



Lassa Fever Situation Report

Epi Week 12: 16 - 22 March, 2020

Key Points

Table 1: Summary of current week (12), cumulative from epi week 01–12, 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)
Current week (week 12)	279	28	0	3	10.7%	State(s): 12 LGA(s): 17
2020 Cumulative (week 1-12)	4012	932	11	176	18.9%	State(s): 27 LGA(s): 125
2019 Cumulative (week 1-12)	1924	510	15	119	22.9%	State(s): 21 LGA(s): 74

Highlights

- In week 12, the number of new confirmed cases decreased from 51 cases in week 11, 2020 to 28 cases. These were reported from 12 States (Edo, Ondo, Ebonyi, Bauchi, Taraba, Plateau, Kogi, Abia, Enugu, FCT, Benue and Gombe) (Table 3).
- Cumulatively from week 1 to week 12, 2020, 173 deaths have been reported with a case fatality rate (CFR) of 18.9% which is lower than the CFR for the same period in 2019 (22.9%).
- In total for 2020, 27 States have recorded at least one confirmed case across 125 Local Government Areas (Figure 2 and 3).
- Of all confirmed cases, 72% are from Edo (33%), Ondo (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.
- No new Healthcare worker were affected in the reporting week 12.

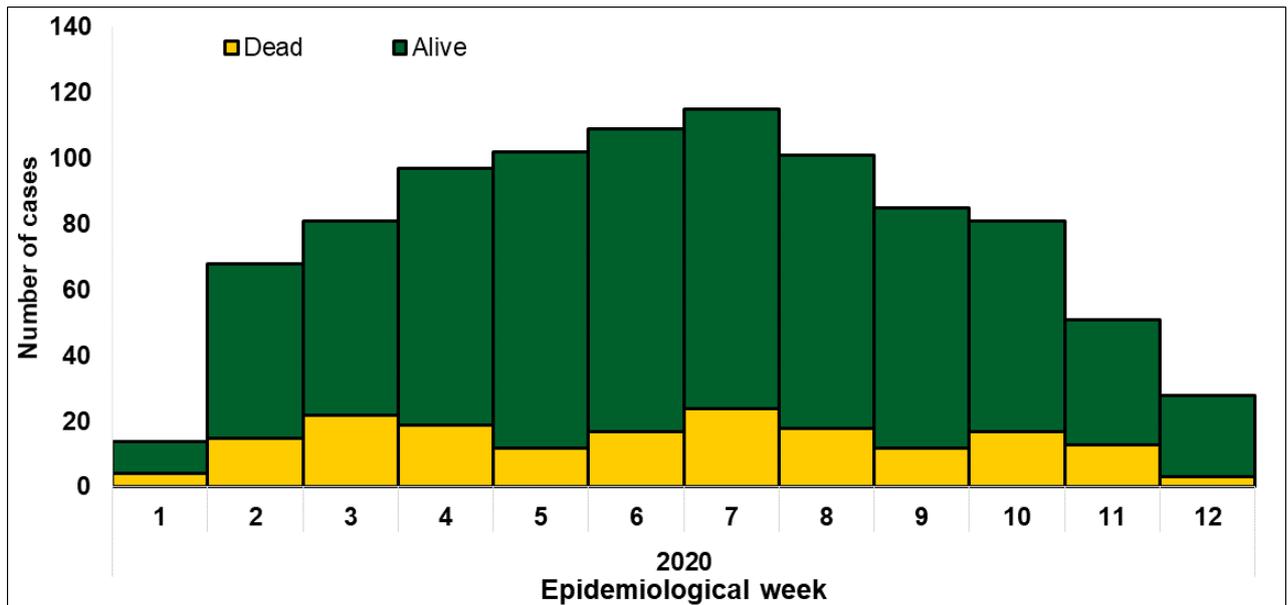


Figure 1. Epidemic curve of confirmed Lassa fever cases from epidemiological week 01 to 12, 2020

