



NIGERIA CENTRE FOR DISEASE CONTROL

# Weekly Epidemiological Report

## Main Highlight of the week

**Intensifying outbreak preparedness activities ahead of the dry season in Nigeria**



Nigeria usually experiences an increase in the number of Lassa fever and Cerebrospinal Meningitis (CSM) cases during the dry season. Ahead of the start of the dry season, the Nigeria Centre for Disease Control (NCDC) has increased the intensity of outbreak preparedness, at various levels.

Following the large outbreak of Lassa fever in 2018, the National Technical Working Group has developed a five-year strategy, with the goal to reduce the case fatality ratio of Lassa fever. In addition, an Emergency Preparedness and Response Plan for Cerebrospinal Meningitis has been developed.

Risk communications is a key component of these strategies. As part of this, an advocacy meeting with members of the Media and Civil Society Organizations (CSO) was held on 21<sup>st</sup> November, 2018 in Abuja.

The meeting aimed at strengthening collaboration between NCDC, the media and CSOs. Importantly, discussions involved opportunities to work together to limit misinformation, and utilise various channels to enlighten and educate the public on how to protect themselves and their communities from these infectious diseases.

In addition, NCDC has begun a weekly radio programme, aired every Monday at 5:30pm (WAT) on Radio Nigeria across states in the country. This is targeted at members of the public especially in rural areas, to educate them on prevention against outbreaks. Newspaper adverts on Lassa fever prevention have also been published in major dailies.

The Nigeria Centre for Disease Control will continue to prioritise risk communication, and work with stakeholders to protect the health of Nigerians. For more information on preparedness activities, kindly visit: [www.ncdc.gov.ng](http://www.ncdc.gov.ng)

## SUMMARY OF REPORTS

In the reporting week ending on November 11, 2018:

- There were 214 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 with the goal to eliminate polio in Nigeria.
- There were 175 suspected cases of Cholera reported from 19 LGAs in eight States (Adamawa – 12, Borno – 86, Gombe – 1, Kaduna – 4, Kano – 32, Katsina – 2, Oyo – 2 and Yobe - 36). Of these, 11 were laboratory confirmed and two deaths were recorded.
- There were 20 suspected cases of Lassa fever reported from nine LGAs in six States (Edo – 3, Ebonyi – 2, Kaduna – 1, Nasarawa – 1, Ondo - 14 & Rivers - 1). Five were laboratory confirmed and no death was recorded.

- There were ten suspected cases of Cerebrospinal Meningitis (CSM) reported from seven LGAs in four States (Bauchi – 2, Katsina – 6, Ondo – 1 & Zamfara – 1). Of these, none was laboratory confirmed and no death was recorded.
- There were 205 suspected cases of measles reported from 28 States. None was laboratory confirmed and no death was recorded.

In the reporting week, all States sent in their report except Anambra State. Timeliness of reporting remains 87% in both previous and current weeks (44 & 45) 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 November 11<sup>th</sup> 2018, no new case of WPV was recorded
- 1.2. In the reporting week, 214 cases of AFP were reported from 173 LGAs in 32 States
- 1.3. Between week 1 and 45 2018, 7660 suspected cases of AFP have been reported from 750 LGAs in 37 States
- 1.3.1. AFP Surveillance has been enhanced and outbreak response is on-going in Borno and other high-risk States

