



# SITUATION REPORT

## Nigeria Centre For Disease Control (NCDC)

www.ncdc.gov.ng

PLOT 800 EBITU UKIWE STREET, JABI ABUJA, NIGERIA. TOLL FREE CALL: 0800-970000-10. E: info@ncdc.gov.ng

@NCDCgov

<b>TITLE:</b>	<b>2019 LASSA FEVER OUTBREAK SITUATION REPORT</b>
<b>SERIAL NUMBER:</b>	<b>24</b>
<b>EPI-WEEK:</b>	<b>24</b>
<b>DATE:</b>	<b>16<sup>th</sup> June 2019</b>

### HIGHLIGHTS

- In the reporting Week 24 (10<sup>th</sup> – 16<sup>th</sup> June, 2019) **four** new confirmed<sup>i</sup> cases were reported from two states – Edo(2) and Ondo(2) states with **one** new death from Ondo state
- From 1<sup>st</sup> January to 16<sup>th</sup> June, 2019, a total of 2763 **suspected<sup>i</sup>** cases have been reported from 22 states. Of these, **591 were confirmed positive**, 15 probable and 2157 negative (not a case)
- Since the onset of the 2019 outbreak, there have been **132** deaths in confirmed cases. Case fatality ratio in confirmed cases is 22.3%
- Twenty-two (22) States (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Plateau, Taraba, FCT, Adamawa, Gombe, Kaduna, Kwara, Benue, Rivers, Kogi, Enugu, Imo, Delta, Oyo, Kebbi, Cross River and Zamfara) have recorded at least one confirmed case across 83 Local Government Areas -*Figure 1*
- 92% of all confirmed cases are from Edo(36%), Ondo(28%), Ebonyi(8%), Bauchi(7%), Taraba(7%) and Plateau(6%) states- *Figure 1*
- Predominant age-group affected is 21-40 years (Range: >1 month to 97 years, Median Age: 37 years) - *Figure 6*
- The male to female ratio for confirmed cases is 1.2:1 - *Figure 6*
- In the reporting week 24, no new health care worker was affected. A total of **eighteen health care workers** have been infected since the onset of the outbreak in nine States – Edo (7), Ondo (3), Ebonyi (2), Enugu (1), Rivers (1), Bauchi (1) Benue (1), Plateau (1) and Kebbi(1) with two deaths in Enugu and Edo States
- Three (3) patients are currently being managed at various treatment centres across the country: Irrua Specialist Teaching Hospital(ISTH) treatment Centre (2) and Federal Medical Centre, Owo (1)
- A total of **7566** contacts have been identified from 22 States. Of these 473(6.3%) are currently being followed up, 7017(92.7%) have completed 21 days follow up, while 12(0.2%) were lost to follow up. 126(1.7%) symptomatic contacts have been identified, of which **64(0.8%)** have tested positive
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate response activities at all levels

