



# SITUATION REPORT

## Nigeria Centre For Disease Control (NCDC)

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<b>TITLE:</b>	<b>2018 LASSA FEVER OUTBREAK IN NIGERIA</b>
<b>SERIAL NUMBER:</b>	<b>19</b>
<b>EPI-WEEK:</b>	<b>19</b>
<b>DATE:</b>	<b>13<sup>th</sup> May 2018</b>

### HIGHLIGHTS

- In the reporting Week 19 (May 07-13, 2018) five new confirmed<sup>ii</sup> cases were reported from three states -Edo(1), Ebonyi (1) and Ondo (3) with one new death in Ondo state
- From 1<sup>st</sup> January to 13<sup>th</sup> May 2018, a total of 1914 suspected<sup>i</sup> cases have been reported from 21 states. Of these, 428 were confirmed positive, 10 are probable, 1468 negative (not a case) and 8 samples are awaiting laboratory result (pending)
- Since the onset of the 2018 outbreak, there have been 107 deaths in confirmed cases, 10 in probable cases. Case Fatality Rate in confirmed cases is 25.0%
- 21 states have recorded at least one confirmed case across 70 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). **Seventeen** states have exited the active phase of the outbreak while **four**- Edo, Ondo, and Ebonyi, Taraba States remain active<sup>iv</sup> - *Figure 1*
- In the reporting week 19, one new healthcare worker was infected with one death. **Thirty-eight health care workers have been affected since the onset of the outbreak in eight states** –Ebonyi (16), Edo (12), Ondo (4), Kogi (2), Benue (1), Nasarawa (1), Taraba (1), and Abia (1) with nine deaths in Ebonyi (6), Kogi (1), Abia (1) and Ondo (1)
- 81% of all confirmed cases are from Edo (42%) Ondo (23%) and Ebonyi (16%) states
- Seven cases are currently being managed in three treatment centres across the country
- A total of **5241** contacts have been identified from 21 states. Of these **292**(5.6%) are currently being followed up, 4938(94.2%) have completed 21 days follow up while 11(0.2%) were lost follow up. 82 symptomatic contacts have been identified, of which **28 (36%)** have tested positive from five states (Edo-13, Ondo-8, Ebonyi-3, Kogi -3 and Bauchi-1)
- National RRT team (NCDC, WHO and Nfeltp residents) batch D continues to support response in Ebonyi and Ondo states
- Emergency phase of national Lassa fever outbreak has been declared over by the Honourable Minister for Health Prof Isaac Adewole during a press briefing on 10<sup>th</sup> May 2018. National Lassa fever multi-partner, multi-agency Emergency Operations Centre (EOC) reverts to Technical Working Group(TWG) and continues to coordinate the response activities at all levels.



