



Weekly Epidemiological Report

Week 16: 15th April – 21st April 2019

Highlight of the week

NCDC BEGINS CONGENITAL RUBELLA SURVEILLANCE IN NIGERIA



Meet Our National Site Ambassadors

Congenital Rubella Syndrome (CRS) is a vaccine preventable condition which usually affects children resulting in long term disability, poor quality of life and low life expectancy. The cost of correcting the disability caused by CRS is usually unaffordable especially in the low resource setting like Nigeria. Unfortunately, there are no reliable data on the national burden of CRS in Nigeria.

As part of its mandate to protect the health of Nigerians, NCDC has made significant progress towards introducing an effective surveillance system to determine the true burden of CRS. With this step, it is expected that there will be improved knowledge of the disease, as well as baseline data to estimate the true burden of CRS. This will provide support for the planned introduction of Rubella Vaccine into the National Program on Immunization.

To this end, NCDC has recently conducted an assessment of tertiary health facilities across geopolitical zones to identify potential rubella focal sites for inclusion into the National rubella sentinel sites. This was followed by a national CRS workshop with the aim of bringing selected facilities together to agree on common principles and identify site coordinators as well site surveillance focal points. Consequently, four tertiary health facilities were selected as sentinel sites and these included:

- Lagos University Teaching Hospital
- University of Enugu Teaching Hospital
- Jos University Teaching Hospital
- Aminu Kano Teaching Hospital

These sentinel sites will work closely with the NCDC and its National Reference Laboratory, as the foundation for a national CRS surveillance system in Nigeria. We are grateful to the US Centers for Disease Control (US CDC) for the technical support provided in this project.

