Nigeria Centre for Disease Control and Prevention
Protecting the health of Nigerians

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Lassa Fever Situation Report

Epi Week 32: 7th August – 13th August 2023

Key Points

Table 1: Summary of the current week (32), cumulative Epi week 1- 32, 2023 and comparison with the 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 32)	94	5	0	1	20.0%	State(s):2 LGA(s): 3
2023 Cumulative (week 1-32)	6872	1033	9	178	17.2%	State(s): 28 LGA(s): 111
2022 Cumulative (week 32)	6305	889	37	174	19.6%	State(s):24 LGA(s):99

Highlights

- In week 32, the number of new confirmed cases decreased from 10 in epi week 31, 2023 to 5 cases. This was reported in Ondo and Edo States (Table 3)
- Cumulatively from week 1 to week 32, 2023, 178 deaths have been reported with a case fatality rate (CFR) of 17.2% which is lower than the CFR for the same period in 2022 (19.6%)
- In total for 2023, 28 States have recorded at least one confirmed case across 111 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 Bauchi) while 26% were reported from 25 states with confirmed Lassa fever cases. Of the 74% confirmed cases, Ondo reported 34%, Edo 29%, and Bauchi 11%
- The predominant age group affected is 21-30 years (Range: 1 to 93 years, Median Age: 32 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.
- No new Healthcare worker was affected in the reporting week 32.
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels.

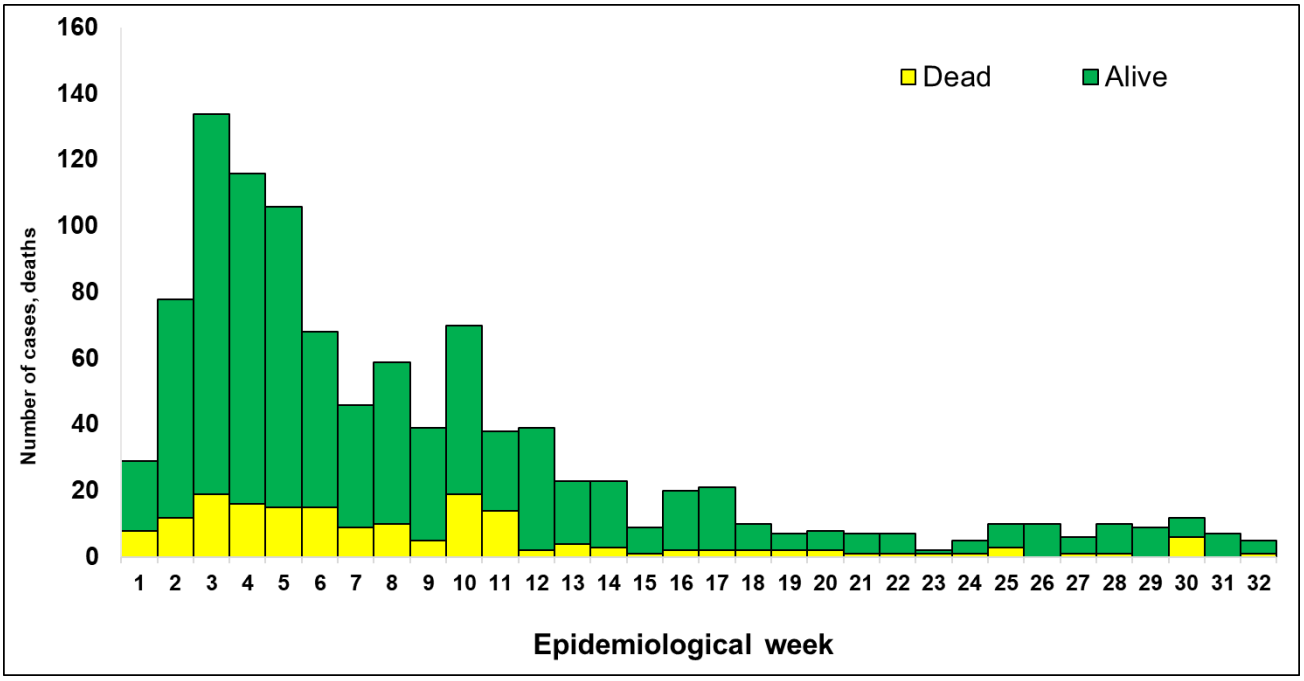

Figure 1. Confirmed Lassa fever cases in Nigeria epidemiological week 1, 2023 to week 32, 2023

