



SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

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TITLE:	2018 LASSA FEVER OUTBREAK IN NIGERIA
SERIAL NUMBER:	47
EPI-WEEK:	47
DATE:	25th November, 2018

HIGHLIGHTS

- In the reporting Week 47 (November 19-25, 2018) **six** new confirmedⁱ cases were reported from Edo (3) and Ondo (3) state with no new death
- From 1st January to 25th November 2018, a total of 3142 **suspectedⁱ** cases have been reported from 22 states. Of these, **568 were confirmed positive, 17 probables, 2557 negative** (not a case)
- Since the onset of the 2018 outbreak, there have been 144 deaths in confirmed cases and 17 in probable cases. Case Fatality Rate in confirmed cases is 25.4%
- 22 states have recorded at least one confirmed case across 90 Local Government Areas (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT, Gombe, Ekiti, Kaduna, Abia, Adamawa and Enugu). **Three** states - Edo, Ondo, and Ebonyi states are in active^{iv} phase of the outbreak -*Figure 1*
- In the reporting week 47, one new healthcare worker was affected. **Forty-three health care workers have been affected since the onset of the outbreak in seven states** –Ebonyi (16), Edo (15), Ondo (8), Kogi (2), Nasarawa (1), Taraba (1) and Abia (1) with ten deaths in Ebonyi (5), Kogi (1), Abia (1), Ondo (2) and Edo (1)
- 83% of all confirmed cases are from Edo (46%), Ondo (24%) and Ebonyi (13%) states
- Eight patients are currently being managed at Irrua Specialist Teaching Hospital(ISTH) treatment Centre (4) and Federal Medical Centre (FMC) Owo (4)
- A total of 9084 contacts have been identified from 22 states. Of these 208(2.3%) are currently being followed up, 8746 (96.3%) have completed 21 days follow up while 15(0.2%) were lost to follow up. 115(1.3%) symptomatic contacts have been identified, of which 36 (0.5%) have tested positive from five states (Edo -20, Odo-8, Ebonyi-3, Kogi -3, Bauchi-1 and Adamawa-1)
- Lassa fever international conference scheduled for 16th to 17th of January 2019, registration ongoing @ www.lic.ncdc.gov.ng
- Good clinical practice workshop in collaboration with World Health Organisation ongoing
- Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels



