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NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

Developing medium-term strategies for cholera control in Nigeria



As part of preparedness to develop medium and long term interventions for cholera control, the Nigeria Centre for Disease Control (NCDC) in collaboration with the National Primary Healthcare Development Agency (NPHCDA) and World Health Organization (WHO) organised a workshop in Abuja on the 19th July 2018. The goal was to review the country's historical data on cholera (2012 to 2017) to effectively prioritise and plan for medium & long term interventions targeting hotspots.

Nigeria is endemic for cholera with cases reported in States, mostly throughout the year. Despite previous efforts, Nigeria continues to record high incidence of cases with limited focus on water, sanitation and hygiene (WaSH) strengthening. This has prompted the call for a revision of strategies and the shift to a multi-sectoral, long term planning of interventions.

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In public health, hotspots are geographically limited areas (e.g. LGA) where sociocultural, environmental conditions facilitate the transmission of a disease. Thus, big gains can be made from targeting hotspots with integrated interventions.

To this end, Nigeria recently completed a mapping of hotspots for cholera and held a workshop to discuss findings. The workshop had representatives from the National Primary Healthcare Development Agency, Federal Ministry of Water Resources, Federal Ministry of Environment, State Ministries of Health (State Epidemiologists & State Immunization officers), WHO, UNICEF, US-CDC, Nigerian Red Cross/ICRC, MSF Spain, MSF France, MSF Belgium, MSF Swiss, Sanofi-Pasteur and other stakeholders.

With this activity, the country is on track to develop a medium term oral cholera vaccination strategy and other well defined interventions to reduce the burden of cholera.

In working with this wide range of stakeholders, we are ensuring that Nigeria has the capacity to effectively utilise the limited human and materials resources to response cholera outbreaks

SUMMARY OF REPORTS

In the reporting week ending on July 8, 2018:

- o There were 212 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.
- 469 suspected cases of Cholera were reported from 22 LGAs in eight States (Adamawa – 45, Bauchi – 115, Borno – 5, Gombe – 7, Kano –122, Katsina – 30, Kogi – 16 & Zamfara - 129). Of these, 16 were laboratory confirmed and eight deaths were recorded.

○ 20 suspected cases of Lassa fever were reported from eight LGAs in eight States (Bayelsa – 1, Edo – 2, Gombe – 1, Ogun – 4, Ondo – 9, Osun -1, Plateau - 1 and Taraba - 1). Five were laboratory confirmed and two deaths were recorded.

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- o There were five suspected cases of Cerebrospinal Meningitis (CSM) reported from four LGAs in two States (Benue -1 & Katsina -4). Of these, no was laboratory confirmed case and no death was recorded.
- o There were 226-suspected cases of Measles reported from 27 States. No laboratory confirmed and no death was recorded.

In the reporting week, all States sent in their report except Akwa-Ibom, Cross River, Delta, Enugu, Imo and Kaduna State. Timeliness of reporting decreased from 89% to 88% in the previous and current weeks (week 26 & 27) while completeness also remains 99% 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 July 8th 2018, no new case of WPV was recorded
- **1.2.** In the reporting week, 212 cases of AFP were reported from 163 LGAs in 30 States and 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 2^{nd} NIPDs was conducted from 30^{th} June to 3^{rd} July, 2018 using bOPV in 36 States plus FCT
- 12.2 The 1^{st} & 2^{nd} Outbreak response (OBR) to cVDPV2 in Jigawa & Gombe States, Polio event in Sokoto (SLGAs) and mop-up response in 11 LGAs in Bauchi State conducted from $10^{th}-13^{th}$ & $26^{th}-29^{th}$ May, 2018 using mOPV2 respectively
- 1.2.3 Two SIPDs and one NIPDs were conducted from January to April, 2018 using bOPV in 18 high risk States and 36 States plus FCT respectively

