



SITUATION REPORT

Nigeria Centre For Disease Control (NCDC)

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TITLE:	2018 LASSA FEVER OUTBREAK IN NIGERIA
SERIAL NUMBER:	26
EPI-WEEK:	26
DATE:	1st July 2018

HIGHLIGHTS

- In the reporting Week 26 (June 25- July 1, 2018) two new confirmedⁱⁱ cases were reported from Edo(1) and Ondo(1)
- From 1st January to 1st July 2018, a total of 2087 suspectedⁱ cases have been reported from 21 states. Of these, **446 were confirmed positive, 10 are probable, 1631 negative** (not a case)
- Since the onset of the 2018 outbreak, there have been 111 deaths in confirmed cases and 10 in probable cases. Case Fatality Rate in confirmed cases is 24.9%
- 21 states have recorded at least one confirmed case across 71 Local Government Areas (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT, Gombe, Ekiti, Kaduna, Abia and Adamawa). **Eighteen** states have exited the active phase of the outbreak while **three**- Edo, Ondo and Plateau States remain active^{iv} -*Figure 1*
- In the reporting week 26, 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)
- 81% of all confirmed cases are from Edo (42%), Ondo (24%) and Ebonyi (15%) states
- Two patients are currently being managed at treatment Centres – one at Irrua Specialist Teaching Hospital (ISTH) and one at the Federal Medical Centre Owo treatment Centre
- A total of **5618** contacts have been identified from 21 states. Of these **267(4.8%)** are currently being followed up, 5341 (95.0%) have completed 21 days follow up while 10(0.2%) were lost follow up. 85 symptomatic contacts have been identified, of which **29 (34%)** have tested positive from five states (Edo-13, Ondo-8, Ebonyi-3, Kogi -3 Bauchi-1 and Adamawa-1)
- Lassa fever Research workshop in collaboration with WHO research and development roadmap scheduled for 3rd-4th July 2018 at Abuja
- Case Management Guideline review meeting of national Lassa fever expert review committee scheduled for 5th -6th July 2018 at Abuja
- Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels

