

NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

Sharing of information is key to Lassa fever outbreak response



In the reporting week (week 6 2017), Kaduna State witnessed its first case in the ongoing National Lassa fever outbreak. Cumulatively, there are now ten States across the country currently affected by the outbreak.

There were 15 new suspected cases reported from five States in the reporting week. Ten newly confirmed cases were reported following laboratory investigations for Lassa fever and other VHFs, and six deaths were recorded.

Since the onset of the outbreak in December 2016, 215 suspected cases have been reported. Of these, 63 cases have been classified as confirmed and five (5) cases classified as probable cases. There have been 37 deaths recorded (32 in confirmed cases and 5 in probable cases). The case fatality rate for all cases is 22.8% and for all confirmed/probable cases is 54.4%

There is a weekly situational report on the Lassa fever outbreak developed by the NCDC Lassa Fever Working Group and published by the NCDC on its website (http://ncdc.gov.ng/diseases/sitreps). This is intended to provide the public and stakeholders' with first-hand information on the outbreak and also create an avenue for feedback.

Sensitisation and awareness on Lassa fever is continually being done through the NCDC's Facebook and Twitter channels (@NCDCgov). Additionally, the airing of jingles has been further extended to some locally based radio stations across the country.

Outbreak Management: The NCDC support to Ondo State

The Lassa fever outbreak was reported in Ondo State in January 2017. In previous outbreaks, cases identified in the State were sent to the Irrua Specialist Teaching Hospital, (ISTH) in Edo State for case management. However, patients who experienced symptoms sought treatment and care at the Federal Medical Centre (FMC), Owo for management. This in itself, provided some gap in information sharing between the State Surveillance team and the tertiary Institution.

The NCDC sent a team to Ondo State to assess the outbreak situation in the State and provide on-site support to manage the outbreak. The team offered training on Infection Prevention and Control (at the State and LGA level), case management as well as help to bridge the communication gap between the State and FMC Owo through sensitization visits and support the enhancement of the isolation unit at FMC, Owo. The support was also extended in contact tracing and re-constitution of the Emergency Response Team (EPR) at the State and LGA level. The support provided has been able to help establish FMC Owo as a treatment centre in Ondo State for the management of Lassa fever.

It is important to note that the early communication within Kaduna State, and between the State and the NCDC, as well as the integration of activities between the State Ministry of Health and the FMC Owo, proved valuable in the recent outbreak activities. Additionally, the weekly situational report shared on the NCDC website has generated positive feedback from partners and the general public who are much more aware of the outbreak situation.

In the reporting week, ending 12th February 2017:

 There were 231 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 assiduously reinvigorated its efforts to eradicate Polio.

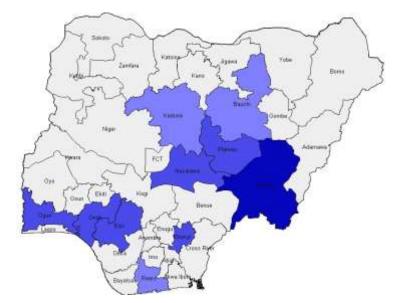
- No new suspected case of Cholera was reported.
- There were 71 suspected cases of Cerebrospinal Meningitis (CSM) reported from 18 LGAs in 11 States. Of this, 2 were lab confirmed and 10 deaths were recorded (CFR 14.09%). Surveillance for CSM is ongoing and intensified in the States, particularly as the dry season has set in.
- There were 492 suspected cases of measles reported from 31 States including the FCT. None was laboratory confirmed and no death was recorded.

In the reporting week, five States (Cross River, Edo, Enugu, Imo and Kwara failed to report and one State reported late. Timeliness of reporting remains 73.0% in the previous week and current week while completeness increased from 86.5% in the previous week to 92.0%.

