



Lassa fever Situation Report

Epi Week 39: 26 September – 2 October 2022

Key Points

Table 1: Summary of current week (39), cumulative from Epi week 1–39, 2022 and comparison with previous year (2021)

Reporting Period	Suspected cases	Confirmed cases	Probable cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases)
Current week (week 39)	85	4	0	1	25.0%	State(s): 2 LGA(s): 3
2022 Cumulative (week 39)	6854	933	37	173	18.5%	State(s): 25 LGA(s): 102
2021 Cumulative (week 39)	3208	382	3	87	22.8%	State(s): 14 LGA(s): 60

Highlights

- In week 39, the number of new confirmed cases decreased from 6 cases reported in week 38, 2022 to 4 cases. These were reported from Ondo and Enugu States (Table 3)
- Cumulatively from week 1 to week 39, 2022, 173 deaths have been reported with a case fatality rate (CFR) of 18.5% which is lower than the CFR for the same period in 2021 (22.8%)
- In total for 2022, 25 States have recorded at least one confirmed case across 102 Local Government Areas (Figures 2 and 3)
- Of all confirmed cases, 71% are from Ondo (32%), Edo (26%), and Bauchi (13%) States.
- The predominant age group affected is 21-30 years (Range: 0 to 90 years, Median Age: 30 years). The male-to-female ratio for confirmed cases is 1:0.8 (Figure 4)
- The number of suspected cases has increased compared to that reported for the same period in 2021
- No new Healthcare worker affected in the reporting week 39
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels

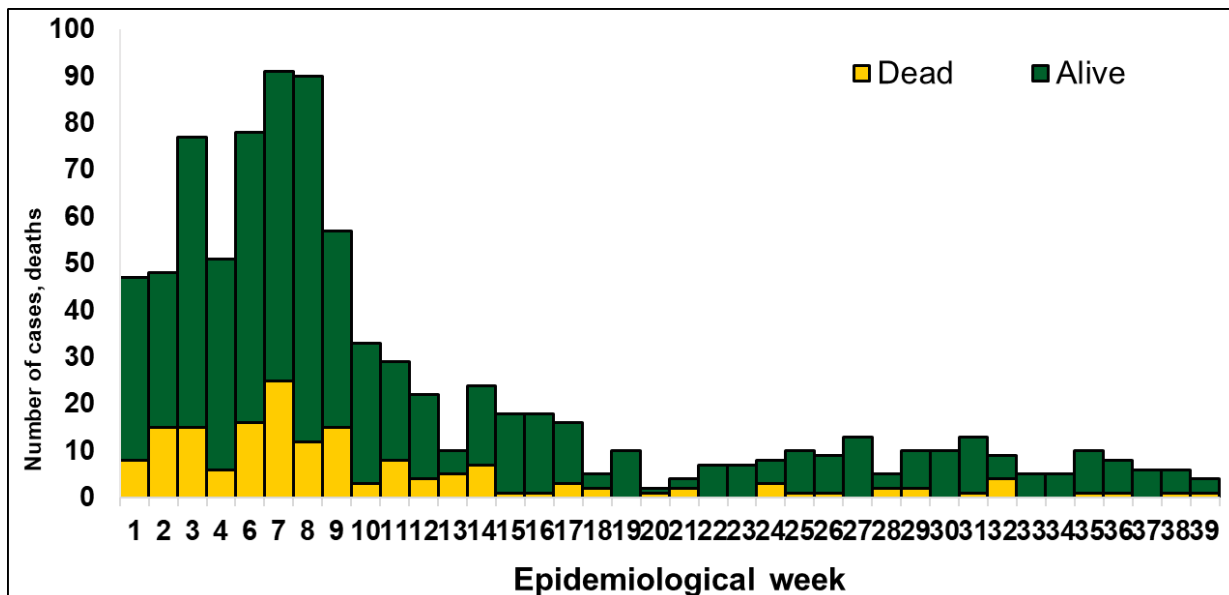


Figure 1. Confirmed Lassa fever cases in Nigeria epidemiological week 1-39, 2022

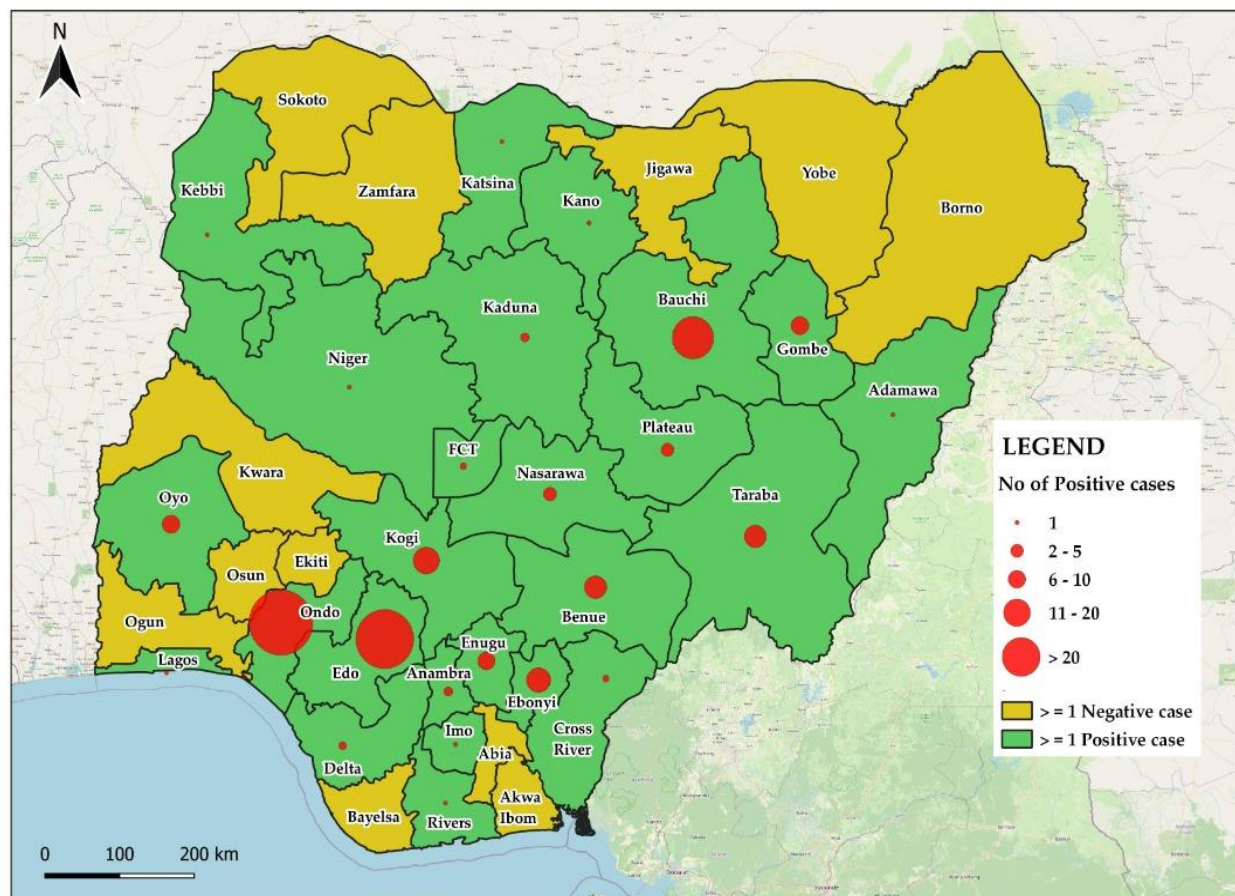


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 39, 2022

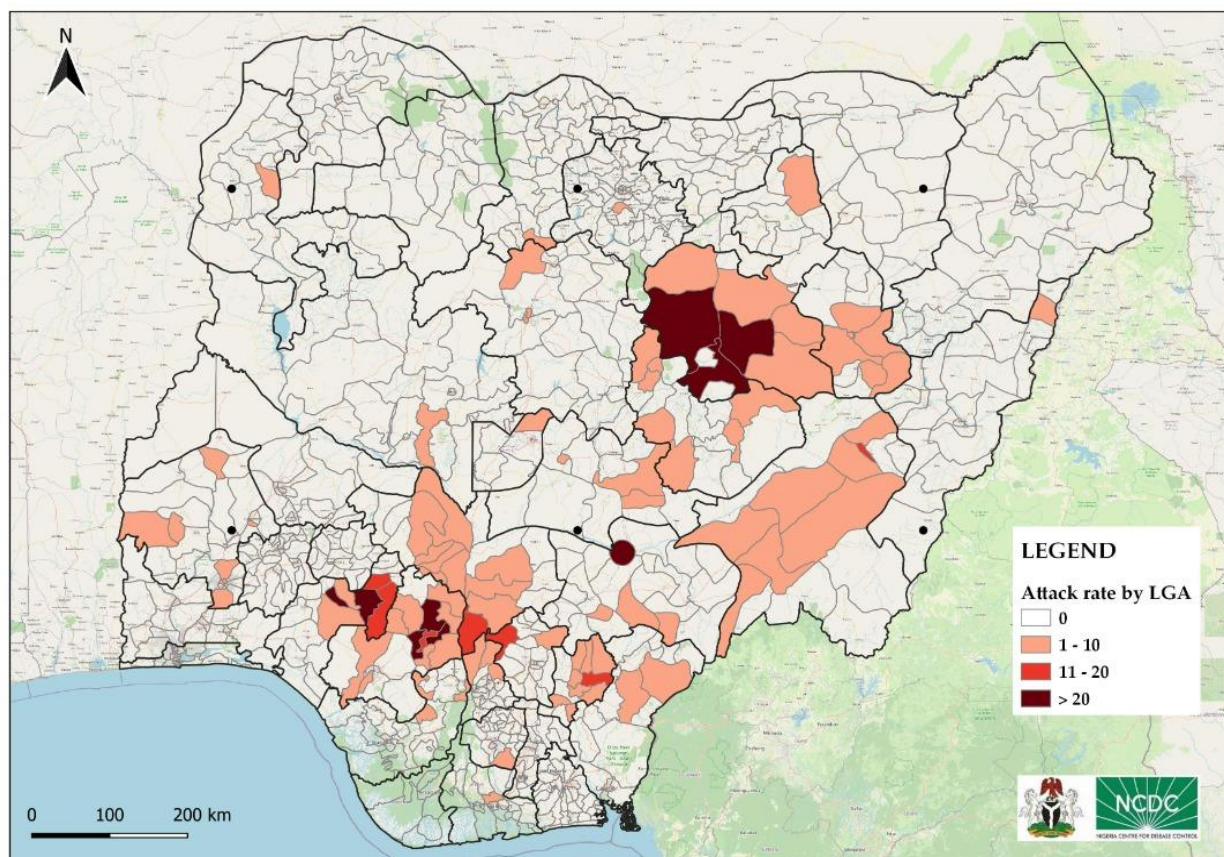


Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 39, 2022

Table 2: Key indicators for current week 2022 and trend compared to previous week, Nigeria

Symptomatic contacts	Number for current week	Trend from previous week	Cumulative number for 2022
Probable cases	0	↔	37
Health Care Worker affected	0	↔	55
Cases managed at the treatment centres	4	↓	853
Contact tracing			
Cumulative contact listed	0	↔	3467
Contacts under follow up	13	↓	13
Contacts completed follow up	0	↓	3394
Symptomatic contacts	0	↔	101
Positive contacts	0	↔	49
Contacts lost to follow up	0	↔	11