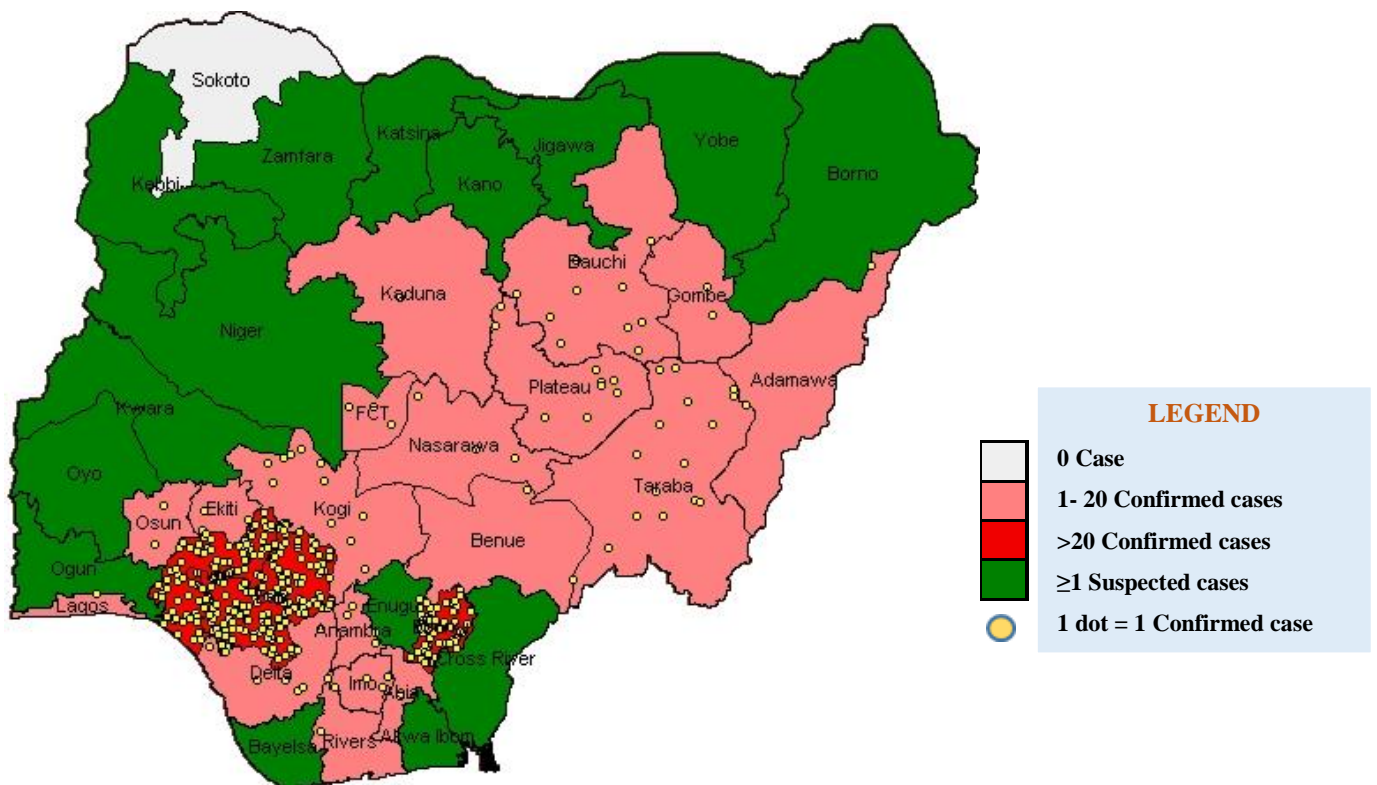


Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 1st July, 2018

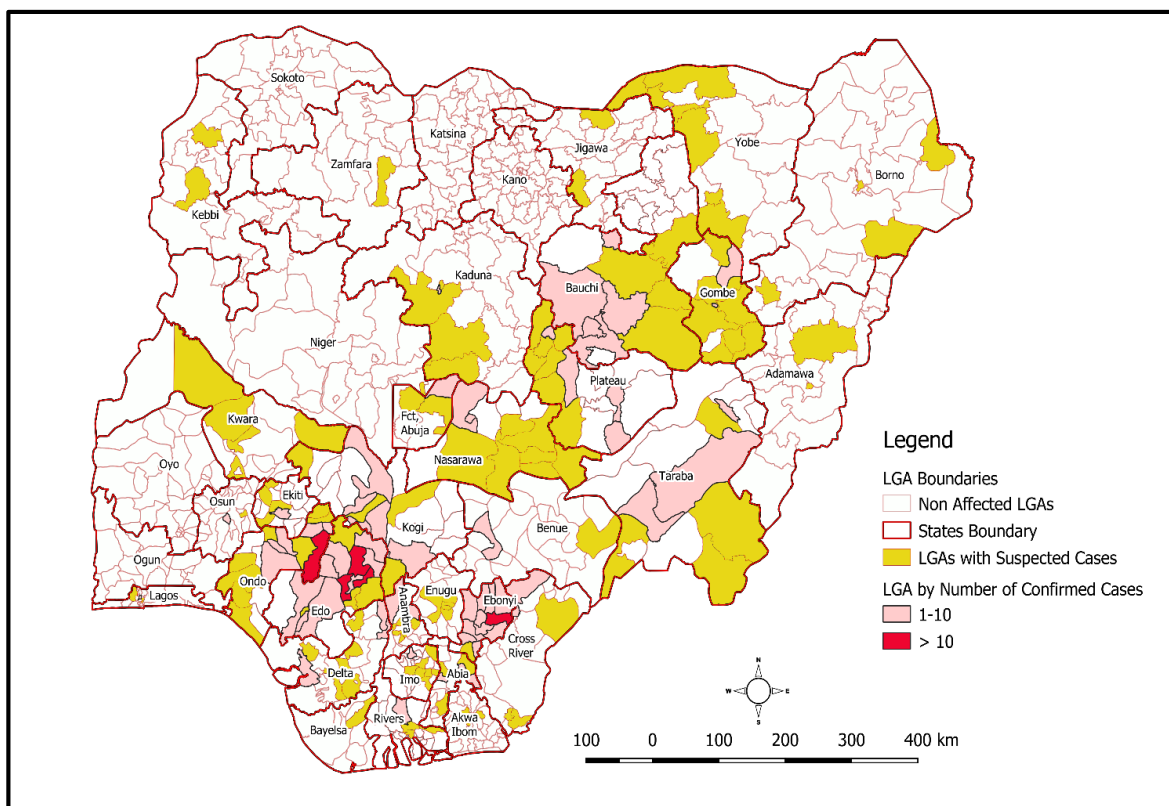