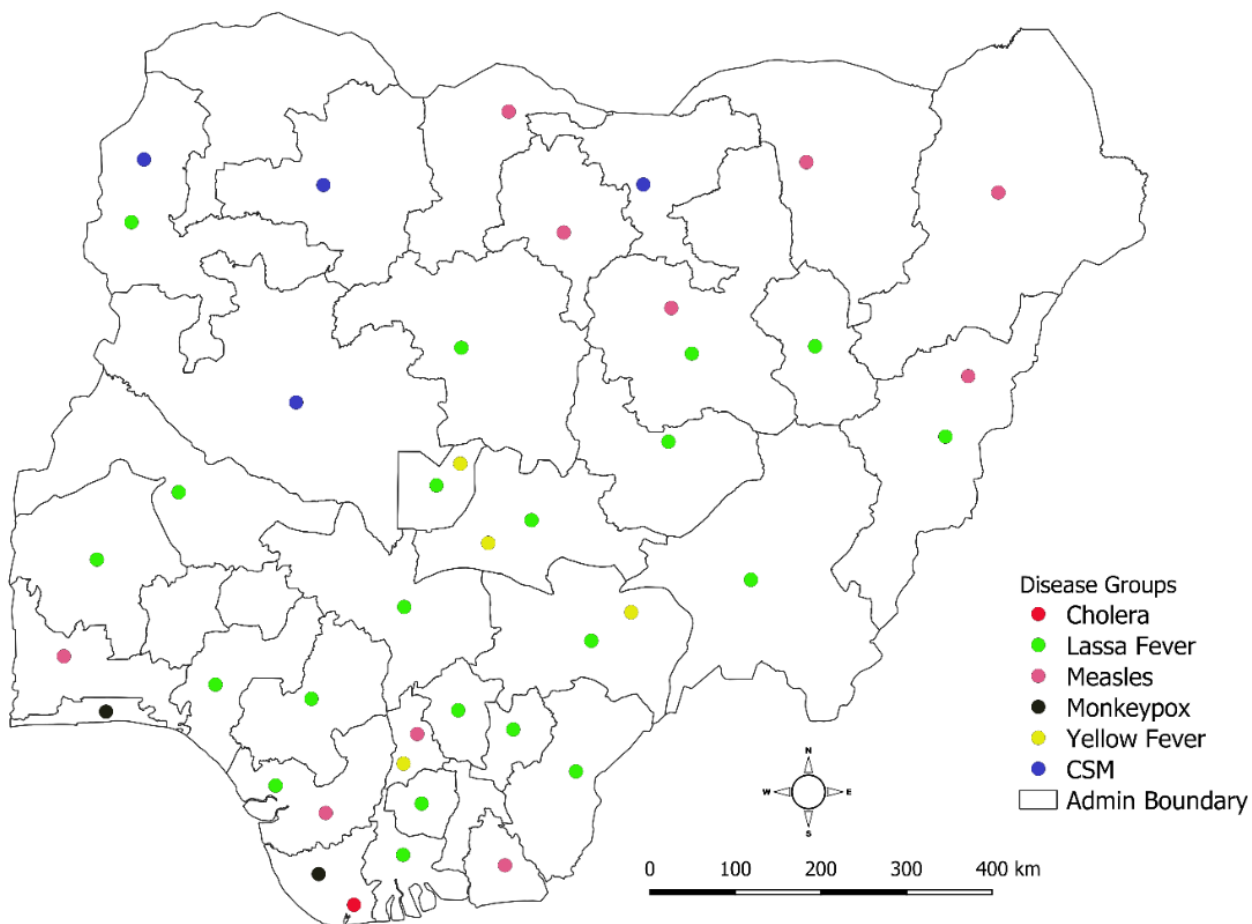
Summary of incidents

Ongoing incidents

3

* Ongoing Incidents are defined as confirmed cases where a national EOC or equivalent has been activated (EOC is currently activated for Lassa fever, Cerebrospinal meningitis and Measles)

Other incidents are those confirmed cases for which EOC is not activated



Data source: SITAware

Summary

Week 16: 15th April – 21st April 2019

Lassa Fever_{1,2}

Cerebrospinal
Meningitis (CSM)_{3,4}

Yellow Fever_{3,4}

<p>71 Suspected cases</p> <p>6 Confirmed cases</p> <p>0 Deaths</p>	<p>59 Suspected cases</p> <p>0 Confirmed cases</p> <p>2 Deaths</p>	<p>45 Suspected cases</p> <p>1 Confirmed cases</p> <p>0 Deaths</p>
Cholera_{3,4}	Measles_{3,4}	Acute Flaccid Paralysis (AFP)_{3,4}
<p>96 Suspected cases</p> <p>0 Confirmed cases</p> <p>0 Deaths</p>	<p>1977 Suspected cases</p> <p>0 Confirmed cases</p> <p>9 Deaths</p>	<p>182 Suspected cases</p> <p>0 Confirmed Polio</p>
National Sentinel influenza surveillance₅	Timeliness of reports₃	Completeness of reports₃
<p>0 Suspected cases</p> <p>0 Confirmed cases</p>	<p>89.2% Last 4 weeks</p> <p>92% Year to date</p>	<p>99.3% Last 4 weeks</p> <p>99% Year to date</p>

Notes

1. Information for this disease was retrieved from the Technical Working Group and Situation Reports
2. Case Fatality Rate (CFR) for this disease is reported for confirmed cases only
3. Information for this disease was retrieved from IDSR 002 data
4. CFR for this disease is reported for total cases i.e. suspected + confirmed
5. Information for sentinel influenza was retrieved from the laboratory

