



Lassa fever Situation Report

Epi Week 4: 23 – 29 January 2023

Key Points

Table 1: Summary of current week (4), cumulative Epi week 1-4, 2023 and comparison with previous year (2022)

Reporting Period	Suspected cases	Confirmed cases	Probable cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases)
Current week (week 4)	445	117	0	16	13.7%	State(s): 14 LGA(s): 39
2023 Cumulative (week 1-4)	1378	361	0	53	14.7%	State(s): 18 LGA(s): 67
2022 Cumulative (week 4)	981	211	0	40	19.0%	State(s): 14 LGA(s): 43

Highlights

- In week 4, the number of new confirmed cases decreased from 137 in week 3 2023 to 117 cases. These were reported from Ondo, Edo, Taraba, Bauchi, Ebonyi, Benue, Plateau, Nasarawa, Kano, Gombe, FCT, Delta, Enugu, and Kogi States (Table 3)
- Cumulatively from week 1 to week 4, 2023, 53 deaths have been reported with a case fatality rate (CFR) of 14.7% which is lower than the CFR for the same period in 2022 (19.0%)
- In total for 2023, 18 States have recorded at least one confirmed case across 67 Local Government Areas (Figures 2 and 3)
- Seventy-four (74%) of all confirmed Lassa fever cases were reported from these three states (Ondo, Edo and Taraba) while 26% were reported from 11 states with confirmed Lassa fever cases. Of the 74% confirmed cases, Ondo reported 36%, Edo 31%, and Taraba 7%
- The predominant age group affected is 21-30 years (Range: 1 to 93 years, Median Age: 30 years). The male-to-female ratio for confirmed cases is 1:0.9 (Figure 4)
- The number of suspected cases increased compared to that reported for the same period in 2022.
- One new Healthcare worker was affected in the reporting week 4
- National Lassa fever multi-partner, multi-sectoral Emergency Operations Centre (EOC) activated to coordinate the response activities at all levels

