

NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

EXPERTS MEET TO DELIBRATE ON CASE MANAGEMENT OF LASSA FEVER



In the 16th week of the outbreak, only one new confirmed case was reported, which is the lowest weekly case count since the onset of the outbreak. No deaths were recorded.

During the outbreak, there has been a growing need to review the national case management protocol for Lassa. The Nigeria Centre for Disease Control (NCDC) hosted the National Lassa fever Case Management meeting between 26th and 27th April 2018.

The meeting brought together experts, physicians and nurses involved in managing Lassa fever cases, logisticians at treatment centres and partners with the purpose of harmonising efforts towards improved practices for Lassa fever case management. The objectives of the meeting were:

- To identify different case management approaches and build consensus on standardization of treatment guidelines for Lassa Fever
- To prioritise infection prevention and control (IPC) measures for Lassa fever among HCWs in all treatment centres
- To build collaborations for future Lassa fever research

The two-day meeting had discussions in which some consensus was reached across treatment duration, revising the standard case definition for Lassa fever, defining other laboratory investigations for patient management and post exposure prophylaxis for contacts of confirmed cases. The meeting also provided an opportunity for infection prevention and control measures and safe management of corpses in the treatment facilities to be discussed, with all participants understanding their roles and responsibilities in these areas.

The need to build a research culture amongst participants was highlighted and a plenary session was held during the meeting. This session provided the opportunity for local researchers to intimate the participants about ongoing research, areas of focus for the country and collaboration opportunities for research. The next steps following the meeting included review of the current guidelines based on consensus reached, dissemination and adoption of the guidelines, commence use of the guidelines and strengthen the drive for research.

In the coming months, NCDC has been tasked with the responsibility of ensuring that there are standard national guidelines available and disseminated widely. In the face of this, more research is required as questions arise daily on clinical management of cases and the need to encourage best practices. It is hoped that this meeting will provide the footstool for further studies to be carried out in the area of Lassa fever.

SUMMARY OF REPORTS

In the reporting week ending on April 15, 2018:

- There were 237 new cases of Acute Flaccid Paralysis (AFP) reported. None was confirmed as Polio. The last reported case of Polio in Nigeria was in August 2016. Active case search for AFP is being intensified as Nigeria has reinvigorated its efforts at eradicating Polio.
- 615 suspected cases of Cholera were reported from ten LGAs in eight States (Abia – 1, Bauchi – 462, Borno – 17, Ekiti – 5, Kaduna – 2, Kano – 27, Yobe – 98 & Zamfara – 3). Of these, 16 were laboratory confirmed and three deaths were recorded.
- 21 suspected cases of Lassa fever were reported from 15 LGAs in nine States (Abia - 3, Anambra – 1, Ekiti – 2, FCT – 3, Gombe – 4, Katsina – 1, Kogi – 1, Plateau – 3 & River – 3). One was laboratory confirmed and three deaths were recorded.
- There were 365 suspected cases of Cerebrospinal Meningitis (CSM) reported from 72 LGAs in 13 States (Adamawa – 2, Bauchi – 13, Borno – 3, Enugu – 1, Gombe – 1, Jigawa – 54, Kaduna – 18, Kano – 11, Katsina - 159, Kebbi – 4, Sokoto – 58, Taraba – 1, Yobe - 4 & Zamfara - 37). Of these, seven were laboratory confirmed and 23 deaths were recorded. Ongoing surveillance for CSM has been intensified in all the 26 States in the Nigeria meningitis belt and case-based surveillance commenced from 4th December, 2017
- There were 723 suspected cases of Measles reported from 37 States. No were laboratory confirmed and 19 deaths were recorded.

In the reporting week, all States sent in their report. This is a remarkable improvement! Timeliness of reporting increases from 88% in previous week (week 14) to 89% in current week (week 15, 2018) while completeness remains from 100% at same period. It is very important for all States to ensure timely and complete reporting at all times, especially during an outbreak.