Table 1: 2018 SIAs

Revised FSU 2018 Plan to accommodate Zamfara CSM & YF preventive vaccination						
S/No	Month	Dates	Scope	Target	Population	Antigen
1	January	20 <sup>th</sup> – 23 <sup>rd</sup> January	SIPDs (13 HR States) (Excluding Zamfara)	22,958,038		bOPV
2	Feb & March	1st February - 31st March	HH based Micro plan with Enumeration of <1yr, <5yrs & <15yrs	Kebbi, Gombe, Bauchi & Taraba		
3	March	3rd-6th March	SIPDs (Borno, Yobe, Adamawa) & Zamfara (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 NIPDs (Lagos & Kogi)	4,797,705		bOPV
9	May	10th - 13th May	1st OBR to cVDPV2 in Jigawa & Gombe, Polio event in Sokoto (5LGAs) & mop-up response in Bauchi (11LGAs)	1,676,209		mOPV2
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 (5LGAs) & mop-up response in Bauchi (11LGAs)	1,676,209		mOPV2
12	June	18th-22nd June	ARCC			
13	June-July	30 <sup>th</sup> June - 3 <sup>rd</sup> July	NIPDs	18,166,240		bOPV
14	August-Sept	1st Aug - 30th Sept	HH based Micro plan with Enumeration of <1yr, <5yrs & <15yrs	Zamfara, Katsina & Jigawa		
15	October	10th-11th October	36th ERC			
16	October	20th - 23th October	SIPDs (18 HR States)	31,715,796		bOPV
17	December	8th-11th December	SIPDs (Borno + 7 HR States)	7,482,305		bOPV

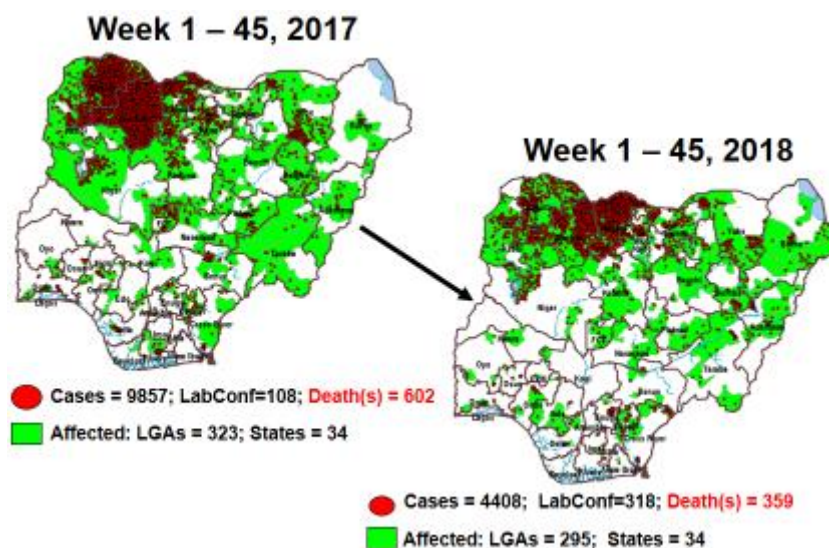
## 2. CEREBROSPINAL MENINGITIS (CSM)

2.1 In the reporting week, ten suspected Cerebrospinal Meningitis (CSM) cases were reported from seven LGAs (four States; Bauchi – 2, Katsina – 6, Ondo – 1 & Zamfara – 1) compared with 13 suspected case reported from six LGAs (six States) at the same period in 2017 (Figure 1)

2.2 Between weeks 1 and 45 (2018), 4408 suspected meningitis cases with 318 laboratory confirmed and 359 deaths (CFR, 8.1%) from 295 LGAs (34 States) were reported compared with 9857 suspected cases and 602 deaths (CFR, 6.1%) from 323 LGAs (34 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 - 45, 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 - 45, 2017 & 2018



## 3. CHOLERA

3.1 175 suspected cases of Cholera with 11 Lab. Confirmed cases and two deaths (CFR, 1.1%) were reported from 19 LGAs (eight States; Adamawa – 12, Borno – 86, Gombe – 1, Kaduna – 4, Kano – 32, Katsina – 2, Oyo – 2 and Yobe - 36) in week 45, 2018



