8th March, 2019





Issue: Volume 9 No. 8

8th March 2019

NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week



Quarterly Steering Committee meeting to review progress towards NCDC Strategy Plan 2017-2021

Institutional strategic planning is an essential management activity that helps to set priorities, strengthen operations and serves as a basis for setting goals. For us at the Nigeria Centre for Disease Control, our five-year strategy plan launched in 2019 has also helped us in defining needed activities, identifying and pooling resources, and establishing agreement around intended outcomes.

This plan guides the day-to-day activities of both our technical and administrative departments, with clear goals, objectives and activities. To enable us measure progress, a quarterly steering committee has been held since 2017. The meeting also provides cross-directorate feedback on delivery plans with focus on timelines and deliverables.

The 7th quarterly meeting which held on the 8th of March 2019, the first for the year, brought together the leadership of NCDC to reflect on and discuss pending strategic action points and set priorities for 2019. Our progress in the last quarter was also discussed including the passing of the NCDC Bill, launch of the National Action Plan for Health Security, revised organisational structure, strengthening technical

8th March, 2019

competencies (including leadership and management development), partnerships and funding etc.

In our role as a national public health institute, the importance of a plan to guide our activities cannot be over emphasised. The progress that has been made can only be measured within a plan. Gaps are highlighted in the context of timelines and goals set.

In the next quarter, we will continue to focus on meeting the goals set for the agency, especially in areas across our main functions of disease prevention, preparedness, detection and response.

SUMMARY OF REPORTS

In the reporting week ending February 24, 2019:

- o There were 116 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
- o There were 75 suspected cases of cholera reported from three LGAs in Bayelsa State. Two were laboratory confirmed case and six deaths recorded.
- There were 193 suspected cases of Lassa fever reported from 43 LGAs in 17 States (Edo 107, Ebonyi 1, Ondo 26, Bauchi -15, Plateau 6, Adamawa 2, Nasarawa 2, Rivers 5, FCT 3, Gombe 6, Kaduna 2, Kogi 1, Delta 6, Benue 2, Taraba 5, Kwara 3 & Kebbi 1). Twenty-five were laboratory confirmed and six deaths were recorded.
- o There were 30 suspected cases of Cerebrospinal Meningitis (CSM) reported from 22 LGAs in 12 States (Adamawa 1, Enugu 1, Gombe 1, Jigawa 1, Kaduna 3, Kano 3, Katsina 6, Kebbi 2, Kwara 1, Sokoto 4, Yobe 2 & Zamfara 5). Of these, none was laboratory confirmed and no death was recorded.
- o There were 1160 suspected cases of measles reported from 33 States. One was laboratory confirmed and two deaths were recorded.

In the reporting week, all States sent in their reports except Cross River and Delta States. Timeliness of reporting remained 93.0% in both weeks seven & eighht while

completeness remains 99.0% at the 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

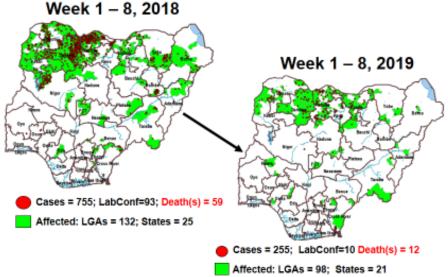
1. AFP

- 1.1 As at February 24 2019, no new case of WPV was recorded
- 1.2 In the reporting week, 116 suspected cases of AFP were reported from 105 LGAs in 32 States and FCT
- 1.3 Between week 1 and 8 (2019), 900 suspected cases of AFP were reported from 445 LGAs in 36 states and FCT

