



NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

OUTBREAK PREPAREDNESS: THE ROLE OF A RAPID RESPONSE TEAM



Outbreaks and events of public health concern are occurrences that affect the health and well-being of people. With adequate emergency preparedness and response structures in place, outbreaks can be quickly controlled and number of people affected reduced.

One way to reduce the impact of a disease outbreak is through the constitution of a Rapid Response Team (RRT). A RRT is a technical, multi-disciplinary team that is readily available for quick mobilisation and deployment in case of emergencies. In Nigeria, it is recommended that a RRT is constituted at the State and Local Government Area (LGA) level. This is to promote collaborative efforts amongst all key stakeholders, given the various technicalities that may come to play in the course of responding to an outbreak or emergency. The RRT at each level is made up of different stakeholders tasked with a specific set of responsibilities. This is summarized in the table below:

Figure 1: Summary of RRT composition and Tasks

Level of RRT	Team Composition	Terms of Reference/Responsibilities
State level	<ul style="list-style-type: none"> • Director Primary Health Care/Public Health • State Epidemiologist. • Medical Laboratory Scientist • Public Health Nurse • Environmental Health Officer Health Education Officer • DSN Officer • Representative of partner agencies 	<ul style="list-style-type: none"> • To verify any report of disease outbreak in the State • To carry out outbreak investigation • To propose and plan appropriate measures for containment of the epidemics to the State Disease Surveillance and response Committee • To participate actively in implementation of epidemic prevention and control strategies • To provide technical support to LGAs during outbreaks
LGA level	<ul style="list-style-type: none"> • Medical Officer of Health/Primary Health Care Coordinator • Epidemiologist or Public Health Officer • Laboratory technologist/Technician/Scientific officers • Clinician • Environmental Health Officer • Immunization Officers • DSN Officers/M&E Officers (whichever is applicable) • Wildlife and Veterinary Officer (for Zoonotic diseases) • Pharmacist • Others based on availability of Technical Staff and specificity of the outbreak 	<ul style="list-style-type: none"> • Investigation of rumours / outbreaks and other public health events • Propose appropriate strategies and measures for the rapid containment of the epidemics • Conduct initial disease control measures to contain the outbreak • Coordination of rapid response actions with partners and other agencies. • Prepare detailed investigation report • Contribute to the post epidemic evaluation of the outbreak response

The team composition as seen in the table is not exhaustive, given that outbreaks and emergencies may occur that will require personnel with certain technical expertise not listed above. Given the dynamics of disease outbreaks in recent times and in a bid to improve surveillance, it is important for considerations to be made for the constitution of a National RRT. This team will be responsible for coordinating and providing technical support to outbreaks particularly as they cut across many states or in the West African sub-region.

The Nigeria Centre for Disease Control is currently developing a training curriculum for use in building capacity of a National RRT. The curriculum will be shared with all States with the hope that it will be adapted to build capacity of the State and LGA RRTs in preparedness and response to an outbreak.

In the light of collectively improving our surveillance system as a country, States are enjoined to constitute or re-activate (whichever is applicable) RRTs which will be focused on working out processes in preparedness and response strategies for any outbreak/emergency. States also have a responsibility, to ensure that every LGA has a constituted RRT that will be at the forefront of investigating any rumored or confirmed reports of any outbreak and initiating appropriate response at that level.

References

1. World Health Organization and Centers for Disease Control and Prevention (2013). Technical Guidelines for Integrated Disease Surveillance and Response in the African Region, Brazzaville, Republic of Congo and Atlanta, USA.

In the reporting week ending on the 27th of August, 2017:

- There were 253 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 at eradicating Polio.
- 106 suspected cases of Cholera were reported from six LGAs (two States) None was laboratory confirmed and two deaths were recorded.
- 54 suspected cases of Lassa fever with five Laboratory confirmed and two deaths were reported from seven LGAs in five States.
- There were eight suspected cases of Cerebrospinal Meningitis (CSM) reported from three LGAs in three States. Of these, none was laboratory confirmed and no death was recorded. Ongoing surveillance for CSM has been intensified in the States.
- There were 344 suspected cases of Measles reported from 30 States. None was laboratory confirmed and four deaths were recorded.

In the reporting week, Akwa-Ibom and Kaduna States failed to send in their report. Timeliness of reporting remains 84% in both previous and current weeks (Week 33 and 34) while completeness remains at 100%. It is very important for all States to ensure timely and complete reporting at all times, especially during an outbreak.