Lassa Fever

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected

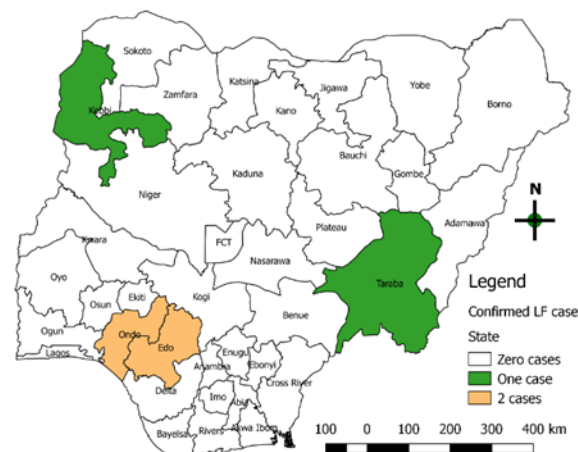
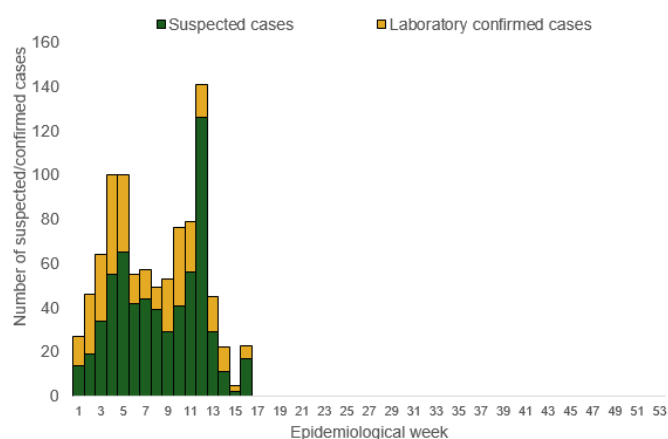
71	6	0	State: 10 LGA: 19
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Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
1865	2289	416	546	105	122	25.2%	22.3%

Figure 1: Number of suspected and confirmed cases of Lassa Fever, Nigeria, week 1– 16 2019

Figure 2: Location of **confirmed** cases of Lassa Fever by State, Nigeria, week 16 2019



Key points

- There were 71 suspected cases of Lassa fever reported from 19 LGAs in 10 States (Edo – 30, Ondo – 10, Bauchi - 4, Ebonyi – 16, Plateau – 4, Kogi – 1, Enugu – 1, Delta – 1, Kebbi – 1 & Taraba – 3). Six were laboratory confirmed and no death was recorded.
- In the reporting week 16, no new health care worker was affected

Actions

To date:

- National Lassa fever Emergency Operations Centre (EOC) continues to coordinate the response activities at all levels

Planned:

- Declaration of outbreak emergency phase over based on composite indicators
- Deployment of multi-sectoral RRT to Kebbi State
- Dissemination of case management guidelines is ongoing

Cerebrospinal Meningitis (CSM)

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected
59	0	2	State: 19 LGA: 42

Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
3680	1061	315	78	322	59	8.8%	5.6%

Figure 3: Number of suspected and confirmed cases of CSM, Nigeria, week 1 – 16, 2019

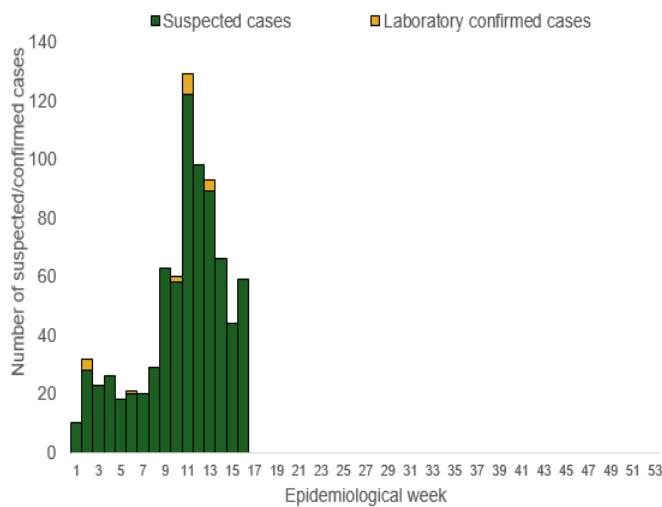
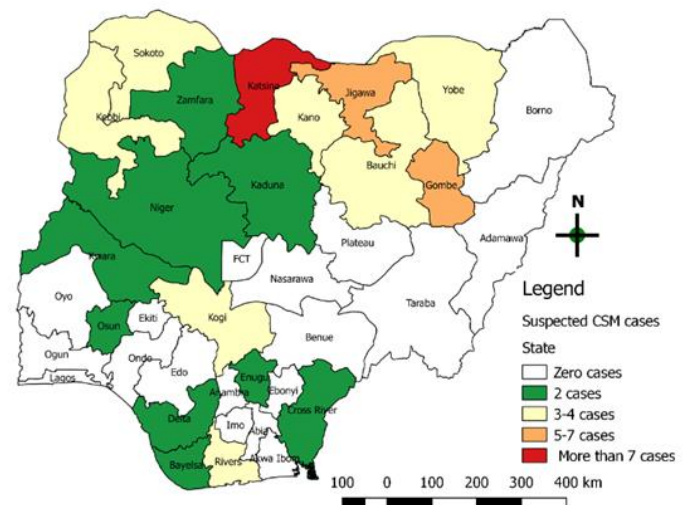