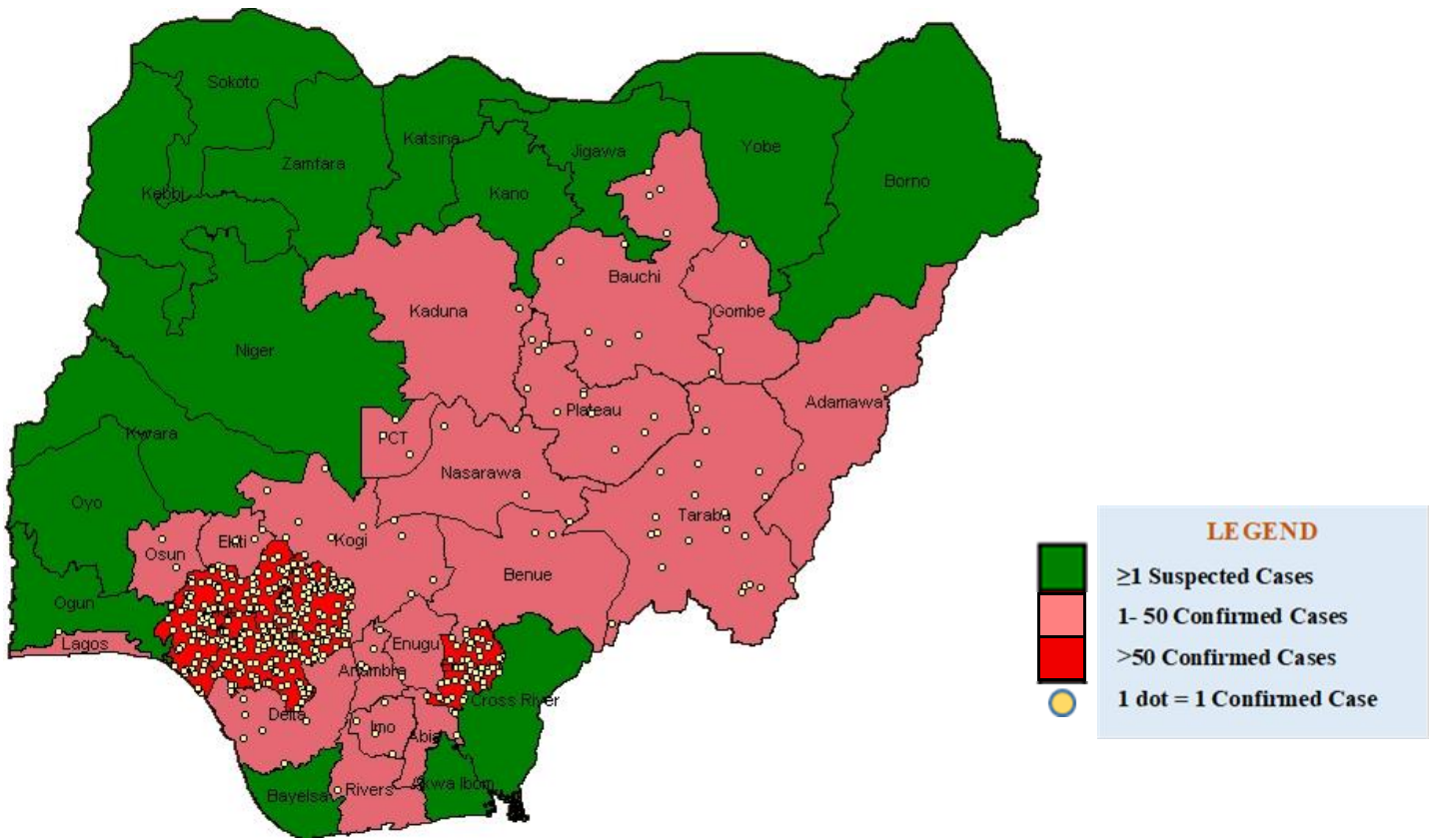


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 18th November, 2018