REPORT ANALYSIS AND INTERPRETATION

1. AFP

- 1.1. As at April 15th 2018, no new case of WPV was recorded
- 1.2. In the reporting week, 237 cases of AFP were reported from 177 LGAs in 31 States & FCT
 - 1.2.1. AFP Surveillance has been enhanced and outbreak response is on-going in Borno and other high risk States

- 1.2.2. The 1st round of SIPDs in 2018 conducted from 20th – 23th January 2018 in the 14 high risk States using bOPV. The schedule for other SIAs is as described in Table 2
- 1.2.3 The 2nd round of SIPDs conducted from 3rd to 6th of March, 2018 in Borno, Yobe, Adamawa and Zamfara (moved from January round) States using bOPV
- 1.3. The first round of NIPDs completed in 36 States & FCT from the 7th – 10th April, 2018 using bOPV
- 1.4. The SIAs were strengthened with the following events:
- 1.4.1. Immunisation for all vaccine-preventable diseases in some selected wards/LGAs.
- 1.4.2. Use of health camp facilities.
- 1.4.3. Field supportive supervision and monitoring.
- 1.4.4. Improved Enhanced Independent Monitoring (EIM) and Lots Quality Assessments (LQAs) in all Polio high risk States.
- 1.4.5. High level of accountability framework

Table 2: 2018 SIAs

Revised FSU 2018 Plan to accommodate Zamfara CSM & YF preventive vaccination							
S/No	Month	Dates	Scope	Target Populations	% of the Total Target Population	Antigen	Remarks
1	January	16th - 20th	Zamfara			CSM	Done
2	January	20 th – 23 rd	SIPDs (13 HR States) (Excluding Zamfara)	22,958,038	46%	bOPV	
3	Jan-Feb	25th Jan- 3rd Feb	Zamfara			YF	
4	February	1st-13th	Measles SIA (NC2)			Measles	
5	March	8th-20th	Measles SIA (South 17 States)			Measles	
6	February & March	1st February - 31st March	HH based Micro plan with Enumeration of <1yr, <5yrs & <15yrs	Kebbi, Gombe, Bauchi & Taraba			
7	March	3rd-6th	SIPDs (Borno, Yobe, Adamawa) & Zamfara (Moved Jan round)	5,277,401	10.60%	bOPV	
8	March	24th-27th	35th ERC				
9	April	7th-10th	NIPDs (36+1)	49,882,026	100%	bOPV	
10	April - June	April 23rd - June 23rd	HH based Micro plan with Enumeration of <1yr, <5yrs & <15yrs	Yobe & Adamawa			
11	May	5th-8th	>NIPDs (33+1) Excluding Borno, Yobe & Adamawa	46,140,332	92.40%	bOPV	Pending
12	July-August	1st July - 30th Aug	HH based Micro plan with Enumeration of <1yr, <5yrs & <15yrs	Zamfara, Katsina & Jigawa			
13	October	13th-16th	SIPDs (18 HR States)	31,715,796	63.50%	bOPV	
14	October	23rd-24th	36th ERC				
15	December	8th-11th	SIPDs (Borno + 7 HR States)	7,482,305	15%	bOPV	

2. CEREBROSPINAL MENINGITIS (CSM)

- 2.1 In the reporting week, 365 suspected Cerebrospinal Meningitis (CSM) cases with seven Lab. Confirmed and 23 deaths (CFR, 6.30%) were reported from 72 LGAs (13 States; Adamawa – 2, Bauchi – 13, Borno – 3, Enugu – 1, Gombe – 1, Jigawa – 54, Kaduna – 18, Kano – 11, Katsina - 159, Kebbi – 4, Sokoto – 58, Taraba – 1, Yobe - 4 & Zamfara - 37)

compared with 2048 suspected cases with 19 Lab. Confirmed cases and 52 deaths (CFR, 2.54%) from 116 LGAs (21 States) at the same period in 2017 (Figure 2)

2.2 Between weeks 1 and 15 (2018), 2427 suspected meningitis cases with 77 laboratory confirmed and 154 deaths (CFR, 6.35%) from 222 LGAs (25 States) were reported compared with 6490 suspected cases and 458 deaths (CFR, 7.06%) from 240 LGAs (30 States) during the same period in 2017.