Figure 4: Location of suspected cases of CSM by State, Nigeria, week 16, 2019



Key points

- There were 59 suspected cases of Cerebrospinal Meningitis (CSM) reported from 42 LGAs in 19 States (Bauchi – 3, Bayelsa – 1, Cross River – 2, Delta – 1, Enugu – 1, Gombe – 7, Jigawa – 6, Kaduna – 1, Kano – 3, Katsina – 12, Kebbi - 3, Kogi – 3, Kwara – 2, Niger – 1, Osun – 1, Rivers – 4, Sokoto – 3, Yobe – 4 & Zamfara - 1). Of these, none was laboratory confirmed and two deaths were recorded
- Shinkafi LGA, Zamfara State crossed Alert Threshold in week15 with an attack rate of 4.4 per 100.000 population

Actions

To date:

- The National CSM EOC meets weekly to review the national situation
- Training in other States on CSM case management, sample and data management

Planned:

- Intensify active CSM case search and enhanced surveillance to monitor progress being made

Yellow Fever

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected
45	1	0	State: 22 LGA: 39

Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
758	768	8	12	0	1	1.4%	1.3%

Figure 5: Number of suspected and confirmed cases of Yellow Fever, Nigeria, week 1–16, 2019

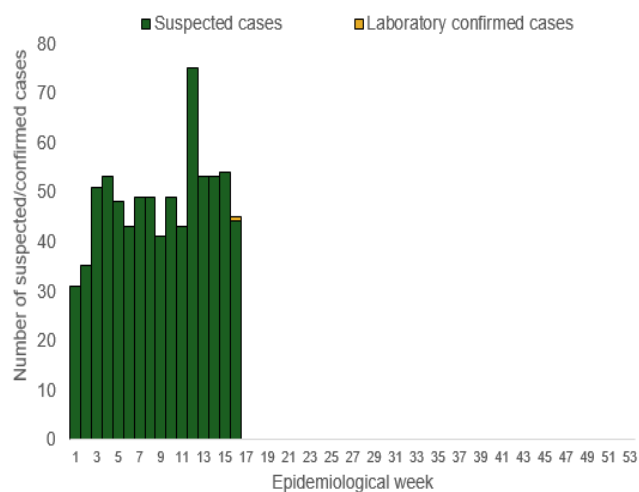
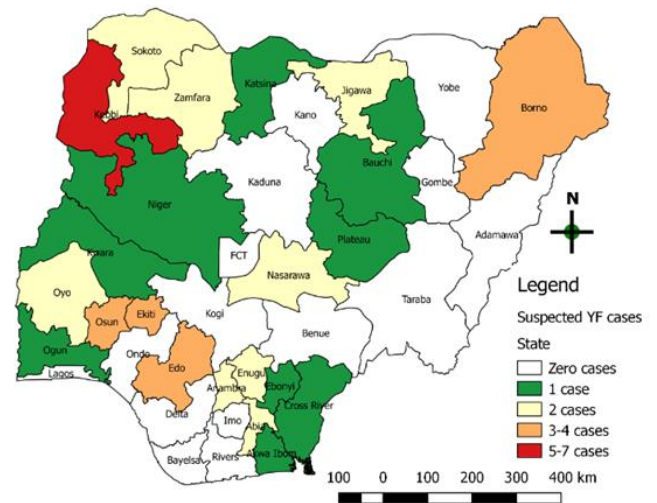