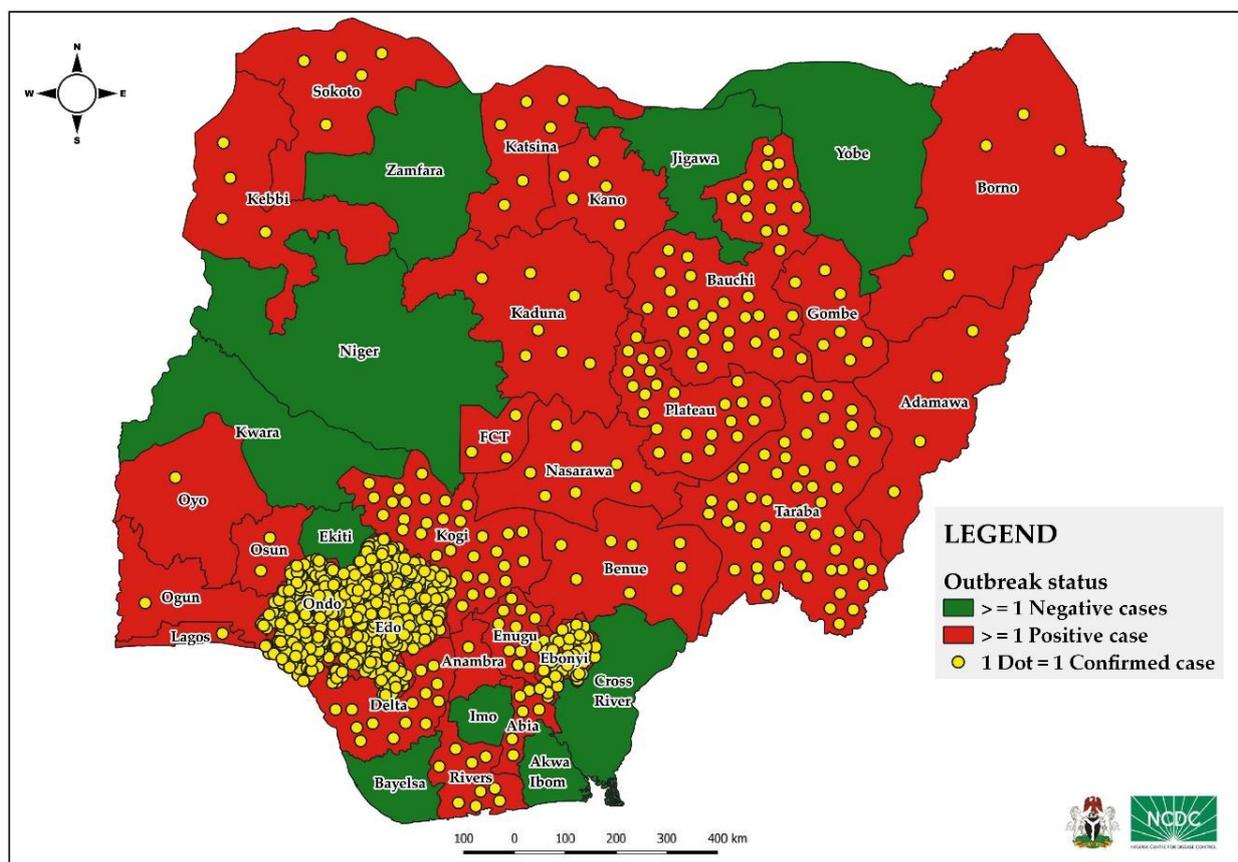


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 01- 12, 2020

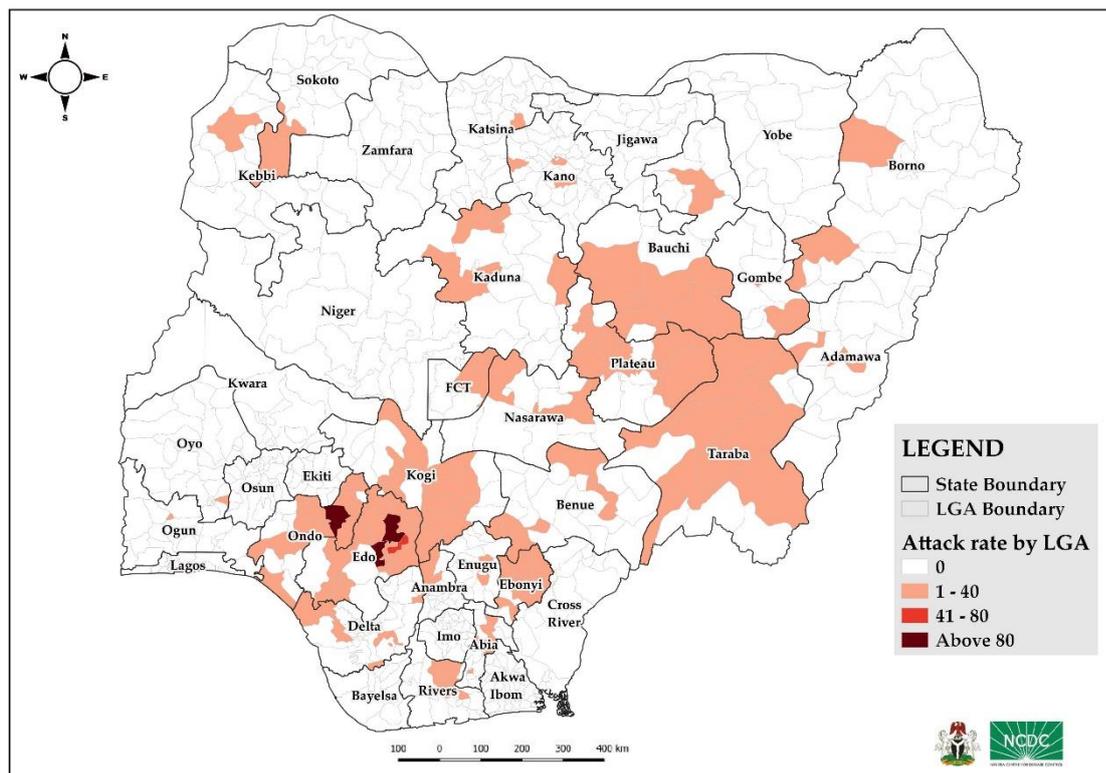


Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 01- 12, 2020

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	↔	11
Health Care Worker affected	0	↓	34
Cases undergoing treatment in Treatment centres	48	↓	946
Contact tracing			
Cumulative contact listed	512	↓	9324
Contacts under follow up	2648	↓	2648
Contacts completed follow up	740	↓	6598
Symptomatic contacts	12	↑	155
Positive contacts	8	↑	72
Contacts lost to follow up	2	↑	6

Key
 ↑ Increase
 ↓ Decrease
 ↔ No difference

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

States	Current week: (Week 12)						Cumulative (Week 1 - 12)				
	Cases					Deaths (Confirmed Cases)	Cases				Deaths (Confirmed Cases)
	Suspected	Confirmed	Trend	Probable	HCW*		Suspected	Confirmed	Probable	HCW*	
1 Abia	2	2	▲				44	5			2
2 Adamawa	2						16	4			1
