



NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

Effective Communication - Bedrock of outbreak management

Issue: Volume 7 No. 9



In the reporting week (week 10), the Lassa fever outbreak is active in 13 States of Nigeria. No new State reported having an outbreak. However, seven new suspected cases were reported from four States that had reported previously. A total of 18 newly confirmed cases were reported from three States following testing for Lassa fever and other VHFs. Three deaths were reported.

A total of 267 suspects have so far been reported since onset of the outbreak in December 2016. Of this, 91 have been confirmed positive for Lassa fever and 6 probable cases. A total of 46 deaths have been reported, of which 40 were in confirmed cases and 6 in probable cases. The case fatality rate for confirmed/probable is 47.4% and for all cases is 21%.

The Nigeria Centre for Disease Control (NCDC) has continued to provide support (onsite and off-site) to the affected States. The team dispatched to Borno State by the NCDC has been involved in providing support for outbreak response, case management and infection, prevention and control. The NCDC has continued to remain in the forefront of coordinating the response in the current outbreak.

Bridging the Gap in Outbreak Notification from the Epicenter of Lassa Fever

Edo State is endemic for Lassa fever and is known as the Epicentre of Lassa fever in Nigeria. The Lassa Fever Research institute is domiciled in the Irrua Specialist Teaching Hospital (ISTH) in Edo State. ISTH has been in the forefront of managing Lassa fever cases in the last 15 years and is a referral centre for laboratory testing and management of Lassa fever cases in Nigeria. Outbreaks of Lassa fever in Edo State are managed by the State and ISTH.

In this reporting week, Edo State reported a total of 13 confirmed cases of Lassa fever. However, the NCDC did not receive any notification of when the cases were first identified and as such, a deviation from the recommended flow of information in outbreak situations under the IDSR strategy. This presents a difficult situation, particularly when attempts are made to contain an outbreak. A coordinated and collaborative approach is necessary in containment of outbreaks, especially those of national and international magnitude.

The good work being done by colleagues at the ISTH is not lost on us, as they have played and continue to play a key role in the containment of Lassa fever outbreaks. Notwithstanding this however, there should be an inclusion of the dynamics in communication strategy as other faster and more effective methods have been approved for communication in surveillance. Phone calls, SMS and WhatsApp chats are some of the platforms that have been approved for use in surveillance. The NCDC Connect Centre has a toll-free line- 080097000010 and WhatsApp- 08099555577.

The NCDC will continue to spread its tentacles in providing the needed support to affected States. These States have the responsibility of working together with the NCDC and other stakeholders and providing the needed information for all to work with. A well-coordinated surveillance team is the bedrock of an efficient and effective surveillance structure.

In the reporting week:

- There were 322 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.
- o Seven new suspected cases of Cholera were reported. No deaths were reported.
- o There were 153 suspected cases of Cerebrospinal Meningitis (CSM) reported from 26 LGAs in 11 States. Of this, one was lab confirmed and 11 deaths were

recorded. Surveillance for CSM is ongoing and intensified in the States, particularly as the dry season has set in.

o There were 619 suspected cases of measles reported from 33 States including the FCT. One was laboratory confirmed and two deaths were recorded.

In the reporting week, two States (Imo and Oyo) failed to report and seven States reported late. Timeliness of reporting remains at 73.0% in the previous week and current week while completeness increased from 95.0% in the previous week to 99.0%. This is a remarkable improvement and States are enjoined to work harder.

Summary Table (IDSR Weekly Report as at 10/03/2017)

Disease	Variables	Week 08	Wee	k 09	Cumulative Weeks			
Disease	Variables	2017	2017	2016	01 - 9, 2017	01 - 9, 2016		
AFP	Cases	285	322	350	2,469	1660		
	Deaths	0	0	0	0	0		
	CFR	0.00%	0.00%	0.00%	0.00%	0.00%		
	WPV Types 1 & 3	0	0	0	0	0		
Polio	WPV Types 1	0	0	0	0	0		
	WPV Types 3	0	0	0	0	0		
Cholera	Cases	0	7	33	45	148		
	Deaths	0	0	0	4	1		
	CFR	0.00%	0.00%	0.00%	8.89%	0.68%		
Lassa Fever	Cases	6	8	20	160	509		
	Deaths	0	0	0	23	67		
	CFR	0.00%	0.00%	0.00%	14.38%	13.16%		
CSM	Cases	89	153	24	537	153		
	Deaths	14	11	1	60	8		
	CFR	15.73%	7.19%	4.17%	11.17%	5.23%		
Measles	Cases	629	619	1,165	4,441	6975		
	Deaths	14	2	1	38	15		
	CFR	2.23%	0.32%	0.09%	0.86%	0.22%		
Guinea Worm	Cases	0	0	0	0	0		
	Deaths	0	0	0	0	0		
	CFR	0.00%	0.00%	0.00%	0.00%	0.00%		

