



Highlight/key priorities

- The Lassa fever (LF) outbreak is currently activeⁱ in **nine states** (Ogun, Bauchi, Plateau, Ebonyi, Ondo, Edo, Taraba, Nasarawa and Rivers) – *Figure 1*
- Since its onset in Dec. 2016 (Week 49), a total of 196 suspectedⁱⁱ cases with 40 deaths have been reported. Of these, **Fifty-eight (58) have been either classified as confirmedⁱⁱⁱ or probable^{iv}** (confirmed = 53, probable =5), with 31 deaths (26 deaths in confirmed and 5 in probable).
- **Case Fatality Rate for confirmed/probable cases is 53.4%** and 20.4% for all cases (including probable/confirmed and suspected).
- **In the last reporting Week 6 (Feb. 4 – 10, 2017), twelve (12) suspected cases were reported with nine (9) laboratory confirmed cases including two (2) deaths.** The new laboratory confirmed cases were in Edo (1), Ondo (2), Bauchi (1), Ogun (1), Nasarawa (2) and Ebonyi (2). Five of the confirmed cases - Edo (1), Ondo (2) and Ebonyi (2) - are currently receiving treatment.
- The two (2) deaths in confirmed were recorded from 2 states: Bauchi state (1) and Ebonyi state (1).
- Taraba state reported seven (7) additional confirmed cases with 5 deaths that were not previously reported.
- A total of five (5) suspected cases, have pending results – Nasarawa (3) and Taraba (2).
- The NCDC team deployed to Ondo state last week have been able to support the State in coordinating case management of patients and have carried out training on use of IPC measures amongst healthcare workers.

Outbreak summary

		Ogun	Taraba	Rivers	Nasarawa	Edo	Ondo	Bauchi	Ebonyi	Plateau	TOTAL
1	Cases										
2	New laboratory confirmed	1	0	0	2	1	2	1	2	0	9
3	Probable Cases	3	2	0	0	0	0	0	0	0	5
4	New Suspected	1	1	0	3	1	2	1	3	0	12
5	Rumour under investigation	0	0	0	0	0	0	0	0	0	0
6	Total laboratory confirmed	3	15	1	8	7	6	3	5	5	53
7	Total suspected cases (including pending laboratory result and unknown)	9	25	3	13	70	9	4	3	2	138
8	Total cases reported (confirmed + probable + suspected)	15	42	4	21	77	15	7	8	7	196
9	Total number currently in treatment facility	0	4	2	2	2	2	2	3	2	19
10	Deaths										
11	Newly Reported	0	0	0	0	0	0	1	1	0	2
12	Total deaths in confirmed cases	2	6	0	4	4	3	2	1	4	26
13	Total Deaths in probable cases	3	2	0	0	0	0	0	0	0	5
14	Total deaths in suspected cases	0	4	0	0	0	2	0	2	1	9
15	Total Deaths	5	12	0	4	4	5	2	3	5	40

Source: NCDC Lassa fever response working group (as at February 10, 2017)

Response

- Coordination
 - NCDC Lassa fever response working group is leading coordination of weekly Lassa fever review meeting in conjunction with partners (WHO, CDC, UMB)
 - Reports are shared with the National Surveillance and Outbreak Response Committee weekly for prompt decisions
- Case management, Infection Prevention and control
 - Confirmed cases are being treated at identified treatment/isolation centres across the states with Ribavirin and necessary supportive management also instituted
 - The NCDC team deployed to Ondo state last week have been able to support the State in coordinating case management of patients and have carried out training on use of IPC measures amongst healthcare workers
- Surveillance
 - Contact tracing is ongoing in affected states through state epidemiologist, led by NCDC staff, supported by NFELTP residents
 - Enhanced surveillance is ongoing in all affected states
 - Line listing of cases reported across all the states is ongoing, updated per time and uploaded on the VHF management database
- Laboratory
 - Of five laboratories with PCR capability only three (LUTH, Irrua Specialist Teaching Hospital and UCH) are currently involved in laboratory confirmation of cases in the ongoing outbreak
- Logistics
 - NCDC distributed commodities to Bauchi State (Ribavirin injections and tablets, PPEs and body bags) and Edo State (Ribavirin injections, PPEs and hypochlorite)
- Communication and social mobilization
 - NCDC had a media chat session with media houses providing updates on current Lassa fever outbreak and coordination of responses activities at the States level. Media support was also solicited for accurate dissemination of the outbreak updates.
 - NCDC is continuing social media campaign for LF in the reporting week 6 through her dedicated Twitter and Facebook channels
 - NCDC jingles on identification of LF will continue to air via Federal Radio Corporation of Nigeria (FRCN) and other media houses during the course of the month, courtesy University of Maryland (UMB) and CDC