3 Akwa Ibom	1						11				
4 Anambra	1						26	2			1
5 Bauchi	46	2	▼				286	41		7	10
6 Bayelsa							5				
7 Benue	1	1	▲				26	8			2
8 Borno							27	4		1	1
9 Cross River	1						9				
10 Delta	5		▼				90	15		3	2
11 Ebonyi	12	1	▼				213	67		1	15
12 Edo	108	8	▼				1547	306	1	10	39
13 Ekiti	1						13				
14 Enugu	5	1					46	10			2
15 FCT	11	1				1	59	3			2
16 Gombe	4	1					36	7	1	1	2
17 Imo	1						18				
18 Jigawa							25			1	
19 Kaduna	4						118	7	2	1	5
20 Kano							12	5	2	3	1
21 Katsina	2						44	6	1	1	2
22 Kebbi	1						27	4			2
23 Kogi	5	2					91	33	1		8
24 Kwara	1						12				
25 Lagos							28	1			
26 Nasarawa	9		▼				40	7			3
27 Niger	1						9				
28 Ogun	2						34	1			
29 Ondo	34	5	▼			1	777	299	1	4	43
30 Osun							30	2			
31 Oyo							12	1			
32 Plateau	4	2	▲			1	101	27			6
33 Rivers	2						20	9			3
34 Sokoto	1						22	4			3
35 Taraba	12	2	▼				117	54	2	1	21
36 Yobe							4				
37 Zamfara							17				
Total	279	28	▼	0	0	3	4012	932	11	34	176