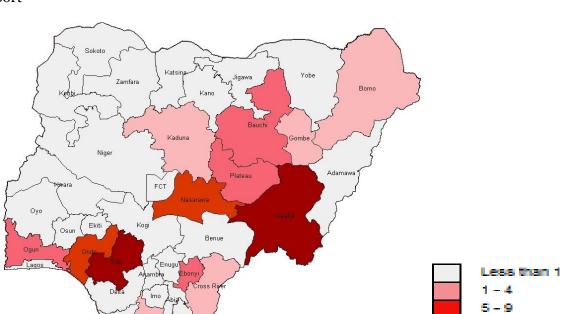


Figure 1. States with confirmed cases - Dec. 2016 to Mar. 2017 (updated as at Mar. 10 2017), N = 97

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 suspected cases of Lassa fever were reported from four LGAs (four States) in week 9, 2017 compared with 20 suspected cases from ten LGAs (six States) at the same period in 2016 (Figure 2).
- 1.2. Laboratory results of the eight suspected cases were two positive for Lassa fever, four negative for Lassa fever and other VHFs while two results are pending (Gombe 1 and Taraba 1).
- 1.3. Between weeks 1 and 9 (2017), 160 suspected Lassa fever cases with 38 laboratory confirmed cases and 23 deaths (CFR, 14.38%) from 32 LGAs (10 States) were reported compared with 509 suspected cases with 49 laboratory confirmed and 67 deaths (CFR, 13.16%) from 110 LGAs (26 States) during the same period in 2016 (Figure 2).
- 1.4. Between weeks 1 and 52 2016, 921 suspected Lassa fever cases with 109 laboratory confirmed cases and 119 deaths (CFR, 12.92%) from 144 LGAs (28 States and FCT) were reported compared with 430 suspected cases with 25 laboratory confirmed cases and 40 deaths (CFR, 9.30%) from 37 LGAs (14 States and FCT) during 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 with support from partners.
- 1.5.1. National Lassa Fever Working Group meeting and weekly National Surveillance and Outbreak Response meeting on-going at NCDC to keep abreast of 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 developed by the NCDC
- 1.5.4. Ongoing reclassification of reported Lassa fever cases
- 1.5.5. Ongoing review of the variables 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. Confirmed cases are being treated at identified treatment/isolation centers across the states with Ribavirin and necessary supportive management also instituted

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- 1.5.8. Onsite support was earlier provided to Ogun, Nasarawa, Taraba and Ondo by NCDC /partners.
- 1.5.9. The NCDC has deployed a team to Borno state to support the outbreak response and coordinate case management of patients and support implementation of IPC measures amongst healthcare workers
- 1.5.10.NCDC distributed Ribavirn tablets to Cross-River State
- 1.5.11. States are enjoined to intensify surveillance

Figure 2: Map of Nigeria showing areas affected by Lassa fever, week 1- 9, 2016 & 2017

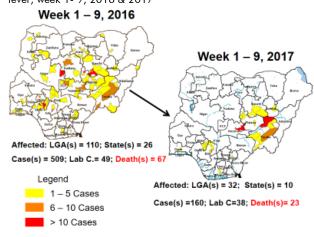
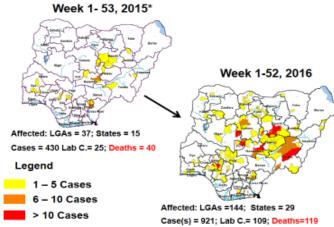


Figure 3: Map of Nigeria showing areas affected by Lassa fever, week 1 - 53, 2015