Figure 6: Location of suspected cases of Yellow Fever by State, Nigeria, week 16, 2019



Key points

Actions

To date:

- A multiagency Yellow fever TWG is coordinating the response activities
- Rapid Response Teams have been deployed to Abia, Delta, Ondo, Imo and Osun states
- Development of National Guideline on Preparedness and Response is ongoing

Planned:

- A follow up with the yellow fever reactive vaccination campaign pre-implementation activities in the approved states and their respective LGAs

Cholera

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected
96	0	0	State: 2 LGA: 4

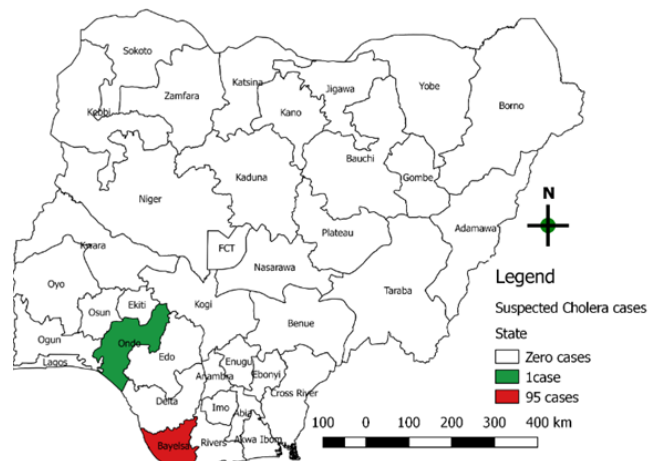
Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
5400	578	80	8	87	28	1.6%	4.8%

Figure 7: Number of suspected and confirmed cases of Cholera, Nigeria, week 1 – 16, 2019



Figure 8: Location of suspected cases of Cholera by State, Nigeria, week 16, 2019



Key points

There were 96 suspected cases of cholera reported from four LGAs in two States (Bayelsa – 95 & Ondo – 1). None was laboratory confirmed and no death recorded.

Actions

To date:

- NCDC cholera Technical Working Group (TWG) continues to coordinate Cholera activities in states collaborating with FMWR and support from partners
- TWG meets bi-weekly to review activities, reports from states and plan on new strategies
- A sensitization workshop was conducted on Hygiene for market women, religious leaders, motor park leaders, NGOs and Volunteers in Adamawa and Bauchi states

Planned:

- A contract has been awarded for the construction of 107 sanitation facilities in Kebbi, Adamawa and Gombe states.

- A second round of OCV campaign to be conducted in Argungu LGA, Kebbi state and Michika LGA, Adamawa State in May
- Review cholera advisory and disseminate ahead of the season

Measles

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected
1977	0	9	State: 33 LGA: 237

Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
8260	2260	131	819	84	62	1.4%	0.27%

Figure 11: Number of suspected and confirmed cases of Measles, Nigeria, week 1 – 16, 2019