2. CEREBROSPINAL MENINGITIS (CSM)

- 2.1 In the reporting week, 30 suspected Cerebrospinal Meningitis (CSM) cases were reported from 22 LGAs in 12 States (Adamawa 1, Enugu 1, Gombe 1, Jigawa 1, Kaduna 3, Kano 3, Katsina 6, Kebbi 2, Kwara 1, Sokoto 4, Yobe 2 & Zamfara 5) compared with 210 suspected cases and 12 deaths (CFR, 6.7%) reported across 58 LGAs (14 States) at the same period in 2018 (Figure 1)
- 2.2 Between weeks 1 and 8 (2019), 255 suspected meningitis cases with ten laboratory confirmed and 12 deaths (CFR, 4.71%) from 98 LGAs (21 States) were reported compared with 755 suspected cases with 93 Laboratory confirmed and 59 deaths (CFR, 17.48%) from 132 LGAs in 25 states during the same period in 2018
- 2.3 Timeliness/completeness of CSM case-reporting from states to the national level (2019 versus 2018): on average, 92.9% of the 26 endemic States sent CSM reports in a timely manner while 88.0% were complete in week 1 8, 2019 as against 89.6% timeliness and 94.2% completeness recorded within the same period in 2018
- 2.4 The CSM National Emergency Operations Centre (EOC) is on alert mode and meets weekly to review the situation
- 2.5 CSM preparedness and response assessment checklist form sent to all States

Figure 1: Map of Nigeria showing areas affected by CSM, week 1 - 8, 2018 & 2019



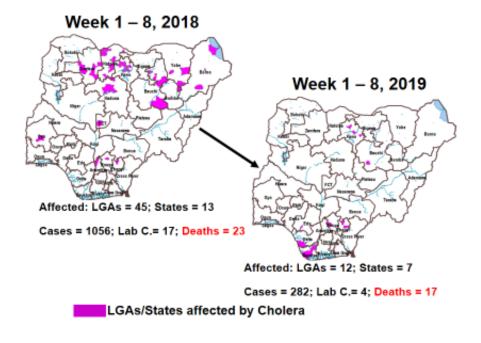
Note: The dots are randomly placed within the LGAs, as the Lat and Long are not available

3. CHOLERA

- 3.1 75 suspected cases of cholera with two laboratory confirmed and six deaths (CFR, 8.0%) were reported from three LGAs in Bayelsa State compared with 11 suspected cases and one death (CFR, 9.1%) reported from three LGAs in three States during the same period in 2018 (Figure 2).
- 3.2 Between weeks 1 and 8 (2019), 284 suspected cholera cases with four laboratory confirmed and 17 deaths (CFR, 6.03%) from 12 LGAs (seven States) were reported compared with 1056 suspected cases and 23 deaths (CFR, 2.18%) from 45 LGAs in 13 States during the same period in 2018.
- 3.3 NCDC has disseminated cholera alert mails and line list template to all states in preparedness for dry season transmission
- 3.4 The cholera National Emergency Operations Centre (EOC) is on watch mode and the Technical Working Group meets weekly to review the situation
- 3.5 NPHCDA and NCDC conducted training on Oral Cholera Vaccine on February 22, 2019 in Abuja
- 3.6 National Preparedness and Response to Acute Watery Diarrhoea/Cholera Guidelines. Available from http://ncdc.gov.ng/themes/common/docs/protocols/45 1507196550.pdf

8th March, 2019

Figure 2: Status of LGAs/States that reported Cholera cases in week 1 - 8, 2018 & 2019



4 LASSA FEVER

- 4.1 In the reporting Week 8 (18 24 February, 2019), twenty-three new confirmed^{il} cases were reported from Edo (11), Ondo (2), Bauchi (1), Nasarawa (1), Taraba (4), Gombe (1), Kaduna (1) and Cross River (1) States with six new deaths in Edo (1), Ondo (1), Bauchi (1), Nasarawa (1), Taraba (1) and Cross River (1) States.
- 4.2 From 1st January 24th February 2019, a total of 1249 suspectedⁱ cases have been reported from 21 States including FCT. Of these, **381 were confirmed positive, 15** probable and **858** <u>negatives</u> (not a case). However, 1279 suspected cases have been reported from 32 States including FCT
- 4.3 Since the onset of the 2019 outbreak, there have been 83* deaths among confirmed cases. Case Fatality Rate in confirmed cases is 21.8%
- 4.4 Twenty-one states have recorded at least one confirmed case across 66 LGAs (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Plateau, Taraba, FCT, Adamawa, Gombe, Kaduna, Kwara, Benue, Rivers, Kogi, Enugu, Imo, Delta, Oyo, Kebbi & Cross River) and remain active.^{iv}
- 4.5 Mid-term Lassa fever review meeting conducted on February 15, 2019
- 4.6 NCDC provided an ambulance to Federal Medical Centre Owo Infection Control Centre