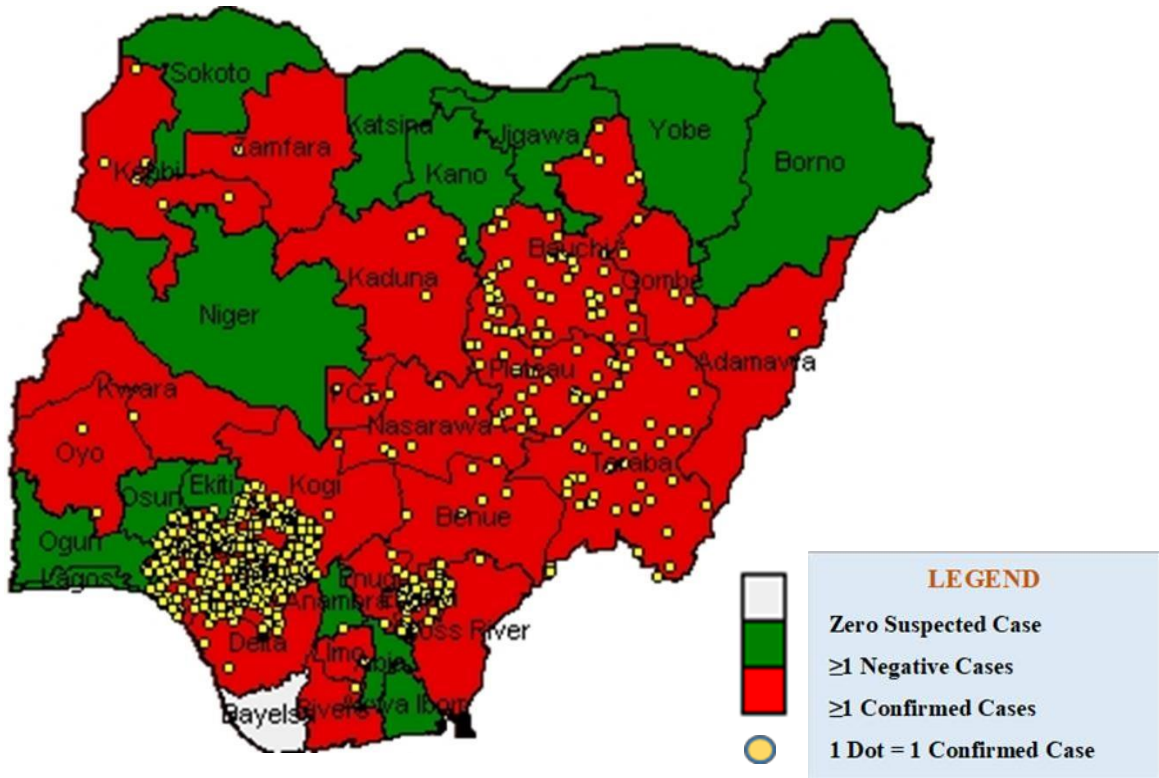


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 16<sup>th</sup> June, 2019

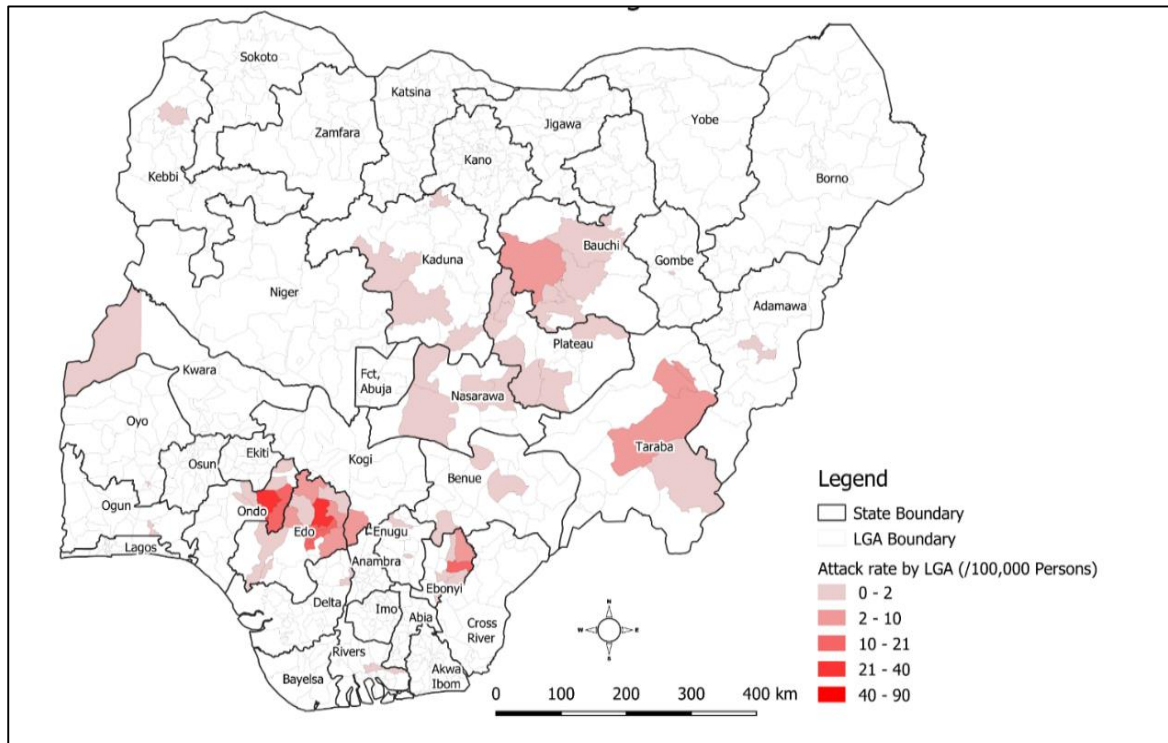


Figure 2. LGA attack rate of