Disease	Variables	Week 05	Wee	ek 06	Cumulative Weeks			
Disease	variables	2017	2017	2016	01 - 6, 2017	01 - 6, 2016		
	Cases	326	231	148	1,444	801		
AFP	Deaths	0	0	0	0	0		
	CFR	0.00%	0.00%	0.00%	0.00%	0.00%		
Polio	WPV Types 1 & 3	0	0	0	0	0		
	WPV Types 1	0	0	0	0	0		
	WPV Types 3	0	0	0	0	0		
	Cases	5	0	10	36	94		
Cholera	Deaths	0	0	0	4	0		
	CFR	0.00%	0.00%	0.00%	11.11%	0.00%		
	Cases	13	8	30	138	377		
Lassa Fever	Deaths	1	2	2	21	60		
	CFR	7.69%	25.00%	6.67%	15.22%	15.92%		
	Cases	51	71	16	224	71		
CSM	Deaths	2	10	1	23	2		
	CFR	3.92%	14.08%	6.25%	10.27%	2.82%		
	Cases	404	492	693	2,548	3461		
Measles	Deaths	4	0	8	22	13		
	CFR	0.99%	0.00%	1.15%	0.86%	0.38%		
	Cases	0	0	0	0	0		
Guinea Worm	Deaths	0	0	0	0	0		
	CFR	0.00%	0.00%	0.00%	0.00%	0.00%		

Summary Table (IDSR Weekly Report as at 17/02/2017)

Figure 1. States with confirmed cases - Dec. 2016 to Feb. 2017 (updated as at Feb. 17 2017), N = 68





1. Lassa fever

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

- 1.1. Eight (8) suspected cases of Lassa fever with six (6) Lab. Confirmed and 2 deaths (CFR, 25.0%) were reported from 7 LGA (7 States) in week 6, 2017 compared with 30 suspected cases with 3 Lab. Confirmed and 2 deaths (CFR, 6.7%) from 15 LGAs (8 States) at the same period in 2016 (Figure 2).
- 1.2. Laboratory results of the 8 suspected cases were 6 positive & 2 negative for Lassa fever and other VHFs.
- Between weeks 1 and 6 (2017), 138 suspected Lassa fever cases with 37 lab-confirmed and 21 deaths (CFR, 15.22%) from 27 LGAs (10 States) were reported compared with 377 suspected cases with 35 labconfirmed and 60 deaths (CFR, 15.92%) from 93 LGAs (24 States) at the same period in 2016 (Figure 2).
- 1.4. Between weeks 1 & 52 2016, 921 suspected Lassa fever cases with 109 lab-confirmed and 119 deaths (CFR, 12.92%) from 144 LGAs (28 States & FCT) were reported compared with 430 suspected cases with 25 labconfirmed and 40 deaths (CFR, 9.30%) from 37 LGAs (14 States & FCT) at the same period in 2015 (Figure 3).
- 1.5. Investigation and active case search ongoing in affected states with coordination of all response activities by NCDC and support from partners.
- 1.5.1. National Lassa Fever Working Group meeting and National Surveillance and Outbreak Response Working Group meeting on-going at NCDC to assess the current Lassa fever situation in the Country
- 1.5.2. Response materials for VHFs prepositioned across the country by NCDC at the beginning of the dry season
- 1.5.3. New VHF guidelines being produced by NCDC

- 1.5.4. Reclassification of reported Lassa fever cases is ongoing
- 1.5.5. Reviewing the variable for case based surveillance for VHF
- 1.5.6. VHF case based forms completed by affected States are being entered into the new VHF management system. This system allows for creation of a VHF database for the country.
- 1.5.7. Onsite support ongoing in Ondo State with off-site support to all the other affected States
- 1.5.8. Onsite support was earlier provided to Ogun, Nasarawa and Taraba.
- 1.5.9. Additional supplies (Medicines, PPEs etc.) provided to Plateau, Nasarawa and Ogun States
- 1.5.10.States are enjoined to intensify surveillance

Figure 2: Map of Nigeria showing areas affected by Lassa fever, week 1- 6, 2016 & 2017

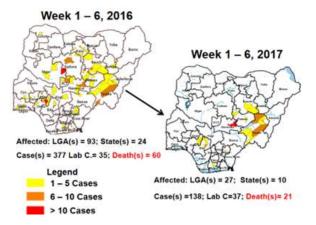
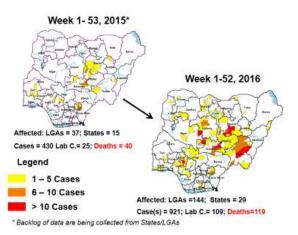