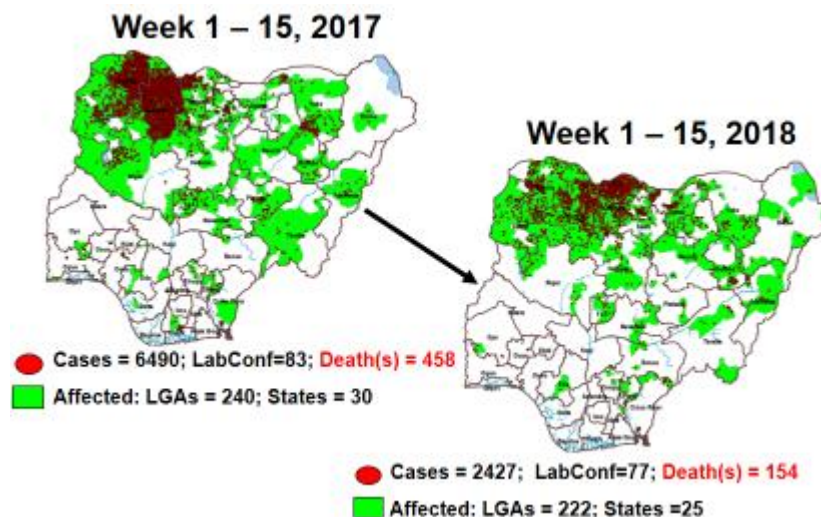
2.3 Timeliness/completeness of CSM case-reporting from States to the National Level (2018 versus 2017): on average, 88.2% of the 26 endemic States sent CSM reports in a timely manner while 98.2% were complete in week 1 - 15, 2018 as against 76.4% timeliness and 92.3% completeness recorded within the same period in 2017

2.4 The National CSM Emergency Operations Centre has been activated and is currently on response mode

2.5 Enhanced surveillance/ case based surveillance began 1st of December 2017

2.6 The National CSM Guidelines are available via http://ncdc.gov.ng/themes/common/docs/protocols/51_1510449270.pdf

Figure 2: Map of Nigeria showing areas affected by CSM, week 1 - 15, 2017 & 2018



2.7 State CSM Emergency Operations Centre has been activated in Zamfara, Katsina and Sokoto States respectively

2.8 Preventive vaccination conducted in Yobe State with Men Afrivac in two phases -7th to 11th and 14th to 18th February, 2018

2.9 NCDC deployed multi-disease response team to Bauchi State on the 11th March, 2018 to support the State

- 2.10 NCDC, NPHCDA and partners conducted reactive vaccination approved by ICG in 12 wards (three States: Zamfara, Katsina & Sokoto) from 21st – 27th April, 2018
- 2.11 Monitoring of risk communication activities in all States especially high risk States
- 2.12 Surveillance Outbreak and Response Management Analysis System (SORMAS) tool deployed in Zamfara, Sokoto and Katsina states

3. CHOLERA

3.1 615 suspected cases of Cholera with 16 Lab. Confirmed cases and three deaths (CFR, 0.49%) were reported from ten LGAs (eight States; Abia – 1, Bauchi – 462, Borno – 17, Ekiti – 5, Kaduna – 2, Kano – 27, Yobe – 98 & Zamfara – 3) in week 15, 2018 compared with seven suspected cases reported from Maru and Zurmi LGAs (Zamfara State) during the same period in 2017 (Figure 3).