Table 1: 2018 SIAs

S/No	Month	Dates	Scope	Target	Population	Antiger
1	January	20 th – 23 rd January	SIPDs (13 HR States) (Excluding Zamfara)	22,958,038		bopy
2	Feb & Morch	1st February - 31st March	HH based Micro plan with Enumeration of <1yr, <5yrs &<15yrs	Kebbi, Gombi	r, Bauchi & Taraba	
3	March	3rd-6th March	SIPDs (Borno,Yobe, Adamawa) & Zemfara (Moved Jan round)	3,971,049		bOPV
4	March	24th-27th March	35th ERC			
5	April	7th-10th April	NIPDs (17+1) (Northern)	49,882,036		bOPV
6	April	21st-24th April	NIPDs (19) (Southern)			
7	April - June	23rd April - 23rd June	HH based Micro plan with Enumeration of <1yr, <5yrs &<15yrs	Yobe & Adamawa (May be suspended in Adamawa)		
8	April	27th-30th April	deferred NIPOs (Lagos & Kogi)	4,797,705		DOPV
9	May	10th - 13th May	1st OBR to cVDPV2 in Jigawa & Gombe, Polio event in Sokoto (SLGAs) & mop-uo response in Bauchi (111GAs)	1,676,209		mQPV2
10	May	17th-18th May	Review Meeting with 17 Southern States + Kogi & Kwara States on target population and vaccine accountability			
11	May	26th-29th May	2nd OBR to cVDPV2 in Jigawa & Gombe, Polio event in Sokoto (SEGAs) & mop-uo response in Bauchi (11EGAs)	2,676,209		mOPV
12	June .	18th-22nd June	ARCC			
13	June -July	30" June - 3" July	NIPOs	18,166,240		bOPV
1	August-Sept	List Aug -30th Sept	HH based Micro plan with Enumeration of <1yr, <5yrs &<15yrs	Zamfara, Kats	ina & Jigawa	
15	October	10th-11th October	36th ERC			
16	October	20th - 23th October	SIPOs (18 HR States)	31,715,796		bOPV
17	December	8th-11th December	SIPOs (Borno + 7. HR States)	7,482,305		bopy

2. CEREBROSPINAL MENINGITIS (CSM)

- 2.1 In the reporting week, five suspected Cerebrospinal Meningitis (CSM) cases were reported from four LGAs (two States; Benue 1 & Katsina 4) compared with 11 suspected cases reported from seven LGAs (four States) at the same period in 2017 (Figure 1)
- 2.2 Between weeks 1 and 27 (2018), 3191 suspected meningitis cases with 102 laboratory confirmed and 206 deaths (CFR, 6.46%) from 253 LGAs (29 States) were reported compared with 9697 suspected cases and 602 deaths (CFR, 6.21%) from 297 LGAs (31 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 26, 2018 as against 76.4% timeliness and 92.3% completeness recorded within the same period in 2017

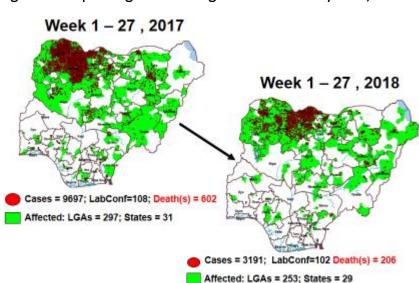
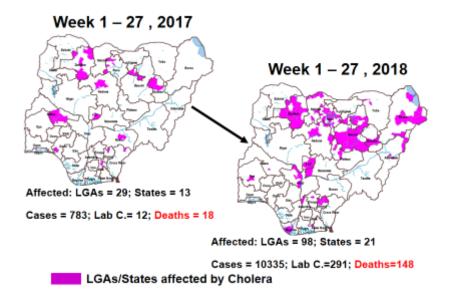


