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Protecting the health of Nigerians
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Lassa fever Situation Report

Epi Week 30: 25 – 31 July 2022

Key Points

Table 1: Summary of current week (30), cumulative from Epi week 1–30, 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 30)	100	10	0	0	0.0%	State(s): 3 LGA(s): 5
2022 Cumulative (week 30)	5990	867	37	164	18.9%	State(s): 24 LGA(s): 99
2021 Cumulative (week 30)	2620	346	3	79	22.8%	State(s): 14 LGA(s): 59

Highlights

- In week 30, the number of new confirmed cases is the same as reported in week 29, 2022, with 10 cases. These were reported from Ondo, Edo and Bauchi States (Table 3)
- Cumulatively from week 1 to week 30, 2022, 164 deaths have been reported with a case fatality rate (CFR) of 18.9% which is lower than the CFR for the same period in 2021 (22.8%)
- In total for 2022, 24 States have recorded at least one confirmed case across 99 Local Government Areas (Figures 2 and 3)
- Of all confirmed cases, 70% are from Ondo (30%), Edo (26%), and Bauchi (14%) 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 30
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels

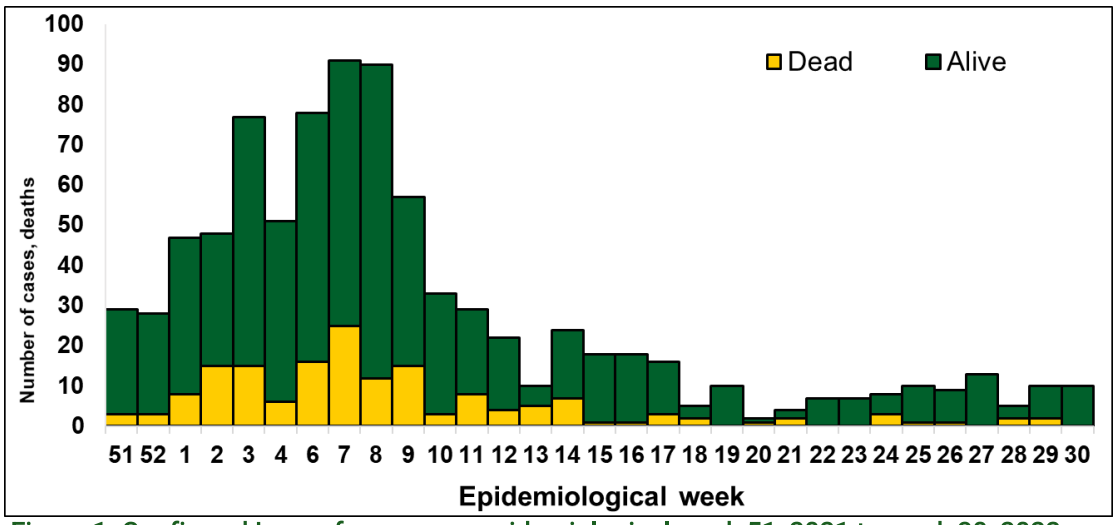

Figure 1. Confirmed Lassa fever cases epidemiological week 51, 2021 to week 30, 2022

