo-13, Ondo-8, Ebonyi-3, Kogi -3 Bauchi-1 and Adamawa-1)
- National intensive clinical workshop on diagnosis, management and control of Lassa Fever phase two - practical/hands-on training on case management and laboratory diagnosis scheduled for 28th – 29th June 2018 at ISTH Irrua Edo state
- Lassa fever Research workshop in collaboration with WHO research and development roadmap scheduled for 3rd-4th July 2018 at Abuja
- Case Management Guideline review meeting of national Lassa fever expert review committee scheduled for 5th -6th July 2018 at Abuja
- Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels



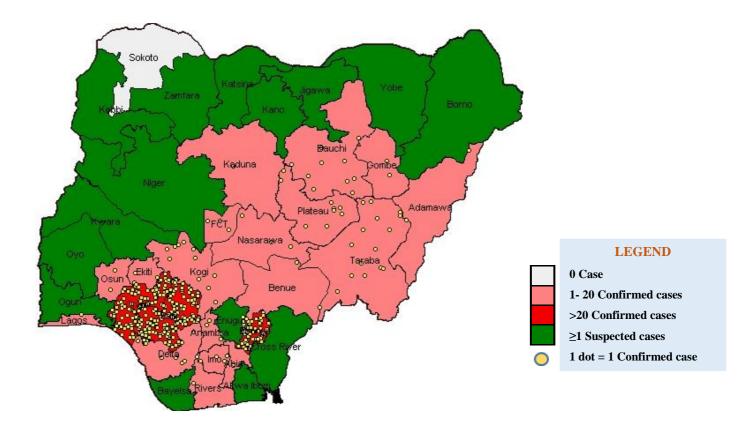


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 24th June, 2018

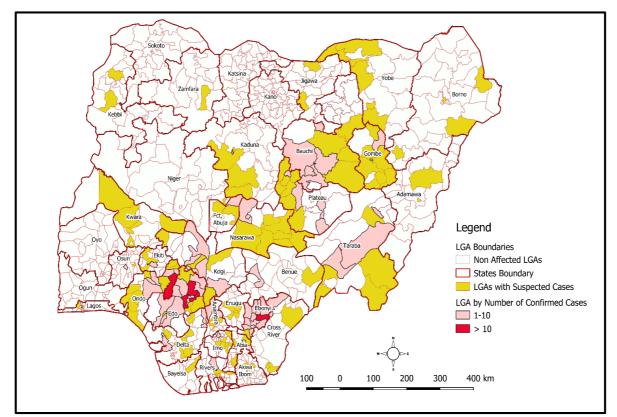


Figure 2. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA



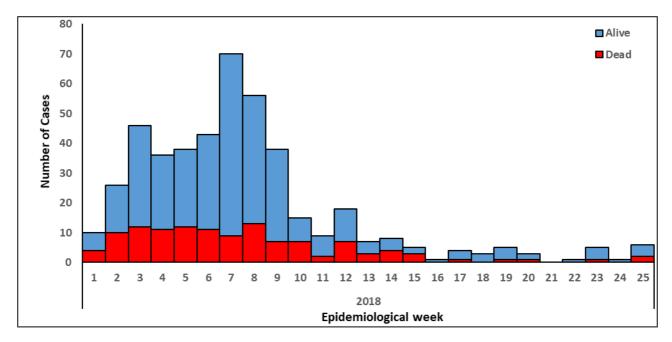


Figure 3.Epicurve of Lassa fever Confirmed (444) and Probable (10) Cases in Nigeria week 1-25, 2018

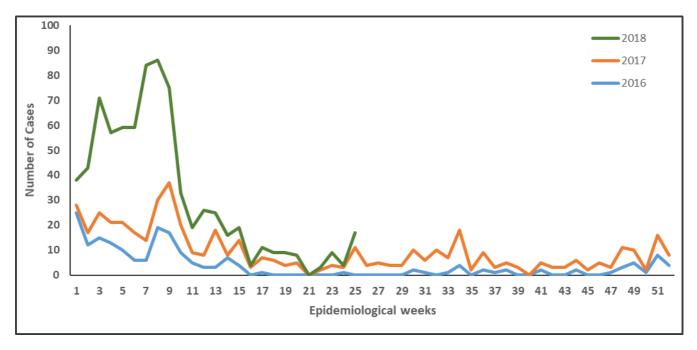


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018



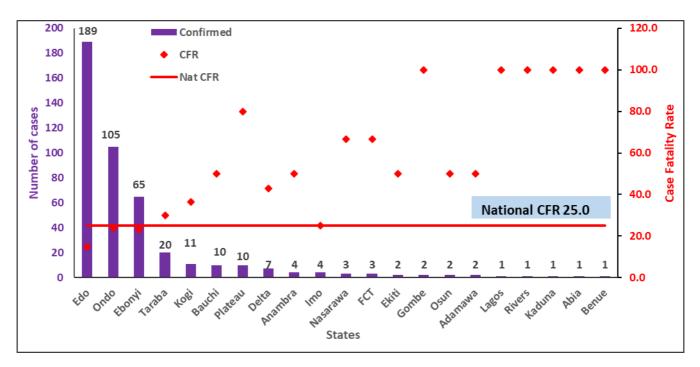


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 24th June 2018

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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.

 $^{^{\}it ii} {\rm Any}\ {\rm suspected}\ {\rm case}\ {\rm with}\ {\rm laboratory}\ {\rm confirmation}\ ({\rm positive}\ {\rm IgM}\ {\rm antibody},\ {\rm PCR}\ {\rm or}\ {\rm virus}\ {\rm isolation})$

iiiAny suspected case (see definition above) who died 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