



Highlights/key priorities

- The Lassa fever (LF) outbreak is currently active in thirteen (13) states (Ogun, Bauchi, Plateau, Ebonyi, Ondo, Edo, Taraba, Nasarawa, Rivers, Kaduna, Gombe, Cross-River and Borno) Figure 1
- Since the onset of LF outbreak in Dec. 2016 (Week 49), a total of 247 suspectedⁱⁱ cases with 53 deaths have been reported. Of these, Seventy-nine (79) have been classified as: confirmedⁱⁱⁱ (73) or probable^{iv} (6), with 43 deaths (37 deaths in confirmed and 6 in probable).
- Case Fatality Rate in confirmed/probable cases is 54.4% and 21.5% for all cases (including probable/confirmed and suspected).
- In reporting Week 9 (Feb. 25 March 3, 2017), seven (7) suspected cases were reported with four(4) laboratory confirmed cases and two (2) deaths.
- The new laboratory confirmed cases were in Ondo(2), Taraba(1) and Borno(1). All four (4) confirmed cases are currently receiving treatment.
- The two (2) deaths were recorded in an old confirmed case from Ondo and a probable case from Nasarawa.
- A total of Nine (9) suspected cases, have pending results –Taraba(2), Rivers (1), Nasarawa (1), Bauchi (2), Plateau (2) and Gombe (1).

Outbreak summary

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	Description	Ogun	Taraba	Rivers	Nas	Edo	Ondo	Bauchi	Ebonyi	Plat	Kad	Gombe	Cros	Borno	TOTAL
1	Cases			•			•		•		•		•	•	
2	New laboratory confirmed	0	1	0	0	0	2	0	0	0	0	0	0	1	4
3	Probable Cases	3	2	0	1	0	0	0	0	0	0	0	0	0	6
4	New Suspected	0	0	1	1	0	0	0	0	0	0	5	0	0	7
5	Rumour under investigation	0	0	0	0	0	0	0	0	0	0	0	0	0	0
6	Total laboratory confirmed	3	19	1	8	7	13	5	5	8	1	1	1	1	73
	Total suspected cases (including pending laboratory result and														
7	unkown)	10	25	7	17	70	15	11	3	14	0	6	0	0	178
8	Total cases reported (confirmed + probable+ suspected)	16	46	8	26	77	28	16	8	22	1	7	1	1	247
9	Total number currently in treatment facility	0	4	2	2	2	7	3	3	2	0	0	0	1	26
10	Deaths														
11	Newly Reported	0	0	0	1	0	1	0	0	0	0	0	0	0	2
12	Total deaths in confirmed cases	2	9	0	5	4	4	3	1	6	1	1	1	0	37
13	Total Deaths in probable cases	3	2	0	1	0	0	0	0	0	0	0	0	0	6
14	Total deaths in suspected cases	0	8	0	0	0	2	0	2	1	0	0	0	0	13
15	Total Deaths	5	19	0	6	4	6	3	3	7	1	1	1	0	53

Source: NCDC Lassa fever response working group (as at March 3rd, 2017)

No updated reports for current week

Response

Coordination

- o NCDC Lassa fever response working group is leading coordination of weekly Lassa fever review meeting in conjunction with partners (WHO, CDC, UMB)
- o Reports are shared with the National Surveillance and Outbreak Response Committee weekly for prompt decisions

Case management, Infection Prevention and control

o Confirmed cases are being treated at identified treatment/isolation centres across the states with Ribavirin and necessary supportive management also instituted.

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Surveillance

- o Contact tracing ongoing in affected states through the State Epidemiologist and NFELTP residents. Off-site support provided by NCDC
- o Enhanced surveillance is still ongoing in all affected states
- o Contact tracing has commenced in Rivers for the contacts of the case that died in Cross Rivers State.
- o 54 contacts have been identified from the newly confirmed case in Borno State.
- Line listing of cases reported across all the states is ongoing, updated per time and uploaded on the VHF management database. 116 entries have so far been made from 9 States (VHF forms yet to be received from Edo State).

Laboratory

- A total of five(5) laboratories have PCR capability for Lassa fever testing. Out of this ,only three (3) labs-LUTH, Irrua Specialist Teaching Hospital and UCH- are currently involved in laboratory confirmation of cases in the ongoing outbreak.
- Assessment of quality of samples to be carried out by the NCDC Lab team to inform quality of results generated from LF testing.

Logistics

- NCDC redistributed 2000 vials of ribavirin retrieved from Rivers State to Irrua Specialist Hospital,(ISTH) Irrua in Edo State.
- o 50 pieces of full PPEs ready for collection from NCDC by ISTH, Edo State.

Communication and social mobilization

- NCDC social media campaign on LF through her dedicated Twitter and Facebook channels is ongoing.
- NCDC jingles on identification of LF will continue to air via Federal Radio Corporation of Nigeria (FRCN) and other media houses, courtesy University of Maryland (UMB) and CDC. Airing of the jingles has been extended to local media houses in some states.

Actions to be completed

- o Updating of VHF case-based management database especially for states with missing epidemiological data
- o Dissemination of targeted IEC materials to frontline healthcare workers in all the states
- o Retrieval of Ribavirin from non-active states and redistribution to active states ongoing.
- o Development of VHF State Profile and Score card
- O Deployment of a team to Borno state to provide onsite support.

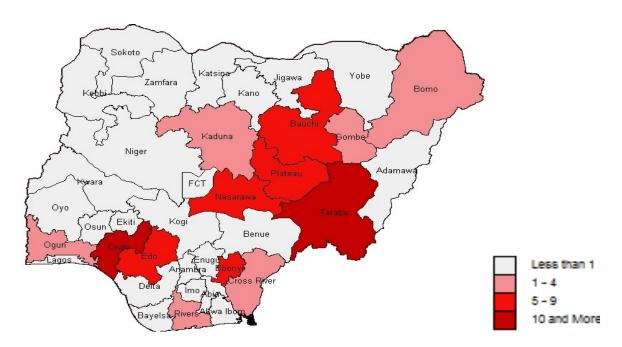


Figure 1. States with confirmed cases as at Mar. 3. 2017

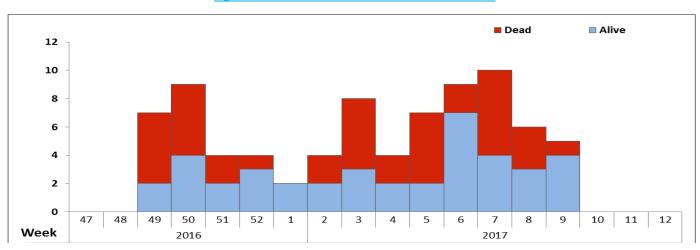


Figure 2. Cases of Lassa fever by epidemiological week in Nigeria - Dec. 2016 to Mar. 2017 (updated as at Mar. 3 2017), N = 79

ⁱ "Active" means where there has been at least one confirmed case, and contacts within 21 days post exposure

ⁱⁱSuspected 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.

ⁱⁱⁱAny suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation).

^{iv}Any suspected case (see definition above) but who died without collection of specimen for laboratory testing