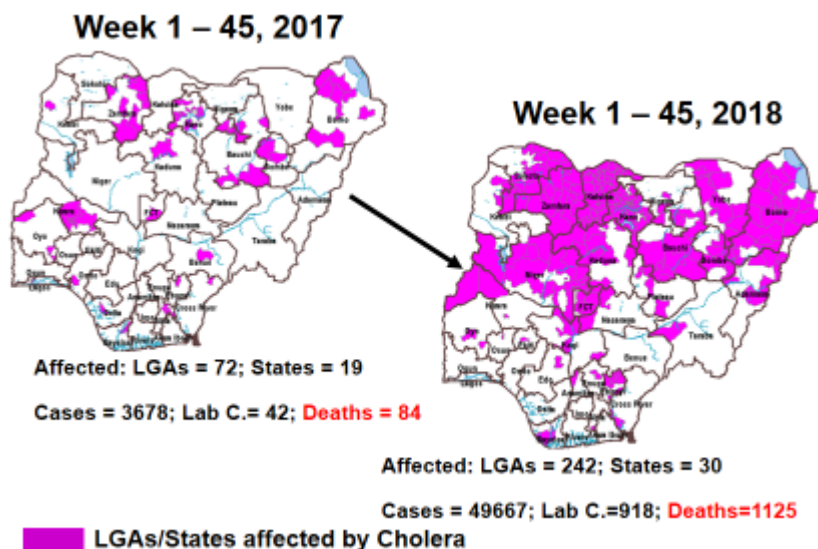
compared with 22 suspected cases reported from eight LGAs (four States) during the same period in 2017 (Figure 2).

3.2 Between weeks 1 and 45 (2018), 49,667 suspected Cholera cases with 918 laboratory confirmed and 1125 deaths (CFR, 2.3%) from 242 LGAs (30 States) were reported compared with 3678 suspected cases and 84 deaths (CFR, 2.3%) from 72 LGAs (19 States) during the same period in 2017.

3.3 Plans are ongoing to deescalate the cholera National Emergency Operations Centre (EOC) to Technical Working Group due to decline in number of new cases reported from States for the last six weeks.

3.4 National Preparedness and Response to Acute Watery Diarrhoea/ Cholera Guidelines available via [http://ncdc.gov.ng/themes/common/docs/protocols/45\\_1507196550.pdf](http://ncdc.gov.ng/themes/common/docs/protocols/45_1507196550.pdf)

Figure 2: Status of LGAs/States that reported Cholera cases in week 1 - 45, 2017 & 2018

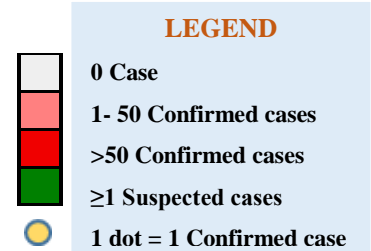
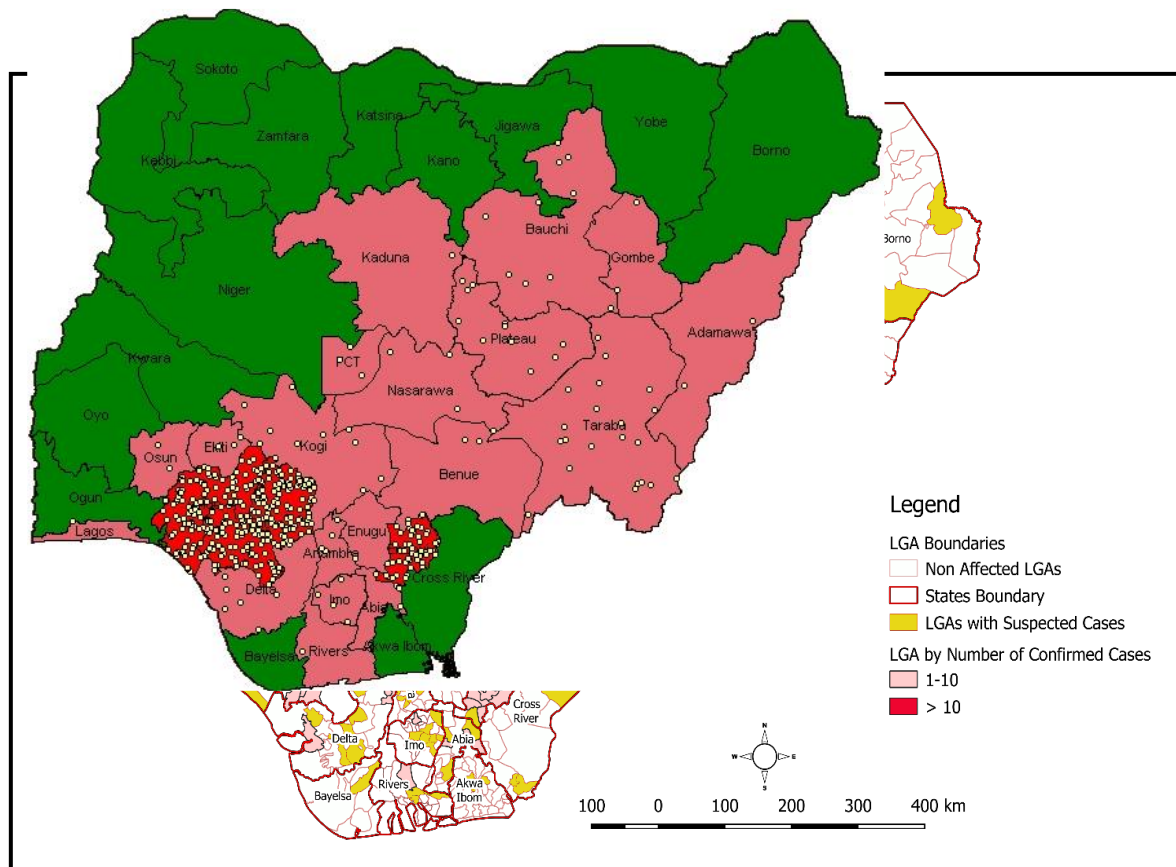