Key

- ↑ Increase
- ↓ Decrease
- ↔ No difference

Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2022

States	Current week: (Week 39)					Cumulative (Week 1 - 39)					
	Cases				Deaths (Confirmed Cases)	Cases				Deaths (Confirmed Cases)	
	Suspected	Confirmed	Trend	Probable		HCW*	Suspected	Confirmed	Probable		HCW*
1 Ondo	20	3	▼			1	1361	303		11	54
2 Edo	31						2620	238		3	29
3 Bauchi	14		▼				830	121		26	12
4 Kogi	1						136	48			8
5 Ebonyi	4						257	41	1	3	19
6 Benue	2						272	35	2	3	8
7 Taraba							98	34	3	1	14
8 Gombe							246	24	8	2	8
9 Enugu	1	1	▲				96	22		1	3
10 Oyo							116	21	14	4	4
11 Nasarawa	1						116	12	5		6
12 Plateau							79	10			
13 Anambra	6						33	5			1
14 Kaduna							93	4	3	1	3
15 Delta	1						75	3			
16 FCT	1						58	2			
17 Cross River	2						15	2			1
18 Imo							55	1			
19 Adamawa							16	1			
20 Niger							13	1			
21 Kebbi	1						7	1			
22 Lagos							46	1			1
23 Kano							38	1			1
24 Katsina							17	1			1
25 Rivers							11	1			
26 Zamfara							5				
27 Sokoto							3				
28 Akwa Ibom							8				
29 Osun							8		1		
30 Yobe							28				
31 Ekiti							2				
32 Abia							20				
33 Borno							19				
34 Bayelsa							8				
35 Jigawa							9				
36 Ogun							20				
37 Kwara							14				
Total	85	4	▼	0	0	1	6848	933	37	55	173

Key	
▼	Decrease
▲	Increase

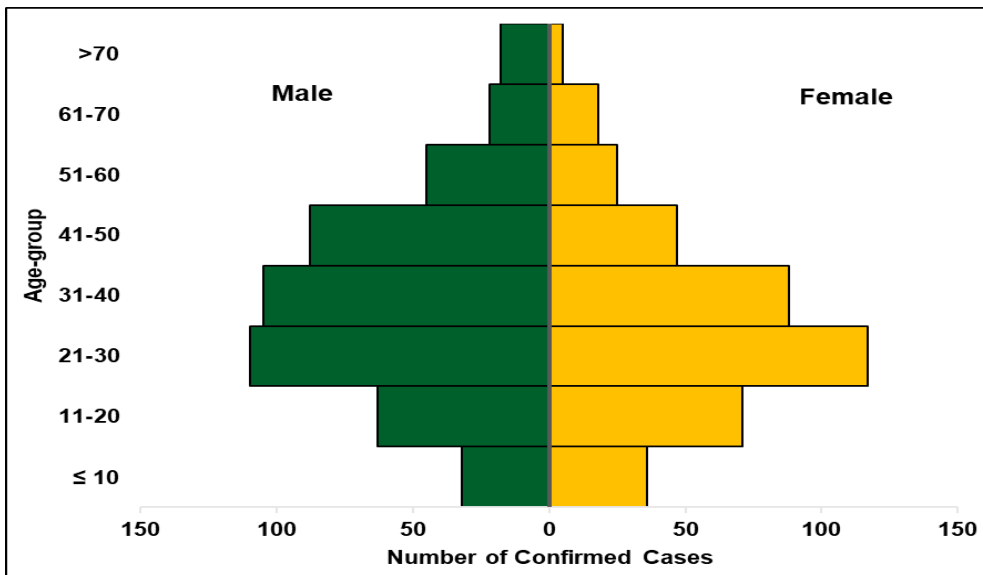


Figure 4. Age and sex pyramid showing the number of confirmed Lassa fever cases for 2022