Figure 1: Map of Nigeria showing areas affected by CSM, week 1 - 27, 2017 & 2018

3. CHOLERA

- 3.1 469 suspected cases of Cholera with 16 Laboratory Confirmed cases and eight deaths (CFR, 1.7%) were reported from 34 LGAs (11 States; Adawama 45, Bauchi 115, Borno 5, Gombe 7, Kano 122, Katsina 30, Kogi 16 & Zamfara 129) in week 27, 2018 compared with 109 suspected cases and one death (CFR, 0.92%) were reported from ten LGAs (three States) during the same period in 2017 (Figure 2)
- 3.2 Between weeks 1 and 27 (2018), 10335 suspected Cholera cases with 291 laboratory confirmed and 148 deaths (CFR, 1.43%) from 98 LGAs (21 States) were reported compared with 783 suspected cases and 18 deaths (CFR, 2.3%) from 29 LGAs (13 States) during the same period in 2017.
- 3.3 A National Emergency Operations Centre (EOC) for Cholera has been activated at level 2 at NCDC.
- 3.4 Rapid Response Teams have been deployed to respond to recent cluster of cases in Kano, Bauchi, Plateau, Zamfara and Adamawa States.
- 3.5 National Preparedness and Response to Acute Watery Diarrhoea/ Cholera Guidelines available via http://ncdc.gov.ng/themes/common/docs/protocols/45 1507196550.pdf

Figure 2: Status of LGAs/States that reported Cholera cases in week 1 - 27, 2017 & 2018



4 LASSA FEVER

- 4.1 In the reporting Week 27 (July 2 8, 2018) seven new confirmed^{il} cases were reported from Ondo (3), Edo (2), Taraba (1) and Plateau(1) with three new deaths Ondo (2) and Plateau (1)
- 4.2 From 1st January to 8th July 2018, a total of 2115 **suspectedⁱ cases** have been reported from 21 states. Of these, **446 were confirmed positive, 10 are probable, 1652** <u>negative</u> (not a case)
- 4.3 Since the onset of the 2018 outbreak, there have been 115 deaths in confirmed cases and 10 in probable cases. Case Fatality Rate in confirmed cases is 25.4%
- 4.4 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). **Seventeen**

states have exited the active phase of the outbreak while **four** - Edo, Ondo, Plateau and Taraba States remain active^{iv}

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- 4.5 A total of **5713** contacts have been identified from 21 states. Of these **156**(2.7%) are currently being followed up, 5547(97.1%) 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)
- 4.6 The Lassa fever national multi-partner, multi-agency Technical Working Group(TWG) continues to coordinate response activities at all levels
- 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 websitehttp://ncdc.gov.ng/diseases/guidelines

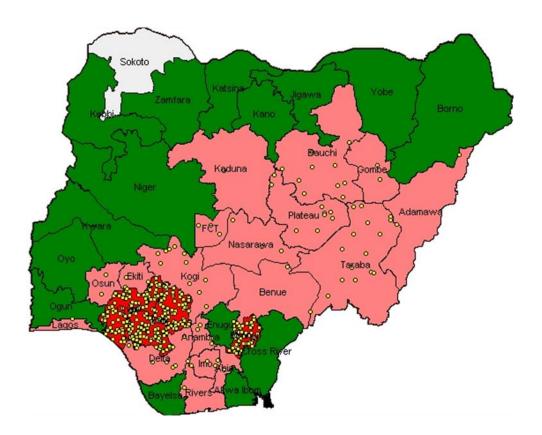
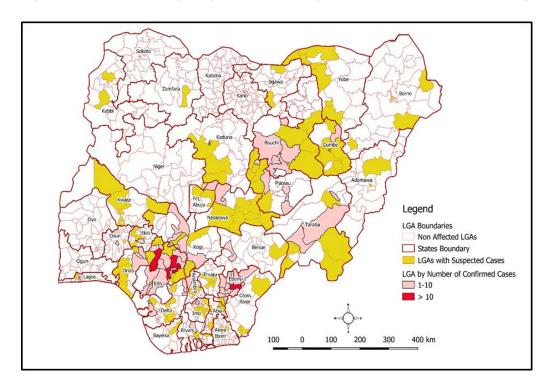


Figure 4. Distribution of Suspected and Confirmed Lassa Fever cases in Nigeria by LGA