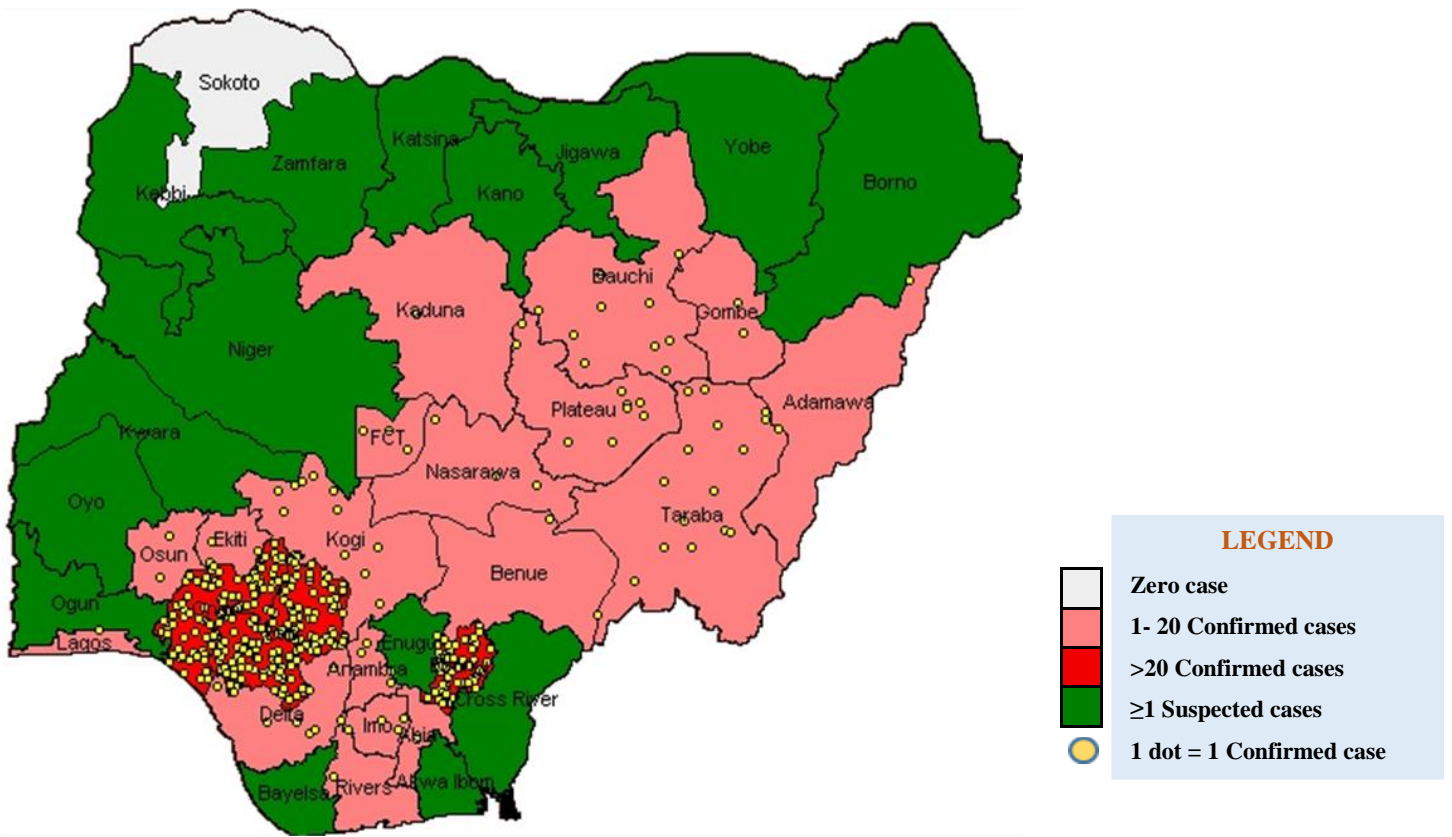


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 13<sup>th</sup> May, 2018

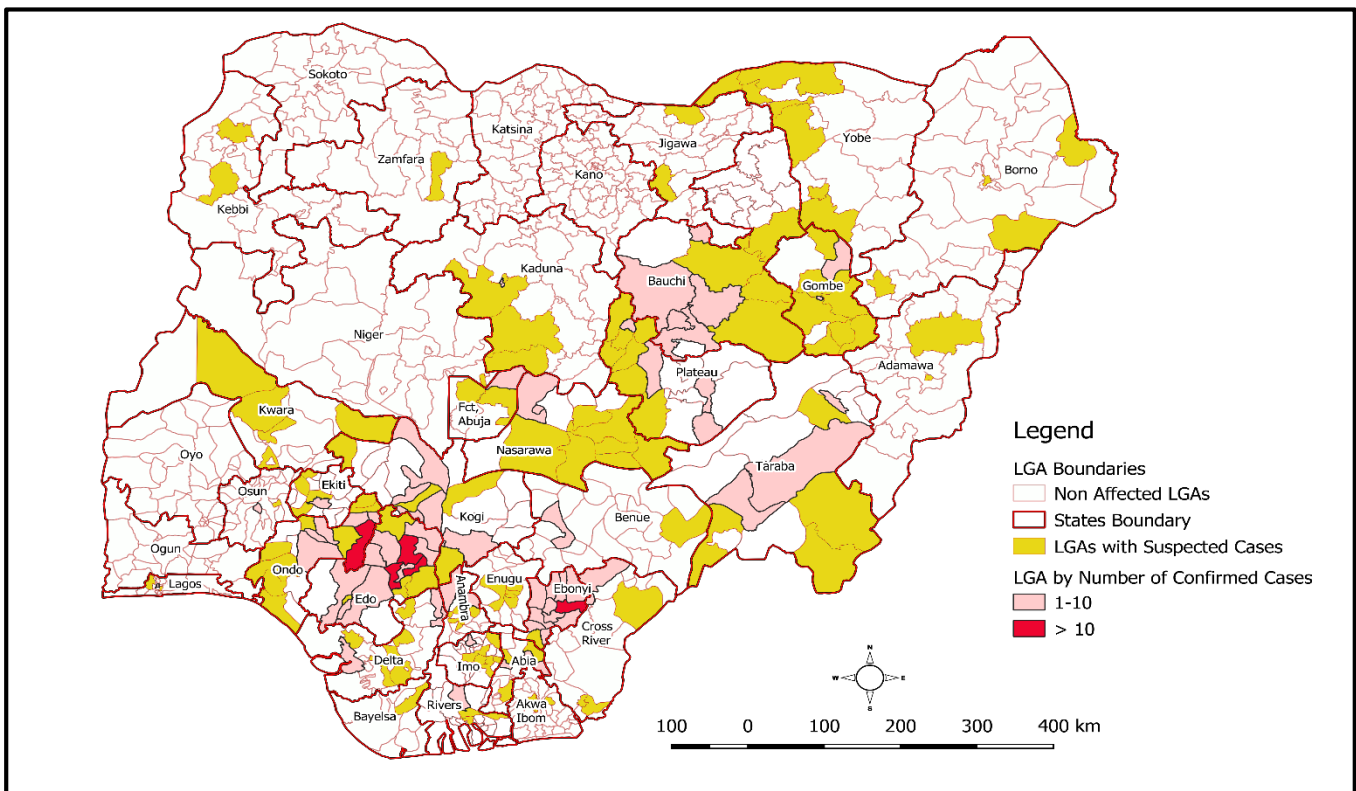