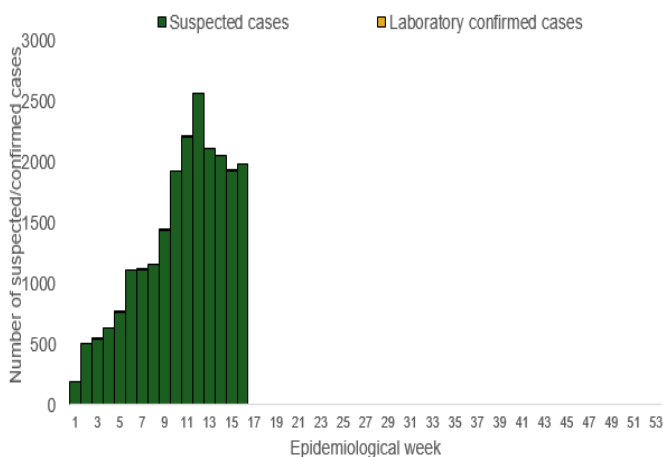
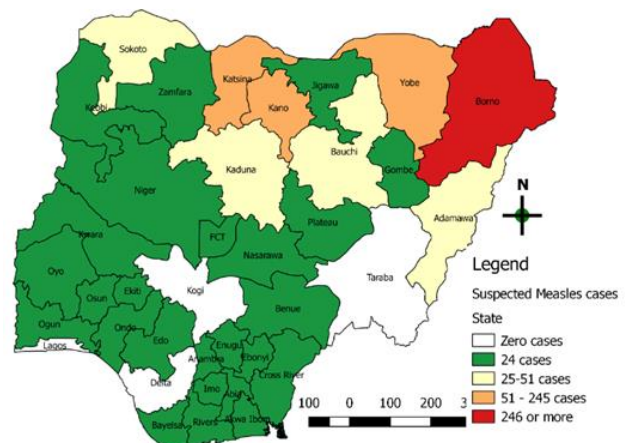


Figure 12: Location of suspected cases of Measles by State, Nigeria, week 16, 2019



Key points

- There were 1977 suspected cases of measles reported from 32 States and FCT. None was laboratory confirmed and nine deaths were recorded

Actions

To date:

- The Measles Emergency Operation Center (EOC) continues to coordinate activities weekly
- Continued engagement with states for early submission of data
- RRT deployed to support case management and EOC coordination in Borno State

Planned:

- Deploy RRT to support emergency response in Katsina, Adamawa and Yobe states
- Follow up with NPHCDA on plan to resubmit ICG request for Katsina and Yobe States
- Field testing and piloting of Measles IEC materials

Acute Flaccid Paralysis (AFP)

Week 16

Suspected cases	Confirmed cases	Deaths	Number of States and LGAs affected
182	0	0	State: 34 LGA:145

Year to date (week 1 – 16)

Suspected cases		Confirmed cases		Deaths		CFR	
2018	2019	2018	2019	2018	2019	2018	2019
2647	2130	0	0	0	0	0%	0%

Figure 13: Number of suspected and confirmed cases of AFP, Nigeria, week 1–16, 2019

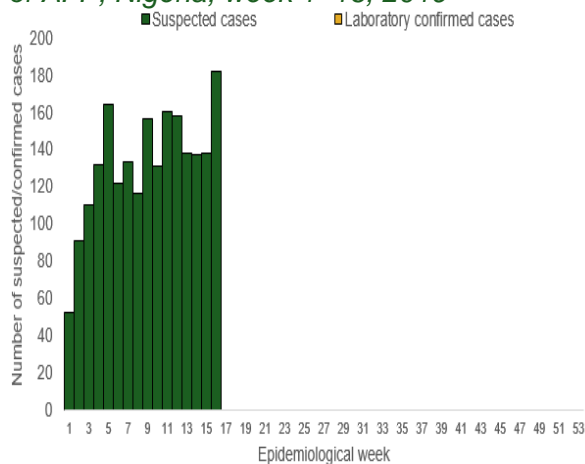
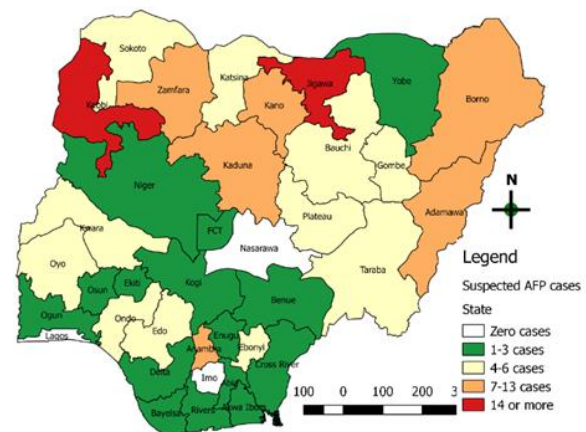


