



# SITUATION REPORT

## Nigeria Centre For Disease Control (NCDC)

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<b>TITLE:</b>	<b>2018 LASSA FEVER OUTBREAK IN NIGERIA</b>
<b>SERIAL NUMBER:</b>	<b>35</b>
<b>EPI-WEEK:</b>	<b>35</b>
<b>DATE:</b>	<b>2<sup>nd</sup> September 2018</b>

### HIGHLIGHTS

- In the reporting Week 35 (August 27- September 2, 2018) five new confirmed<sup>i</sup> cases were reported from Edo state with one new death
- From 1<sup>st</sup> January to 2<sup>nd</sup> September 2018, a total of 2466 **suspected<sup>i</sup>** cases have been reported from 22 states. Of these, **497 were confirmed positive, 10 probable, 1959 negative** (not a case)
- Since the onset of the 2018 outbreak, there have been 132 deaths in confirmed cases and 10 in probable cases. Case Fatality Rate in confirmed cases is 26.6% -*Table 1*
- 22 states have recorded at least one confirmed case across 87 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). **Eighteen** states have exited the active phase of the outbreak while **four**- Edo, Ondo, Ebonyi and Bauchi states remain active<sup>iv</sup> - *Table 1/ Figure 1*
- In the reporting week 35, no new healthcare worker was infected. **Thirty-nine health care workers have been affected since the onset of the outbreak in seven states** –Ebonyi (16), Edo (14), Ondo (4), Kogi (2), Nasarawa (1), Taraba (1) and Abia (1) with ten deaths in Ebonyi (6), Kogi (1), Abia (1), Ondo (1) and Edo (1)
- 82% of all confirmed cases are from Edo (46%), Ondo (23%) and Ebonyi (13%) states
- Eight patients are currently being managed at treatment Centres –Seven at Irrua Specialist Teaching Hospital (ISTH) and one at the Federal Medical Centre Owo treatment Centre - Table 1
- A total of **7217** contacts have been identified from 22 states. Of these 349(4.8%) are currently being followed up, 6761 (93.7%) have completed 21 days follow up while 15(0.2%) were lost to follow up. 91 (1.4%) symptomatic contacts have been identified, of which **33 (0.5%)** have tested positive from five states (Edo -17, Ondo-8, Ebonyi-3, Kogi -3 Bauchi-1 and Adamawa-1) - *Table 1*
- Lassa fever international Conference registration, abstract submission and scholarships now open to the public on the conference website [www.lic.ncdc.gov.ng](http://www.lic.ncdc.gov.ng)
- Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels



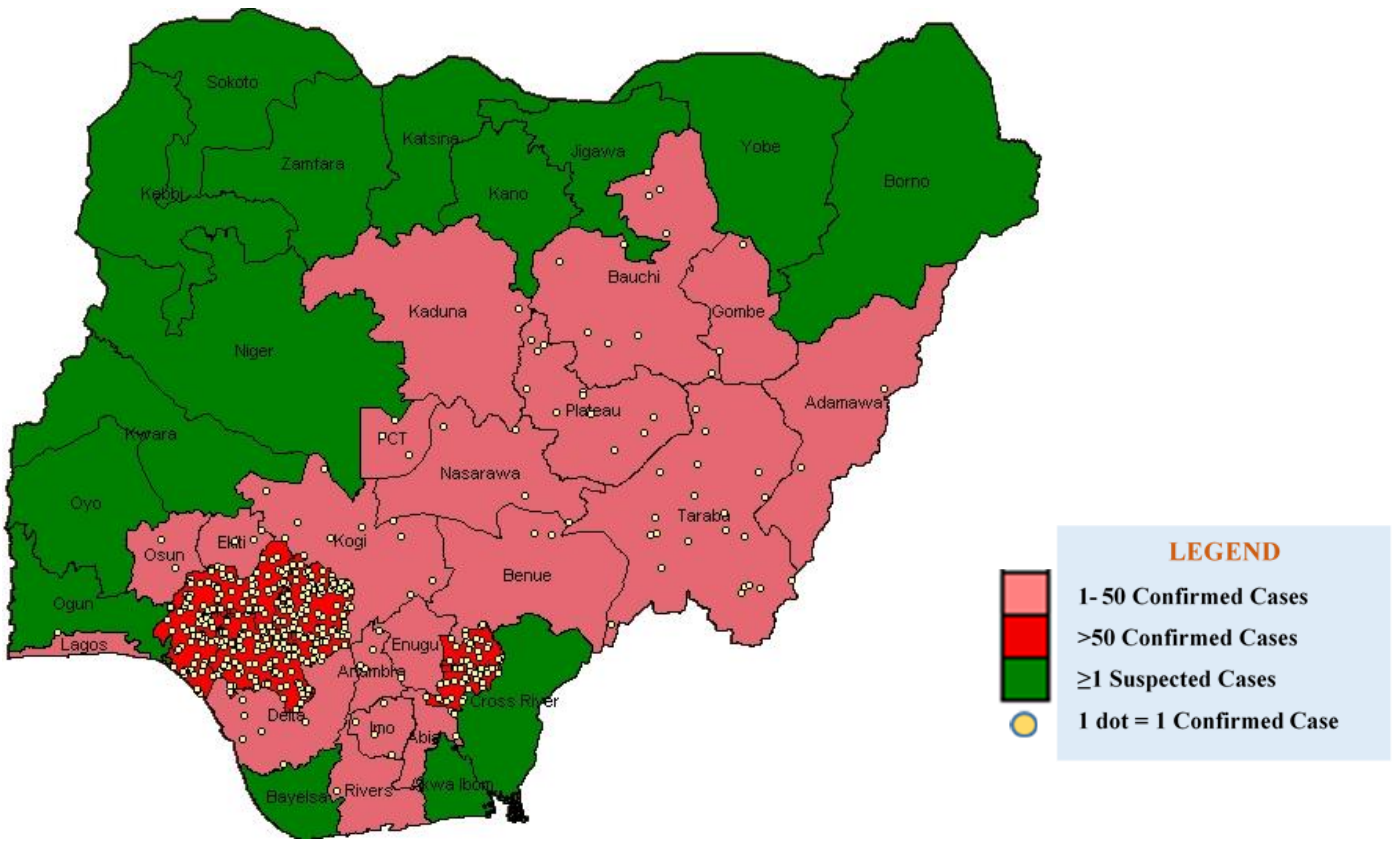


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 2<sup>nd</sup> September, 2018