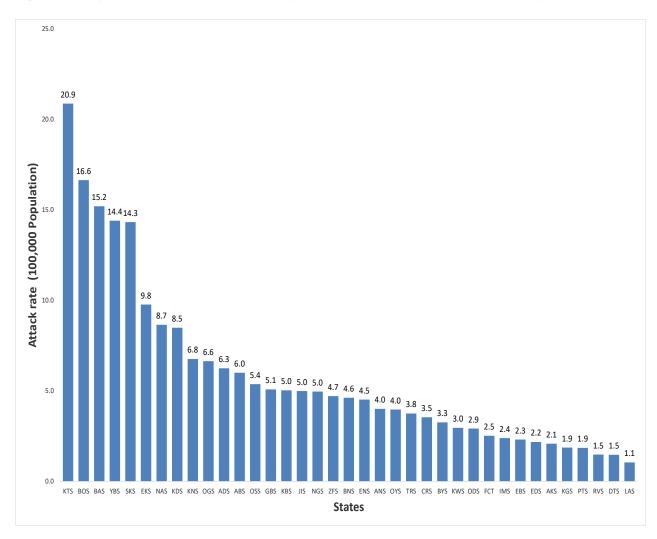


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5 MEASLES

- 5.1 In the reporting week, 226 suspected cases of Measles were reported from 27 States compared with 409 suspected cases with four Laboratory confirmed and two deaths (CFR, 0.49%) reported from 30 States during the same period in 2017
- 5.2 So far, 11987 suspected Measles cases with 13 Lab. Confirmed and 94 deaths (CFR, 0.78 %) were reported from 36 States and FCT compared with 14319 suspected cases with 96 laboratory confirmed and 81 deaths (CFR, 0.57 %) 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

Figure 5: Suspected Measles attack rate by States, week 1 - 27, 2018 as at 8th July, 2018



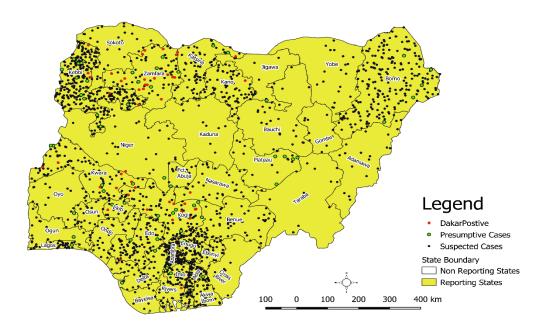
6 Yellow fever

6.1 In this reporting week 9^{th} – 15^{th} July, 2018, 91 suspected cases were added to the national line list

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- 6.2 One new in-country presumptive positive was report from Maitama District Hospital Abuja in the reporting week, last presumptive positive case in the Nigerian lab was 2-July-18 and last IP Dakar confirmed case from Nigeria was on 6-June -2018
- 6.3 From the onset of this outbreak on September 12, 2017, a total of 2,400 suspected yellow fever cases with 47 Laboratory confirmed and 47 deaths (CFR, 1.96%) have been reported from 504 LGAs (36 States & FCT)
- 6.4 Predominant age groups affected among the suspected cases are 20 years and below accounting for 62.5%; [male to female ratio is 1.4 to 1 (male 58.0%, female 42.0%)]
- 6.5 Surveillance activities have been intensified across all States
- 6.6 NCDC and partners have completed the assessment of some laboratories in Nigeria for possible inclusion into the testing laboratory network
- 6.7 NCDC & partners conducted detailed case investigation in Edo and Ekiti states following recent reports

Figure 6: Map of Nigeria showing States with suspected/presumptive/confirmed cases as at week 28, 2018 (as at 15^{th} July, 2018)



7. Update on national Influenza sentinel surveillance, Nigeria week 1 - 28, 2018

- 7.1. From week 1- 28, 170-suspected cases were reported, of which 154 were Influenza like-illness (ILI), 16 Severe Acute Respiratory Infection (SARI).
- 7.2 A total of 170 samples were received and all samples were processed. Of the processed samples, 154(90.6%) were ILI cases, 16 (9.4%) were Severe Acute Respiratory Infection (SARI).
- **7.4.** Of the 154 processed ILI samples, 16 (10.4%) was positive for Influenza A; 26(16.9%) positive for Influenza B and 112 (72.7%) were negative.
- 7.5 For the processed 16 SARI samples, five (31.3%) were positive for Influenza A while the remaining 11 (68.7%) were negative.
- 7.6 42 (27.4%) of the processed 170 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

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- 7.7 The percentage influenza positive was highest (75.0%) in week 6, 2018
- 7.8 In the reporting week 1 -28, no samples were left unprocessed

