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Lassa fever Situation Report

Epi Week 31: 1 – 7 August 2022

Key Points

Table 1: Summary of current week (31), cumulative from Epi week 1–31, 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 31)	136	13	0	1	7.7%	State(s): 5 LGA(s): 7
2022 Cumulative (week 31)	6126	880	37	165	18.8%	State(s): 25 LGA(s): 100
2021 Cumulative (week 31)	2686	350	3	81	23.1%	State(s): 14 LGA(s): 60

Highlights

- In week 31, the number of new confirmed cases increased from 10 in week 30, 2022 to 13 cases. These were reported from Ondo, Edo, Kogi, Ebonyi and Imo States (Table 3)
- Cumulatively from week 1 to week 31, 2022, 165 deaths have been reported with a case fatality rate (CFR) of 18.8% which is lower than the CFR for the same period in 2021 (23.1%)
- In total for 2022, 25 States have recorded at least one confirmed case across 100 Local Government Areas (Figures 2 and 3)
- Of all confirmed cases, 70% are from Ondo (31%), 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 31
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels

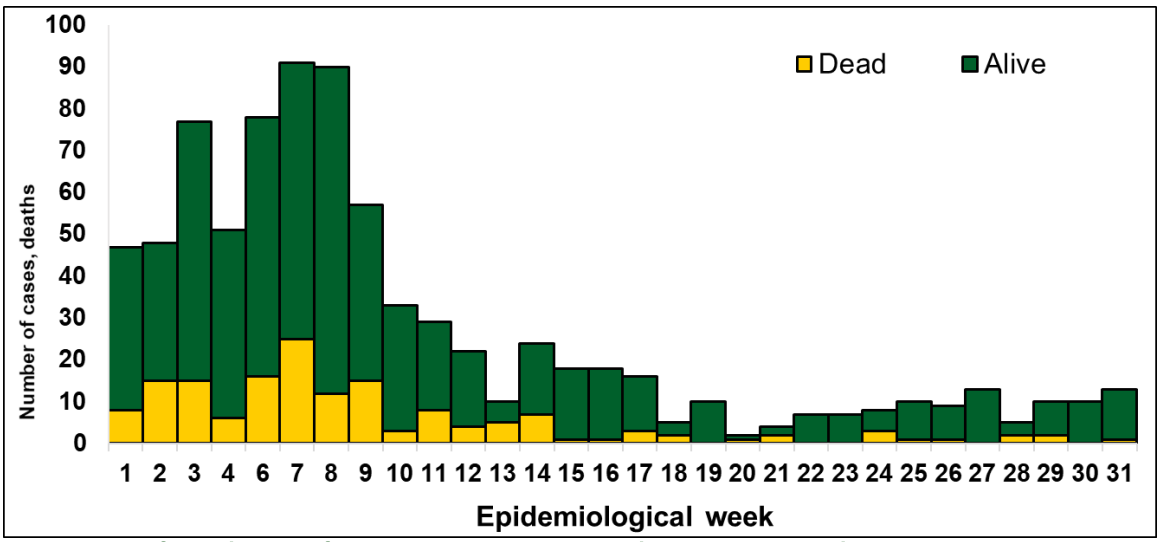

Figure 1. Confirmed Lassa fever cases in Nigeria, Epidemiological week 1-31, 2022