Figure 2. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA

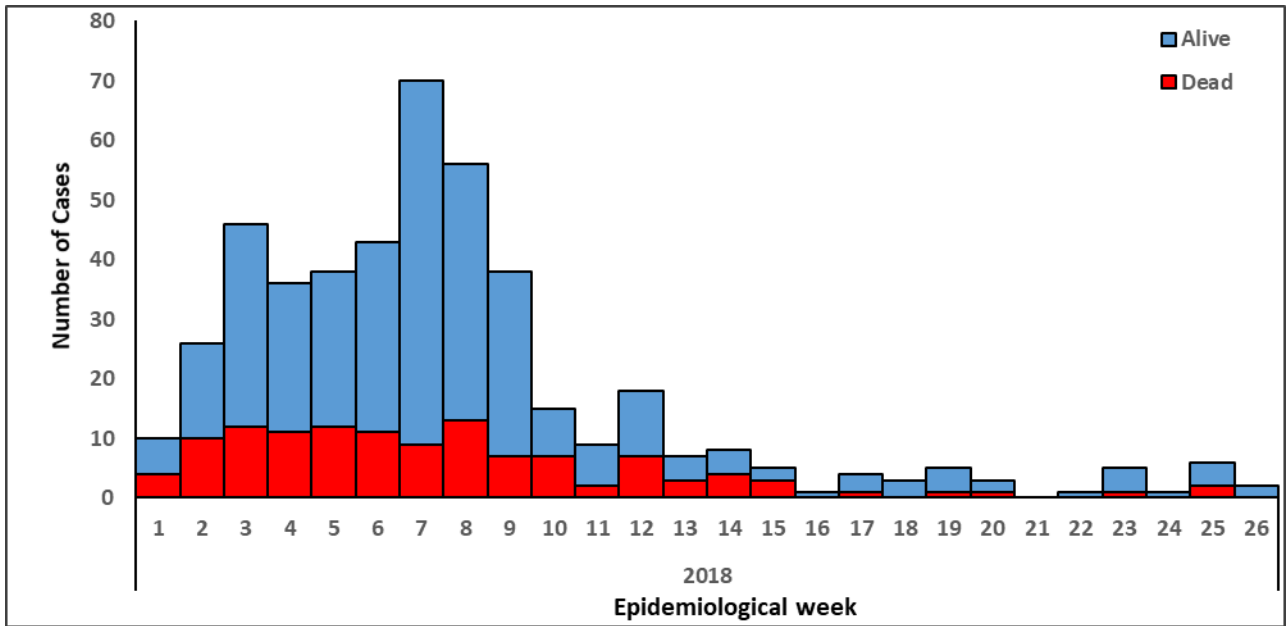


Figure 3. Epicurve of Lassa fever Confirmed (446) and Probable (10) Cases in Nigeria week 1- 26, 2018