Figure 3: Map of Nigeria showing areas affected by Lassa fever, week 1 - 53, 2015 & 2016



2. MEASLES

- 2.1. In the reporting week, four hundred & ninety-two (492) suspected cases of Measles and 0 death were recorded from 30 States & FCT compared with 693 suspected measles cases and 8 deaths (CFR, 1. 15%) from 30 States & FCT at the same period in 2016.
- 2.2. So far, 2,548 suspected Measles cases with 35 Lab. Confirmed and 22 deaths (CFR, 0. 86%) have been reported in 2017 from 35 states & FCT (Figure 3 & 4) compared with 3,461 suspected cases and 13 deaths (CFR, 0.38%) from 35 states & FCT at the same period in 2016.
- 2.3. In 2016 (week 1 -52), 25,251 suspected measles cases with 102 deaths (CFR, 0.40%) were reported from 36 States and FCT compared with 24,421 suspected cases with 127 deaths (CFR, 0.52%) at the same period in 2015
- 2.4. Response measure includes immunization for all vaccinepreventable diseases in some selected/ affected wards/LGAs during SIAs with case management.
- 2.5. Scheduled measles campaign in the North East conducted from 12th 17th January, 2017 in Adamawa, Borno & Yobe States (Phase I) and phase II from 21st 25th January, 2017, Borno State & 4th 8th February, 2017, Yobe State

Figure 4: Suspected measles cases by States, week 6, 2017 as at 17th February, 2017

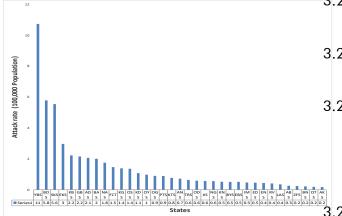


Figure 5: Nigeria: Distribution of suspected measles cases, week 1 - 6, 2017 as at 17/02/2017

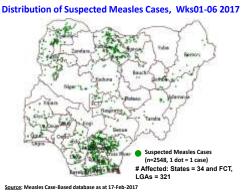


Figure 6: Nigeria: Suspected & Confirmed (Lab+Epi Link + Clinical) Measles cases WK 1- 6, 2017 as at 17/02/2017

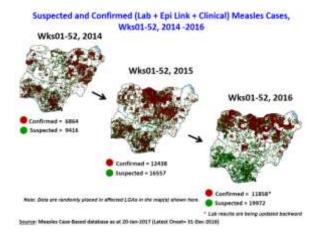


Figure 6 Nigeria: Suspected & Confirmed (Lab+Epi Link + Clinical) Measles cases 2014, 2015 & 2016

3. POLIOMYELITIS

- 3.1. As at February 12th 2017, no new case of WPV recorded
- 3.2. No new cVDPV2, environmental derived and Polio compatible cases identified
- 3.2.1. In the reporting week, 231 cases of AFP were reported from 181 LGAs in 30 States and FCT
- 3.2.2. AFP Surveillance has been enhanced and outbreak response is on-going in Borno and other high risk states
- 3.2.3. The 1st round of NIPDs in 2017 was conducted from 28th 31st January 2017 in the 18 high risk states. This was carried out using mOPV2 (2nd mOPV2 OBR). The schedule for other SIAs is as in Figure 8.
- 3.2.4. The 2nd round of NIPDs is being proposed for 25th-28th February, 2017 in 14 high risk States.