* Backlog of data are being collected from States/LGAs

2. MEASLES

- 2.1. In the reporting week, 619 suspected cases of Measles with one Laboratory confirmed case and two deaths (CFR, 0.32%) were reported from 32 States and FCT compared with 1,165 suspected measles cases and one death (CFR, 0.09%) from 33 States and FCT during the same period in 2016.
- 2.2. So far, 4,441 suspected Measles cases with 41 Laboratory confirmed cases and 38 deaths (CFR, 0. 86%) have been reported in 2017 from 36 states and FCT (Figures 3 and 4) compared with 6,975 suspected cases and 15 deaths (CFR, 0.22%) from 36 states and FCT during 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%) during the same period in 2015
- 2.4. Response measures include immunization for all vaccine-preventable diseases in some selected/affected wards/LGAs during SIAs, as well as case management.
- 2.5. Scheduled measles campaign in the North East was conducted from 12th 17th January, 2017 in Adamawa, Borno and Yobe States (Phase I) and Phase II from 21st 25th January, 2017 in Borno State and 4th 8th February, 2017 in Yobe State

Figure 4: Suspected measles attack rate by States, week 9, 2017 as at 10th March, 2017

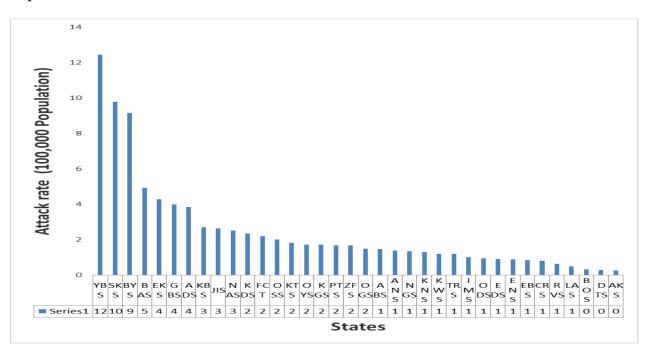
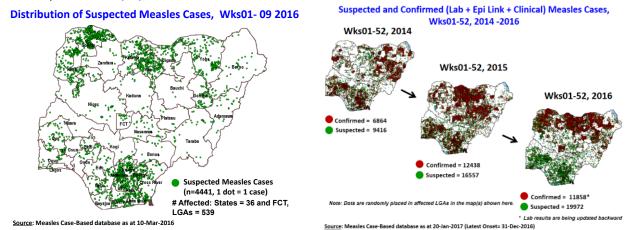


Figure 5: Nigeria: Distribution of suspected measles cases,

Figure 6: Suspected & Confirmed(Lab+Epi Link+Clinical) Measles 2014,2015 and 2016 week 1 - 9, 2017 as at 10/03/2017



3. POLIOMYELITIS

- 3.1. As at March 3rd 2017, no new case of WPV recorded
- 3.2. Three new cVDPV2, environmental derived and Polio compatible cases identified
- 3.2.1. In the reporting week, 322 cases of AFP were reported from 220 LGAs in 33 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 described in Figure 8.
- 3.2.4. The 2nd round of SIPDs completed (25th-28th February, 2017) in 14 high risk States using bOPV.

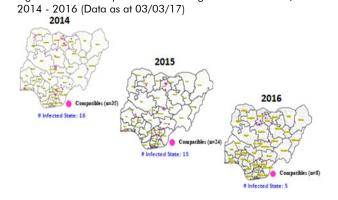
3.2.5. Between weeks 1 and 52, 2016 four WPVs were isolated from Borno State compared to no WPV isolated during the same period in 2015.

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- 3.3. No circulating Vaccine Derived Polio Virus type 2 (cVDPV2) was isolated in week 1 5, in both 2016 and 2015.
- 3.4. Between weeks 1 and 52, 2016 two (2) cVDPV2 were isolated in 2 LGAs (2 States) while one (1) cVDPV2 was isolated from Kwali, FCT during the same period in 2015.
- 3.5. Six confirmed WPVs were isolated in 2014.
- 3.6. The SIAs were strengthened with the following events:
- 3.6.1. Immunization for all vaccine-preventable 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,

Figure 8: EOC Planned SIAs Calendar for 2017



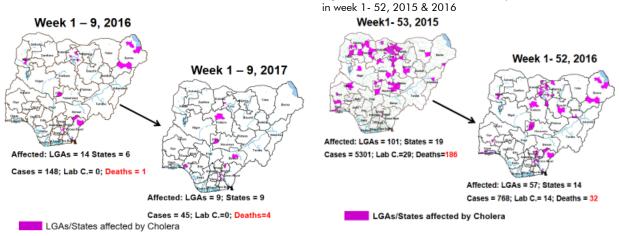
S/No	Month	Dates	Scope	Remarks	Target Populations	Antigen	Outcome		
	January	28 th - 31 st	SIPDs (18 States)	2nd mOPV2 OBR in 18 states	33,478,035	mOPV2			
1	January	28 th - 31 st	Bodinga LGA & 2 wards in Shagari	the missed bOPV round in Dec 16	84,632	ьору	Completed		
2	February	25 th - 28 th	SIPDs (14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