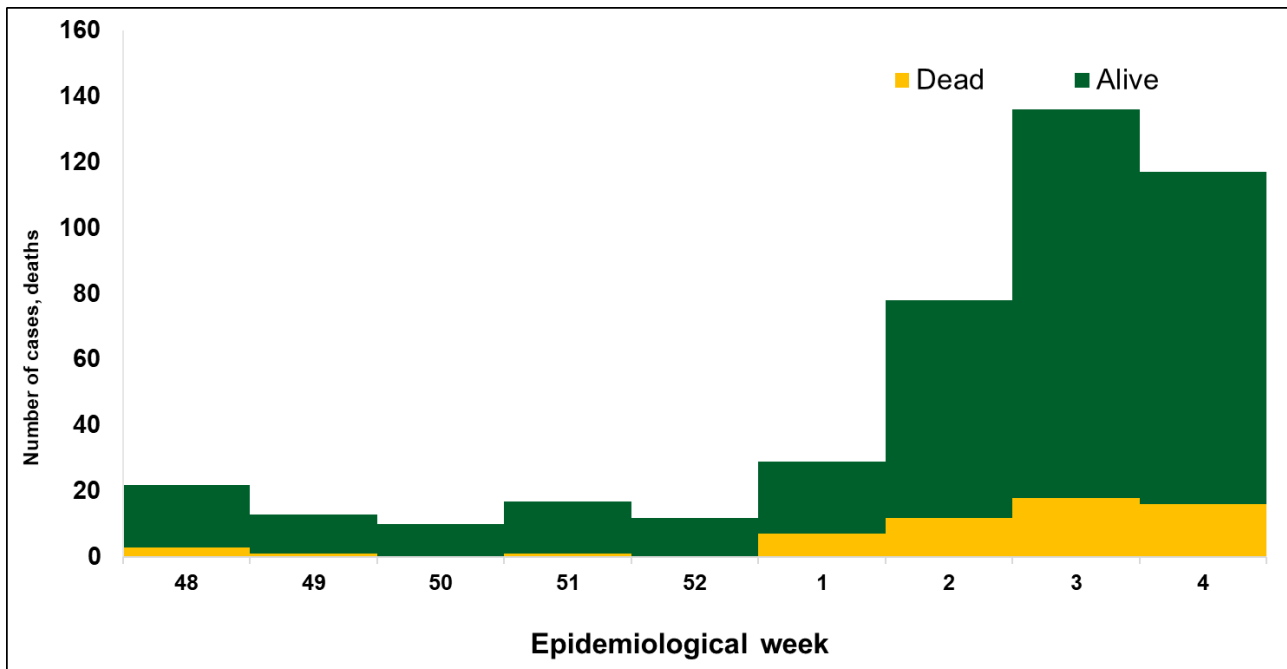


Figure 1. Confirmed Lassa fever cases in Nigeria epidemiological week 48, 2022 to week 4, 2023