- 3.2.5. Between weeks 1 & 52, 2016 four WPVs were isolated from Borno State compared to no WPV isolated at the same period in 2015.
- 3.3. No circulating Vaccine Derived Polio Virus type 2 (cVDPV2) was isolated in both week 1 - 5, 2016 and 2015.
- 3.4. Between weeks 1 & 52, 2016 two (2) cVDPV2 were isolated in 2 LGAs (2 States) while one (1) cVDPV2 were isolated from Kwali, FCT at the same period in 2015.
- 3.5. Six (6) confirmed WPV were isolated in 2014.
- 3.6. The SIAs were strengthened with the following events:
- 3.6.1. Immunization for all vaccinepreventable diseases in some selected wards/LGAs.
- 3.6.2. Use of health camp facilities.
- 3.6.3. Field supportive supervision and monitoring.
- 3.6.4. Improved Enhanced Independent Monitoring (EIM) and Lots Quality Assessments (LQAs) in all Polio-high risk States.
- 3.6.5. High level of accountability framework

Figure 7: Polio Compatible cases in Nigeria as at week 52, 2014 - 2016 (Data as at 12/02/17)



Figure 8: EOC Planned SIAs Calendar for 2017

S/No	Month	Dates	Scope	Remarks	Target Populations	Antigen	Outcome	
1	January	28 th - 31 st	SIPDs (18 States)	2nd mOPV2 OBR in 18 states	33,478,035	mOPV2		
1	January	28 th - 31 st	Bodinga LGA & 2 wards in Shagari	the missed bOPV round in Dec 16	84,632	bopv	Completed	
2	February	25 th - 28 th	SIPDs (14 High	List of high risk states reviewed using the HR Algorithm and local information on risk	26,256,251	bOPV	Pending	
3	March	25 th - 28 th	NIPDs (36+1)	Nationwide	59,961,520	bOPV	Pending	
4	April	22 nd - 25 th	NIPDs (36+1)	Nationwide	59,961,520	bOPV	Pending	
5	July	1 st - 4 th	SIPDs (14 High Risk States)	righ Risk States	26,256,251	ЬОРУ	Pending	
6	September	9 th - 12 th	SIPDs (14 High Risk States)	0	26,256,251	bopv	Pending	
7	October	14 th - 17 th	SIPDs (6 High Risk States)	High Risk States	26,256,251	bopv	Pending	
8	December	9 th - 12 th	SIPDs (18 High Risk States)	High Risk States	26,256,251	ьору	Pending	

4. CHOLERA

- 4.1. No case of Cholera was reported in week 6 (2017), compared with 10 cases from Damboa LGA (2 States) at the same period in 2016 (Figure 9).
- 4.2. Between weeks 1 and 6 (2017), 36 suspected cholera cases and 4 deaths (CFR, 11.11%) from 5 LGAs (5 States) were reported compared with 94 suspected cases from 5 LGAs (3 States) at the same period in 2016 (Figure 9).
- 4.3. Between weeks 1 and 52 (2016), 768 suspected cholera cases with 14 labconfirmed and 32 deaths (CFR, 4.17%) from 57 LGAs (14 States and FCT) were reported compared with 5,301 cases with 29 lab confirmed and 186 deaths (CFR, 3.51%) from 101 LGAs (18 States and FCT) at the same period in 2015 (Figure 10).
- 4.4. States are enjoined to intensify surveillance.

Figure 9: Status of LGAs/States that reported Cholera cases in week 1- 6, 2016 & 2017

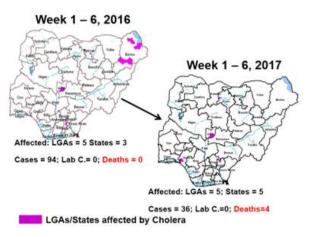
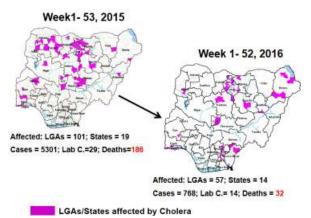


Figure 10: Status of LGAs/States that reported Cholera cases in week 1- 52, 2015 & 2016



5. CEREBROSPINAL MENINGITIS (CSM)

- 5.1. In the reporting week, 71 suspected cerebrospinal meningitis (CSM) cases with 2 Lab. Confirmed and 10 deaths (CFR, 14. 09 %) were reported from 18 LGAs (11 States) compared with 16 cases and 1 death (CFR, 6.25%) from 10 LGAs (8 States) at the same period in 2016.
- 5.2. Between weeks 1 & 6 (2017), 224 suspected CSM cases with 3 Lab. confirmed and 23 deaths (CFR, 10.27%) were recorded from 49 LGAs (21 States) compared with 71 suspected cases and 2 deaths (CFR, 2.82%) from 34 LGAs (14 States) at the same period in 2016 (Figure 11).
- 5.3. Between weeks 1 & 52, 2016, 831 suspected CSM cases with 43 labconfirmed and 33 deaths (CFR, 3.97%) were recorded from 154 LGAs (30 States and FCT) compared with 2711 suspected cases and 131 deaths (CFR, 4.83%) from 170 LGAs (28 States and FCT) at the same period in 2015 (Figure 12)