Actions to be completed

- Updating of VHF case-based management database especially for states with missing epidemiological data
- Printing of IEC materials in advance of advocacy meeting with media
- Dissemination of targeted IEC materials to frontline healthcare workers in all the states

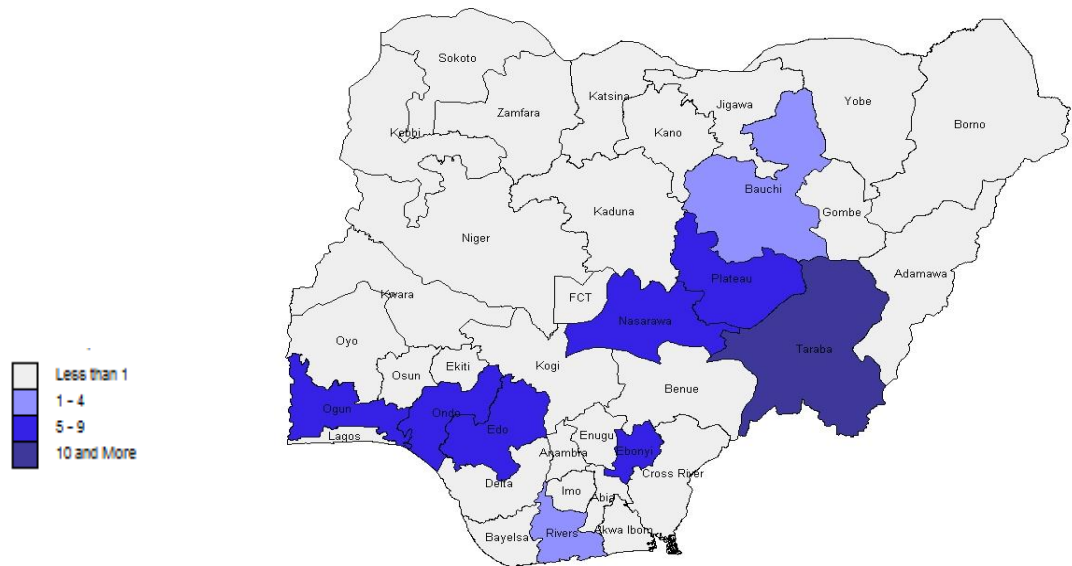


Figure 1. States reporting Lassa fever cases - Dec. 2016 to Feb. 2017 (updated as at Feb. 10 2017), N = 58

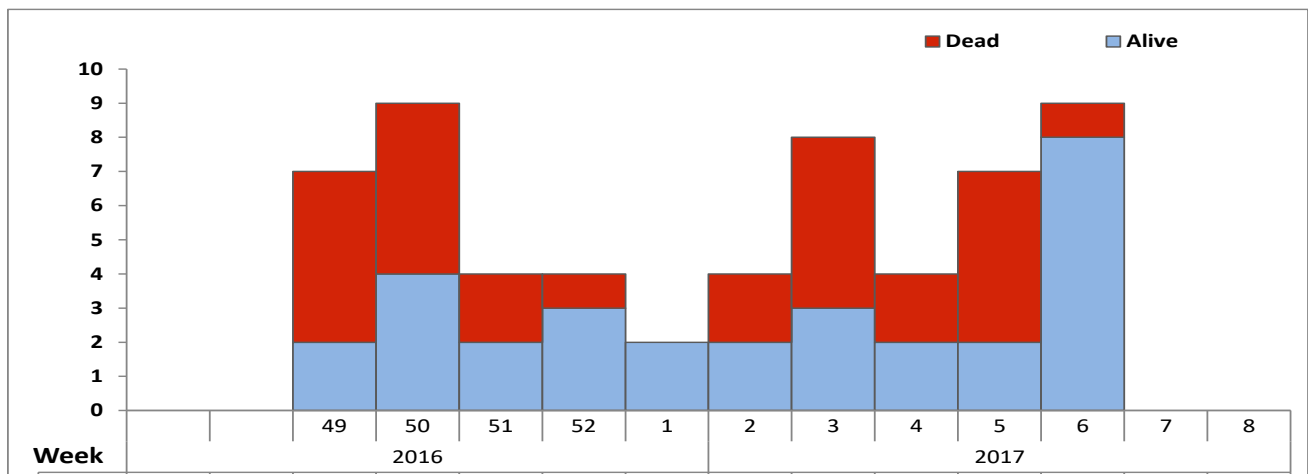


Figure 2. Cases of Lassa fever by epidemiological week in Nigeria - Dec. 2016 to Feb. 2017 (updated as at Feb. 10 2017), N = 58

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

ii 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.

iii Any 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