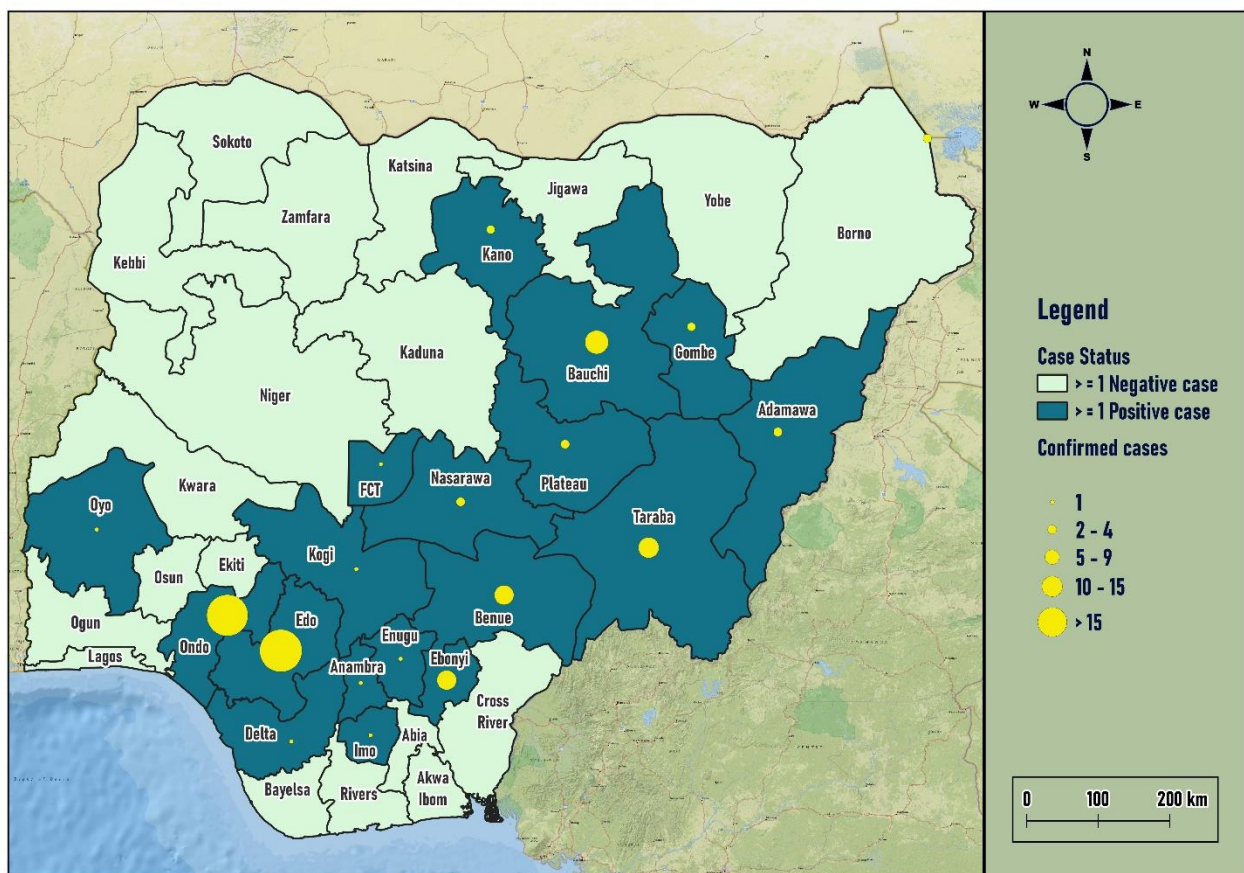


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 4, 2023

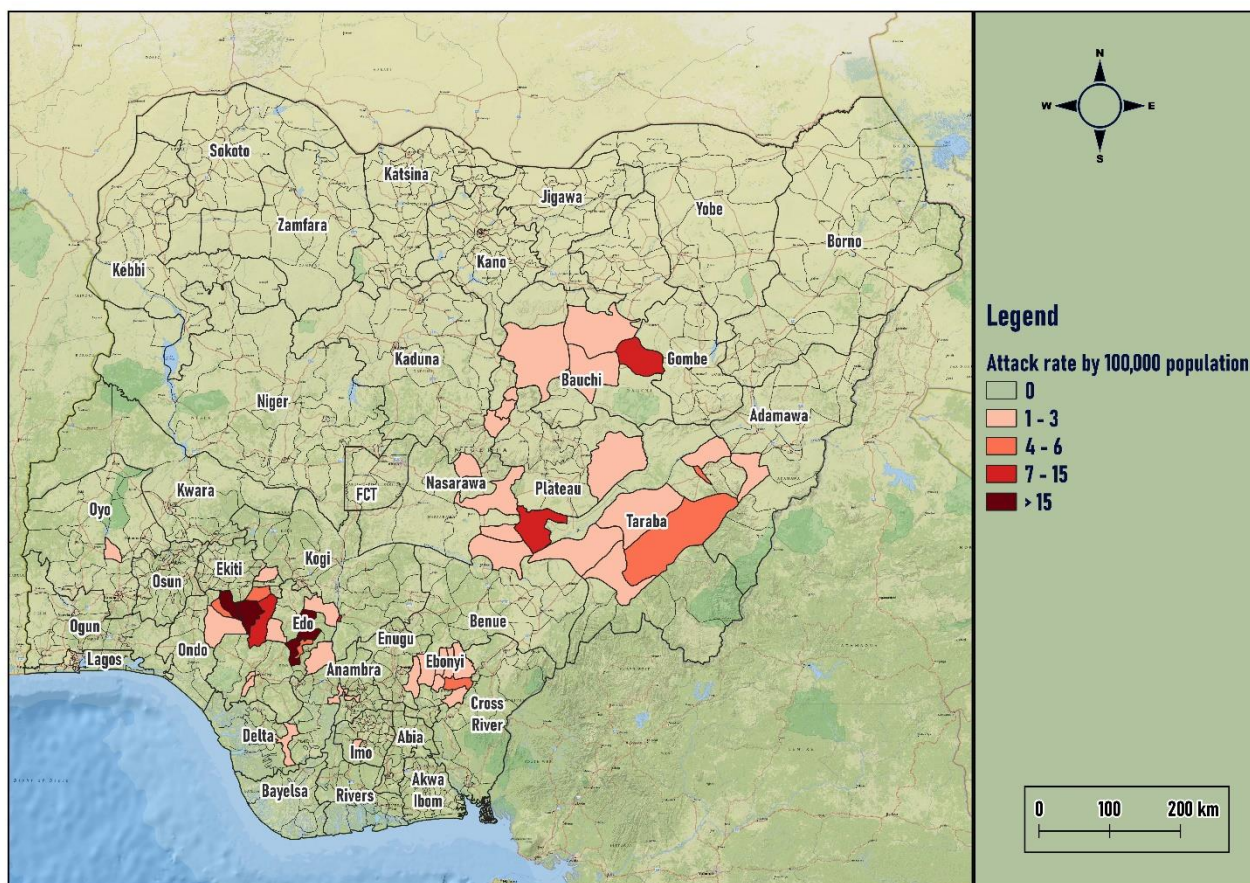


Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 4, 2023

Symptomatic contacts	Number for current week	Trend from previous week	Cumulative number for 2023
Probable cases	0	↔	0
Health Care Worker affected	1	↔	6
Cases managed at the treatment centres	101	↑	306
Contact tracing			
Cumulative contact listed	191	↑	1216
Contacts under follow up	861	↑	861
Contacts completed follow up	0	↔	355
Symptomatic contacts	0	↔	5
Positive contacts	2	↑	0
Contacts lost to follow up	0	↔	0