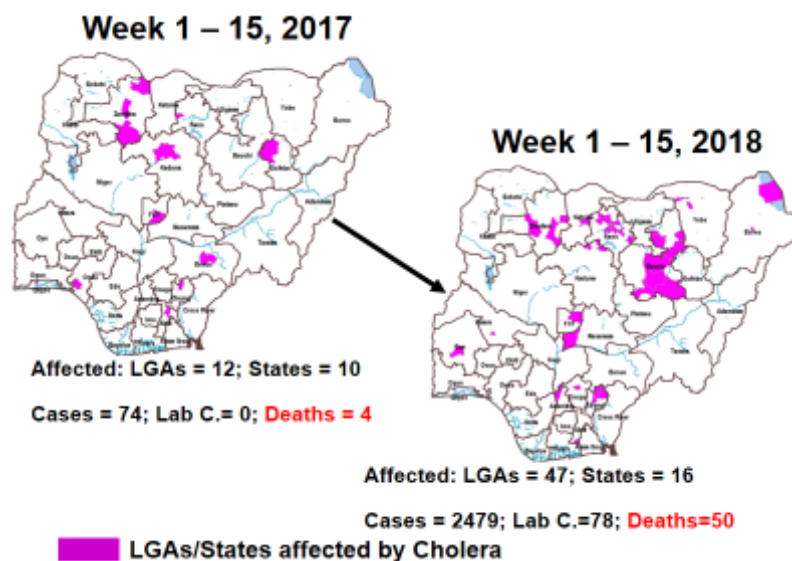
3.2 Between weeks 1 and 15 (2018), 2479 suspected Cholera cases with 78 laboratory confirmed and 50 deaths (CFR, 2.02%) from 47 LGAs (16 States) were reported compared with 74 suspected cases and four deaths (CFR, 5.41%) from 12 LGAs (ten States) during the same period in 2017.

3.3 National Preparedness and Response to Acute Watery Diarrhoea/ Cholera Guidelines have been finalised:
http://ncdc.gov.ng/themes/common/docs/protocols/45_1507196550.pdf

3.4 Ongoing plans for nationwide Cholera campaign with Federal Ministry of Water Resources and partner agencies

3.5 Rapid Response Team deployed to respond to recent cluster of cases in Bauchi State

Figure 3: Status of LGAs/States that reported Cholera cases in week 1 - 15, 2017 & 2018

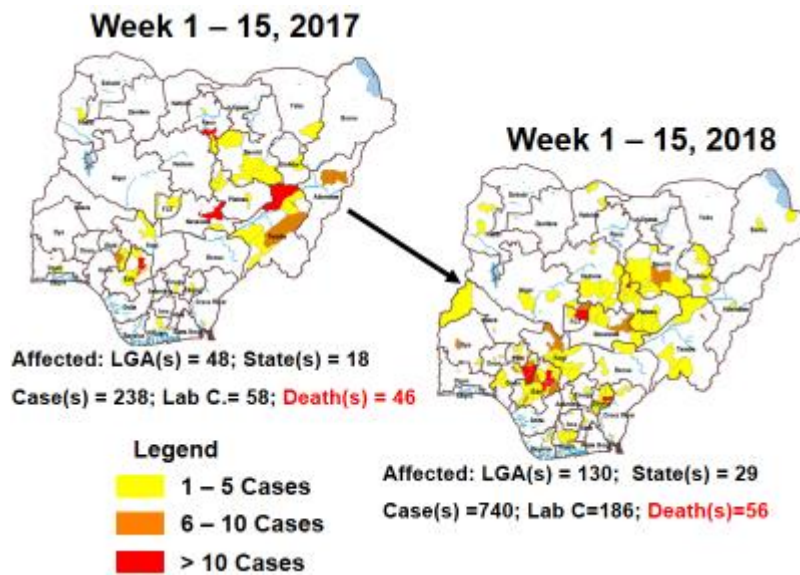


4 LASSA FEVER

Please note that the data reflects the routine reports i.e. all suspected cases including the laboratory positive and negative cases