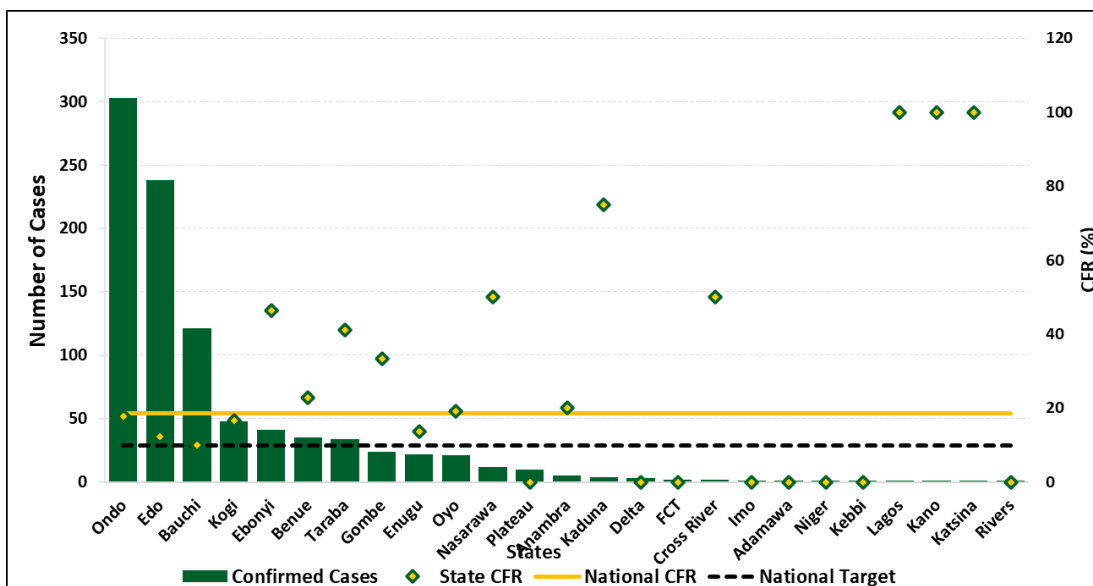


Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 39, 2022

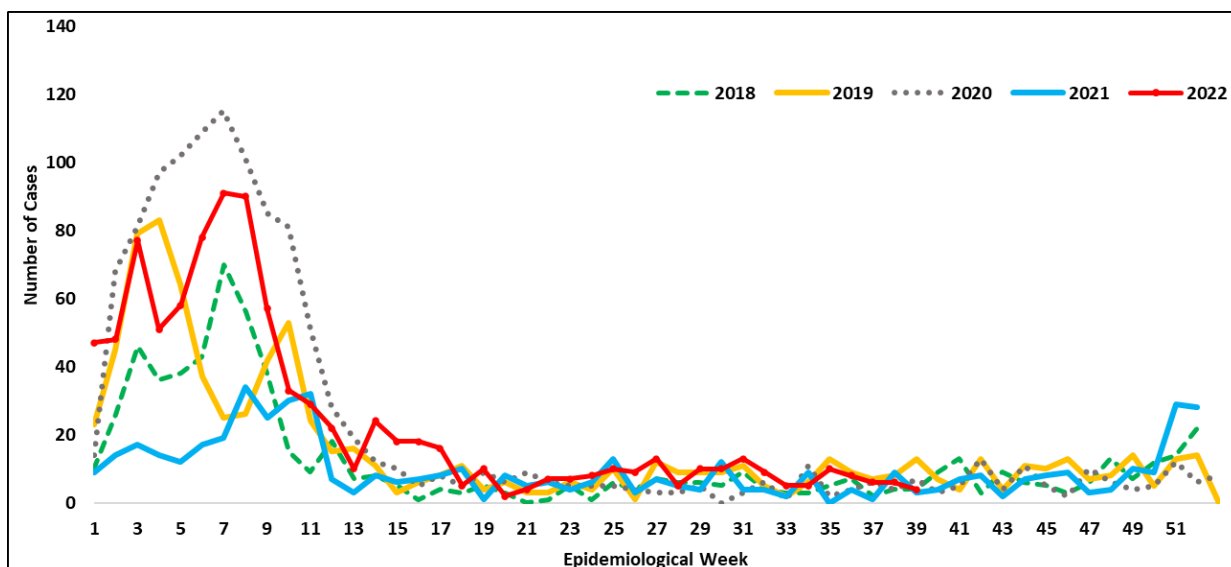


Figure 6: Trend of confirmed cases by epidemiological week, 2018– 2022, Nigeria

Response activities

- Lassa fever alert letters sent to States at the onset of outbreak
- Lassa fever preparedness assessment carried out for 36 States and FCT at the onset of the outbreak
- The 2022 National Emergency Operations Centre response mode was activated in January 2022 and de-escalated in May 2022
- Lassa fever TWG continues to provide effective multi-sectoral, multi-disciplinary coordination of Lassa fever response
- State Public Health Emergency Operations Centre activated in affected States
- The Eight Lassa fever molecular laboratories in the NCDC network are working full capacity to ensure that all samples are tested, and results provided within the shortest turnaround time
- Confirmed cases are treated at designated treatment centres across the states
- Dissemination of reviewed case management and safe burial practices guidelines
- Dissemination of reviewed Infection Prevention and Control (IPC) guideline and health facility IPC advisory
- Risk communications and community engagement activities have been scaled up across states using television, radio, print, social media and other strategies
- Implementation of Lassa fever environmental response campaign in high burden states by Federal Ministry of Environment
- Distribution of medical response commodities to states and treatment centre
- Engagement of adhoc data clerks to upload case management data on SORMAS
- Deployment of National Rapid Respond Teams (NRRT) deployment to Nasarawa, FCT, Edo, Ondo, Bauchi, Ebonyi, Oyo, Taraba, and Benue
- Coordinated sub-national Lassa fever surveillance and response intensive workshop
- Supported Federal Ministry of Health and ISTH Irrua, Edo State on training of health care workers for clinical management of Lassa fever