4. CHOLERA

- 4.1. Seven suspected cases of Cholera were reported from three LGAs (three States) in week 9 (2017), compared with 33 suspected cases from three LGAs (Kano States) during the same period in 2016 (Figure 9).
- 4.2. Between weeks 1 and 9 (2017), 45 suspected cholera cases and four deaths (CFR, 8.89%) from nine LGAs (nine States) were reported compared with 148 suspected cases and 1 death (CFR, 0.68%) from 14 LGAs (six States) during the same period in 2016 (Figure 9).
- 4.3. Between weeks 1 and 52 (2016), 768 suspected cholera cases with 14 laboratory confirmed cases and 32 deaths (CFR, 4.17%) from 57 LGAs (14 States and FCT) were reported compared with 5,301 cases with 29 laboratory confirmed cases and 186 deaths (CFR, 3.51%) from 101 LGAs (18 States and FCT) during the same period in 2015 (Figure 10).
- 4.4. States are enjoined to intensify surveillance.

Figure 10: Status of LGAs/States that reported Cholera cases

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5. CEREBROSPINAL MENINGITIS (CSM)

- 5.1. In the reporting week, 153 suspected cerebrospinal meningitis (CSM) cases with one laboratory confirmed case and 11 deaths (CFR, 7.19%) were reported from 26 LGAs (11 States) compared with 24 cases with three laboratory confirmed cases and one death (CFR, 4.17%) from 15 LGAs (12 States) during the same period in 2016.
- 5.2. Between weeks 1 and 9 (2017), 537 suspected CSM cases with nine laboratory confirmed cases and 60 deaths (CFR, 11.17%) were recorded from 83 LGAs (22 States) compared with 153 suspected cases and eight deaths (CFR, 5.23%) from 61 LGAs (19 States) during the same period in 2016 (Figure 11).
- 5.3. Between weeks 1 and 52, 2016, 831 suspected CSM cases with 43 laboratory confirmed cases and 33 deaths (CFR, 3.97%) were recorded from 154 LGAs (30 States and FCT) compared with 2,711 suspected cases and 131 deaths (CFR, 4.83%) from 170 LGAs (28 States and FCT) during the same period in 2015 (Figure 12)

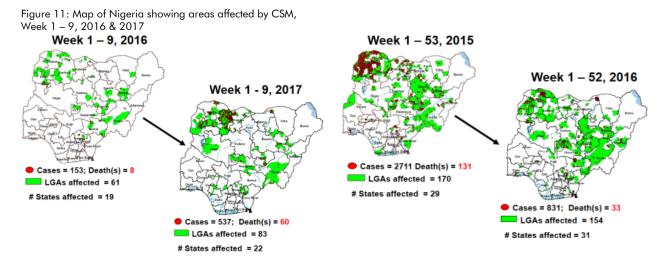


Figure 12: Nigeria: Dot maps of CSM cases, week 1 - 53, 2015 & 2016

5.4. Timeliness/completeness of CSM case-reporting from States to National Level (2017 versus 2016): on average, 76.9% of the 26 endemic states sent CSM reports in a timely

- manner while 97.9% were complete in week 1 9, 2017 as against 83.8% timeliness and 95.3% completeness recorded within the same period in 2016.
- 5.5. CSM preparedness checklist sent to 36 States and FCT ahead of 2017 meningitis season
- 5.6. Confirmed cases are being treated at identified treatment centres in Zamfara and Katsina States and necessary supportive management also instituted
- 5.7. Onsite support was earlier provided to Zamfara State.
- 5.8. Intensive Surveillance is on-going in high risk States.
- 5.9. Request has been made to the National Primary Health Care Development Agency for reactive vaccination campaign in Zamfara State.