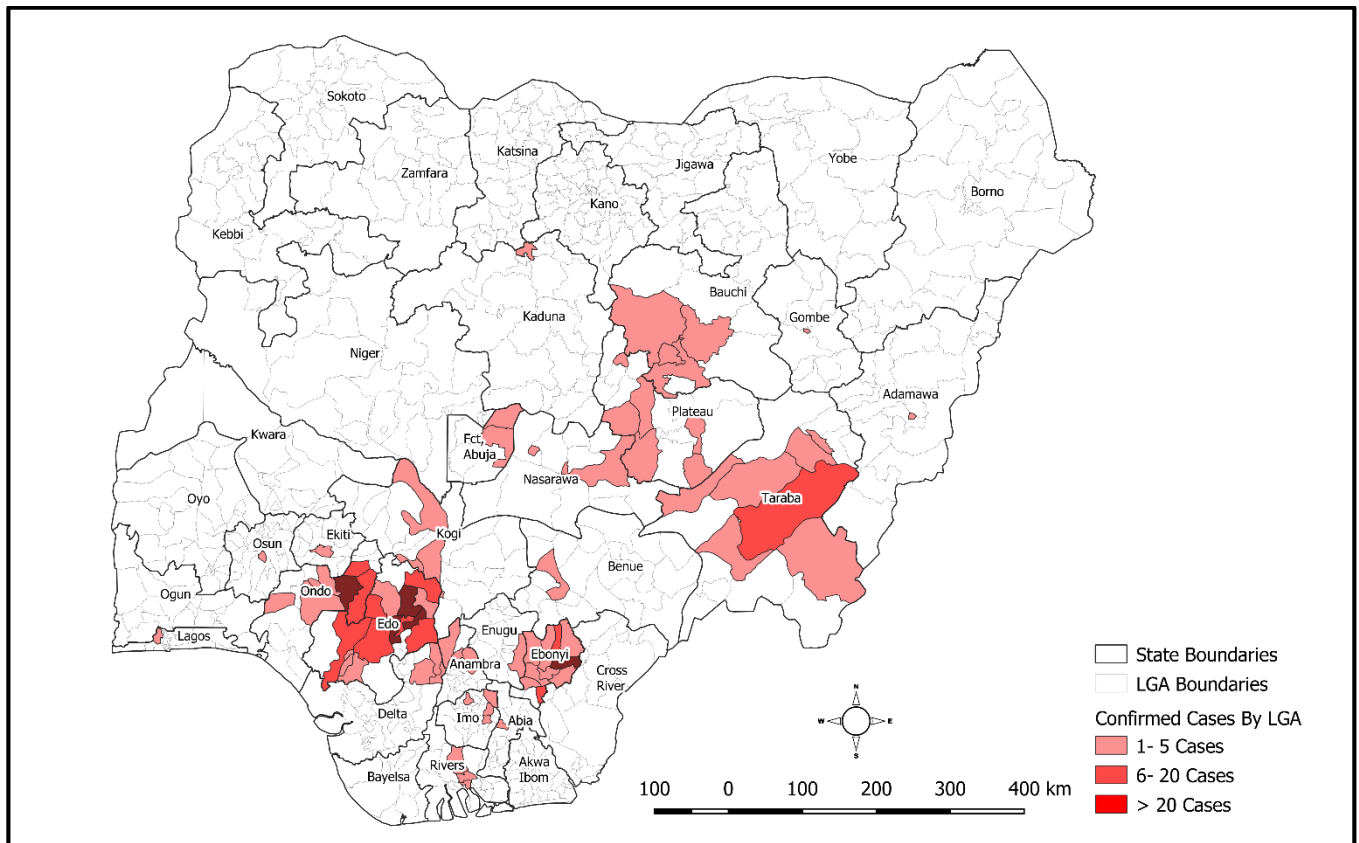


Figure 2. Distribution of Confirmed Lassa Fever cases in Nigeria by LGA as at 25th November 2018