Figure 2. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA

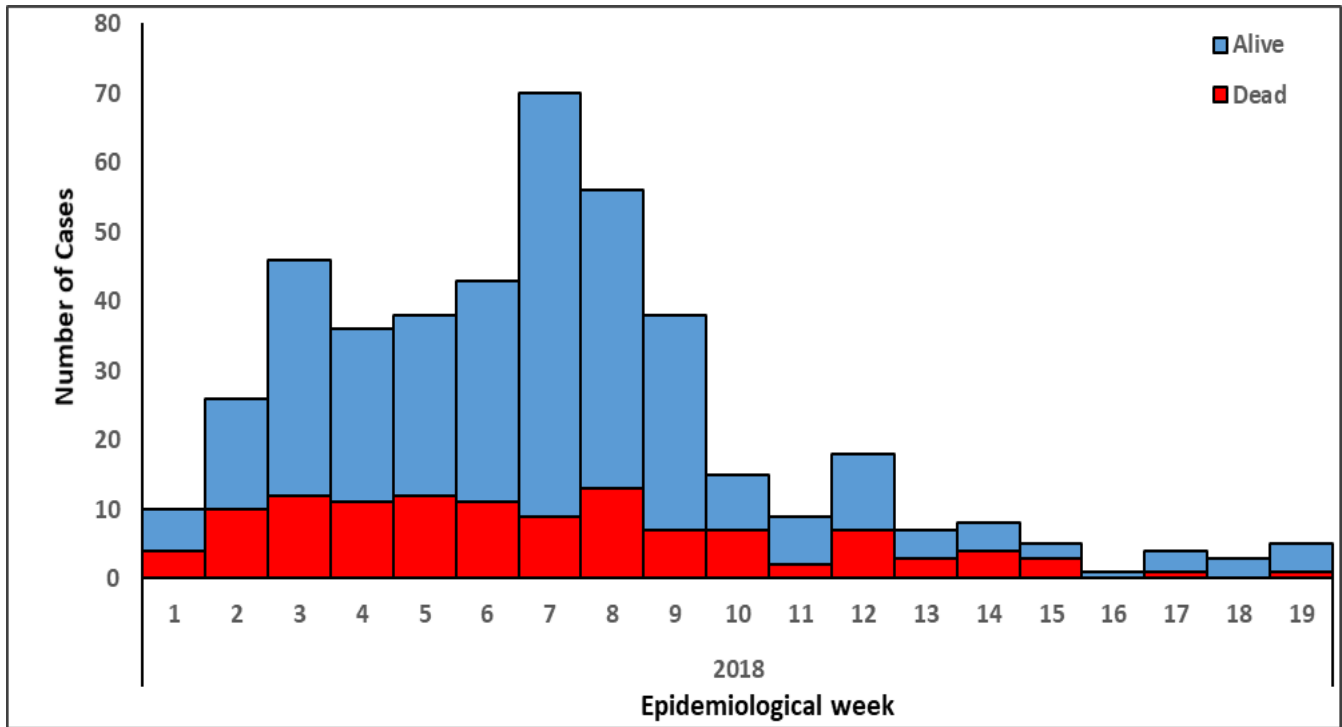


Figure 3. Epicurve of Lassa fever Confirmed (428) and Probable (10) Cases in Nigeria week 1- 19, 2018