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, ifechuba@yahoo.co.uk)

FOR MORE INFORMATION CONTACT

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Keys:													Tt. 1	<50%	Poor	10 States
T= Arrived on Time													Timely	50-79%	Good	6 States
L= Arrived late		N Report not received											Reports	80-100%	Excellent	21 States
N = No Report (Report not received)		report not recer														
State	GeoZones	W01	W02	W03	W04	W05	W06	W07	W08	W09	Expected (Es)	Timely Rpts (Ts)	Late Rpts (Ls)	Rpts Not Recvd (Ns)	% Timely	% Complet
Abia	SEZ	L	L	L	L	L	T	L	Т	L	9	2	7	0	22%	100%
Adamawa	NEZ	L	L	L	L	L	L	Т	L	Т	9	2	7	0	22%	100%
Akwa Ibom	SSZ	T	L	T	T	T	T	L	T	T	9	7	2	0	78%	100%
Anambra	SEZ	T	Т	Т	T	L	T	Т	Т	Т	9	8	1	0	89%	100%
Bauchi	NEZ	T	T	T	T	T	T	T	L	T	9	8	1	0	89%	100%
Bayelsa	SSZ	T	Т	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Benue	NCZ	T	Т	Т	Т	Т	Т	L	Т	Т	9	8	1	0	89%	100%
Borno	NEZ	L	T	Т	T	T	T	L	L	L	9	5	4	0	56%	100%
Cross River	SSZ	L	L	L	L	L	L	L	L	L	9	0	9	0	0%	100%
Delta	SSZ	L	T	I.	L	Ī.	T	I.	L	Ī,	9	2	7	0	22%	100%
Ebonyi	SEZ	T	L	I.	L	T	I,	T	T	L	9	4	5	0	44%	100%
Edo	SSZ	L	L	L	L	T	L	T	T	T	9	4	5	0	44%	100%
Ekiti	SWZ	T	T	Т	T	Т	T	Т	Т	Т	9	9	0	0	100%	100%
Enugu	SEZ	L	L	L	L	T	L	T	L	Т	9	3	6	0	33%	100%
FCT	NCZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Gombe	NEZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
ímo	SEZ	I.	I.	I.	L	L	L	I.	L	N	9	0	8	1	0%	89%
igawa	NWZ	T	T	T	L	I.	I.	I.	L	T	9	4	5	0	44%	100%
Kaduna	NWZ	T	T	T	T	Ī.	T	I.	T	Т	9	7	2	0	78%	100%
Kano	NWZ	T	T	Т	T	T	Т	T	Т	Т	9	9	0	0	100%	100%
Katsina	NWZ	T	T	Т	T	T	T	Т	T	Т	9	9	0	0	100%	100%
Kebbi	NWZ	T	T	Т	T	L	L	T	T	T	9	7	2	0	78%	100%
Kogi	NCZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Kwara	NCZ	I.	I.	I.	I.	I.	I.	I.	I.	I.	9	0	9	0	0%	100%
Lagos	SWZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Nasarawa	NCZ	T	T	Т	Т	Т	Т	T	Т	Т	9	9	0	0	100%	100%
Niger	NCZ	T	T	Т	T	T	Т	T	T	I.	9	8	1	0	89%	100%
Ogun	SWZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Ondo	SWZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Osun	SWZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Оуо	SWZ	T	T	I.	T	T	T	T	Т	N	9	7	1	1	78%	89%
Plateau	NCZ	T	T	T	T	T	T	T	T	T	9	9	0	0	100%	100%
Rivers	SSZ	T	T	T	T	T	T	T	T	Т	9	9	0	0	100%	100%
Sokoto	NWZ	T	T	Т	T	T	T	T	T	T	9	9	0	0	100%	100%
Faraba	NEZ	T	T	Т	T	T	T	T	T	T	9	9	0	0	100%	100 %
Yobe	NEZ	T	I.	T	T	T	T	T	T	T	9	8	1	0	89%	100%
Zamfara	NWZ	T	T	Т	I.	T	I.	I.	T	Т	9	6	3	0	67%	100%
Total number of reports expected (E)	111111	37	37	37	37	37	37	37	37	37	333	7	,		01/0	100 /
Total reports sent on time (T)		28	27	27	26	27	27	26	28	28		244				
Total reports sent late (L)		9	10	10	11	10	10	11	9	7		211	87			
•													07	2		
Total number of reports not received (N)		0 75.7	72.0	72.0	70.2	72.0	72.0	70.2	0	2				2	HOD/	
Timeliness of reports =100*T/E		75.7	73.0	73.0	70.3	73.0	73.0	70.3	75.7	75.7					73%	_000/
Completeness of reporting=100*(E-N)/E		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	94.6						99%