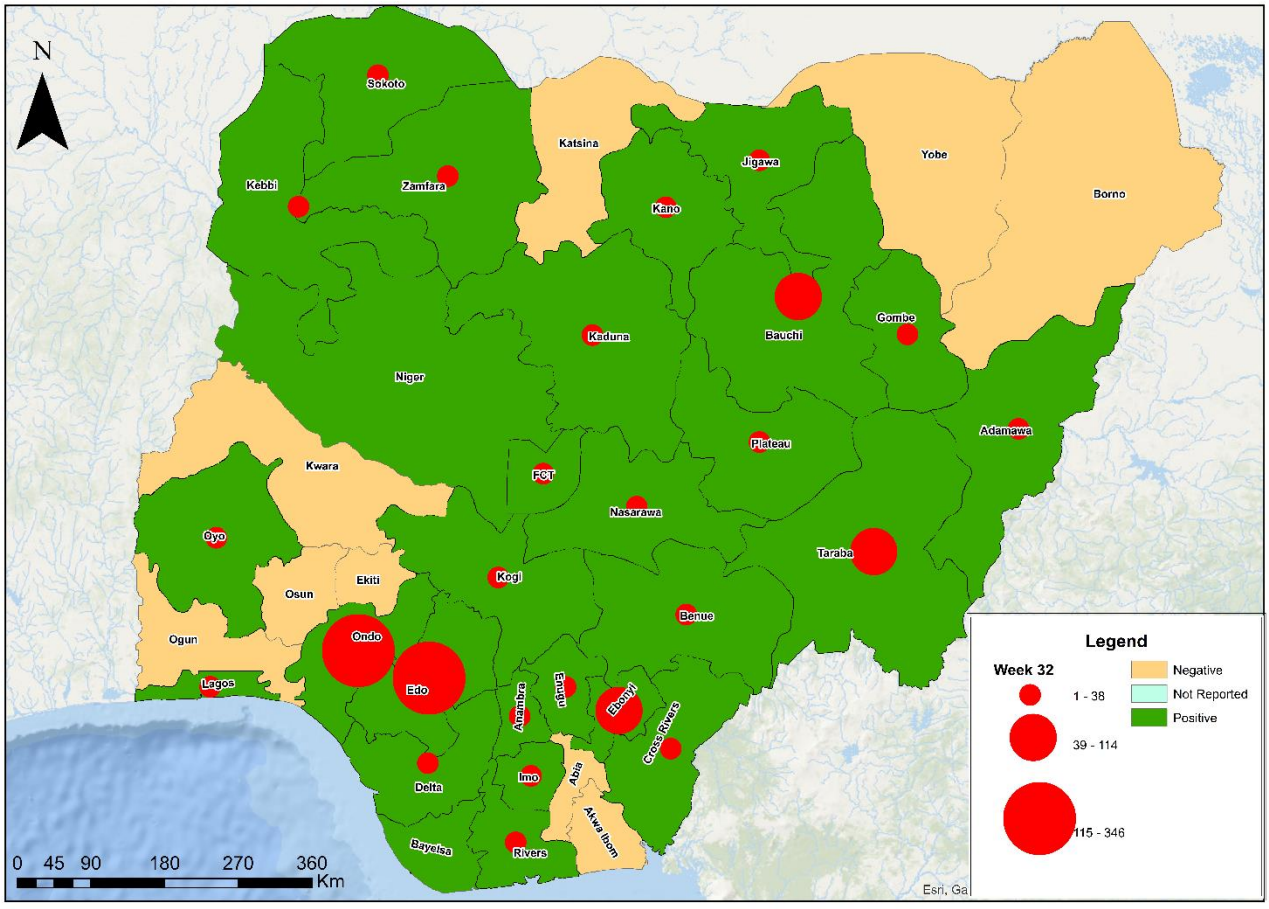

Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 32, 2023

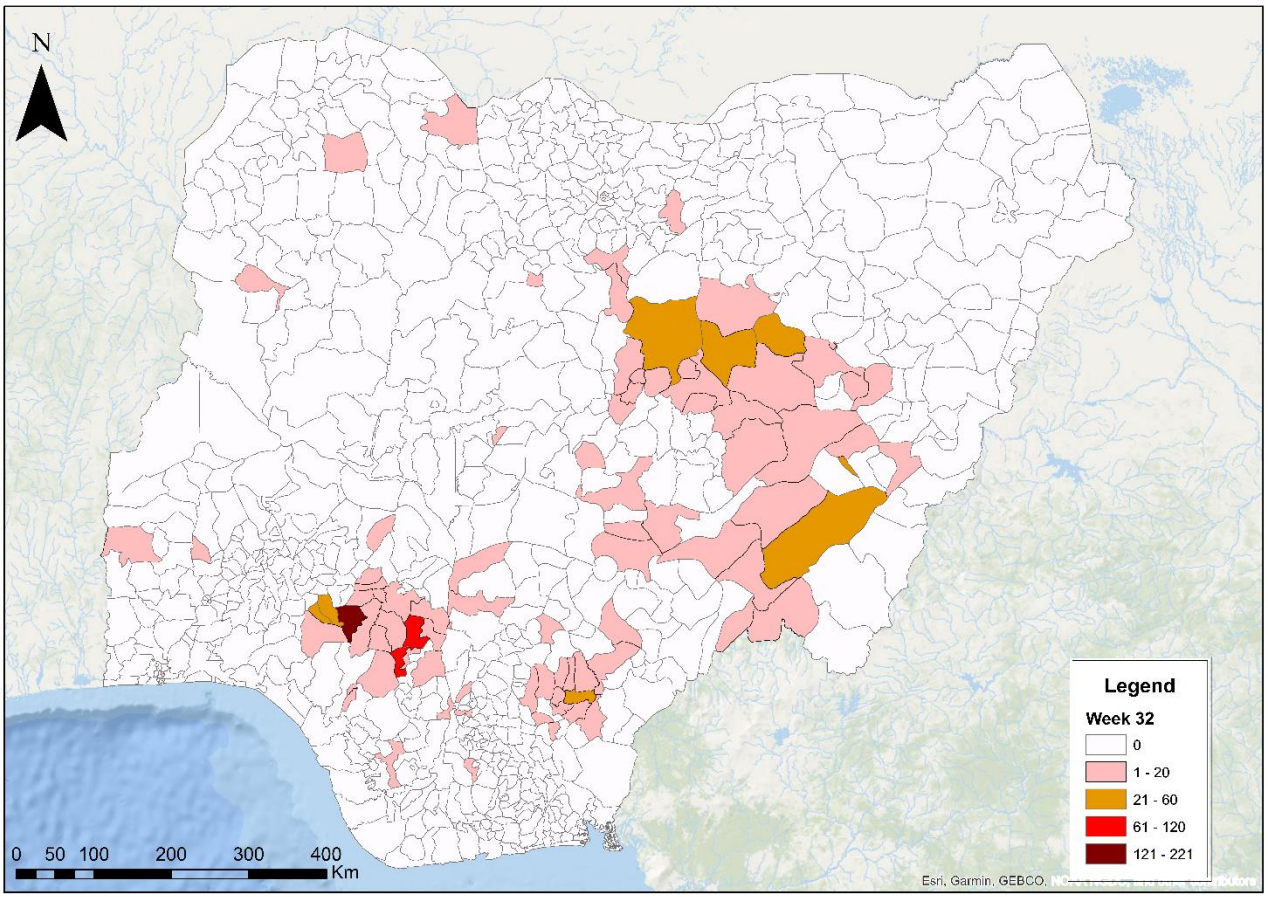

Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 32, 2023

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

Symptomatic contacts	Number for current week	Trend from previous week	Cumulative number for 2023
Probable cases	0	←→	**9**
Health Care Worker affected	0	←→	**49**
Cases managed at the treatment centres	4	↓	**855**
Contact tracing			
Cumulative contact listed	0	↓	**4402**
Contacts under follow up	135	↓	**135**
Contacts completed follow up	0	←→	**4264**
Symptomatic contacts	4	↑	**109**
Positive contacts	0	←→	**43**
Contacts lost to follow up	0	←→	**0**

Key

↑ Increase
↓ Decrease
←→ No difference

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

	States	Current week: (Week 32)						Cumulative (Week 1 - 32)				
		Cases					Deaths	Cases				Deaths
		Suspected	Confirmed	Trend	Probable	HCW*	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW*	(Confirmed Cases)