confirmed Lassa fever cases in Nigeria as at 16<sup>th</sup> June, 2019

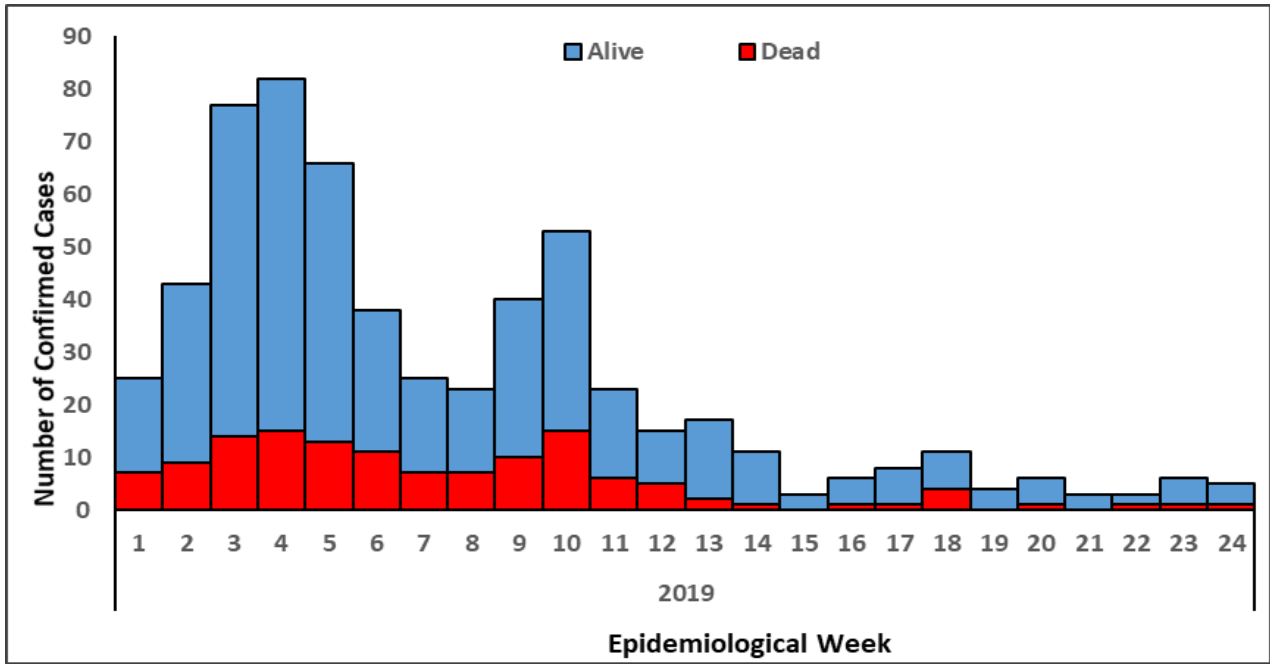


Figure 3. Epicurve of Lassa fever Confirmed Cases (591) in Nigeria - week 01-24, 2019