Figure 11: Map of Nigeria showing areas affected by CSM, week 1 – 6, 2016 & 2017

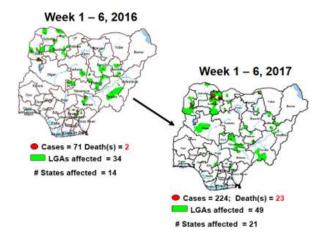
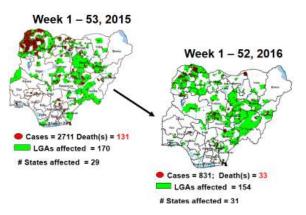


Figure 12: Nigeria: Dot maps of CSM cases, week 1 - 53, 2015 & 2016



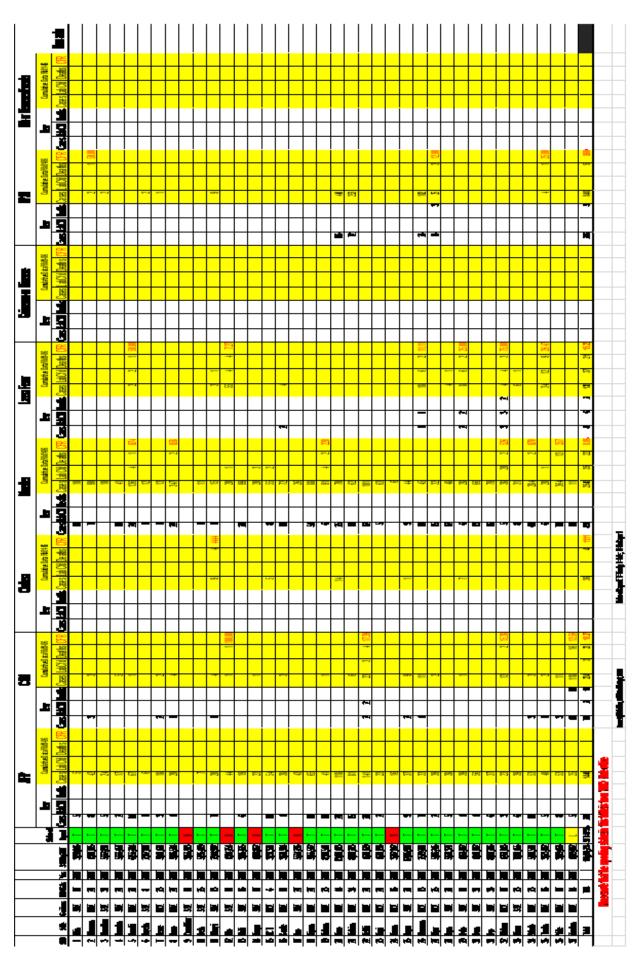
- 5.4. Timeliness/completeness of CSM casereporting from States to National Level (2017 versus 2016): on the average, 77.6% of the 26 endemic states sent CSM reports timely while 84.0% were complete in week 1 – 6, 2017 as against 81.4% timeliness and 93.6% completeness recorded within the same period in 2016.
- 5.5. CSM preparedness checklist sent to 36 States and FCT in response to 2017 meningitis season
- 5.6. CSM surveillance evaluation to be held in first quarter of 2017
- 5.7. Intensive Surveillance is on-going in high risk States.