1	Ondo	61	4	▼			1	2010	354	1	16	41
2	Edo	19	1	▲				2582	295	2	5	36
3	Bauchi							752	115	1	9	23
4	Taraba							279	93		6	29
5	Ebonyi	2						266	51	1	3	29
6	Benue	6						182	38	2	1	4
7	Plateau							74	16		1	2
8	Nasarawa							135	14		5	2
9	Kogi							39	11		1	1
10	Gombe							51	9			2
11	Enugu	1						33	5			1
12	Kano							34	4			
13	Oyo							46	4			1
14	Jigawa							22	3			
15	Anambra	1						34	3		1	2
16	Bayelsa							38	2			1
17	Fct	1						51	2			
18	Lagos							18	2			
19	Delta							33	2		1	
20	Cross River							22	2			1
21	Sokoto							7	1			
22	Kebbi							4	1			1
23	Zamfara							5	1			
24	Adamawa	1						14	1			
25	Niger							5	1			
26	Rivers							9	1			
27	Kaduna							31	1			
28	Imo	1						16	1			2
29	Borno							3				
30	Katsina							5				
31	Abia							10				
32	Akwa Ibom							4				
33	Yobe							7				
34	Ekiti	1						13				
35	Ogun							20		2		
36	Kwara							10				
37	Osun							8				
	Total	**94**	**5**	▼	**0**	**0**	**1**	**6872**	**1033**	**9**	**49**	**178**