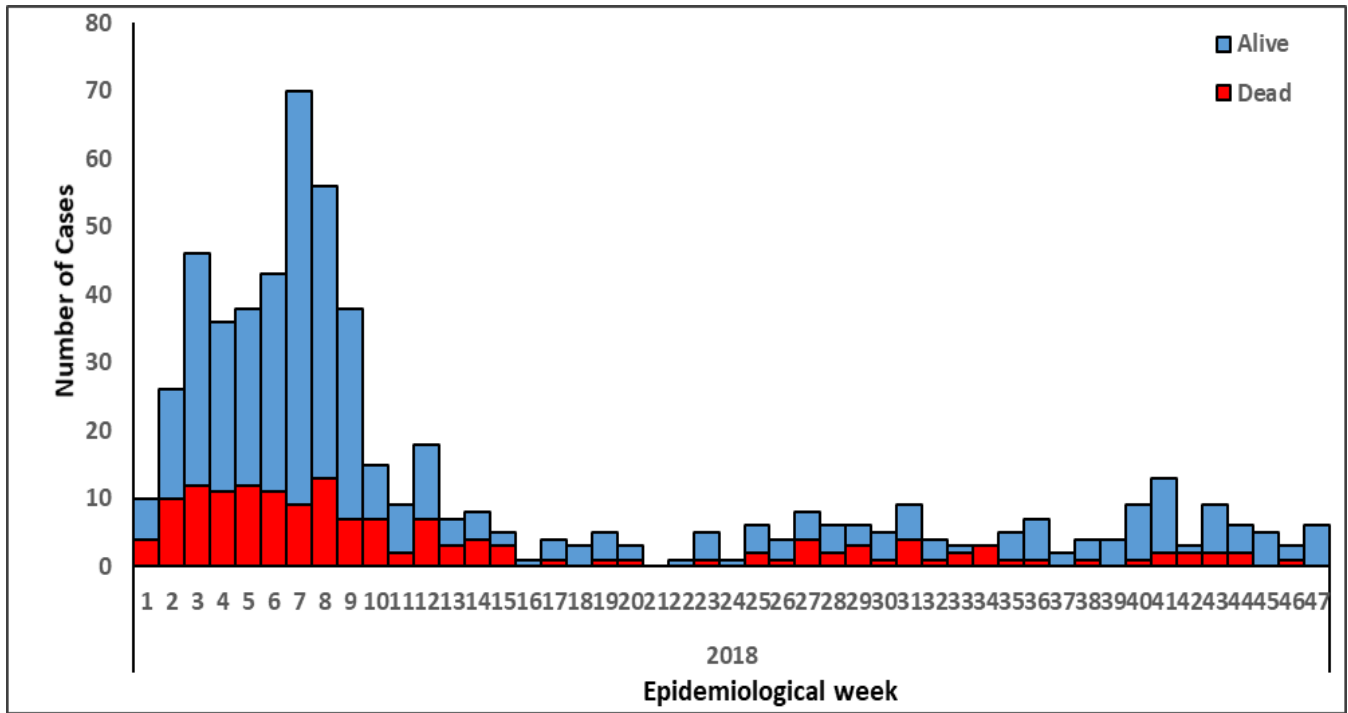


Figure 3. Epicurve of Lassa fever Confirmed (568) and Probable (17) Cases in Nigeria week 1- 47, 2018