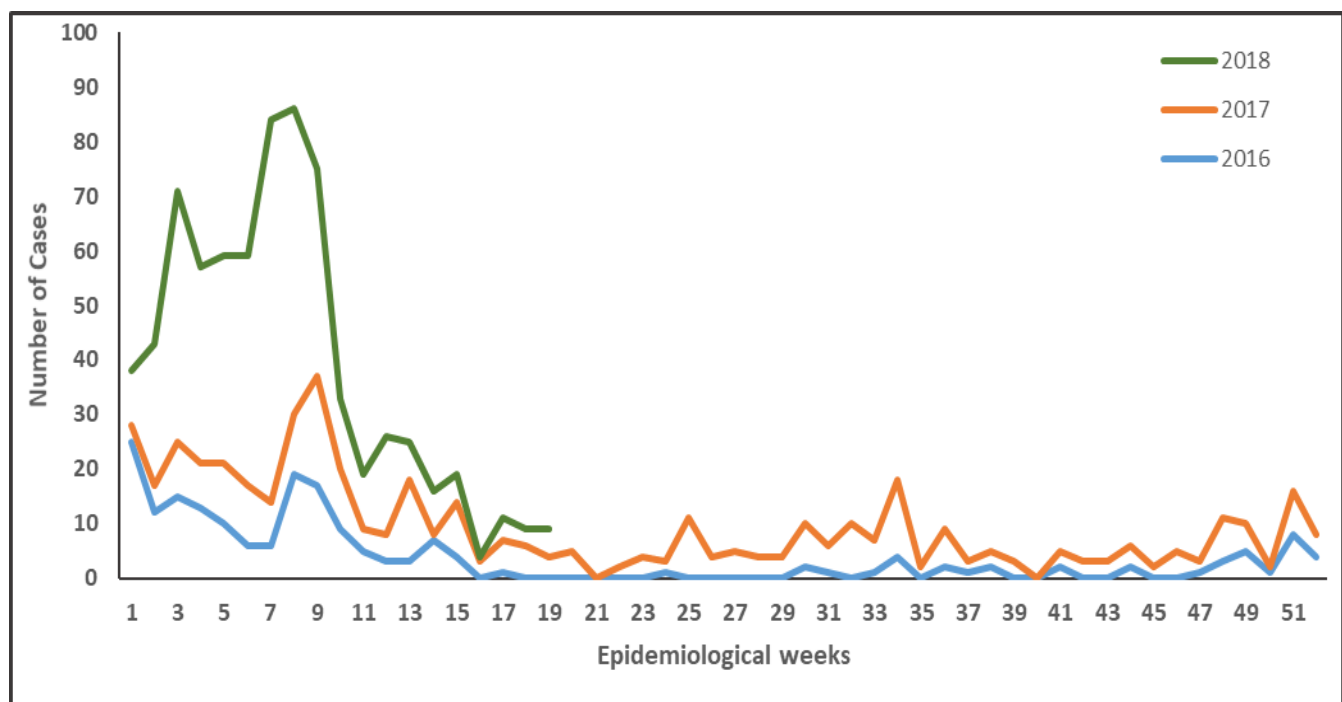


Figure 4. Trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018

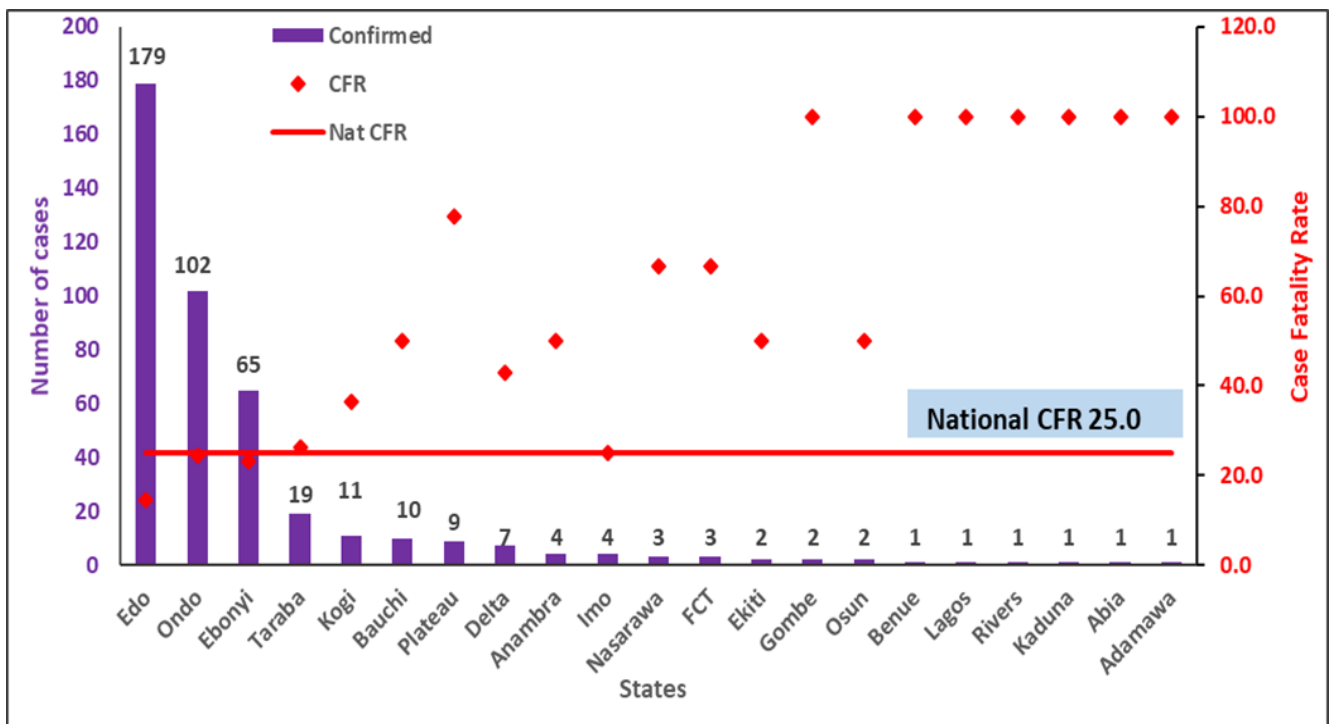