- 4.1 21 suspected cases of Lassa fever with one Laboratory confirmed and three deaths (CFR, 14.29%) were reported from 15 LGAs (nine States: Abia - 3, Anambra – 1, Ekiti – 2, FCT – 3, Gombe – 4, Katsina – 1, Kogi – 1, Plateau – 3 & River – 3) in week 15, 2018 compared with three suspected cases and two deaths (CFR,66.70%) reported from three LGAs (three States) at the same period in 2017
- 4.2 Laboratory results of the 21 suspected cases; one positive for Lassa fever (Kogi - 1), 20 were negative for Lassa fever & other VHFs (Abia – 3, Adamawa – 1, Ekiti – 2, FCT– 3, Gombe – 4, Plateau – 3 & Rivers - 3)
- 4.3 Between weeks 1 and 15 (2018), 740 suspected Lassa fever cases with 186 laboratory confirmed cases and 56 deaths (CFR, 7.57%) from 130 LGAs (29 States) were reported compared with 238 suspected cases with 58 laboratory confirmed cases and 46 deaths (CFR, 19.33%) from 48 LGAs (18 States) during the same period in 2017 (Figure 4)
- 4.4 Surveillance Outbreak and Response Management Analysis System (SORMAS) tool deployed in Edo, Ondo and Ebonyi States
- 4.5 Investigation and active case search ongoing in affected States with coordination of response activities by the NCDC with support from partners
- 4.6 Response materials for VHF provided to support States and health facilities
- 4.7 National VHF guidelines (National Viral Haemorrhagic Fevers Preparedness guidelines, Infection Prevention and Control of VHF and Standard Operating Procedures for Lassa fever management) are available on the NCDC website-
<http://ncdc.gov.ng/diseases/guidelines>
- 4.8 Offsite support provided by NCDC/partners in all affected States
- 4.9 NCDC in collaboration with ALIMA is providing support to treatment centres in Ebonyi, Ondo and Edo States where most of the patients are managed
- 4.13 NCDC deployed data management tools (SORMAS) on the field to encourage real time reporting and data analysis/interpretation to inform prompt decision making
- 4.14 NCDC and Irrua Specialist teaching Hospital is organising a nationwide training on Lassa fever case management from 2nd May, 2018
- 4.15 States are enjoined to intensify surveillance and promote Infection, Prevention and Control (IPC) measures in health facilities

Figure 4: Map of Nigeria showing areas affected by Lassa fever, week 1 - 15, 2017 & 2018



5 MEASLES

5.1 In the reporting week, 723 suspected cases of Measles and 19 deaths (CFR, 2.63%) were reported from 37 States compared with 425 suspected cases with four Lab. Confirmed and seven deaths (CFR, 1.65%) reported from 31 States during the same period in 2017