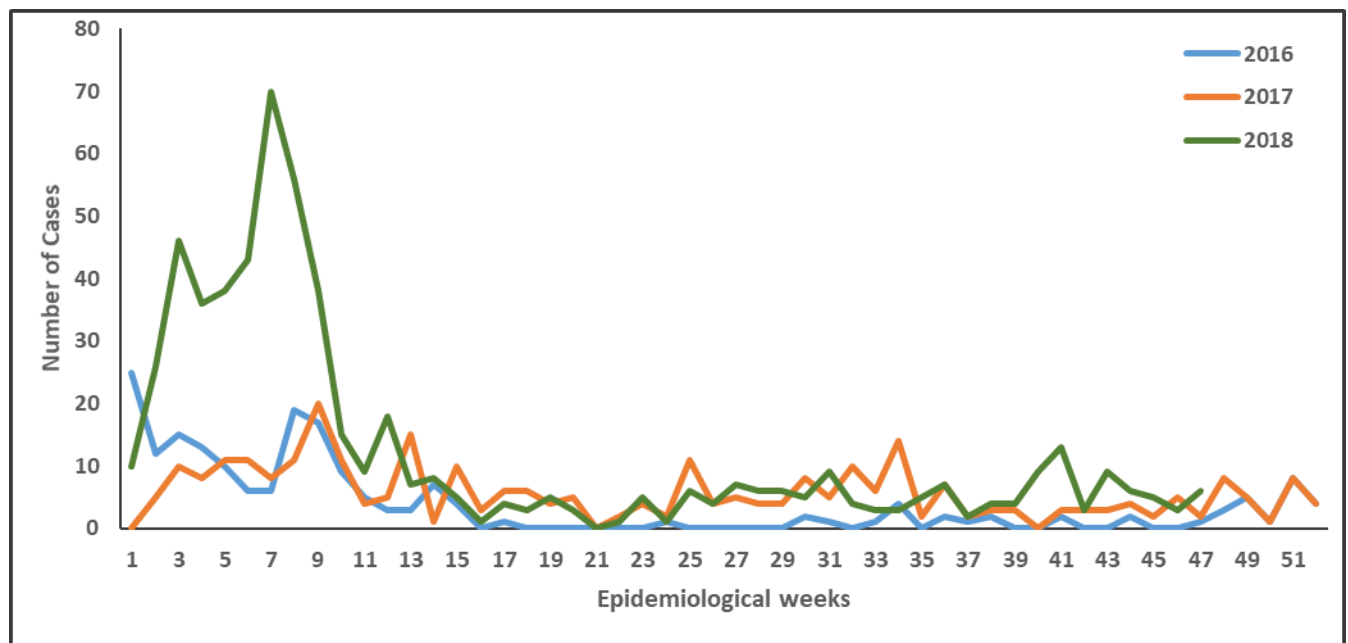


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018/Week 47

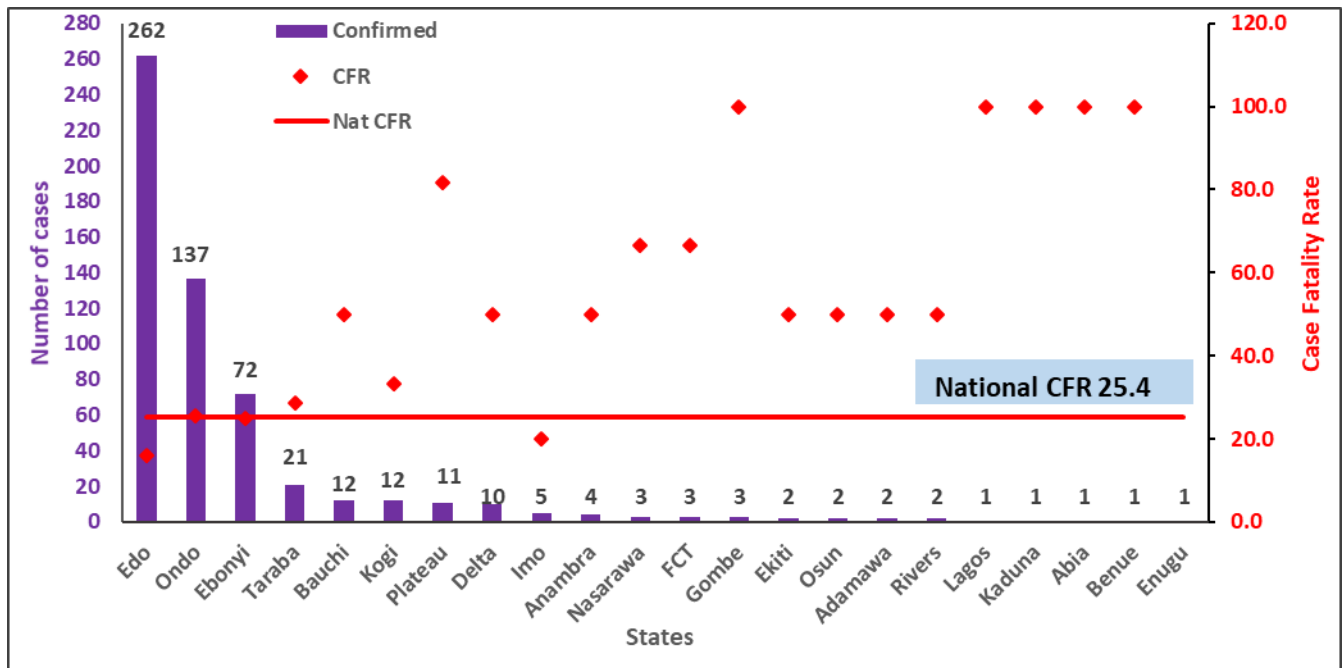


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 25th November, 2018

ⁱSuspected 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.

ⁱⁱAny suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)

ⁱⁱⁱAny suspected case (see definition above) who died without collection of specimen for laboratory testing

^{iv} "Active" means where there has been at least one confirmed case, and contacts within 21 days post exposure

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<http://ncdc.gov.ng/diseases/sitreps>