Summary Table 1 (IDSR Weekly Report as at 01/09/2017)

Disease	Variables	Week 33	Week 34		Cumulative Weeks	
		2017	2017	2016	01 - 34, 2017	01 - 34, 2016
AFP	Cases	239	253	274	10,686	9028
	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	2
	WPV Types 1	0	0	0	0	2
	WPV Types 3	0	0	0	0	0
Cholera	Cases	24	106	0	1,198	402
	Deaths	1	2	0	32	13
	CFR	4.17%	1.89%	0.00%	2.67%	3.23%
Lassa Fever	Cases	39	54	26	486	816
	Deaths	0	2	1	60	92
	CFR	0.00%	3.70%	3.85%	12.35%	11.28%
CSM	Cases	4	8	3	9776	600
	Deaths	0	0	0	602	29
	CFR	0.00%	0.00%	0.00%	6.16%	4.83%
Measles	Cases	485	344	335	17,177	21941
	Deaths	0	4	11	105	97
	CFR	0.00%	1.16%	3.28%	0.61%	0.40%
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%

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. 54 suspected cases of Lassa fever with five Laboratory confirmed and two deaths (CFR, 3.70%) were reported from seven LGAs (five States; Cross River – 1, Edo – 34, Kwara – 15, Ondo – 3 and Plateau – 1) in week 34, 2017 compared with 26 suspected cases with four Laboratory confirmed reported from three LGAs (three States) at the same period in 2016.
- 1.2. Laboratory results of the 54 suspected cases were five positives for Lassa fever (Edo – 2, & Ondo -3) while 49 were negative for Lassa fever and other VHF (Edo – 32, Kwara – 15 and Plateau - 1).
- 1.3. Between weeks 1 and 34 (2017), 486 suspected Lassa fever cases with 109 laboratory confirmed cases and 60 deaths (CFR, 12.35%) from 78 LGAs (26 States) were reported compared with 816 suspected cases with 80 laboratory confirmed cases and 92 deaths (CFR, 11.28%) from 132 LGAs (28 States) during the same period in 2016 (Figure 1).
- 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 2).
- 1.5. Investigation and active case search ongoing in affected States with coordination of response activities by the 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 VHF prepositioned across the country by NCDC at the beginning of the dry season
 - 1.5.3. New VHF guidelines have been developed by the NCDC (National Viral Haemorrhagic Fevers Preparedness guidelines, Infection Prevention and Control of VHF and Standard Operating Procedures for Lassa fever management) and are available on the NCDC website.
 - 1.5.4. National Lassa fever outbreak review meeting carried out with all affected States and partners
 - 1.5.5. Ongoing reclassification of reported Lassa fever cases
 - 1.5.6. Ongoing review of the variables for case-based surveillance for VHF
 - 1.5.7. VHF case-based forms completed by affected States are being entered into the new VHF management system. This system allows for the creation of a VHF database for the country.
 - 1.5.8. NCDC team sent to Edo State to support Lassa fever data harmonization & Updating of VHF case-based management database
 - 1.5.9. Confirmed cases are being treated at identified treatment/isolation centres across the States with Ribavirin and necessary supportive management also instituted
 - 1.5.10. Onsite support was earlier provided to Ogun, Nasarawa, Taraba, Ondo and Borno States by the NCDC and partners

- 1.5.11. Offsite support provided by NCDC/partners in all affected States
- 1.5.12. NCDC and partners are providing onsite support in Ondo and Plateau State
- 1.5.13. States are enjoined to intensify surveillance and promote Infection, Prevention and Control (IPC) measures in health facilities.

Figure 1: Map of Nigeria showing areas affected by Lassa fever, week 1- 34, 2016 & 2017

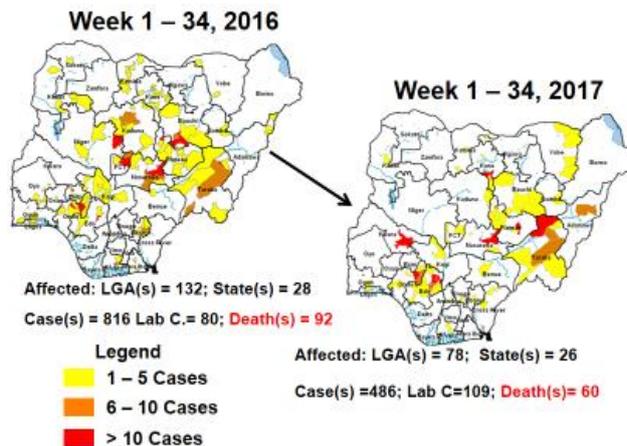
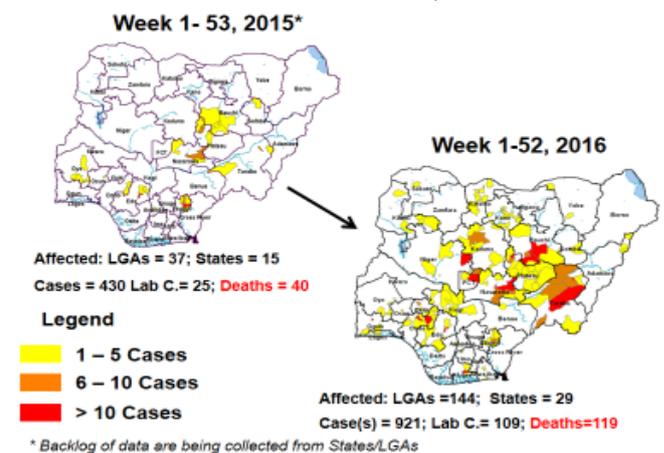