Table 2: Key indicators for current week 2023 and trend compared to previous week, Nigeria

Key

- ↑ Increase
- ↓ Decrease
- ↔ No difference

States	Current week: (Week 4)					Cumulative (Week 1 - 4)					
	Cases			Deaths (Confirmed Cases)	Probable HCW*	Cases			Deaths (Confirmed Cases)		
	Suspected	Confirmed	Trend			Suspected	Confirmed	Probable HCW*			
1 Ondo	142	40	▼		4	378	130		10		
2 Edo	148	25	▼		4	469	113	1	12		
3 Taraba	25	16	▲		3	55	26		14		
4 Bauchi	54	8	▲			165	21	3	3		
5 Benue	13	7	▲			31	16		1		
6 Ebonyi	15	7	▲		5	49	16		9		
7 Nasarawa	10	3	▼			49	10	1	1		
8 Plateau	5	4	▲	1		30	9	1			
9 Kogi	2	1	▼			14	5				
10 Kano	6	2	▲			14	2				
11 Anambra	2		▼			23	2		1		
12 Fct	5	1				34	2				
13 Delta	4	1				11	2				
14 Enugu	5	1				11	2				
15 Adamawa			▼			1	1				
16 Gombe	3	1	▲			5	1				
17 Oyo	1					3	1				
18 Imo						4	1		2		
19 Abia	1					1					
20 Bayelsa						1					
21 Akwa-Ibom						2					
22 Yobe	1					2					
23 Ekiti						1					
24 Niger						2					
25 Ogun						4					
26 Rivers						3					
27 Kwara						5					
28 Osun	1					3					
29 Kaduna	2					3					
30 Lagos						7					
31 Cross River						1					
Total	445	117	▼	0	1	16	1381	360	0	6	53

Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2023

Key	
▼	Decrease
▲	Increase

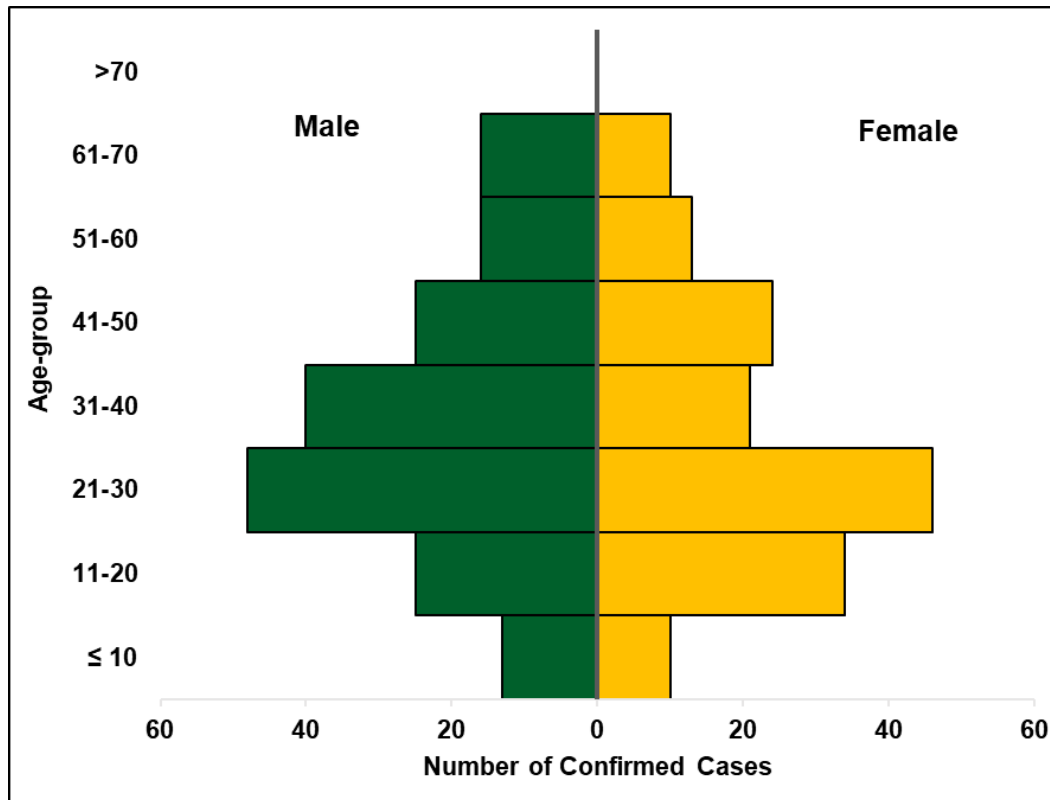


Figure 4. Age and sex pyramid showing the number of confirmed Lassa fever cases for 2023