Figure 14: Location of suspected cases of AFP by State, Nigeria, week 16, 2019



Key points

- As at 21st April 2019, no new case of WPV was recorded
- The last reported case of polio in Nigeria was in August 2016
- In the reporting week, 182 suspected cases of AFP were reported from 145 LGAs in 33 States and FCT

Actions

To date:

- Active case search for AFP is being intensified with the goal to eliminate polio in Nigeria

Planned:

- Intensify active AFP case search and continue to monitor progress being made to eliminate polio in Nigeria

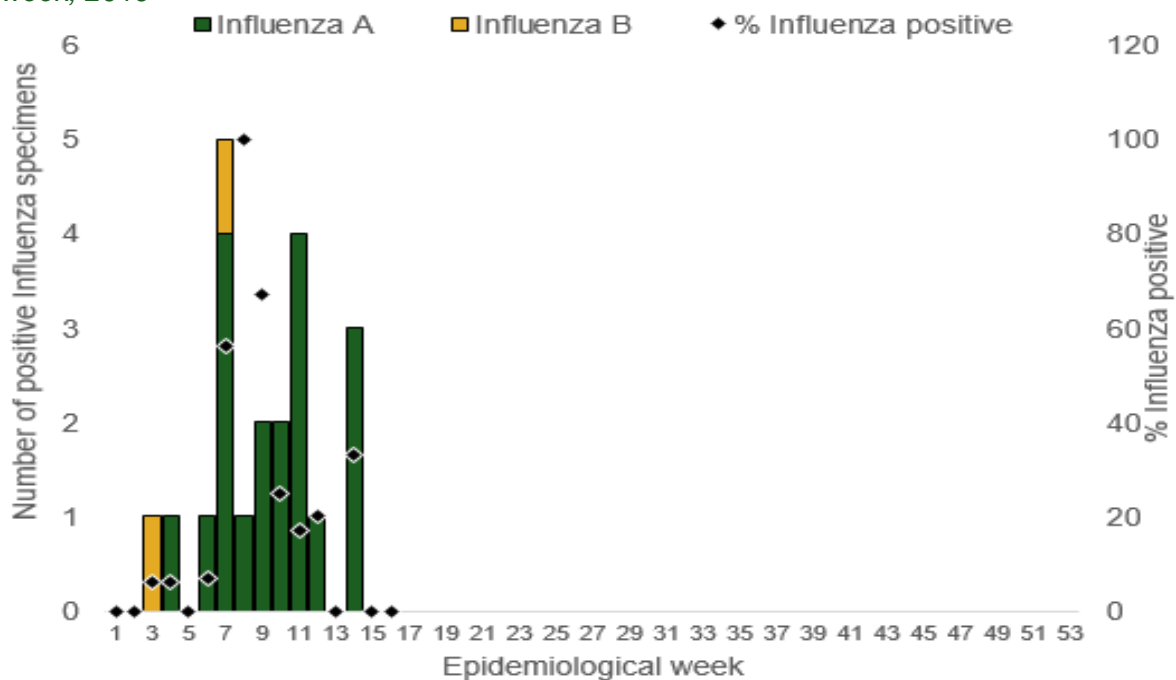
National Influenza Sentinel Surveillance

Year to date (week 1 – 16)

	Suspected cases	Suspected ILI	Suspected SARI
Number (Percentage)	146	13(90%)	15(10%)

	Confirmed cases		Confirmed ILI		Confirmed SARI	
	Influenza A	Influenza B	Influenza A	Influenza B	Influenza A	Influenza B
Number	20	2	17	2	3	0
Positivity (%)	13.7%	1.4%	13%	1.5%	20%	0%

Figure 15: Number of influenza positive specimens by type and percent positive by epidemiological week, 2019