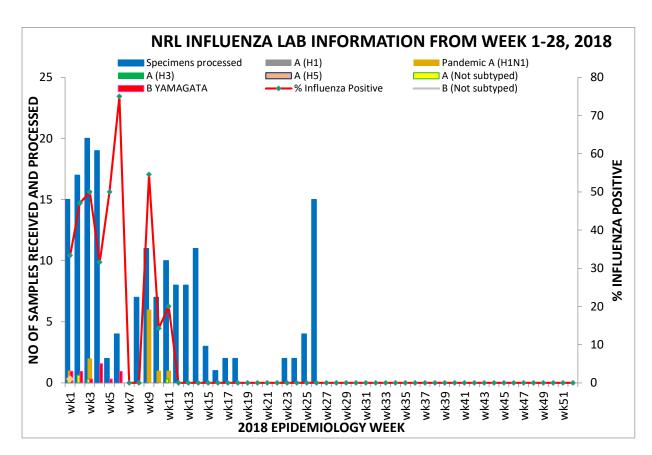


Figure 7: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 28, 2018)

FOR MORE INFORMATION CONTACT

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Table 2: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1-27, 2018, as at 8th July, 2018 Poor 0 States Timely T= Arrived on Time 50-79% Good 9 States Reports Report not received xcellent L= Arrived late 28 States N = No Report (Report not received) Late Rpts Rpts Not Recvd Timely Rpts % State GeoZones W02 W03 W04 W05 W06 W07 W08 W09 W10 W11 W12 W13 W14 W15 W16 W17 W18 W19 W20 W21 W22 W23 W24 W25 W26 W27 Expected (Es (Ls) (Ns) Timely Complete (Ts) 1 Abia SEZ 21 2 Adamawa NEZ T T 27 27 3 Akwa Ibom SSZ T 27 24 SEZ 27 4 Anambra 26 5 Bauchi NEZ 27 27 0 0 SSZ 27 27 6 Bayelsa 0 0 NCZ 27 17 10 7 Benue 0 27 8 Borno NEZ 26 27 20 74% 9 Cross River SSZ 6 1 67% 78% SSZ 27 18 3 10 Delta 6 27 11 Ebonyi SEZ 74% 20 12 Edo SSZ T T T 27 74% 20 0 13 Ekiti SWZ 27 27 0 0 14 Enugu SEZ 27 25 1 15 FCT NCZ 27 27 0 0 NEZ 27 22 T 5 0 16 Gombe SEZ 27 21 5 78% 17 Imo 27 18 Jigawa NWZ 14 13 19 Kaduna NWZ 27 22 4 1 NWZ 27 27 20 Kano 0 0 21 Katsina NWZ 27 23 4 22 Kebbi NWZ 27 20 7 74% 0 NCZ 27 24 3 0 23 Kogi NCZ 27 26 24 Kwara 0 25 Lagos SW7. 27 27 NC7. 27 26 Nasarawa 24 NCZ 27 Niger 27 22 5 28 Ogun SWZ TIT 27 27 23 29 Ondo SWZ T 27 4 0 T T 27 27 30 Osun SWZ SWZ 27 31 Oyo 26 32 Plateau NCZ 27 27 SSZ 33 Rivers 27 26 0 NWZ 27 27 34 Sokoto 35 Taraba NF7. 27 24 0 27 27 36 Yobe NEZ 27 23 NWZ 37 Total number of reports expected (E 32 25 27 33 36 36 35 33 32 33 33 29 34 Total reports sent on time (T 35 34 35 34 29 33 35 34 35 35 33 881 5 2 2 3 8 12 10 2 2 2 4 Total reports sent late (L) 105 1 Total number of reports not received (N 0 0 0 0 0 0 0 13 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 94.6 94.6 89.2 86.5 86.5 89.2 89.2 89.2 78.4 91.9 Timeliness of reports =100*T/E 81.1 100.0 97.3 97.3 97.3 973 100.0 973 100.0 94.6 83.8 Completeness of reporting=100*(E-N)/ Latest Week 27 Last updated 13th July, 2018