Figure 2: Map of Nigeria showing areas affected by Lassa fever, week 1 - 53, 2015 and week 1 – 52, 2016



2. MEASLES

- 2.1. In the reporting week, 344 suspected cases of Measles and four deaths (CFR, 1.16%) were reported from 30 States compared with 335 suspected measles cases and 11 deaths (CFR, 3.28%) reported from 26 States during the same period in 2016.
- 2.2. So far, 17,177 suspected Measles cases with 108 laboratory confirmed cases and 105 deaths (CFR, 0. 61%) have been reported in 2017 from 36 States and FCT (Figure 4) compared with 21,941 suspected cases and 97 deaths (CFR, 0.44%) 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 (Figure 5)
- 2.4. Response measures include immunisation for all vaccine-preventable diseases in some selected/affected wards/LGAs during SIAs, as well as case management.
- 2.5. Scheduled Measles campaigns in the North East were 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
- 2.6. Measles Surveillance Evaluation and Establishment of the burden of Congenital Rubella Syndrome (CRS) in 12 selected States in the six geopolitical zones from the 17th -21st July 2017 conducted

2.6.1 Debrief meeting to review results and next steps scheduled for the 15th of September 2017

2.7. Harmonization of measles surveillance data with laboratory confirmed cases

Figure 3: Suspected Measles attack rate by States, week 34, 2017 as at 20th August, 2017

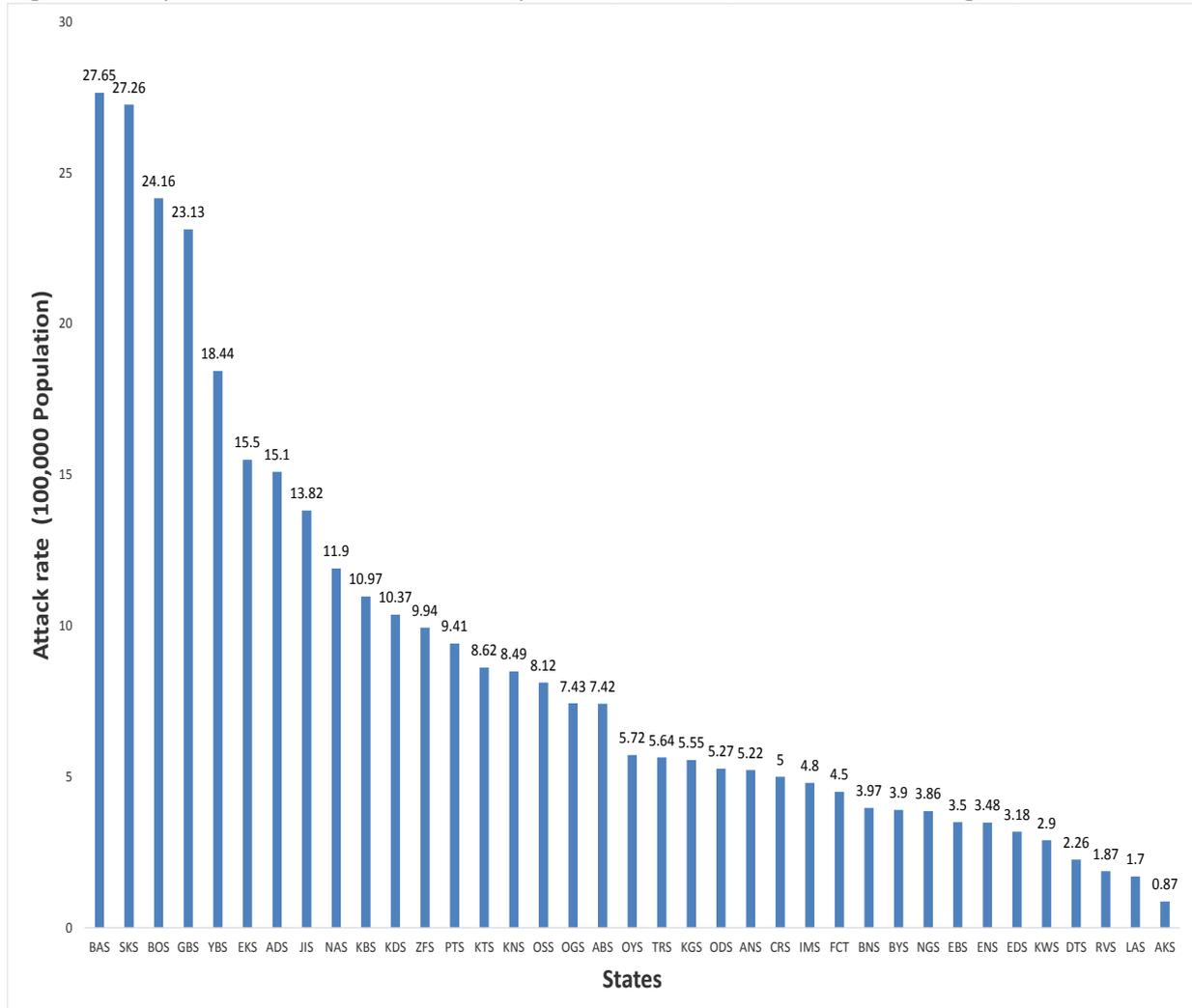
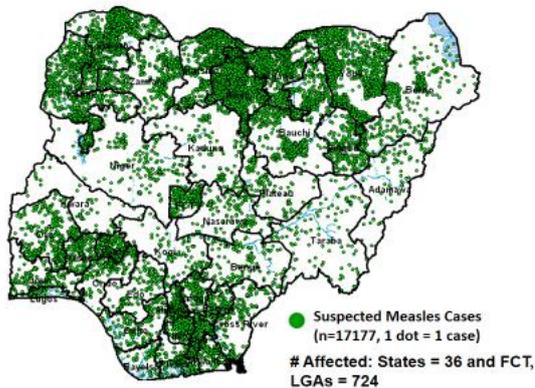