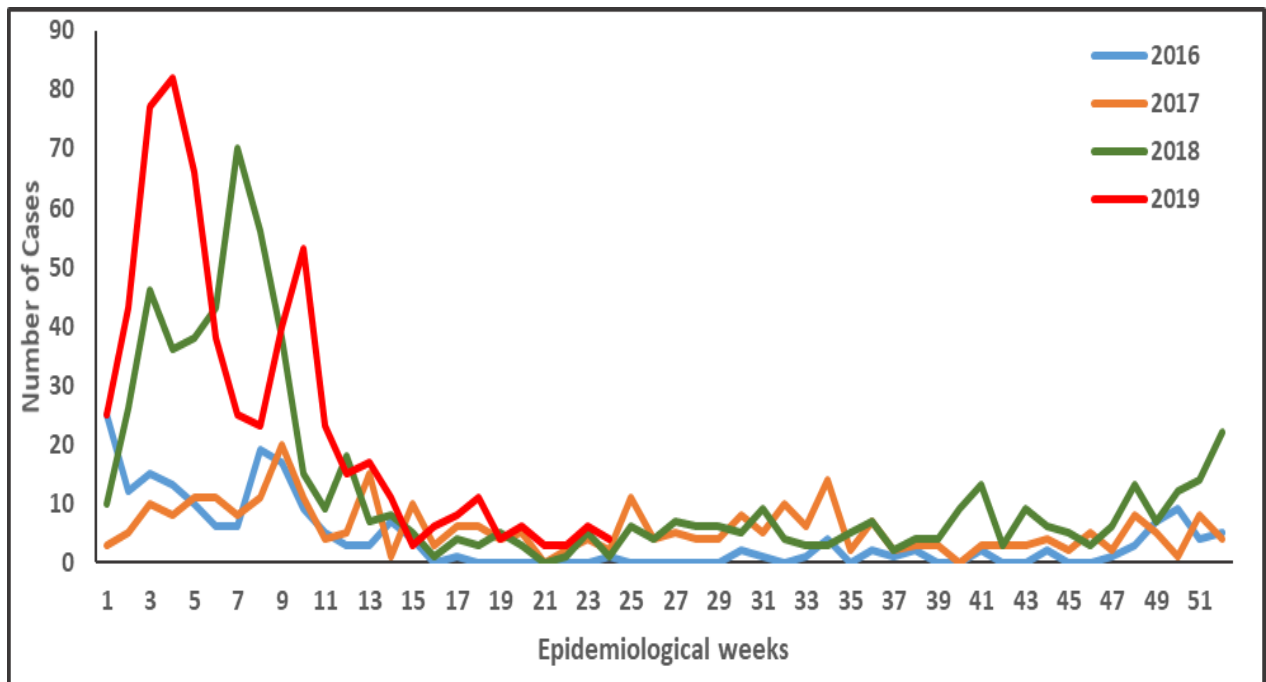


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016/week 01-2019/week 24

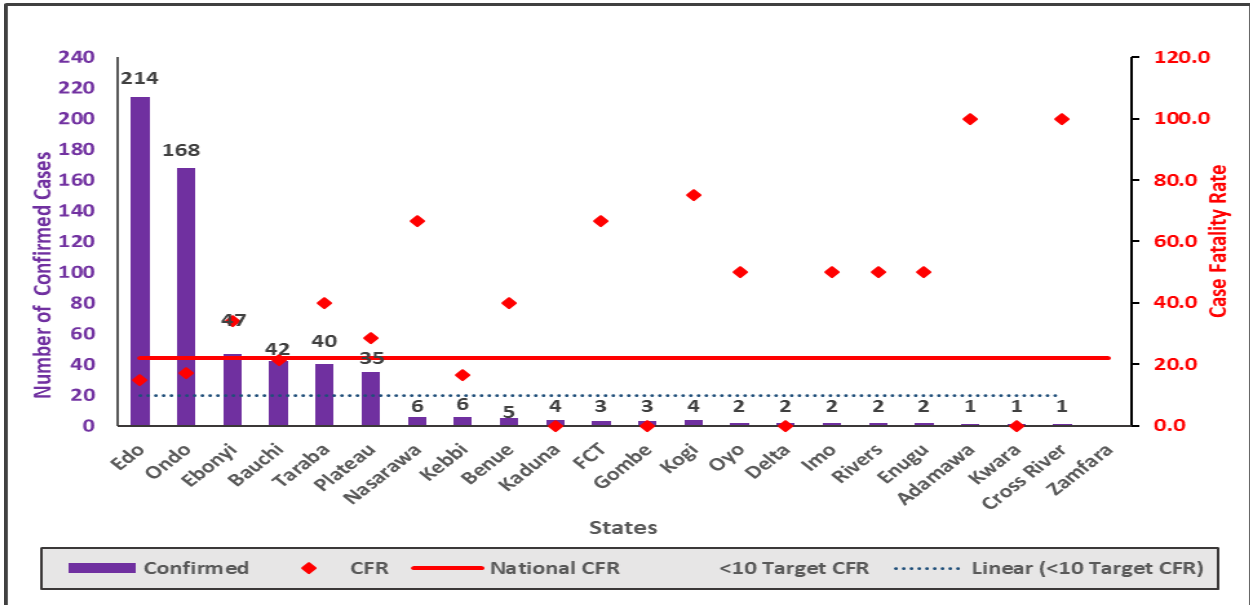


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 16<sup>th</sup> June, 2019