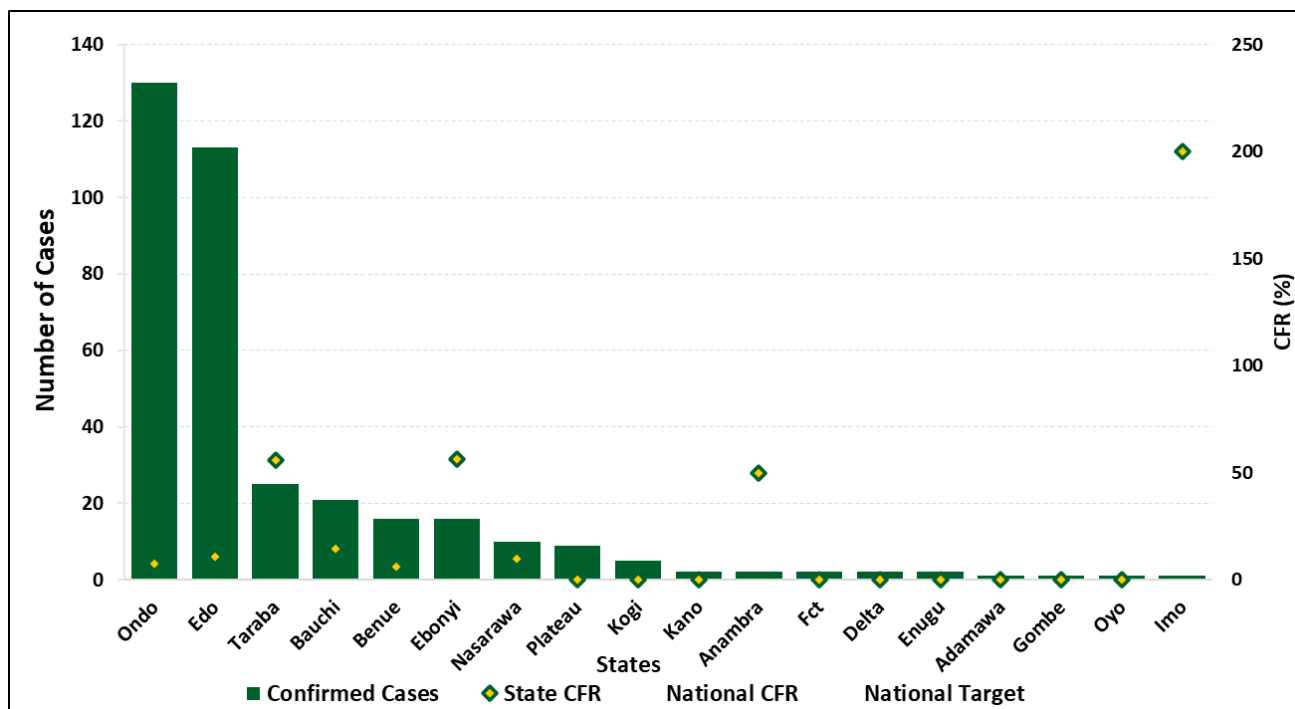


Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 4, 2023

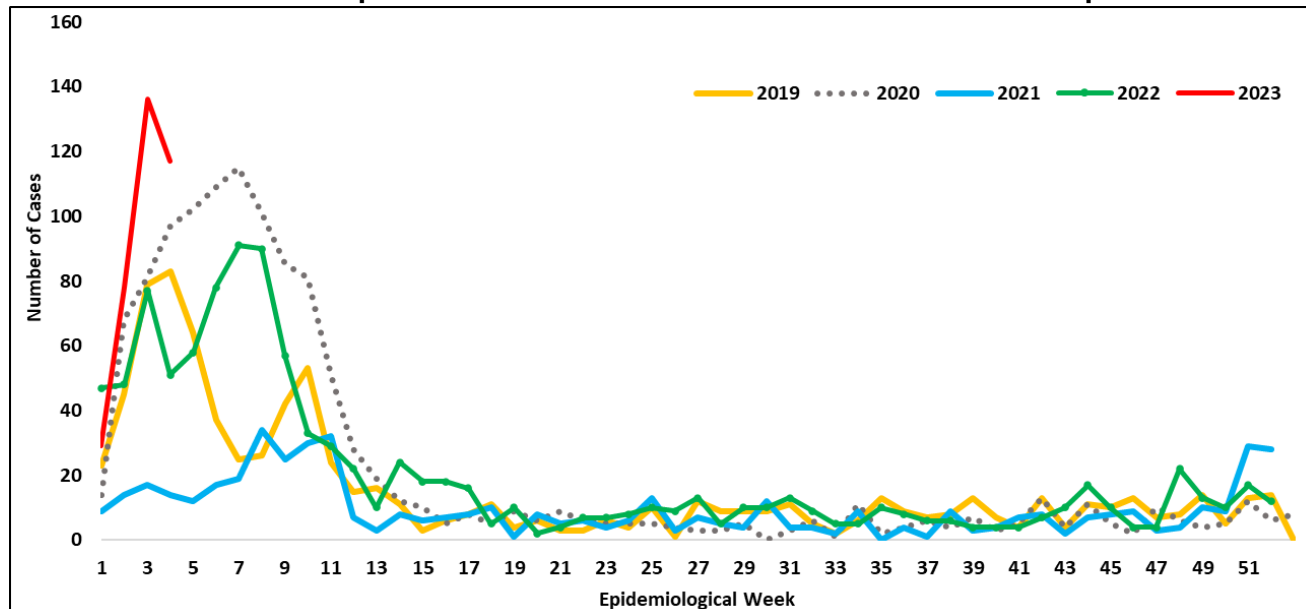


Figure 6: Trend of confirmed cases by epidemiological week, 2019– 2023, Nigeria

Table 5: Response activities

- Sent Lassa fever alert letters to Governors' forum, State Ministries of Health, professional bodies (NMA, MDCAN, NARD, NDA, MWAN, AGPMPN, AMLSN, NANNM) etc.
- Conducted Lassa fever risk assessment
- Confirmed cases are treated at identified treatment centres across the states.
- Dissemination of reviewed case management and safe burial practices guidelines
- Mortality review of Lassa fever deaths
- In-depth investigation of healthcare worker infections
- External Quality Assurance (EQA) panel preparation for all testing laboratories ongoing
- Distribution of response commodities -PPEs, Ribavirin (injection and tablets) body-bags, thermometers, hypochlorite hand sanitizers, IEC materials distributed to states and treatment centres.
- Implementation of Nigeria Lassa fever epidemiological Study supported by CEPI
- Multi-sectoral Public Health Emergency Operation Centres (PHEOC) activated at the National and affected States

Challenges

- Late presentation of cases leading to an increase in CFR
- Poor health-seeking behaviour due to the high cost of treatment and clinical management of Lassa fever
- Poor environmental sanitation conditions observed in high-burden communities

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

INFORMATION RESOURCE

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