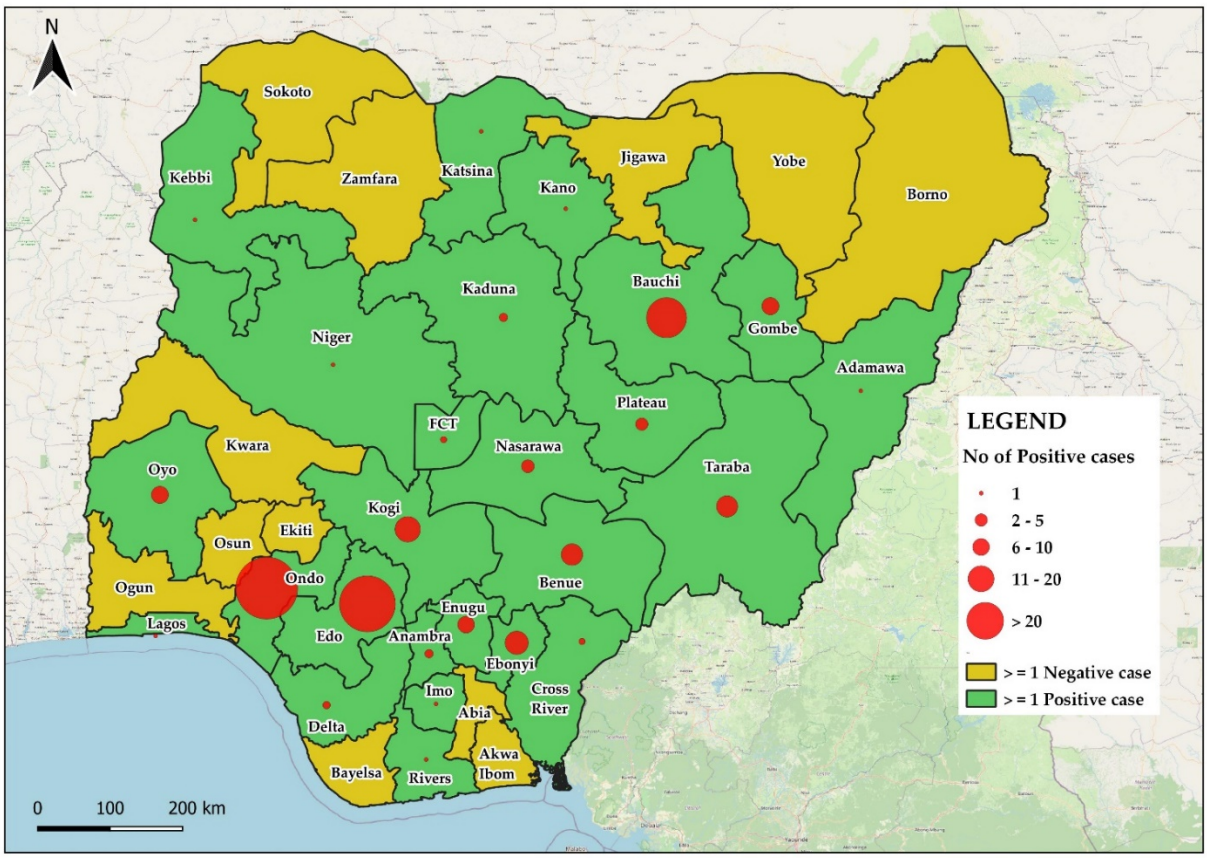

Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 31, 2022

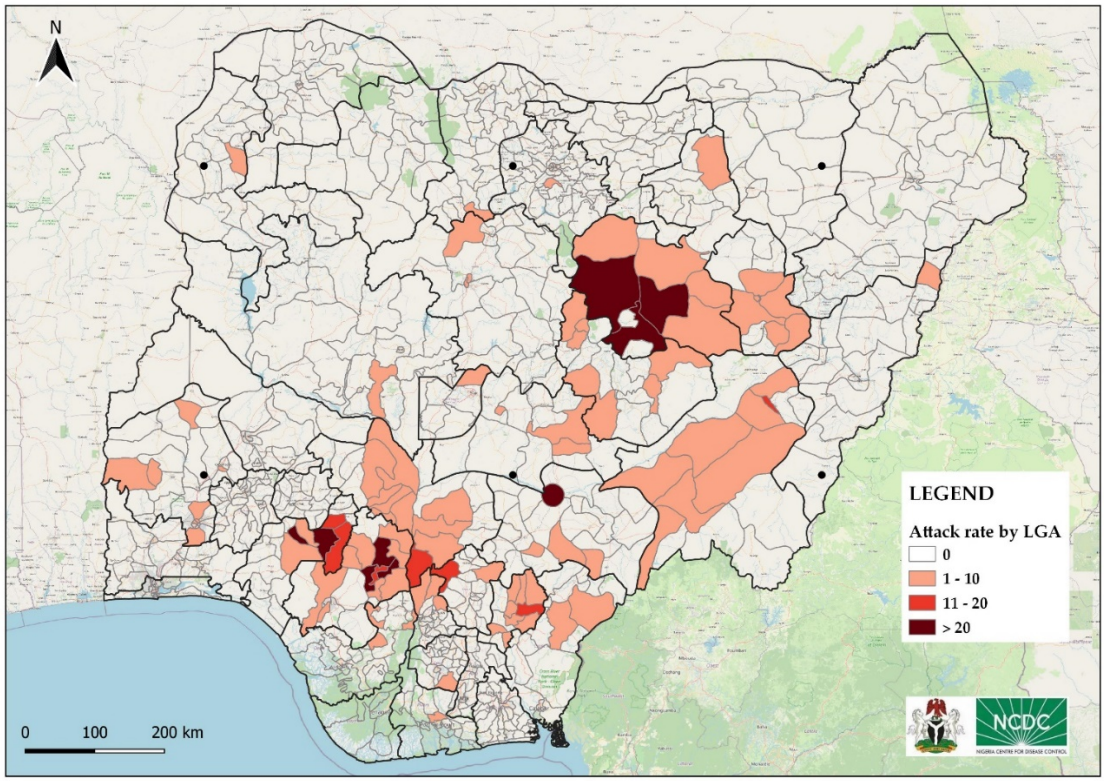

Figure 3. Lassa fever attack rate per 100,000 population for LGAs in Nigeria, week 31, 2022