Key	
▼	Decrease
▲	Increase

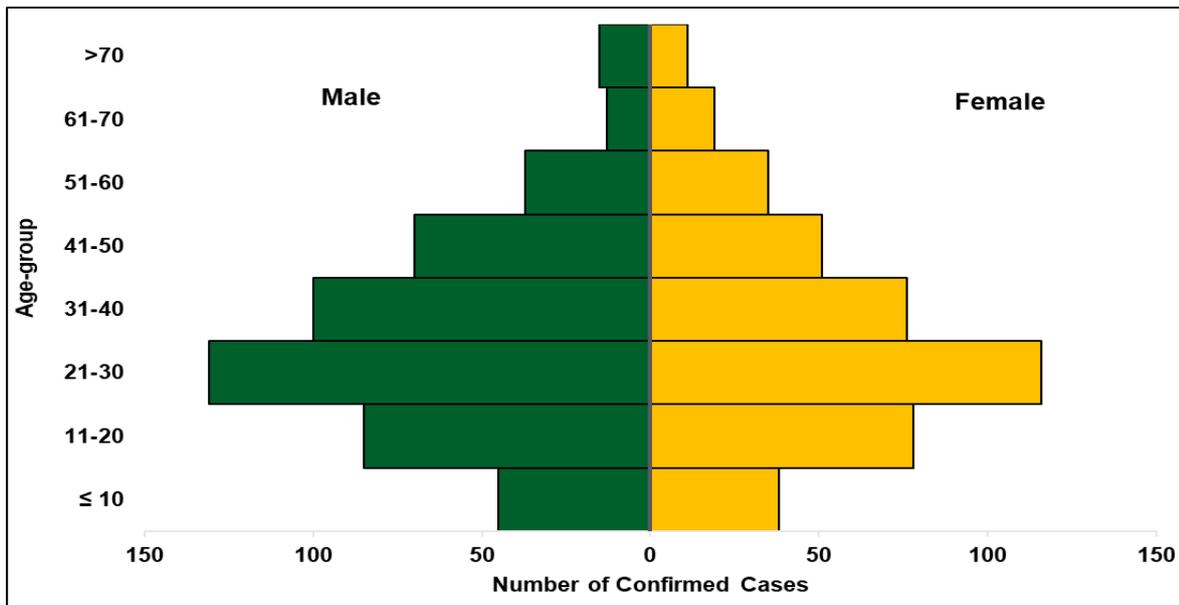


Figure 4. Age and sex pyramid showing number of confirmed Lassa fever cases for 2020