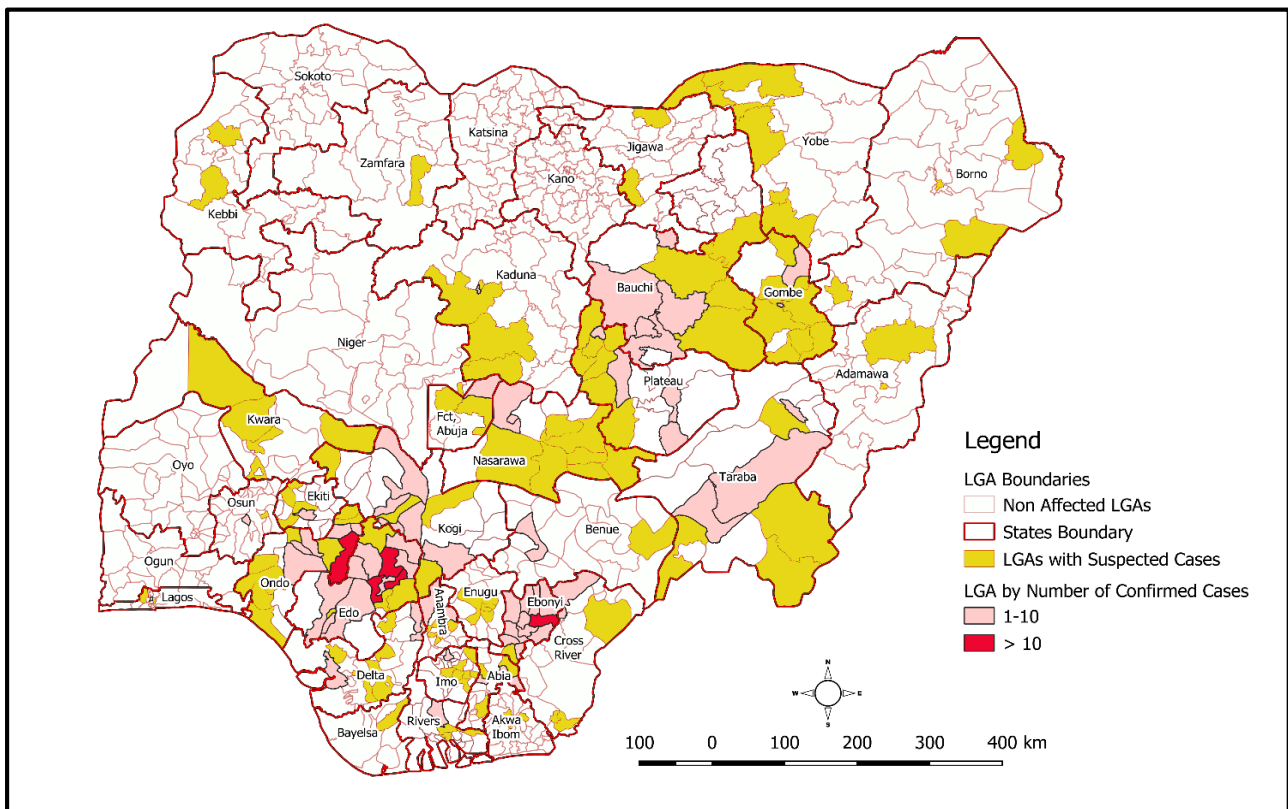


Figure 2. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA

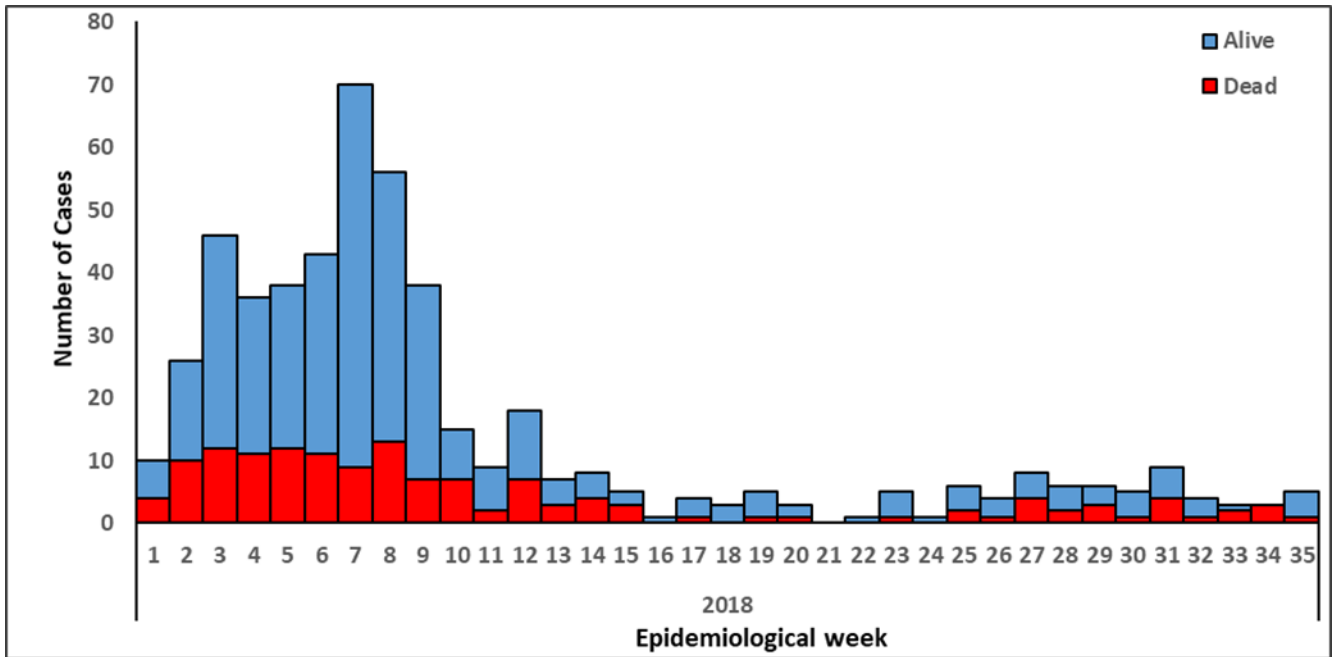


Figure 3. Epicurve of Lassa fever Confirmed (497) and Probable (10) Cases in Nigeria week 1- 35, 2018