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

Indicator	Number for current week	Trend from previous week	Cumulative number for 2022
Probable cases	0	⟷	37
Health Care Worker affected	0	⟷	54
Cases managed at the treatment centres	13	↓	817
Contact tracing			
Cumulative contact listed	0	⟷	3424
Contacts under follow up	45	↓	45
Contacts completed follow up	11	↓	3319
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 31)						Cumulative (Week 1 - 31)				
		Cases					Deaths	Cases				Deaths
		Suspected	Confirmed	Trend	Probable	HCW*	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW*	(Confirmed Cases)
1	Ondo	24	6	▼				1184	270		11	47
2	Edo	87	3	▲				2276	225		3	29
3	Bauchi			▼				784	118		26	12
4	Kogi	4	2	▲			1	134	48			8
5	Ebonyi	3	1	▲				247	41	1	3	19
6	Benue	1						259	35	2	3	8
7	Taraba							98	34	3	1	14
8	Gombe	1						240	24	8	2	8
9	Oyo							112	21	14	4	4
10	Enugu	1						93	20			2
11	Nasarawa	1						94	11	5		6
12	Plateau	5						70	10			
13	Anambra							24	4			1
14	Kaduna							92	4	3	1	3
15	Delta							72	3			
16	FCT	1						54	2			
17	Cross River	1						12	2			1
18	Imo	1	1	▲				16	1			
19	Adamawa							16	1			
20	Niger							12	1			
21	Kebbi							5	1			
22	Lagos	4						36	1			1
23	Kano							37	1			1
24	Katsina							17	1			1
25	Rivers	1						7	1			
26	Zamfara							5				
27	Sokoto							2				
28	Akwa Ibom							7				
29	Osun							8		1		
30	Yobe							27				
31	Ekiti							2				
32	Abia							20				
33	Borno							15				
34	Bayelsa	1						8				
35	Jigawa							9				
36	Ogun							15				
37	Kwara							13				
	Total	136	13	▲	0	0	1	6122	880	37	54	165

