

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

ITUATION REPOR

Nigeria Centre For Disease Control (NCDC)

TITLE:	2018 LASSA FEVER OUTBREAK IN NIGERIA
SERIAL NUMBER:	43
EPI-WEEK:	43
DATE:	28 th October, 2018

HIGHLIGHTS

- In the reporting Week 43 (October 22-28, 2018) nine new confirmedⁱ cases were reported from Ondo(4), Edo(4) and Ebonyi(1)state with two new deaths in Edo(1) and Ondo(1) and a probable case from Ebonyi
- From 1st January to 28th October 2018, a total of 2834 suspectedⁱ cases have been reported from 22 states. Of these, 548 were confirmed positive, 17 probables, 2264 <u>negative</u> (not a case)
- Since the onset of the 2018 outbreak, there have been 141 deaths in confirmed cases and 17 in probable cases. Case Fatality Rate in confirmed cases is 25.7% -*Table 1*
- 22 states have recorded at least one confirmed case across 90 Local Government Areas (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT, Gombe, Ekiti, Kaduna, Abia, Adamawa and Enugu). Sixteen states have exited the active phase of the outbreak while six- Edo, Ondo, Ebonyi, Kogi, Delta and Imo states remain active^{iv} -Table 1/ Figure 1
- In the reporting week 43, no new healthcare worker was affected. Forty-one health care workers have been affected since the onset of the outbreak in seven states –Ebonyi (16), Edo (15), Ondo (5), Kogi (2), Nasarawa (1), Taraba (1) and Abia (1) with ten deaths in Ebonyi (5), Kogi (1), Abia (1), Ondo (2) and Edo (1)
- 82% of all confirmed cases are from Edo (46%), Ondo (23%) and Ebonyi (13%) states
- Twelve patients are currently being managed at Irrua Specialist Teaching Hospital(ISTH) treatment Centre (8) Federal Medical Centre (FMC) Owo (3) and Federal Teaching Hospital Abakiliki (1) *Table 1*
- A total of **8454** contacts have been identified from 22 states. Of these 389(4.6%) are currently being followed up, 7946 (94.0%) have completed 21 days follow up while 15(0.2%) were lost to follow up. 109(1.3%) symptomatic contacts have been identified, of which **36** (0.5%) have tested positive from five states (Edo -20, Ondo-8, Ebonyi-3, Kogi -3 Bauchi-1 and Adamawa-1) *Table 1*
- National RRT team (NCDC staff and NFELTP residents) deployed Ondo state to support response
- Lassa fever international Conference registration, abstract submission and travel scholarship now open to the public on the conference website <u>www.lic.ncdc.gov.ng</u> with the date for abstract submission extended to the 14th November 2018
- Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels