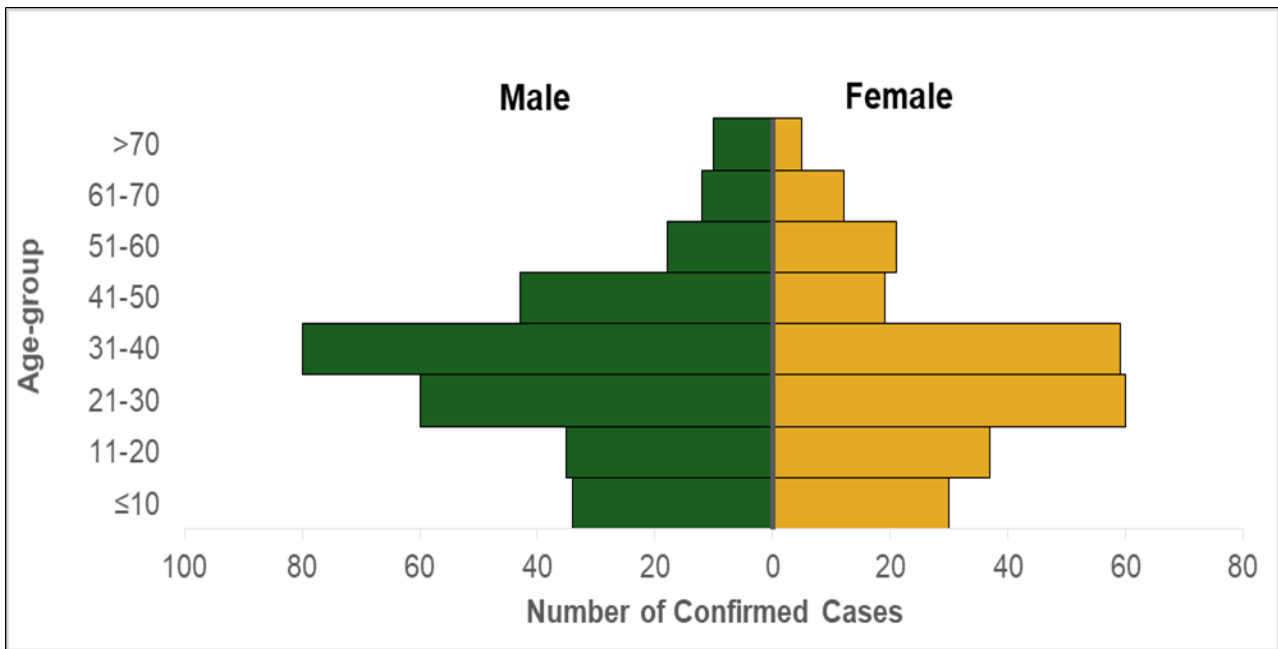


Figure 6. Age-Sex distribution of Confirmed Lassa fever cases in Nigeria as at 16<sup>th</sup> June, 2019

<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

**Disclaimer – 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>**