#### 4 LASSA FEVER

4.1 In the reporting Week 44 (5 – 11 November, 2018) five new confirmed<sup>ii</sup> cases were reported from Edo (3) and Ondo (2) States with no new death

- 4.2 From 1<sup>st</sup> January to 11<sup>th</sup> November 2018, a total of 3016 **suspected<sup>i</sup>** cases have been reported from 22 states. Of these, **559 were confirmed positive, 17 are probable, 2440 negative** (not a case)
- 4.3 Since the onset of the 2018 outbreak, there have been 143 deaths in confirmed cases and 17 in probable cases. Case Fatality Rate in confirmed cases is 25.6%
- 4.4 22 states have recorded at least one confirmed case across 90 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 Delta States remain active<sup>iv</sup>
- 4.5 Lassa fever international Conference registration open to the public on the conference website [www.lic.ncdc.gov.ng](http://www.lic.ncdc.gov.ng)
- 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 website- <http://ncdc.gov.ng/diseases/guidelines>

Figure 3: Distribution of confirmed Lassa fever cases in Nigeria as at 11<sup>th</sup> November, 2018



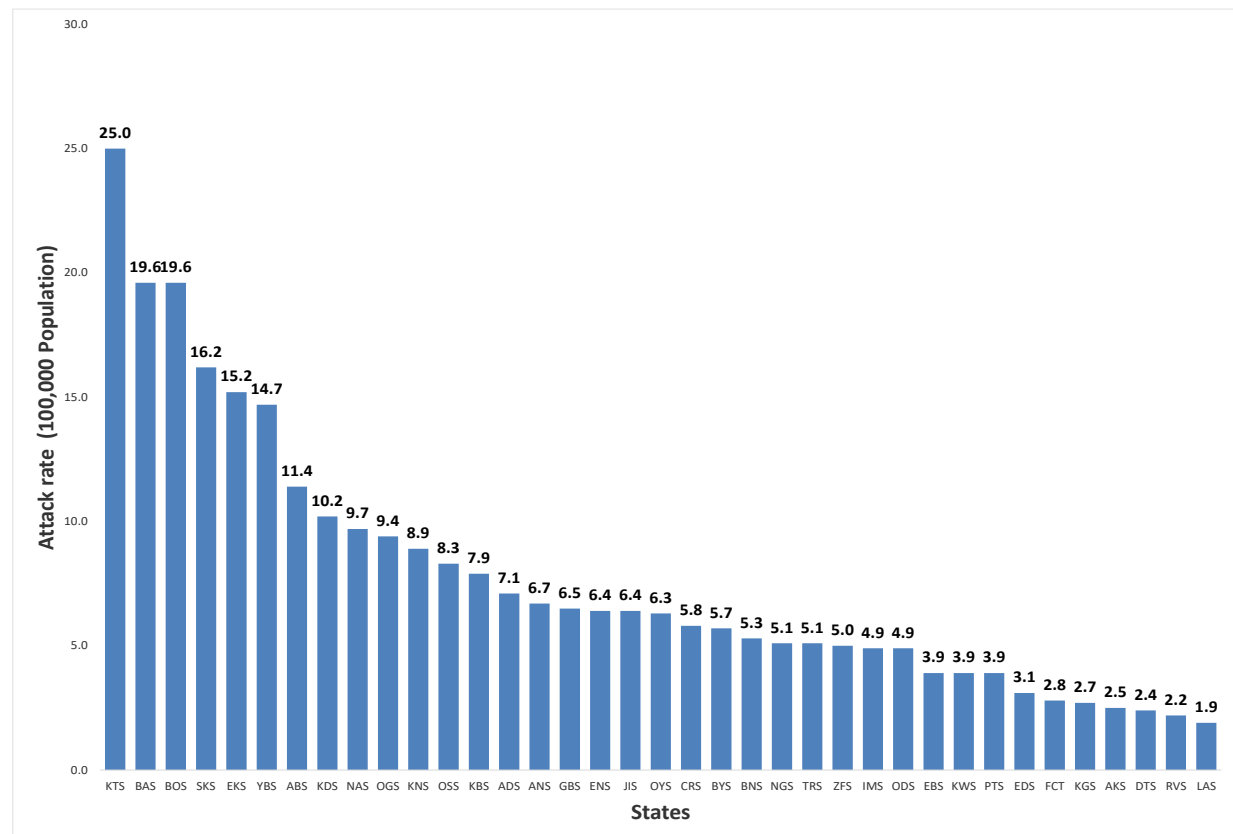
**Figure 4. Distribution of Suspected and Confirmed Lassa Fever cases in *Nigeria* by LGA**

5.1 In the reporting week, 205 suspected cases of measles were reported from 28 States compared with 309 suspected cases and one death (CFR, 0.3%) reported from 36 States during the same period in 2017

5.2 Since the beginning of the year, 15723 suspected measles cases with 1110 Lab. Confirmed and 123 deaths (CFR, 0.8%) were reported from 36 States and FCT compared with 20327 suspected cases with 108 laboratory confirmed and 111 deaths (CFR, 0.55 %) from 36 States and FCT, 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 - 45, 2018 as at 4<sup>th</sup> November, 2018**