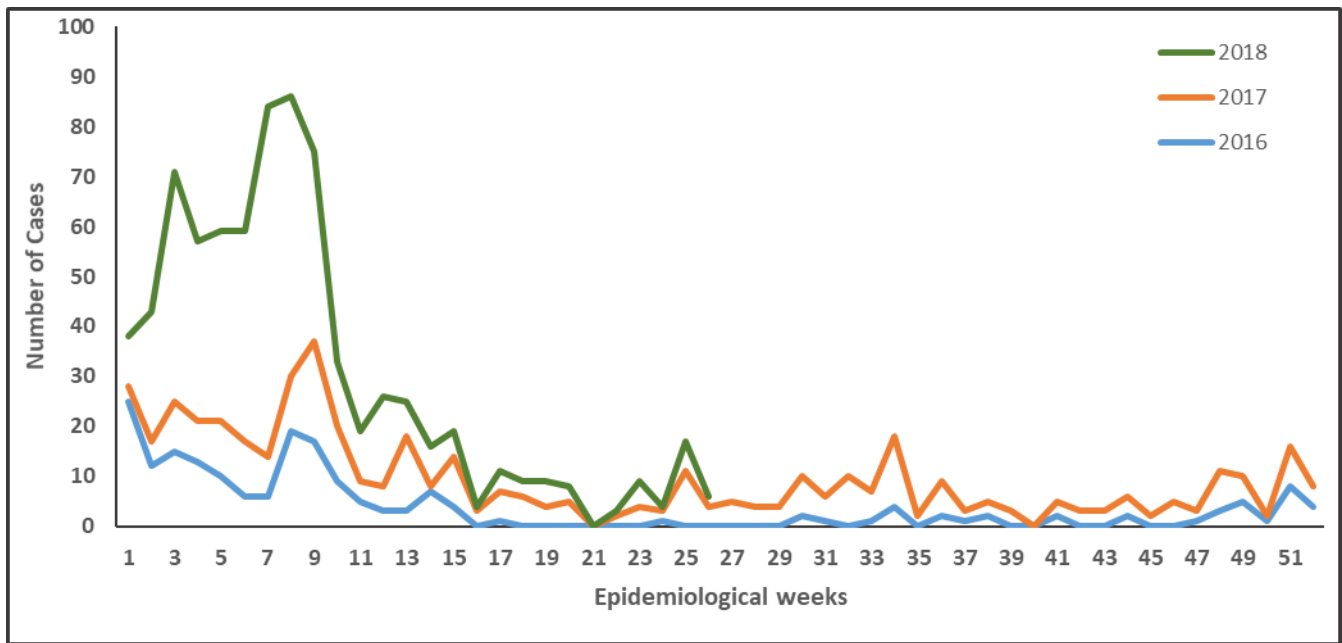


Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018

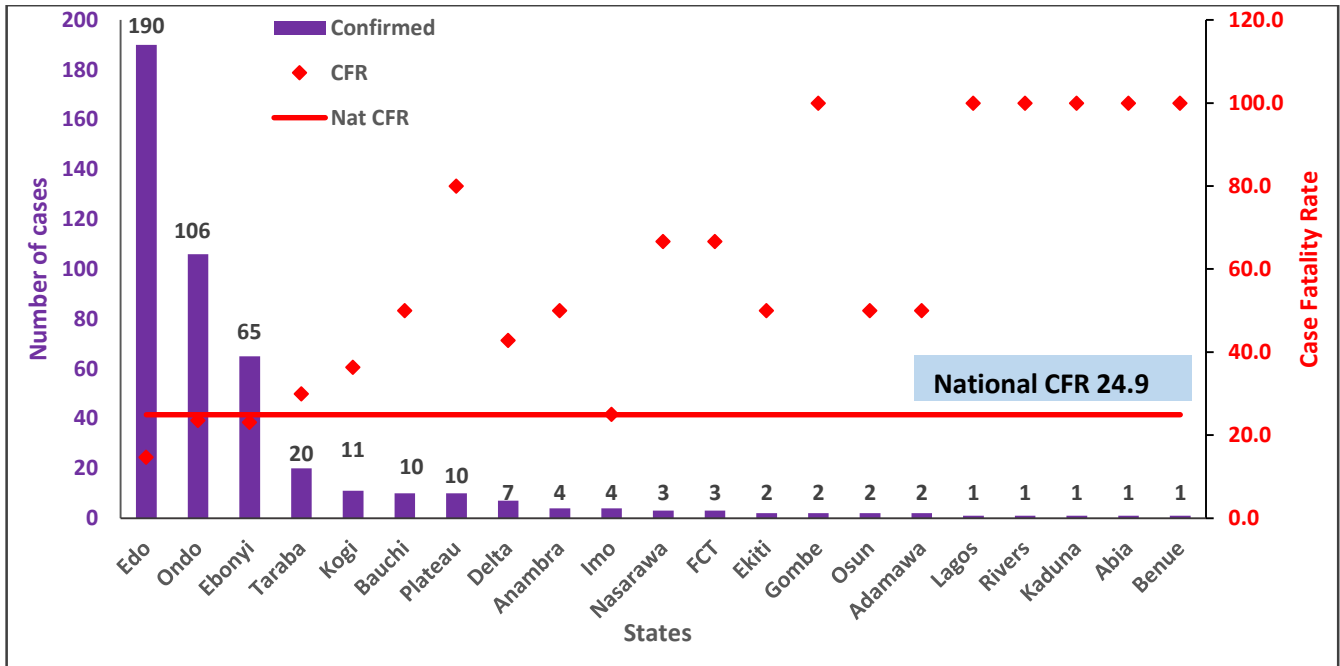


Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 1st July 2018

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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