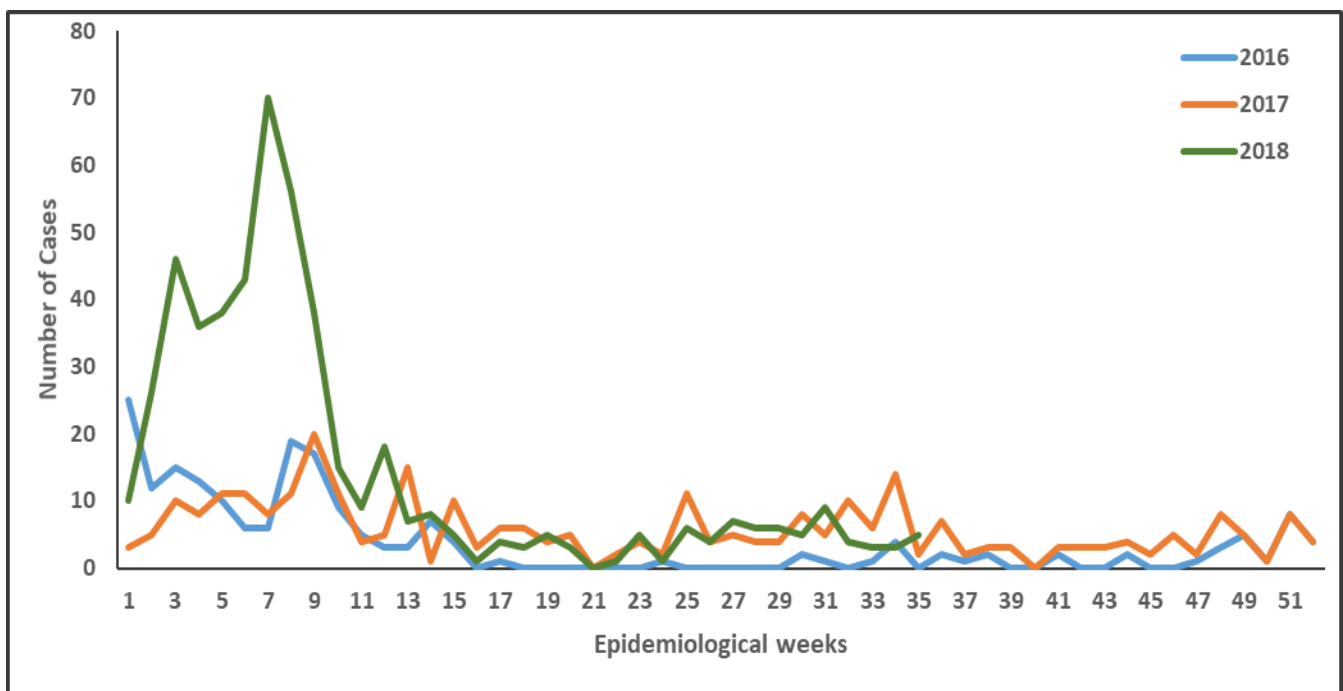
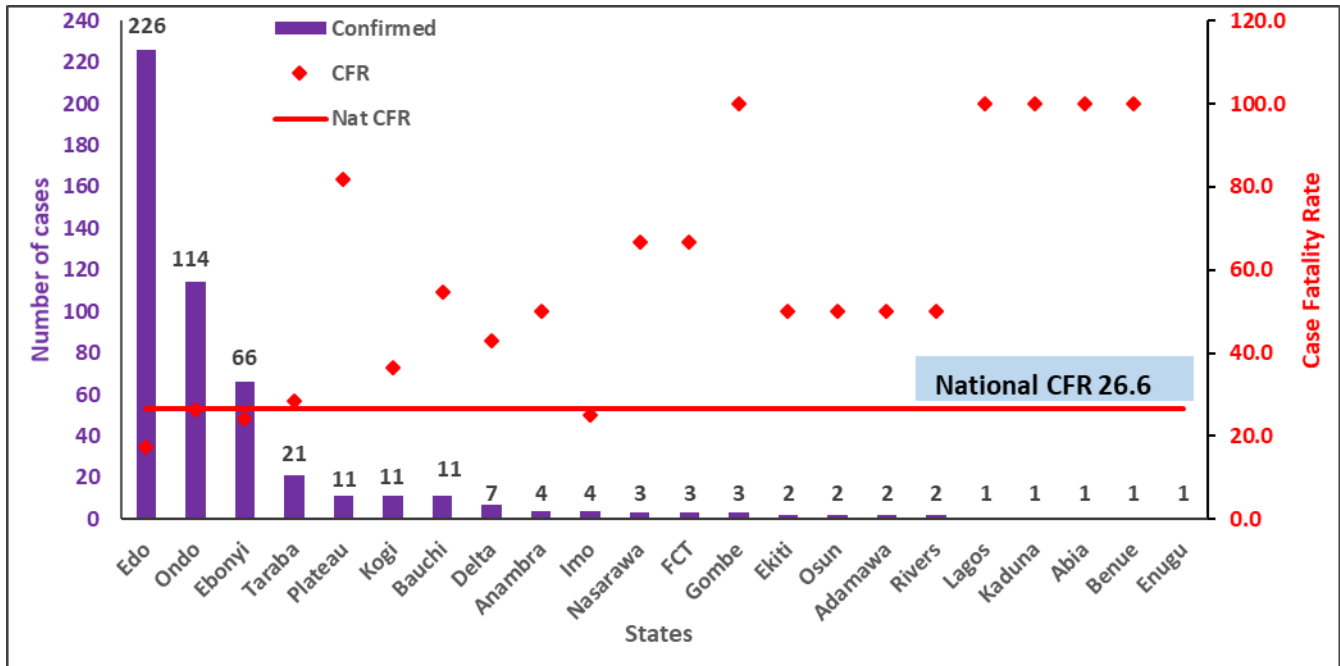


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018/35



**Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 2<sup>nd</sup> September, 2018**

<sup>i</sup>Suspected 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.

<sup>ii</sup>Any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)

<sup>iii</sup>Any suspected case (see definition above) who died without collection of specimen for laboratory testing

<sup>iv</sup>“Active” means where there has been at least one confirmed case, and contacts within 21 days post exposure

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