Key	
▼	Decrease
▲	Increase

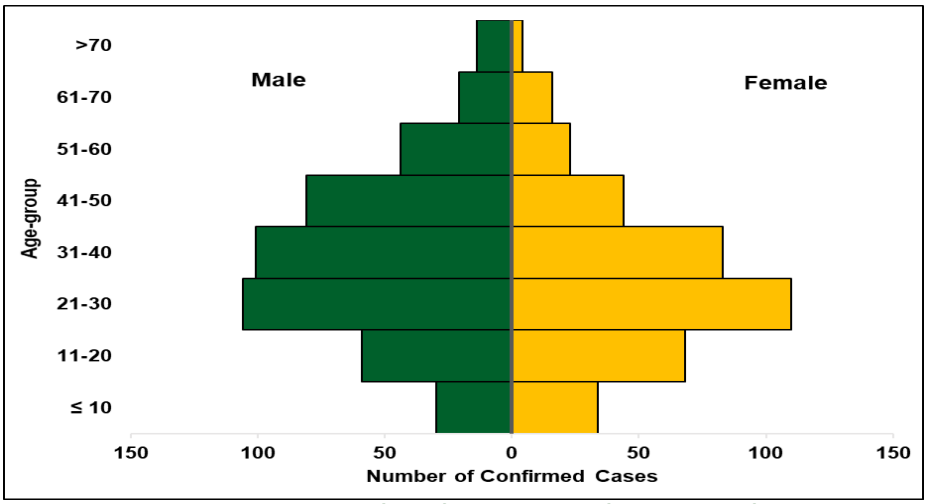

Figure 4. Age and sex pyramid of confirmed Lassa fever cases for 2022

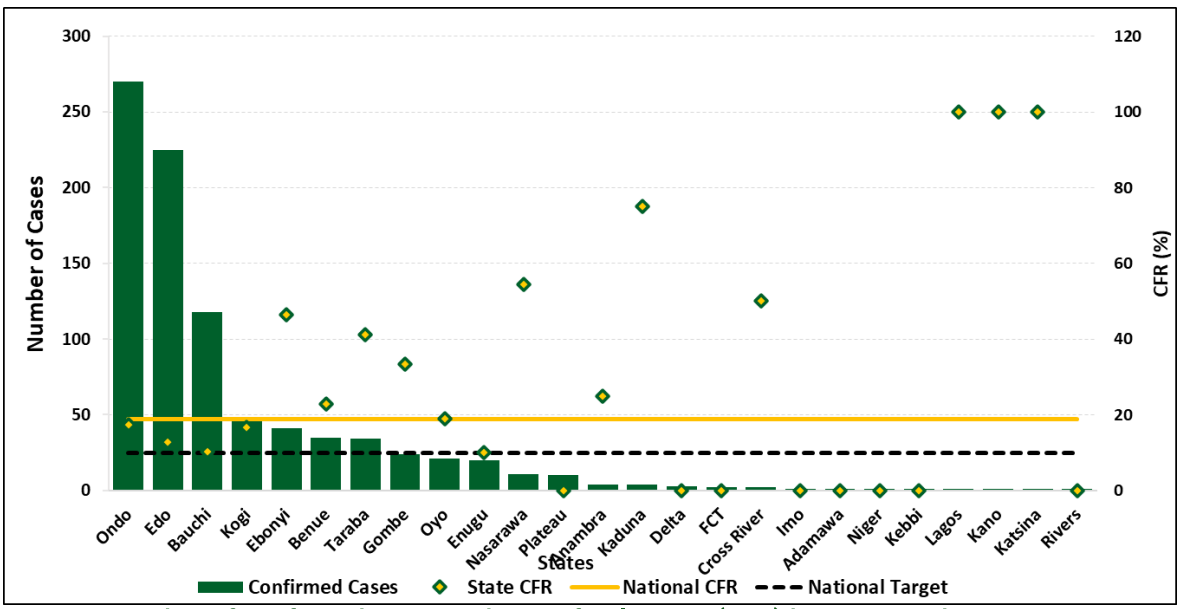

Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 31, 2022

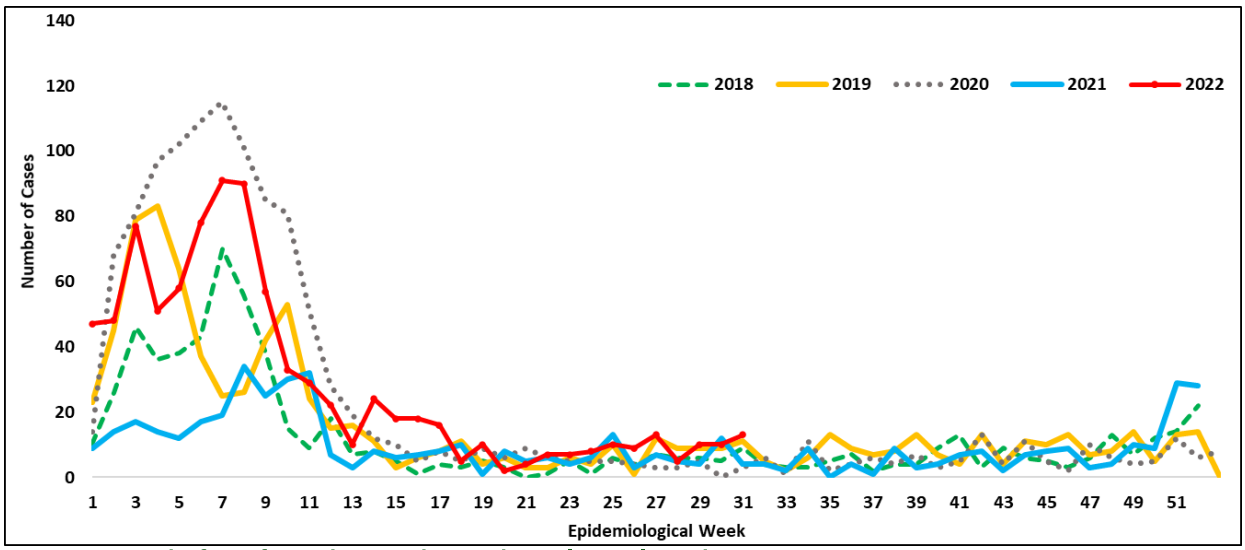

Figure 6: Trend of confirmed cases by epidemiological week, 2018– 2022, Nigeria

Response activities

- Lassa fever alert letters sent to States
- Lassa fever preparedness assessment carried out for 36 States and FCT
- The National Emergency Operations Centre response mode 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 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 targeted 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 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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