6. GUINEA WORM DISEASE

- 6.1. In the reporting week, No rumour reports of Guinea Worm disease was received from any State.
- 6.2. Nigeria has celebrated 8 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 NIGEP NC/Director: Mrs. I, Anagbogu: +2348034085607, <u>ifechuba@yahoo.co.uk</u>)

Keys:										.	<50%	Poor	9 States
I= Anived on Time										Timely Terms	50-79%	Good	3 States
l= Anived late		N	Leput	mtree	eired					Lepurts	80-100%	Excellent	25States
N = No Report (Report ast received)			-										
									Timely Rpts	Late Rpts	Rpts Not Recvd	96	9/6
State	GeoZones	W01	W02	W03	W04	W05	W06	Expected (Es)	(Ts)	(Ls)	(Ns)	Timely	Complete
Abia	SEZ	N	N	N	N	N	Т	6	1	0	5	17%	17%
Adamawa	NEZ	L	L	L	L	L	L	6	0	6	0	0%	100%
Akwa Ibom	SSZ	Т	L	Т	Т	Т	Т	6	5	1	0	83%	100%
Anambra	SEZ	Т	Т	Т	Т	L	Т	6	5	1	0	83%	100%
Beachi	NEZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Bayelsa	SSZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Benne	NCZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Bomo	NEZ	L	Т	Т	Т	Т	Т	6	5	1	0	83%	100%
Cross River	SSZ	N	N	N	N	N	Ν	6	0	0	6	0%	0%
Delta	SSZ	L	Т	L	L	L	Т	6	2	4	0	33%	100%
Ebanyi	SEZ	Т	L	L	L	Т	L	6	2	4	0	33%	100%
Edo	SSZ	L	L	L	L	Т	N	6	1	4	1	17%	83%
<u>Retti</u>	SWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Enngn	SEZ	L	L	L	L	Т	N	6	1	4	1	17%	83%
RCT	NCZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Gambe	NEZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Imo	SEZ	L	L	L	L	N	Ν	6	0	4	2	0%	67%
Jipawa	NWZ	Т	Т	Т	L	L	N	6	3	2	1	50%	83%
Kaduna	NWZ	Т	Т	Т	Т	L	Т	6	5	1	0	83%	100%
Kano	NWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Katsina	NWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Kebbi	NWZ	Т	Т	Т	Т	L	L	6	4	2	0	67%	100%
Kogi	NCZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Kwara	NCZ	L	L	L	L	L	N	6	0	5	1	0%	83%
Lagos	SWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Nasarawa	NCZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Niger	NCZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Ogun	SWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Ondo	SWZ	Т	Т	Т	Т	Т	Т	6	6	0	0	100%	100%
Osun	SWZ	T	T	T	Т	Т	Т	6	6	0	0	100%	100%
Oyo	SWZ	Т	T	L	Т	Т	T	6	5	1	0	83%	100%
Plateau D	NCZ	T	T	T	Т	Т	T	6	6	0	0	100%	100%
Rivers	SSZ	T	T	T	T	Т	T	6	6	0	0	100%	100%
Sokoto	NWZ	T	T	T	T	T	T	6	6	0	0	100%	100%
Taraba	NEZ	Т	T	Т	Т	Т	Т	6	<u> </u>	0	0	100%	100%
Yobe	NEZ	T	L	T	T	Т	Т	6	5	1	0	83%	100%
Zamfara	NWZ	Т	T	Т	L	Т	L	6	4	2	0	67%	100%
Total number of reports expected (E)		37	37	37	37	37	37	222	470				
Total reports sent on time (T)		28	27	27	26	27	27		162				
Total reports sent late (L)		7	8	8	9	7	4			43			
Total number of reports not received (N)		2	2	2	2	9	6				17		
Timeliness of reports =100°T/E		757	73.0	73.0	70.5	7 3 0	73.0					73%	
Completeness of reporting=100*(E-N)/E		94.6	94.6	94.6	946	919	83.8						92%



17th February 2017

FOR MORE INFORMATION CONTACT

Surveillance Department: Nigeria Centre for Disease Control 801 Ebitu Ukiwe Street, Jabi, Abuja, Nigeria.

email: epidreport@ncdc.gov.ng website: www.ncdc.gov.ng/reports toll-free call centre: 0800-970000-10 facebook: fb.com/NCDCgov twitter: twitter.com/NCDCgov