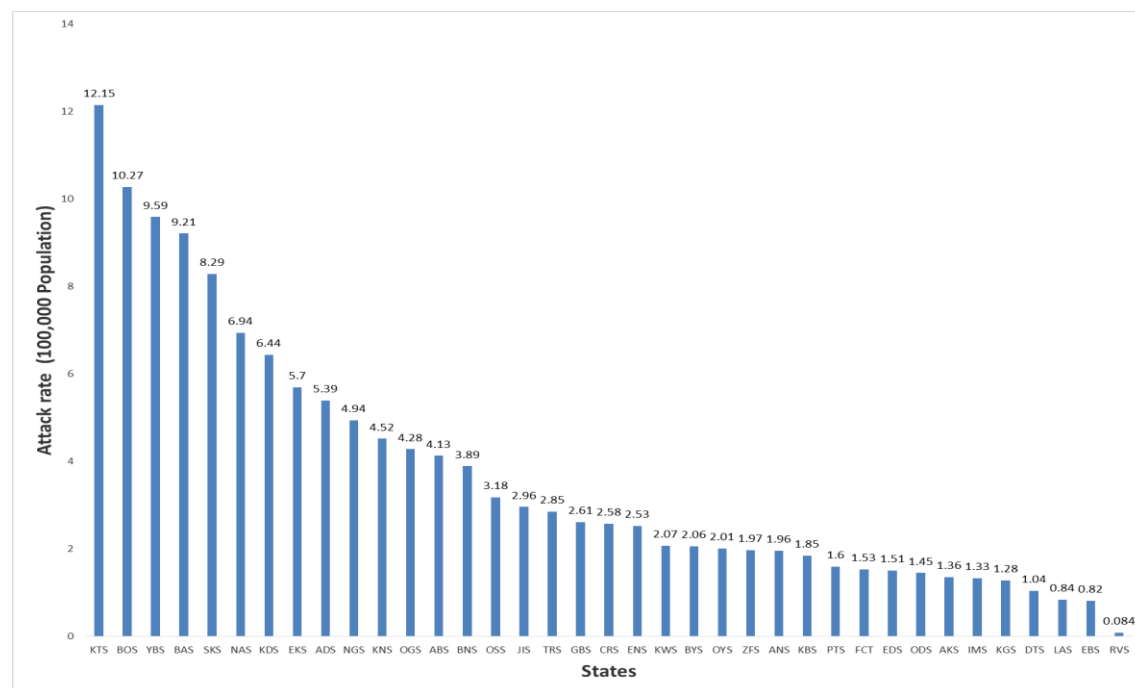
5.2 So far, 7613 suspected Measles cases with nine Lab. Confirmed and 84 deaths (CFR, 1.1%) were reported from 36 States and FCT compared with 8686 suspected cases with 59 laboratory confirmed and 58 deaths (CFR, 0.67 %) from 37 States during the same period in 2017

5.3 Response measures include immunization for all vaccine-preventable diseases in some selected/affected wards/LGAs during SIAs, as well as case management

5.4 Measles mass campaign completed in the 17 Southern States from March 8 – 20, 2018

5.5 Measles mass campaign completed in the North central States in February, 2018 while North East and North Western States were conducted in 2017

Figure 3: Suspected Measles attack rate by States, week 1 - 15, 2018 as at 15th April, 2018



6 GUINEA WORM DISEASE

- 6.1 In the reporting week, no rumour report of Guinea Worm disease was received from any State.
- 6.2 Nigeria has celebrated eight consecutive years of zero reporting of Guinea worm disease in the country. The Country has been officially certified free of Dracunculiasis transmission by the International Commission for the Certification of Dracunculiasis Eradication (ICCDE).

(For further information, contact Nigeria Guinea Worm Eradication Program / Neglected Tropical Diseases Division, Public Health Department/Federal Ministry of Health)

7. Update on national Influenza sentinel surveillance, Nigeria week 1 - 16, 2018

- 7.1 From week 1- 16, 142-suspected cases were reported, of which 133 were Influenza like-illness (ILI), nine Severe Acute Respiratory Infection (SARI).
- 7.2 A total of 142 samples were received and all samples were processed. Of the processed samples, 133(93.7%) were ILI cases, nine (6.3%) were Severe Acute Respiratory Infection (SARI).

- 7.4. Of the 133 processed ILI samples, 16 (12.0%) was positive for Influenza A; 26(19.6%) positive for Influenza B and 91(68.4%) were negative.
- 7.5 For the processed nine SARI samples, five (55.56%) were positive for Influenza A while the remaining four (44.44%) were negative.
- 7.6 42 (29.6%) of the processed 133 samples were positive for Influenza, with 16 (38.1%) of these positive for Influenza A and 26 (61.9%) positive for Influenza B.
- 7.5. The subtypes A seasonal H3, 2009A/H1N1 and A/not subtyped account for (0.0%), 11 (68.8%) and 5 (31.2%) of the total influenza A positive samples respectively.
- 7.6 The subtypes B VICTORIA, B Not subtyped and B Yamagata account for 10(38.5%), 16(61.5%) and 0(0.0%) of the total influenza B positive samples respectively
- 7.7 The percentage influenza positive was highest (75.0%) in week 6, 2018
- 7.8 In the reporting week 1 -16, no samples were left unprocessed