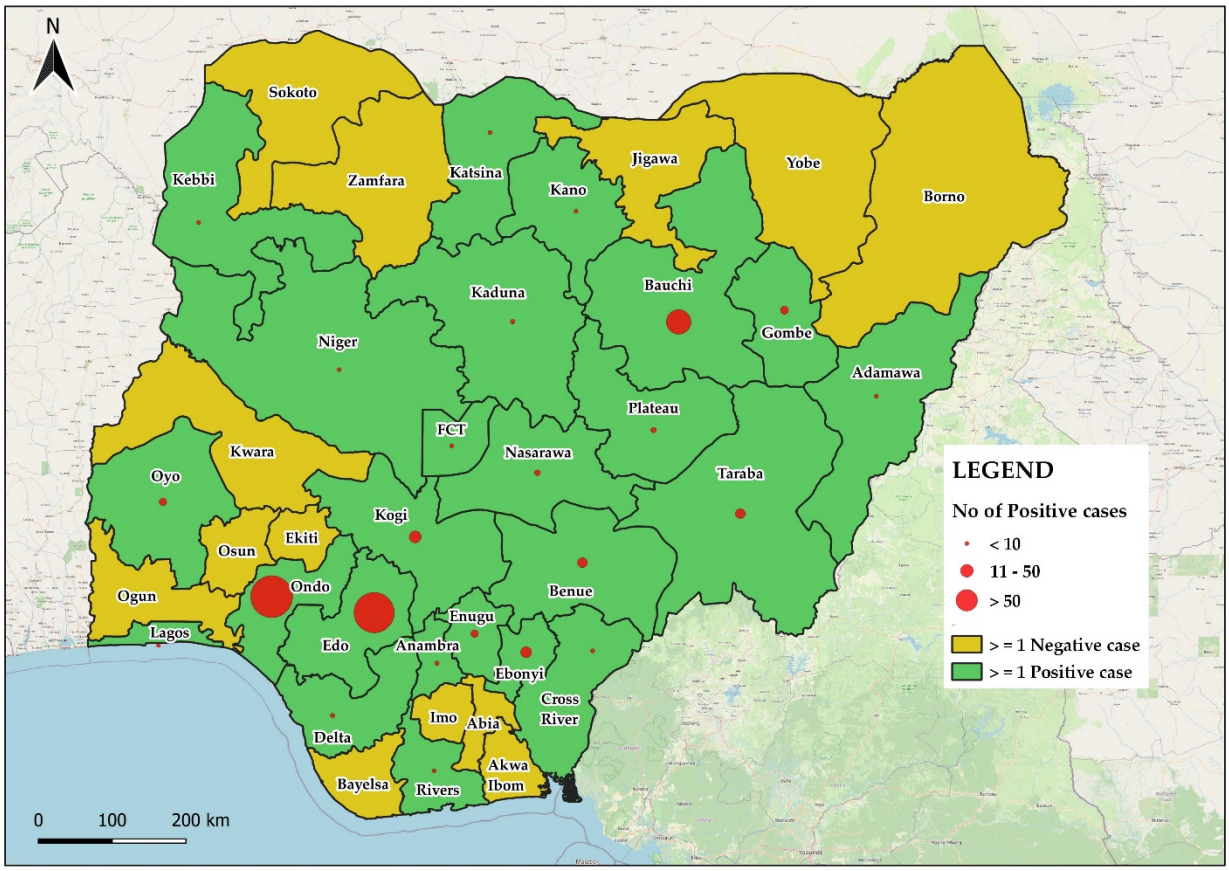

Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 30, 2022

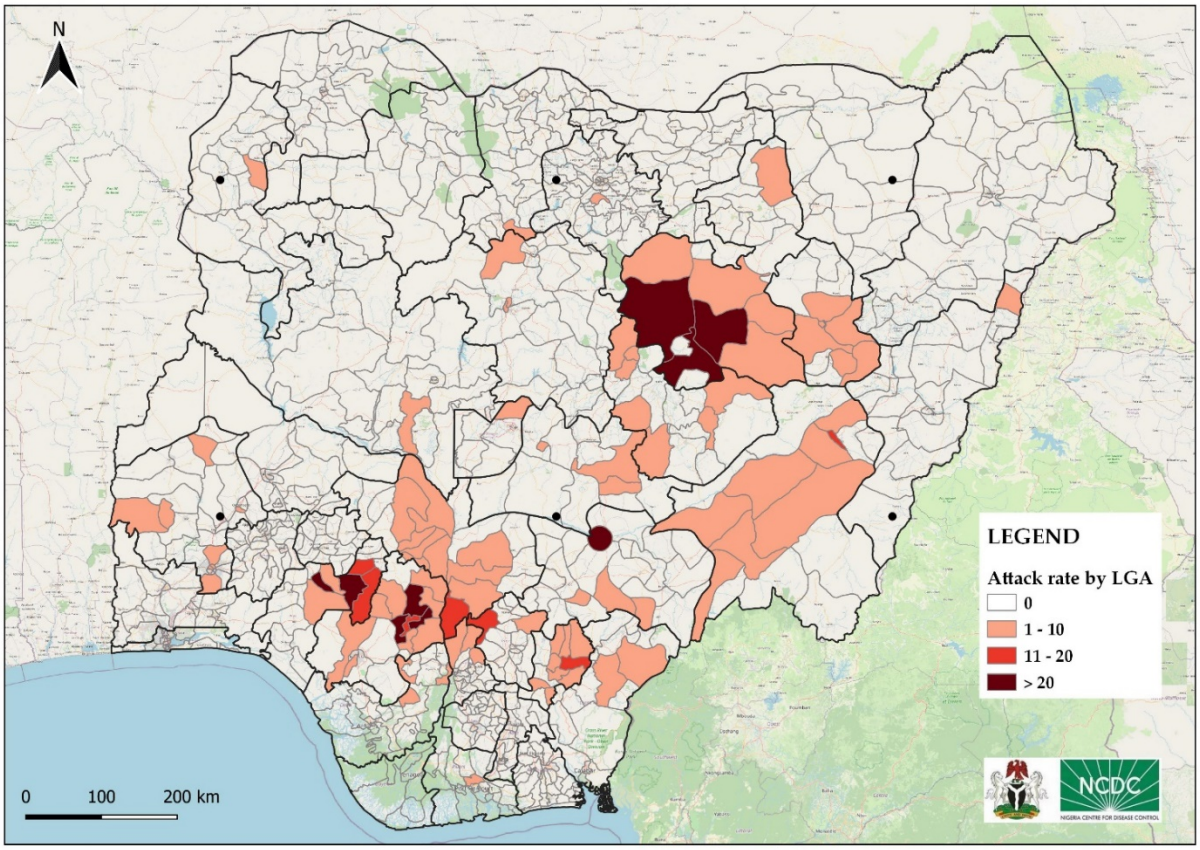

Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 30, 2022

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	1	⇑	54
Cases managed at the treatment centres	10	⇔	805
Contact tracing			
Cumulative contact listed	0	⇔	3424
Contacts under follow up	55	⇑	55
Contacts completed follow up	5	⇑	3309
Symptomatic contacts	0	⇔	101
Positive contacts	0	⇔	49
Contacts lost to follow up	0	⇔	11

Key

⇑ Increase
⇓ Decrease
⇔ No difference

	States	Current week: (Week 30)						Cumulative (Week 1 - 30)				
		Cases					Deaths	Cases				Deaths
		Suspected	Confirmed	Trend	Probable	HCW*	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW*	(Confirmed Cases)
1	Ondo	37	7	▲				1160	264		11	47
2	Edo	56	2	▼				2189	222		3	29
3	Bauchi	2	1	▲				784	118		26	12
4	Kogi							130	46			7
5	Ebonyi							244	40	1	3	19
6	Benue							258	35	2	3	8
7	Taraba							98	34	3	1	14
8	Gombe							239	24	8	2	8
9	Oyo							112	21	14	4	4
10	Enugu							92	20			2
11	Nasarawa							93	11	5		6
12	Plateau	1						65	10			
13	Anambra							24	4			1
14	Kaduna							92	4	3	1	3
15	Delta	1						72	3			
16	FCT							53	2			
17	Cross River							11	2			1
18	Adamawa	1						16	1			
19	Niger	1						12	1			
20	Kebbi							5	1			
21	Lagos							32	1			1
22	Kano							37	1			1
23	Katsina							17	1			1
24	Rivers							6	1			
25	Zamfara							5				
26	Sokoto							2				
27	Akwa Ibom							7				
28	Osun							8		1		
29	Yobe	1						27				
30	Imo							15				
31	Ekiti							2				
32	Abia							20				
33	Borno							15				
34	Bayelsa							7				
35	Jigawa							9				
36	Ogun							15				
37	Kwara							13				
	Total	100	10		0	0	0	5986	867	37	54	164

Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2022

Key	
▼	Decrease
▲	Increase

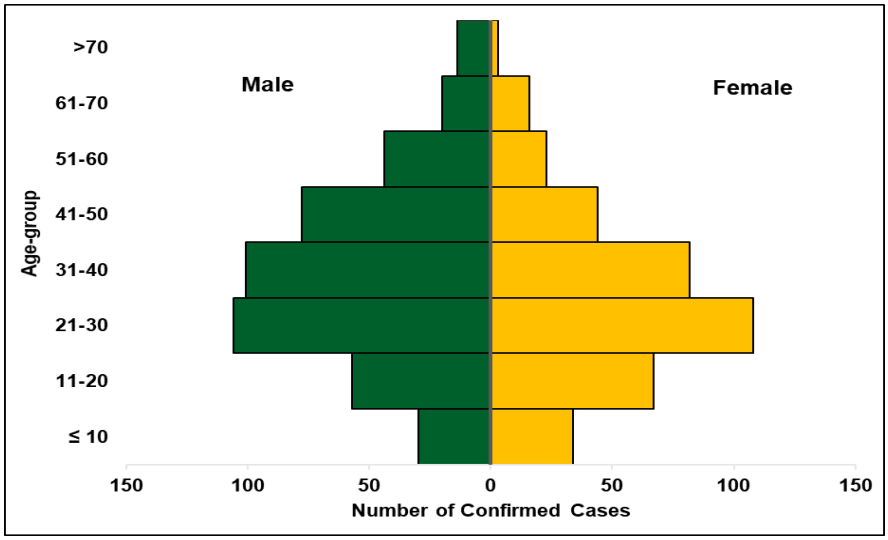

Figure 4. Age and sex pyramid of confirmed Lassa fever cases in Nigeria, 2022

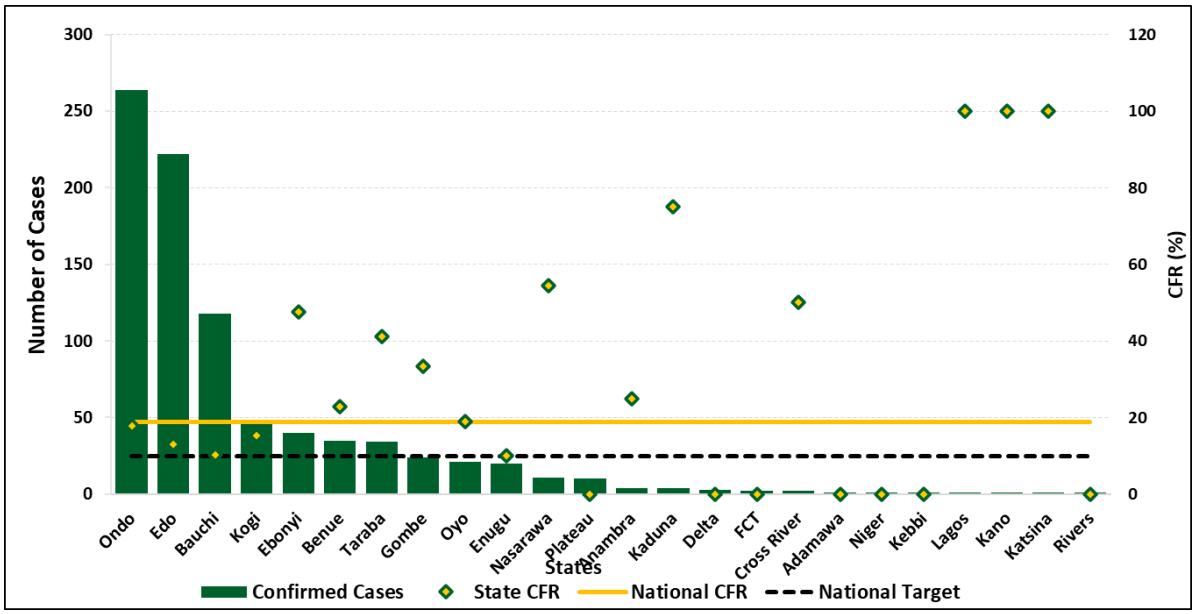

Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 30, 2022

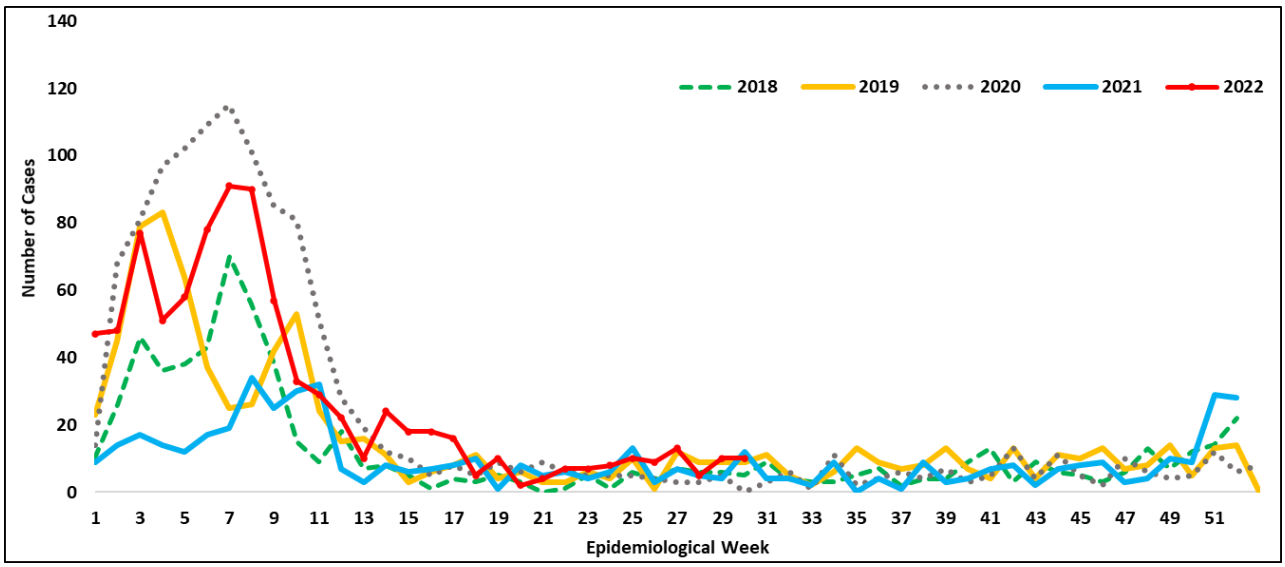

Figure 6: Trend of confirmed cases by epidemiological week, 2018– 2022, Nigeria

Response activities

- Lassa fever alert letters sent to States
- The National Emergency Operations Centre response mode Level 2 activated for effective multi-sectoral, multi-disciplinary coordination of 2022 Lassa fever outbreak response
- Lassa fever preparedness assessment carried out for 36 States and FCT
- 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 identified 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

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
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