- 4.7 Multi sectoral one health national rapid response team (NCDC, NFELTP, Federal Ministry of Agriculture & Federal of Ministry of Environment) deployed to Edo, Ondo and Ebonyi States
- 4.8 High level advocacy visit by the DG NCDC to Plateau State
- 4.9 NCDC prepositioned PPEs, Ribavirin (injection and tablets), beds, Tents, bodybags, thermometers, hypochlorite hand sanitizers, IEC materials, guidelines and SOPS distributed across 36 states, FCT and treatment centres
- 4.10 A National Lassa fever multi-partner, multi-sectoral Emergency Operational Centre (EOC) continues to coordinate the response activities at all levels. State EOCs have also been activated in Edo, Ondo, Plateau and Ebonyi

Figure 3: Distribution of confirmed Lassa fever cases in Nigeria as at 24th February, 2019



5 MEASLES

- 5.1 In the reporting week, 1160 suspected cases of measles with one laboratory confirmed and two deaths (CFR, 0.17%) were reported from 34 states compared with 517 suspected cases and one death (CFR,0.19%) reported from 36 states during the same period in 2018
- 5.2 Since the beginning of the year, 5998 suspected measles cases with 414 laboratory confirmed and 15 deaths (CFR, 0.25%) were reported from 36 states and FCT compared with 2983 suspected cases and 25 deaths (CFR, 0.84 %) from 36 States and FCT, during the same period in 2018

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

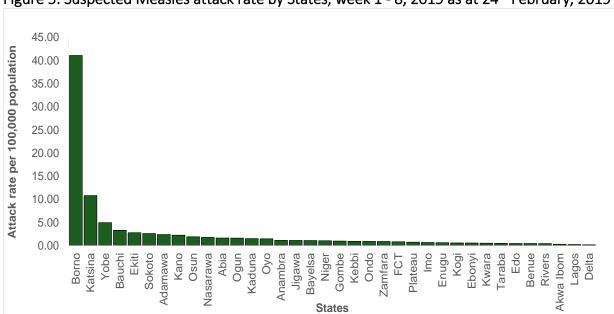


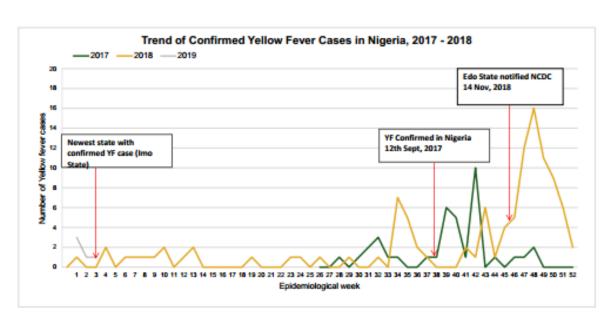
Figure 5: Suspected Measles attack rate by States, week 1 - 8, 2019 as at 24th February, 2019

6 Yellow fever

- 6.1 In the reporting week 8 ($18^{th}-24^{th}$ February, 2019), Nigeria received five new confirmed cases (Edo -2, Imo -1 & Ondo -2) from WHO reference laboratory, Institute Pasteur Dakar (IP Dakar)
- 6.2 From 1st January 24th February 2019, 276 suspected cases have been recorded from 134 LGAs across the country with blood samples collected from all cases. Of these, five were confirmed positive with no death recorded so far.
- 6.3 From the onset of this outbreak on September 12, 2017 to date, 4,100 suspected cases in 604 (78.0%) LGAs in all the 36 States and FCT
- 6.4 A total of 139 cases have been confirmed by IP Dakar from 17 states (Kwara (8), Kogi (10), Kano (1), Zamfara (19), Kebbi (7), Nasarawa (3), Niger (1), Katsina (2), Edo (69), Ekiti (2), Rivers (1), Anambra (1), FCT (10), Benue (1), Delta (1), Ondo (2) and Abia (1) States) in 46 Local Government areas (LGAs).