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 13<sup>th</sup> May 2018

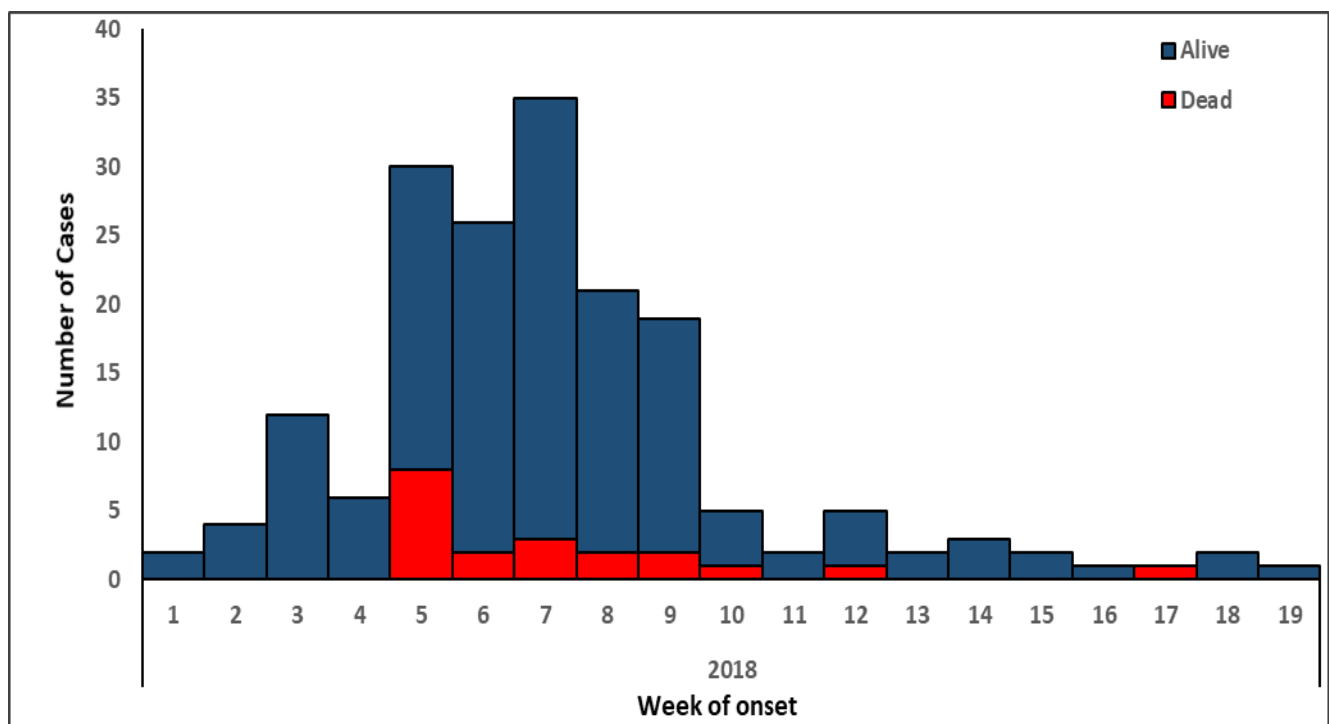


Figure 6: Epicurve of confirmed cases Lassa fever in Edo State week 1-19, 2018