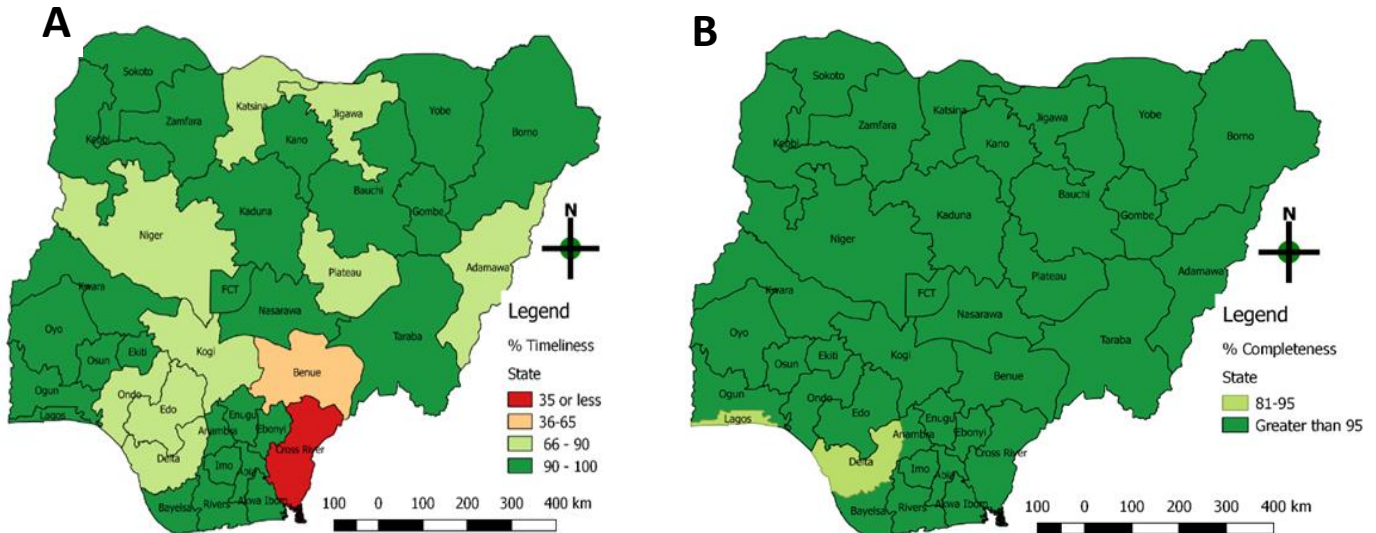
Key points

- The predominant Influenza A subtype so far this year was A seasonal H3 19 (95%).
- The predominant Influenza B subtype so far this year was B not subtyped 2(100%).

Timeliness and completeness of reports

Last 4 weeks (week 13 - 16, 2019)

Figure 16: A – Timeliness by State (%); B – Completeness by State (%), week 12 – 15, 2019



Number of reports received on time, late or not received, the percentage timeliness and completeness, in the last 4 weeks and year to date

Nigeria Total Reports	Last 4 weeks Week 13 – 16	Year to date Week 1- 16
Reports sent on time	132	543
Reports sent late	15	45
Reports not received	1	4
Timeliness	89.2%	92%
Completeness	99.3%	99%

States with reports not received in 2019 (week 1 – 16)

State	Week(s) report not received
Delta	8, 10, 12
Lagos	14

Timeliness and completeness of reports by state

Year to date (week 1 – 16)

State	Timeliness (%)	Completeness (%)
Abia	94	100
Adamawa	88	100
Akwa Ibom	100	100
Anambra	100	100
Bauchi	100	100
Bayelsa	100	100
Benue	56	100
Borno	100	100
Cross River	31	100
Delta	81	81
Ebonyi	100	100
Edo	88	100
Ekiti	100	100
Enugu	100	100
FCT	100	100
Gombe	94	100
Imo	94	100
Jigawa	75	100
Kaduna	94	100
Kano	100	100
Katsina	88	100
Kebbi	100	100
Kogi	88	100
Kwara	94	100
Lagos	94	94
Nasarawa	94	100
Niger	88	100
Ogun	100	100
Ondo	75	100
Osun	100	100
Oyo	100	100
Plateau	88	100
Rivers	100	100
Sokoto	100	100
Taraba	100	100
Yobe	100	100
Zamfara	94	100