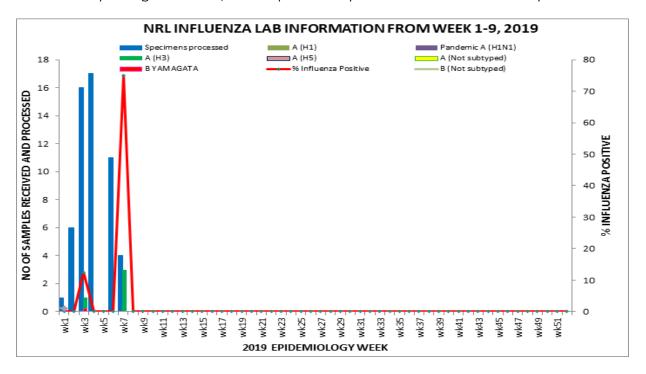
- 6.5 Since the onset of the outbreak, 80 deaths were recorded among all cases with 25 deaths among IP Dakar confirmed cases. Case Fatality Rates (CFR) in all cases (suspected, probable & confirmed) and among IP Dakar confirmed cases is 2.1% and 21.0% respectively
- 6.6 Yellow fever reactive vaccination campaigns were conducted in the following States: Edo (13 LGAs), Kebbi (7 LGAs), Niger (5 LGAs), Sokoto (1 LGA) & Katsina (1 LGA)
- 6.7 A multi-agency national Emergency Operations Centre is coordinating the national response
- 6.8 Yellow fever vaccination campaigns have been successfully completed in 12 States (Nasarawa, Cross River, Akwa-Ibom, Kogi, Kwara, Zamfara, Sokoto, Kebbi, Niger, FCT, Plateau & Borno) and 57 political wards in 25 LGAs in Borno State. Another campaign to commence in Vandekeiya LGA in Benue State
- 6.9 The 2018 phase 2b November Preventive Mass Vaccination Campaign (PMVC) was conducted (22^{nd} November -1^{st} December, 2018) in Sokoto, Kebbi, Niger, FCT, Plateau and some LGAs in Borno States. Target population is 9 months to 44 years (85% of the total population)
- 6.10 Yellow fever After Action Review (AAR) being planned and is slated for April 2019

Figure 6: Trend of confirmed Yellow fever cases in Nigeria, 2017 - 2019 (as at 24th February, 2019)



7. Update on national Influenza sentinel surveillance, Nigeria week 1-9, 2019

- 7.1From week 1- 9 2019, a total of 58 samples were recruited, of which 57 were Influenza like-illness (ILI) and one was Severe Acute Respiratory Infection (SARI).
- 7.2 A total of 55 samples were received and all samples were processed. Of the processed samples, 57(98.3%) were ILI cases and 1 (1.7%) was Severe Acute Respiratory Infection (SARI).
- 7.3 Of the 57 processed ILI samples, 5 (8.8%) were positive for Influenza A; 1(1.8%) was positive for Influenza B and 51 (89.4%) were negative.
- 7.4 The processed SARI sample was negative for both Influenza A and B.
- 7.5 Of the 57 processed samples, six (10.3%) were positive for Influenza, with five (83.3%) of these positive for Influenza A and one (16.7%) positive for Influenza B.
- 7.6 The subtypes A seasonal H3, 2009A/H1N1 and A/not subtyped account for four (80.0%), 0 (0.0%) and 1 (20.0%) of the total influenza A positive samples respectively.
- 7.7 The subtypes B VICTORIA, B Not subtyped and B Yamagata account for O(0.0%), one(100.0%) and O(0.0%) of the total influenza B positive samples respectively
- 7.8 The percentage of influenza positive was highest (75.0%) in week 7, 2019
- 7.9 In the reporting week 1-9, all samples were processed in the laboratory



Weekly Epidemiological Report

Issue: Volume 9 No. 8 8th March, 2019

Figure 7: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 9, 2019)