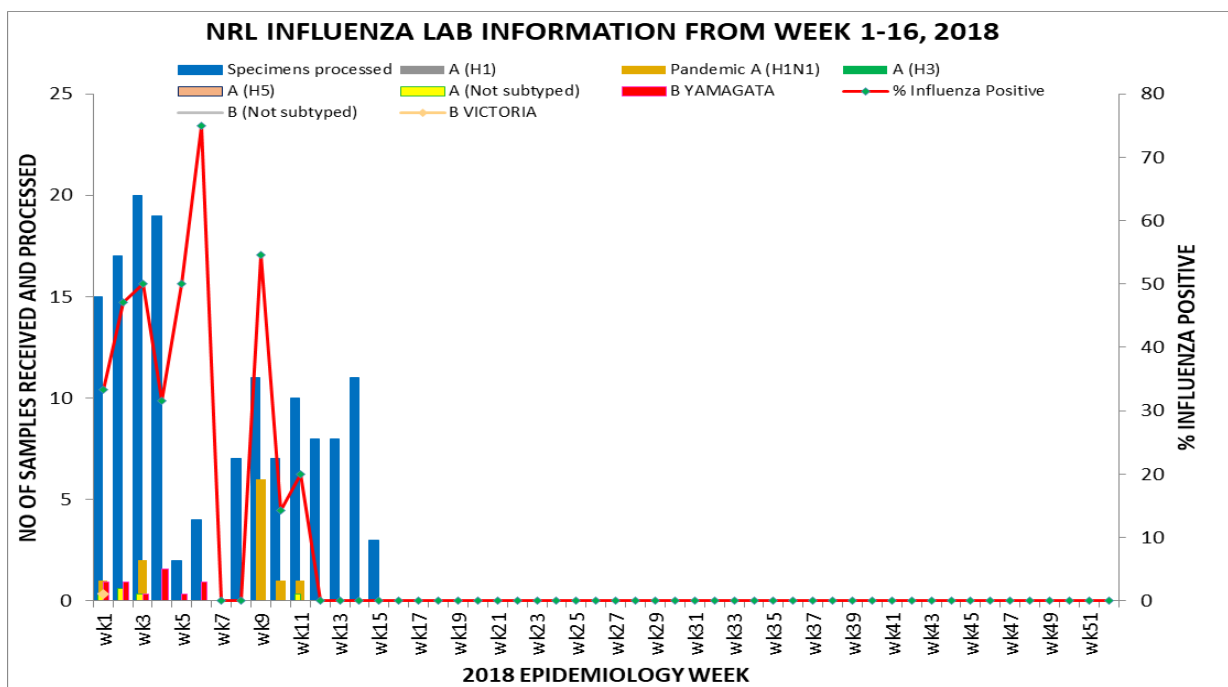


Figure 19: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 16, 2018)

FOR MORE INFORMATION CONTACT

Surveillance Unit:

Nigeria Centre for Disease Control,

801 Ebitu Ukiwe Street, Jabi, Abuja, Nigeria.

epidreport@ncdc.gov.ng
www.ncdc.gov.ng/reports
0800-970000-10

Table 3: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1 -15, 2018, as at 15th April, 2018