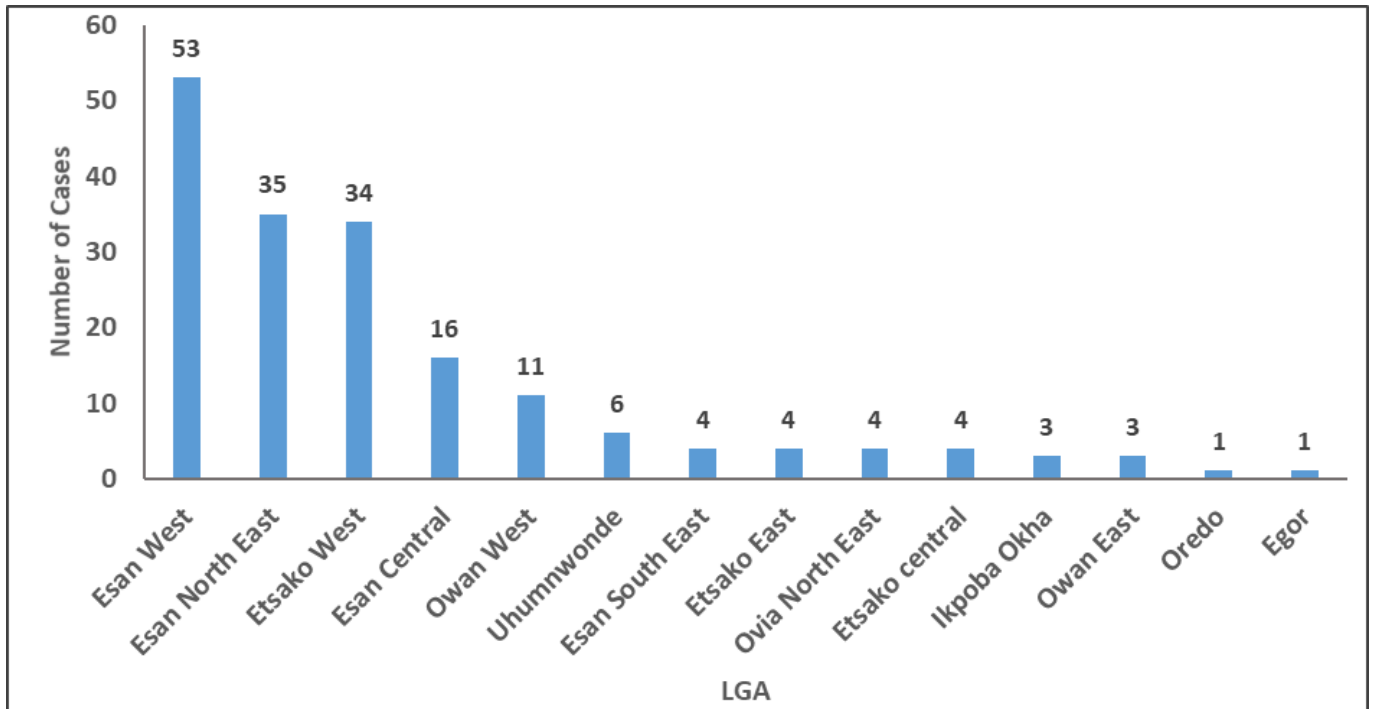


Figure 7: Distribution of Lassa fever confirmed cases in Edo State by LGA as at 13<sup>th</sup> of May 2018