Key	
▼	Decrease
▲	Increase

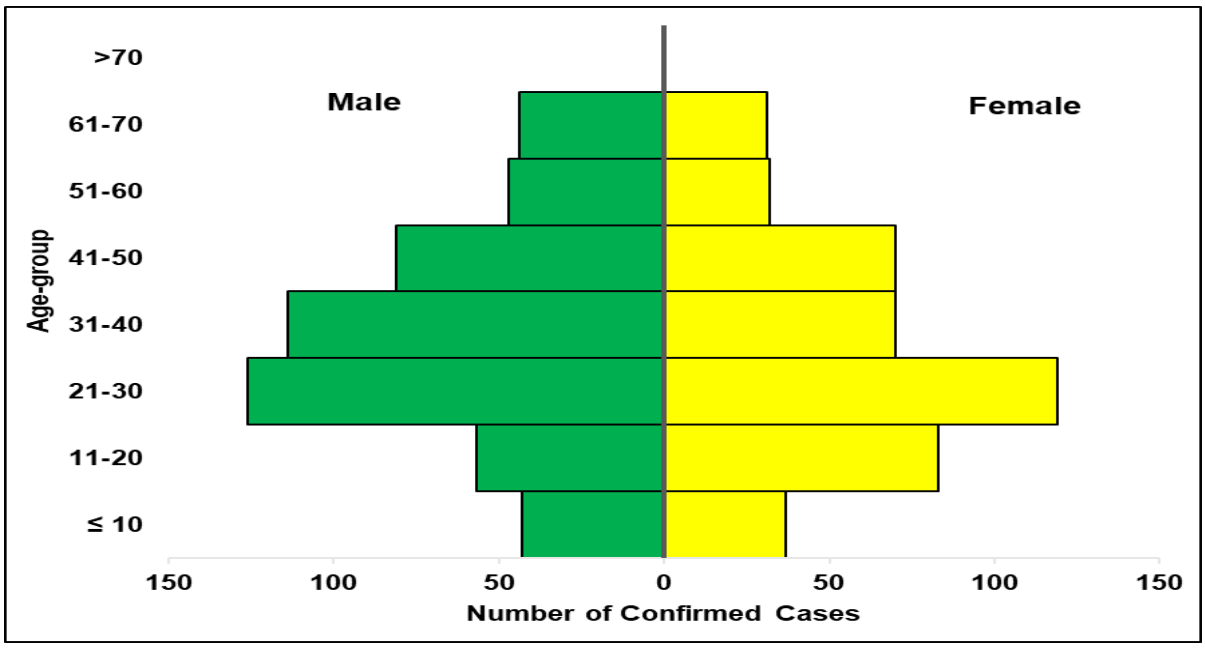

Figure 4. Age and sex pyramid showing the number of confirmed Lassa fever cases for 2023