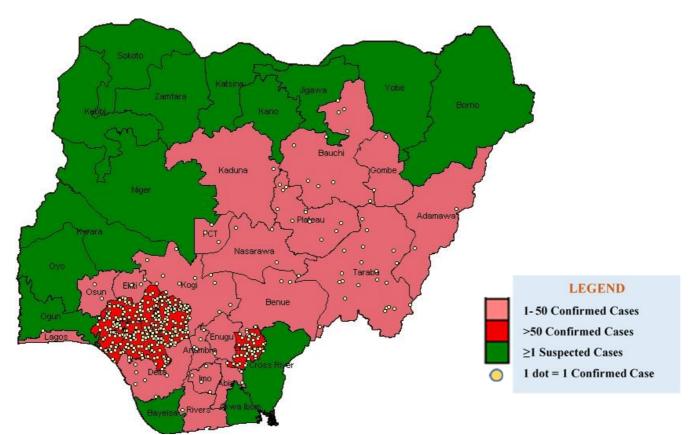


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 28th October, 2018

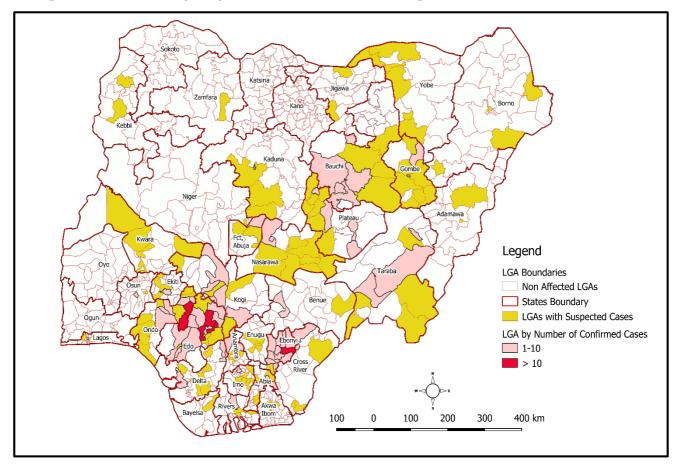


Figure 2. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA



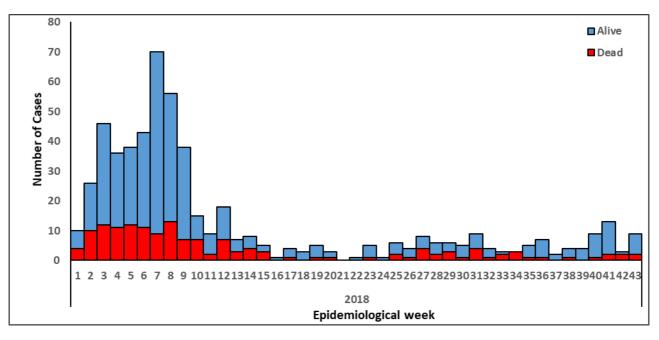


Figure 3. Epicurve of Lassa fever Confirmed (548) and Probable (17) Cases in Nigeria week 1-43, 2018

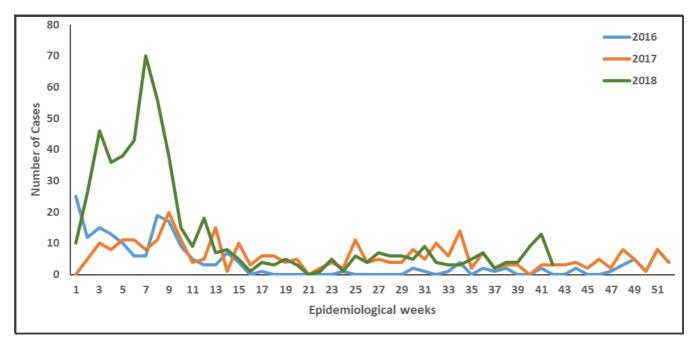


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018/Week 43



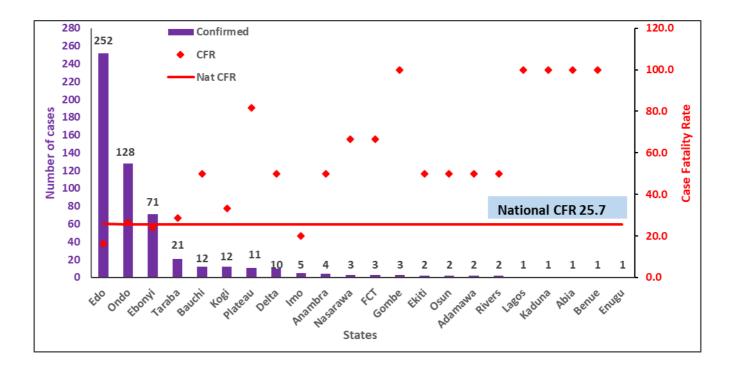


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 28th October, 2018

giz .

BNITM

UK-PHRST AHRICA.COC

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.

ⁱⁱAny suspected case with laboratory confirmation (positive IgM antibody, PCR or virus 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

<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 http://ncdc.gov.ng/diseases/sitreps