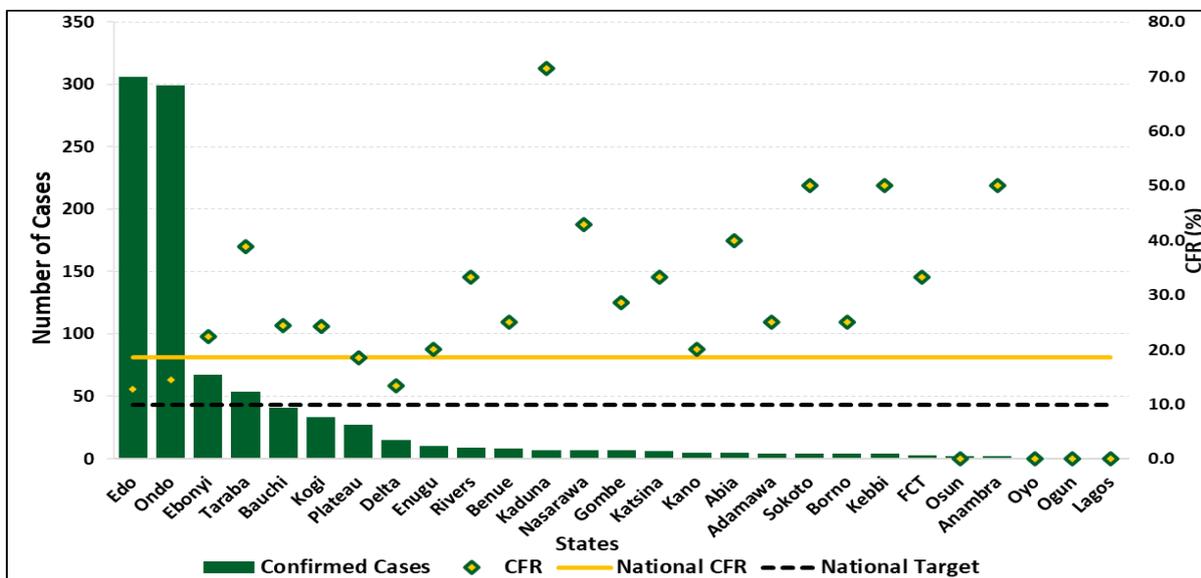


Figure 5: Number of confirmed cases with case fatality rate (CFR) by state, week 01- 12, 2020

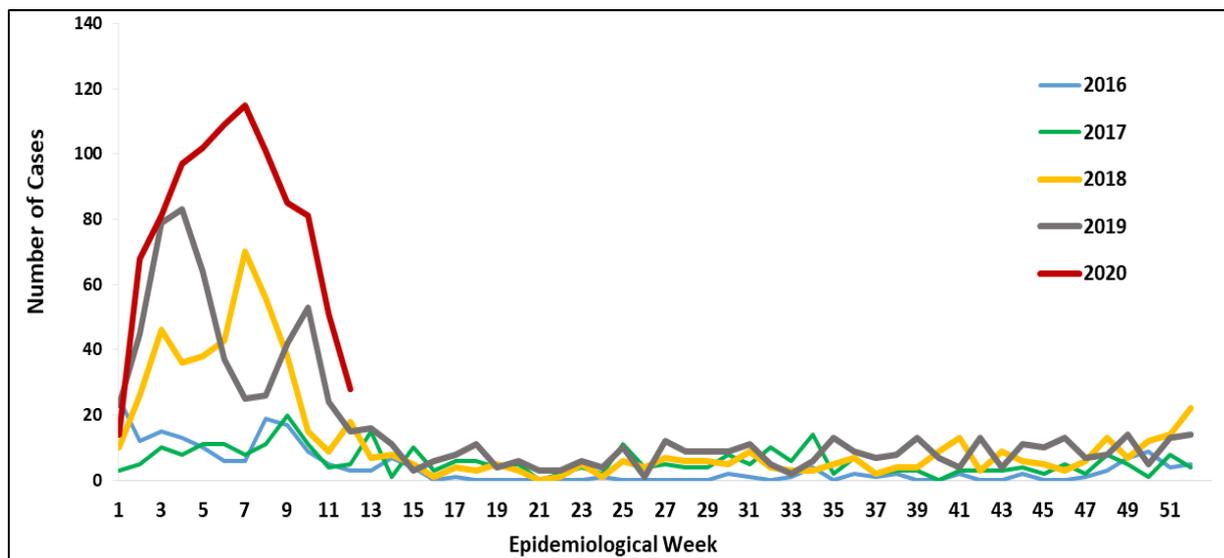


Figure 6: Trend of confirmed cases by epidemiological week, 2016 – 2020 (12), Nigeria

Response activities

- The National Emergency Operations Centre (EOC) has been activated to coordinate response activities across states. Of the states with confirmed cases, eight of them have activated state-level EOCs
- National Rapid Response Teams have been deployed from NCDC to support response activities in ten States
- Surge staff (Doctors, Nurses, Laboratorians and Hygienist) deployed to ISTH and FMC Owo
- State Public Health Emergency Operations Centre activated in affected States
- The five molecular laboratories for Lassa fever testing in the NCDC network are working full capacity to ensure that all samples are tested and results provided within the shortest turnaround time
- NCDC is working to support every state in Nigeria to identify one treatment centre, while supporting existing ones with care, treatment and IPC commodities
- Risk communications and community engagement activities have been scaled up across states using television, radio, print, social media and other strategies
- Implementation of Lassa fever Environmental response campaign in high burden states by Federal Ministry of Environment

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