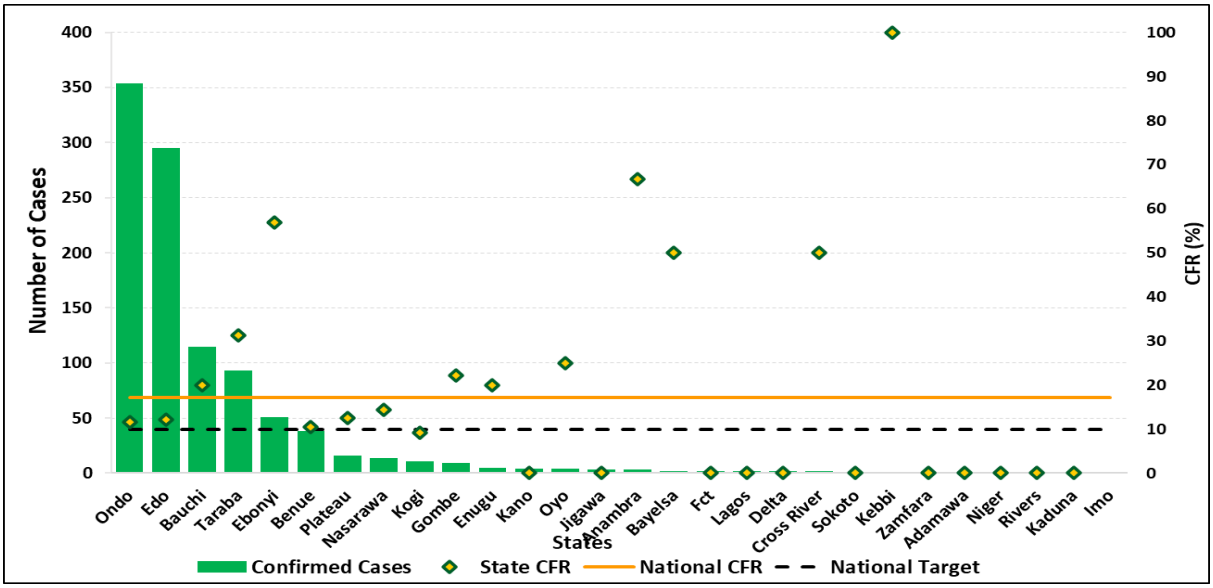

Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 32, 2023

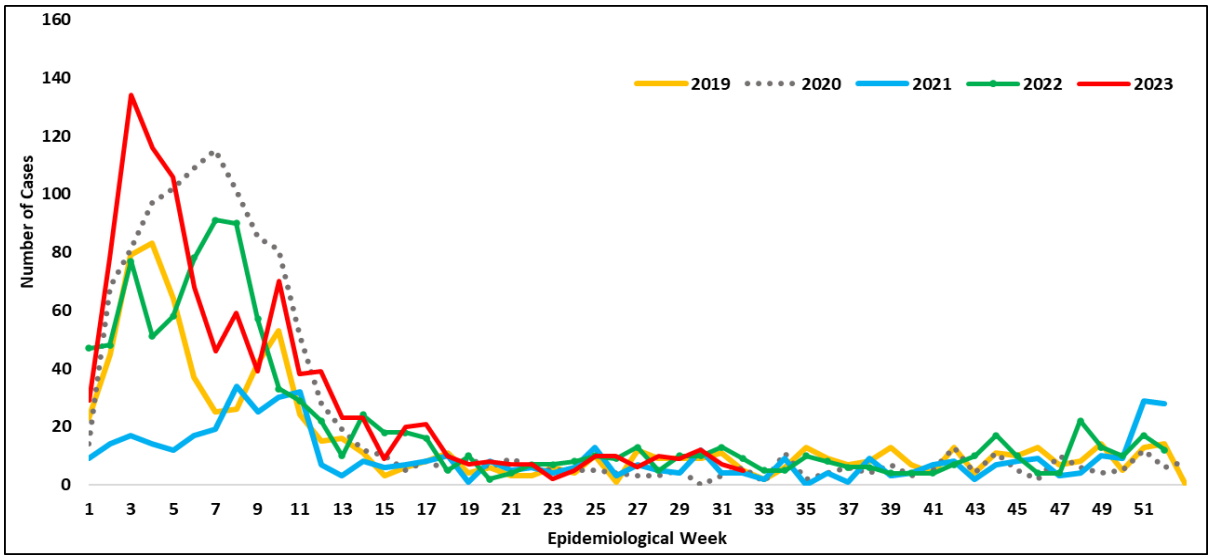

Figure 6: Trend of confirmed cases by epidemiological week, 2019– 2023, Nigeria

Response activities

- Conducted national after action review
- Conducted one-day *Accelerating Lassa fever Vaccine* workshop with CEPI and key stakeholders, experts and policy makers
- De-escalation of the IMS/EOC
- Finalized plans - structure and modules - to pilot case management fellowship with support from GU and CDC
- Conducted risk assessment in preparation for de-escalation of the response and/or deactivation of the IMS/EOC .
- Conducted a three-day LF Human-Centred Design synthesis workshop with support from BA-N.
- Off-site coordination support to states
- Engagement with CEPI on proposed visit to Nigeria towards LF vaccine development/clinical trials
- Coordinated LF Colloquium & workshop with support from UCL and Jhpiego – to develop a 5-year LF research agenda
- Updating IPC focal persons database
- Engagement of surge staff at treatment centres
- Identification and Assessment of treatment centres
- Intensive response activities through a one-health approach in affected LGAs
- Designed a tool to collect geo-points for all Lassa fever confirmed cases in the States
- Update of VHF Case Investigation Form (CIF) database
- Enhanced surveillance (contact tracing and active case finding) in affected states.
- Monitoring of outbreak emergency composite indicators to guide action
- Implementation of targeted risk communication activities in most affected States
- Diagnosis of all samples in the Eight Lassa fever testing laboratories across the country
- External Quality Assurance (EQA) panel preparation for all testing laboratories ongoing
- Dissemination of reviewed IPC guideline, health facility IPC advisory and healthcare worker advisories
- Deployed NRRT to 6 states – Bauchi, Benue, Ebonyi, Edo, Ondo & Taraba
- Periodic implementation of vector control measures in Edo and Ondo States
- 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
- 1st Draft of protocol for identification and management of LF in pregnant women completed
- 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
- Poor awareness 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 HAEMORRAGHIC 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 HAEMORRAGHIC FEVER
https://ncdc.gov.ng/themes/common/docs/protocols/24_1502192155.pdf
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