Keys:																	<table border="1"> <tr> <td rowspan="3">Timely Reports</td> <td><50%</td> <td>Poor</td> <td>1 States</td> </tr> <tr> <td>50-79%</td> <td>Good</td> <td>6 States</td> </tr> <tr> <td>80-100%</td> <td>Excellent</td> <td>30 States</td> </tr> </table>				Timely Reports	<50%	Poor	1 States	50-79%	Good	6 States	80-100%	Excellent	30 States
Timely Reports	<50%	Poor	1 States																											
	50-79%	Good	6 States																											
	80-100%	Excellent	30 States																											
T= Arrived on Time																														
L= Arrived late		N Report not received																												
N= No Report (Report not received)																														
State	GeoZones	W01	W02	W03	W04	W05	W06	W07	W08	W09	W10	W11	W12	W13	W14	W15	Expected (Es)	Timely Rpts (Ts)	Late Rpts (Ls)	Rpts Not Recvd (Ns)	% Timely	% Complete								
1 Abia	SEZ	T	T	T	T	T	L	L	L	T	L	T	T	T	T	T	15	11	4	0	73%	100%								
2 Adamawa	NEZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
3 Akwa Ibom	SSZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
4 Anambra	SEZ	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
5 Bauchi	NEZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
6 Bavela	SSZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
7 Benue	NCZ	L	T	L	T	T	T	L	L	L	L	T	T	T	L	L	15	7	8	0	47%	100%								
8 Borno	NEZ	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
9 Cross River	SSZ	T	T	T	T	T	L	L	L	L	L	T	T	T	T	T	15	10	5	0	67%	100%								
10 Delta	SSZ	T	T	T	T	L	T	L	L	T	T	T	T	T	T	T	15	12	3	0	80%	100%								
11 Ebonyi	SEZ	T	L	L	T	T	L	T	L	T	T	T	L	T	T	T	15	10	5	0	67%	100%								
12 Edo	SSZ	T	T	T	T	L	L	L	L	T	T	T	T	T	T	T	15	11	4	0	73%	100%								
13 Ekiti	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
14 Enugu	SEZ	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
15 FCT	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
16 Gombe	NEZ	T	T	T	L	T	T	L	T	T	L	T	T	T	T	T	15	12	3	0	80%	100%								
17 Imo	SEZ	L	T	T	T	T	T	T	T	T	T	L	T	T	T	T	15	13	2	0	87%	100%								
18 Jigawa	NWZ	T	T	T	L	T	L	L	T	L	L	T	L	T	T	T	15	9	6	0	60%	100%								
19 Kaduna	NWZ	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	15	14	1	0	93%	100%								
20 Kano	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
21 Katsina	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
22 Kebbi	NWZ	L	L	L	T	L	T	L	T	T	T	T	T	T	L	T	15	9	6	0	60%	100%								
23 Kogi	NCZ	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
24 Kwara	NCZ	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
25 Lagos	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
26 Nasarawa	NCZ	T	T	T	T	T	T	L	L	T	T	T	T	T	T	T	15	13	2	0	87%	100%								
27 Niger	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
28 Ogun	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
29 Ondo	SWZ	T	T	T	T	T	T	L	L	L	T	T	T	T	T	T	15	12	3	0	80%	100%								
30 Osun	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
31 Oyo	SWZ	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
32 Plateau	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
33 Rivers	SSZ	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
34 Sokoto	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
35 Taraba	NEZ	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	14	1	0	93%	100%								
36 Yobe	NEZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	15	15	0	0	100%	100%								
37 Zamfara	NWZ	T	T	T	T	T	T	L	T	T	T	L	T	T	T	T	15	13	2	0	87%	100%								
Total number of reports expected (E)		37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	555													
Total reports sent on time (T)		32	35	34	35	34	29	25	27	33	33	35	34	36	36	35		493												
Total reports sent late (L)		5	2	3	2	3	8	12	10	4	4	2	3	1	1	2			62											
Total number of reports not received (N)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0				0										
Timeliness of reports =100*(T+E)		86.5	94.6	91.9	94.6	91.9	78.4	67.6	73.0	89.2	89.2	94.6	91.9	97.3	97.3	94.6					89%									
Completeness of reporting=100*(E-N)/E		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0						100%								
Latest Week		15																				Last updated 20th April, 2018								