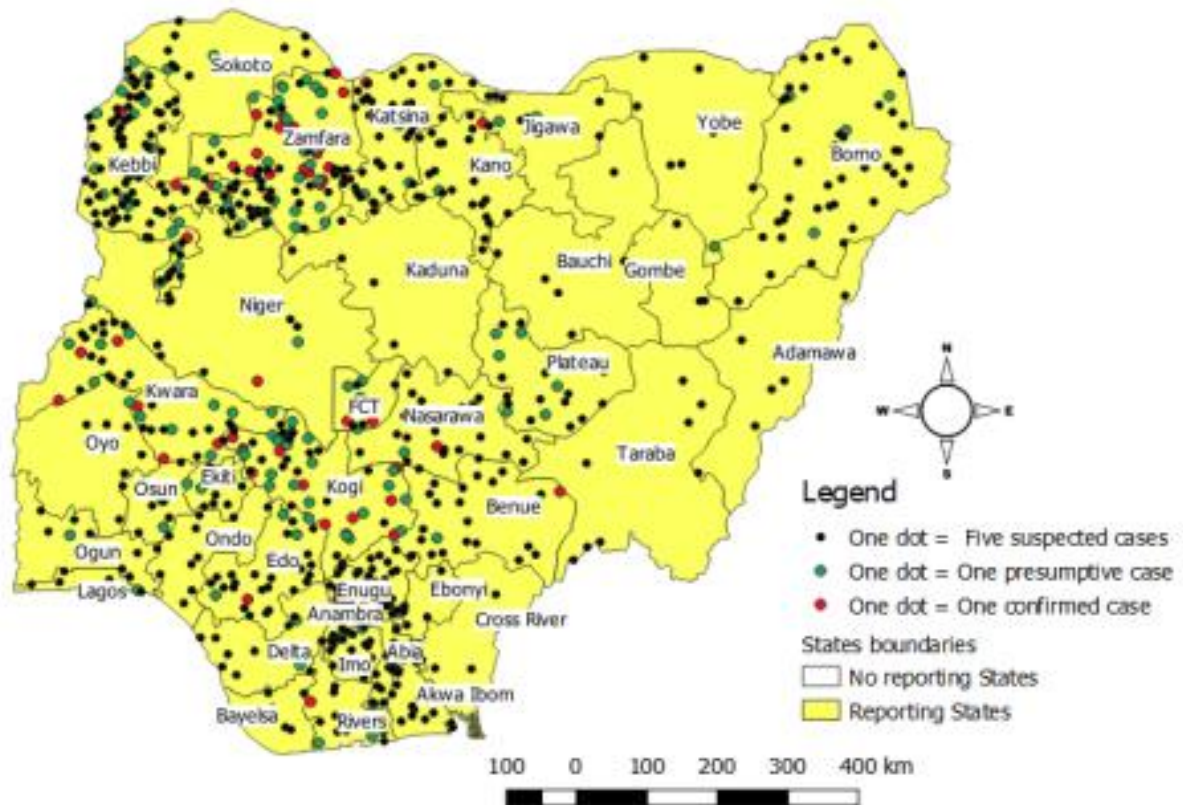


## 6 Yellow fever



- 6.1 In this reporting week 5<sup>th</sup> - 11<sup>th</sup> November, 2018, 85 suspected cases were reported
- 6.2 One inconclusive case was recorded from NCDC Central Public health Laboratory, Lagos in the reporting week from Bakassi LGA in Cross River State
- 6.3 A national yellow fever Emergency Operation Centre (EOC) has been activated at level 2
- 6.4 From the onset of this outbreak on September 12, 2017, a total of 3,456 suspected yellow fever cases with 56 Laboratory confirmed and 55 deaths (CFR, 1.6%) have been reported from 570 LGAs (36 States & FCT)
- 6.5 Yellow fever reactive vaccination campaigns conducted in the following States [Kebbi (7 LGAs), Niger (5 LGAs), Sokoto (1 LGA) & Katsina (1 LGA)]
- 6.6 Yellow fever vaccination campaigns have been successfully completed in six States (Nassarawa, Cross River, Akwa-Ibom, Kogi, Kwara & Zamfara) and 57 political wards in 25 LGAs in Borno State
- 6.7 Surveillance activities have been intensified across all States
- 6.8 The 2018 phase 2b November PMVC to be implemented from 22<sup>nd</sup> November – 1<sup>st</sup> December, 2018 in Sokoto, Kebbi, Niger, FCT, Plateau and some LGAs in Borno States. Target population 9 months to 44 years, (85% of the total population)

**Figure 6: Map of Nigeria showing States with suspected/presumptive/confirmed cases as at week 45, 2018 (as at 11<sup>th</sup> November, 2018)**