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

8th March, 2019

	le 2: Status of Reporti			_F			0	,	500			,				
4	Keys:												Timely	<50%	Poor	2 St
]	T= Arrived on Time												Reports	50-79%	Good	25
I	= Arrived late		N	Report	not rece	eived								80-100%	Excellent	33 9
1	N = No Report (Report not received)															
	Clata	Cas7anas	W01	W02	W03	W04	W05	W06	W07	TATOO	Euro ato d (Es)	Timely Rpts	Late Rpts	Rpts Not Recvd	%	
	State	GeoZones	WUI	VVU2	VVU3	VVU4	WUS	WUO	WU7	W08	Expected (Es)	(Ts)	(Ls)	(Ns)	Timely	Con
1	Abia	SEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	10
2	Adamawa	NEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
3	Akwa Ibom	SSZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
4	Anambra	SEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
5 I	Bauchi	NEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
6 I	Bayelsa	SSZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	10
7 I	Benue	NCZ	L	T	L	T	L	L	L	T	8	3	5	0	38%	1
8 I	Borno	NEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	10
9 (Cross River	SSZ	L	L	L	T	T	N	N	N	8	2	3	3	25%	Е
10 I	Delta	SSZ	T	T	T	T	T	T	T	N	8	7	0	1	88%	8
11 I	Ebonyi	SEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
2 I	Edo	SSZ	T	T	T	L	T	T	T	T	8	7	1	0	88%	1
13 I	Ekiti	SWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
4 I	Enugu	SEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
5 I	FCT	NCZ	T	T	Т	Т	Т	Т	Т	T	8	8	0	0	100%	1
6 (Gombe	NEZ	T	Т	Т	Т	Т	Т	Т	T	8	8	0	0	100%	1
7 I	mo	SEZ	T	T	Т	T	T	T	Т	L	8	7	1	0	88%	1
8 J	igawa	NWZ	Т	L	L	T	T	T	Т	T	8	6	2	0	75%	1
-	Kaduna	NWZ	Т	L	Т	Т	Т	T	Т	Т	8	7	1	0	88%	1
	Kano	NWZ	Т	Т	Т	Т	Т	Т	Т	Т	8	8	0	0	100%	1
-	Katsina	NWZ	Т	T	Т	Т	Т	T	Т	Т	8	8	0	0	100%	1
_	Kebbi	NWZ	T	Т	Т	Т	Т	Т	Т	Т	8	8	0	0	100%	1
_	Kogi	NCZ	I.	Т	Т	Т	Т	Т	Т	Т	8	7	1	0	88%	1
	(wara	NCZ	T	T	T	Т	T	T	T	T	8	8	0	0	100%	1
	Lagos	SWZ	Т	Т	Т	Т	Т	Т	Т	Т	8	8	0	0	100%	1
	Nasarawa	NCZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
-	Viger	NCZ	I.	T	T	T	T	L	T	T	8	6	2	0	75%	1
_	Ogun	SWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
	Ondo	SWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
_	Osun	SWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
31 (SWZ	Т	Т	T	Т	Т	Т	Т	Т	8	8	0	0	100%	1
	Plateau	NCZ	T	T	T	T	T	I.	T	T	8	7	1	0	88%	1
	Rivers	SSZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
	Sokoto	NWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
	Taraba	NEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
	l'obe	NEZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
	Zamfara	NWZ	T	T	T	T	T	T	T	T	8	8	0	0	100%	1
<u> </u>	Total number of reports expected (E)	11112	37	37	37	37	37	37	37	37	296	J	U	U	100/0	1
\dashv	Total reports sent on time (T)		33	34	34	36	36	33	35	34	2 50	275				-
+	Total reports sent late (L)				3			3	1	1		2/3	17		\vdash	
-}			4	3		1	1						17			\vdash
	Total number of reports not received (N)		0	0	0	0	0	1	1	2				4	0504	
	Timeliness of reports =100*T/E		89.2	91.9	91.9	97.3	97.3	89.2	94.6	91.9					93%	
	Completeness of reporting=100*(E-N)/E		100.0	100.0	100.0	100.0	100.0	97.3	97.3	94.6						

Issue: Volume 9 No. 8