- Implementation of Nigeria Lassa fever epidemiological Study supported by CEPI
- Implementation of human centred design risk communication activities in most affected States

Notes on this report

Data Source

Information for this disease was case based data retrieved from the National Lassa fever Emergency Operations Centre.

Case definitions

- **Suspected case:** 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.
- **Confirmed case:** any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)
- **Probable case:** any suspected case (see definition above) who died or absconded without collection of specimen for laboratory testing
- **Contact:** Anyone who has been exposed to an infected person, or to an infected person's secretions, excretions, or tissues within three weeks of last contact with a confirmed or probable case of Lassa fever

Calculations

- Case Fatality Rate (CFR) for this disease is reported for confirmed cases only

VIRAL HAEMORRHAGIC FEVER QUICK REFERENCE GUIDE

For social mobilization https://ncdc.gov.ng/themes/common/docs/vhfs/83_1517222929.pdf
For LGA Rapid Response Team https://ncdc.gov.ng/themes/common/docs/vhfs/82_1517222811.pdf
Healthcare worker laboratory https://ncdc.gov.ng/themes/common/docs/vhfs/81_1517222763.pdf
For healthcare workers https://ncdc.gov.ng/themes/common/docs/vhfs/80_1517222586.pdf
For community informant https://ncdc.gov.ng/themes/common/docs/vhfs/79_1517222512.pdf

NATIONAL GUIDELINES FOR LASSA FEVER CASE MANAGEMENT

https://ncdc.gov.ng/themes/common/docs/protocols/92_1547068532.pdf

VIRAL HAEMORRHAGIC FEVER AND RESPONSE PLAN

https://ncdc.gov.ng/themes/common/docs/protocols/24_1502192155.pdf

NATIONAL GUIDELINE FOR INFECTION, PREVENTION AND CONTROL FOR VIRAL HAEMORRHAGIC FEVER

https://ncdc.gov.ng/themes/common/docs/protocols/24_1502192155.pdf

INFROMATION RESOURCE

Nigeria Centre for Disease Control: www.ncdc.gov.ng

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