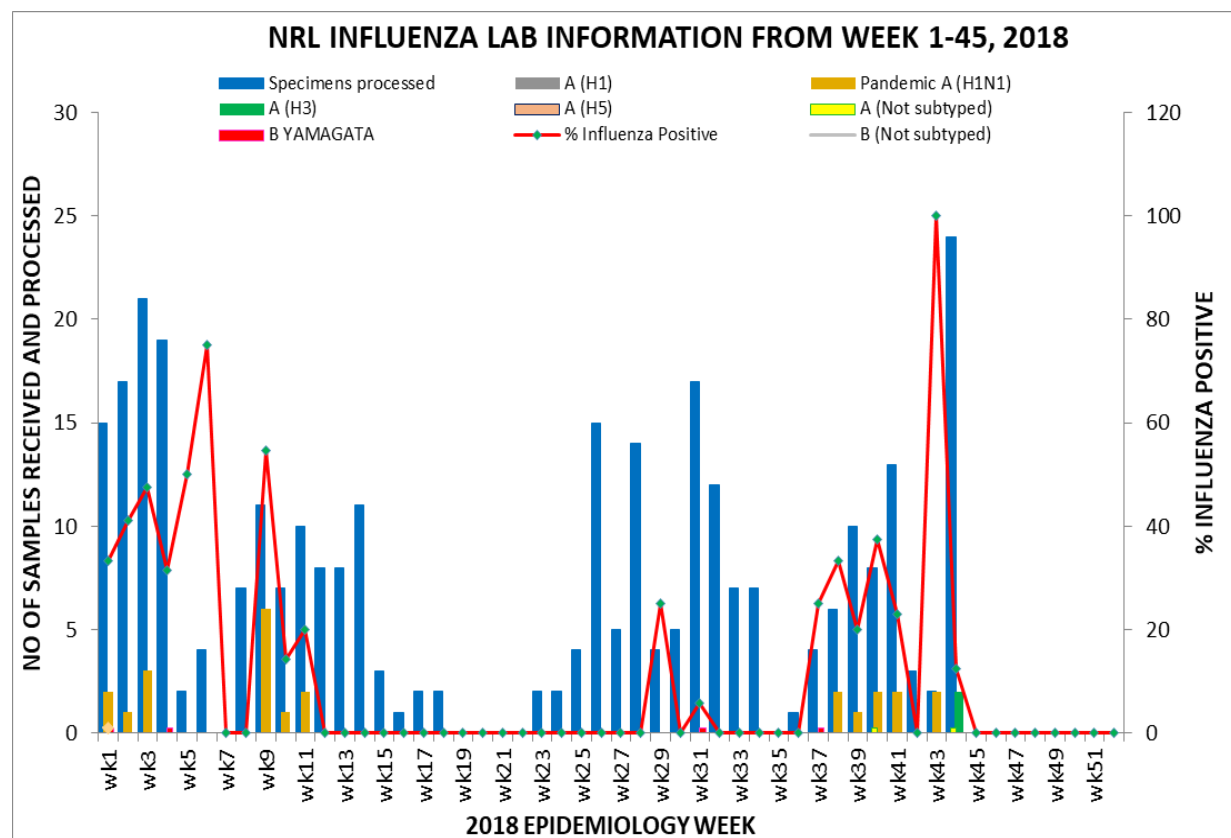


## 7. Update on national Influenza sentinel surveillance, Nigeria week 1 – 45, 2018

- 7.1. From week 1- 44, 313-suspected cases were reported, of which 280 were Influenza like-illness (ILI), 33 Severe Acute Respiratory Infection (SARI).
- 7.2. A total of 313 samples were received and all samples were processed. Of the processed samples, 280(89.5%) were ILI cases, 33 (10.5%) were Severe Acute Respiratory Infection (SARI).
- 7.3. Of the 280 processed ILI samples, 21 (7.5%) was positive for Influenza A; 29(10.4%) positive for Influenza B and 230 (82.1%) were negative.
- 7.4. For the processed 33 SARI samples, seven (21.2%) were positive for Influenza A, two (6.1%) were positive for Influenza B, while the remaining 24 (72.7%) were negative.
- 7.5. Of the 313 processed samples, 59 (18.8%) were positive for Influenza, with 28 (47.5%) of these positive for Influenza A and 31 (52.5%) positive for Influenza B.
- 7.6. The subtypes A seasonal H3, 2009A/H1N1 and A/not subtyped account for 2(7.1%), 24 (85.7%) and 2 (18.5%) of the total influenza A positive samples respectively.
- 7.7. The subtypes B VICTORIA, B Not subtyped and B Yamagata account for 24(77.4%), 4(12.9%) and 3(9.7%) of the total influenza B positive samples respectively

7.8 The percentage of influenza positive was highest (100.0%) in week 43, 2018

7.9 In the reporting week 1 -45, all samples were processed



**Figure 7: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 45, 2018)**

#### FOR MORE INFORMATION CONTACT

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0800-970000-10

**Table 2: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1 - 45, 2018, as at 11<sup>th</sup> November, 2018**

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