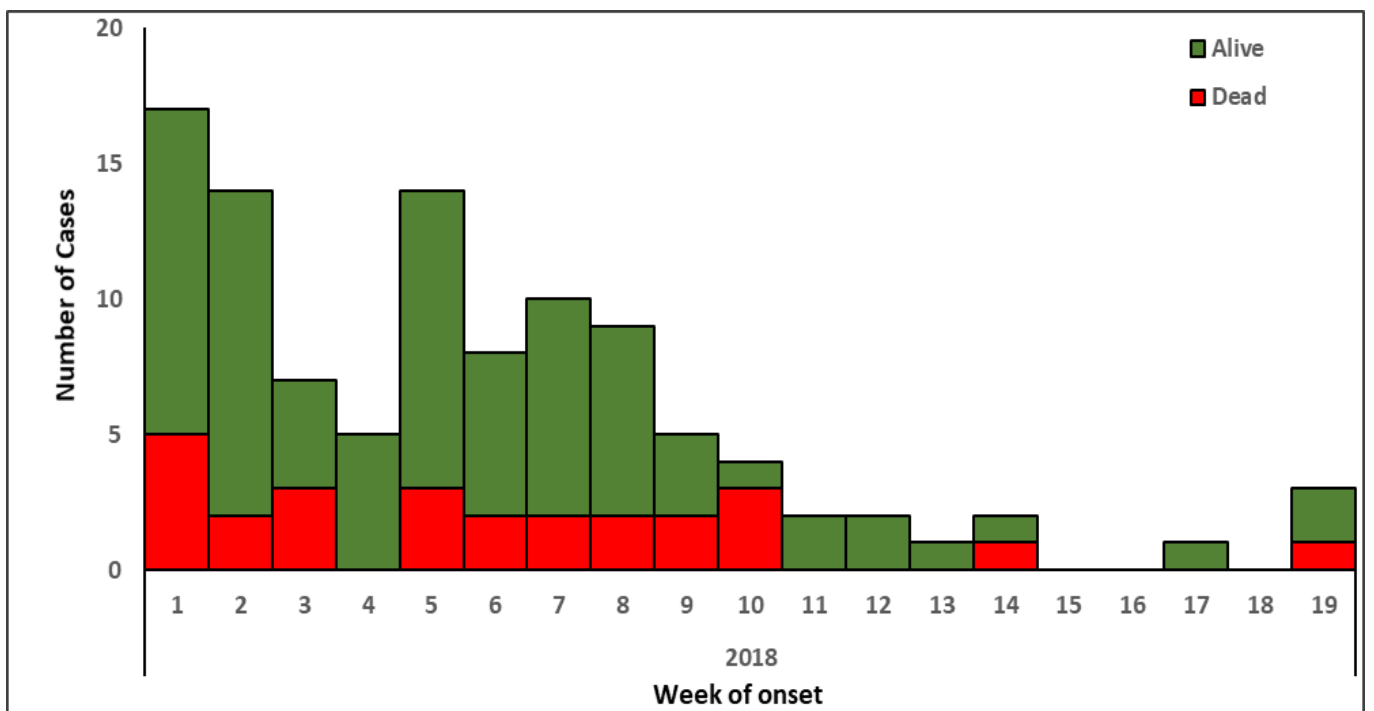


Figure 8: Epicurve of Lassa fever confirmed cases in Ondo State week 1- 19, 2018

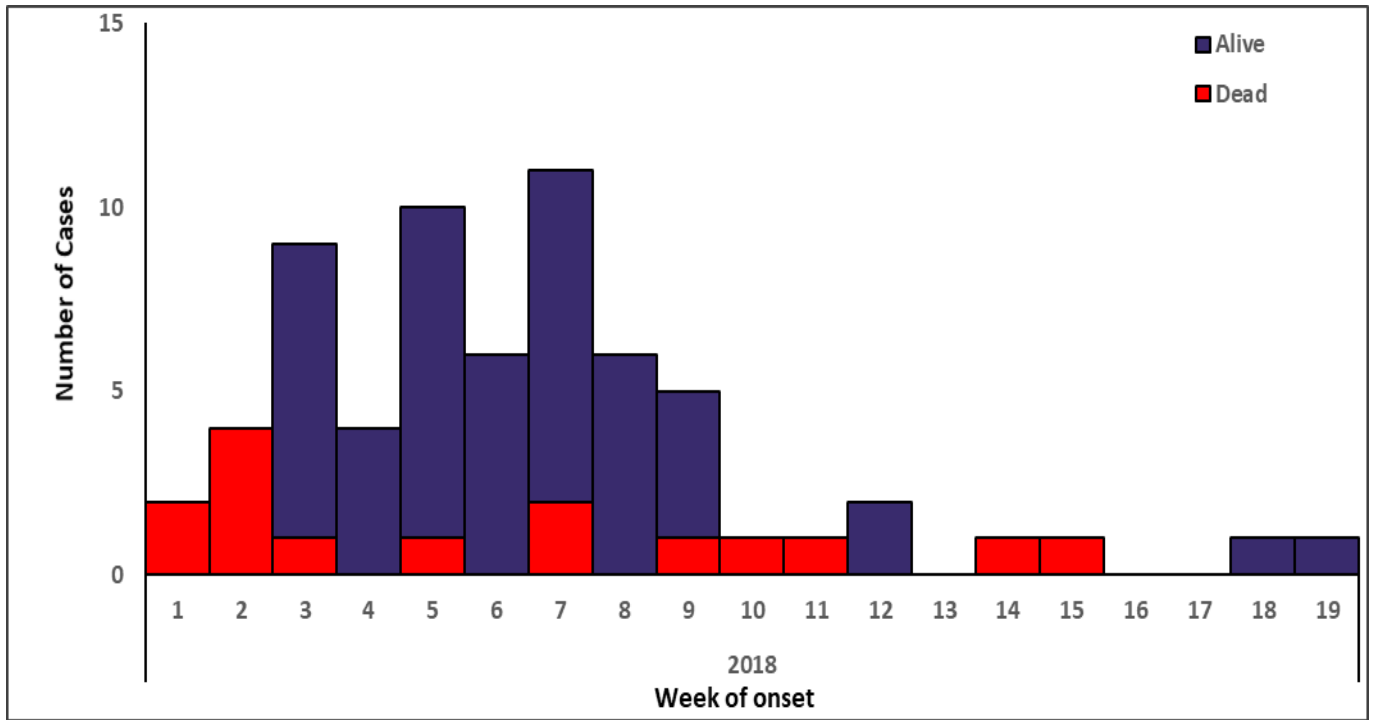


Figure 9: Epicurve of Lassa fever confirmed cases in Ebonyi State week 1-19, 2018

<sup>i</sup>Suspected 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.

<sup>ii</sup>Any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)

<sup>iii</sup>Any suspected case (see definition above) who died without collection of specimen for laboratory testing

<sup>iv</sup>“Active” means where there has been at least one confirmed case, and contacts within 21 days post exposure