Figure 4: Map of Nigeria showing Distribution of suspected Measles cases, Weeks 1- 34, 2017as at 20/08/2017

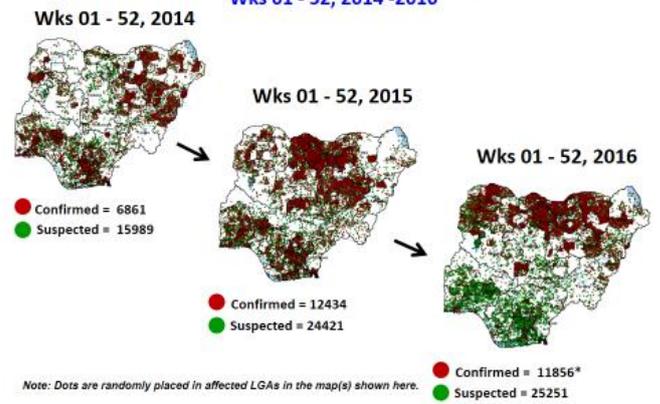
Figure 5: Suspected & confirmed (Lab + Epi Link + Clinical) Measles cases weeks 1 – 52, 2014 - 2016

Distribution of Suspected Measles Cases, Wks01-34 2017



Source: Measles Case-Based database as at 01-Sep-2017

Suspected and Confirmed (Lab + Epi Link + Clinical) Measles Cases, Wks 01 - 52, 2014 -2016



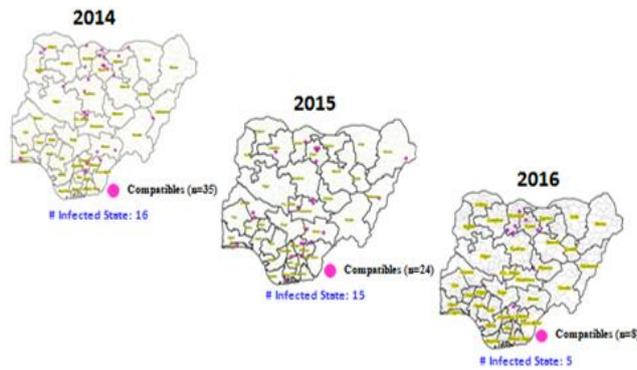
Source: Measles Case-Based database as at 06-Jan-2016 (Latest Onset= 31-Dec-2016)

3. POLIOMYELITIS

- 3.1. As at August 13th 2017, no new case of WPV was recorded
- 3.2. Three new cVDPV2, environmental derived and Polio compatible cases identified
 - 3.2.1. In the reporting week, 253 cases of AFP were reported from 194 LGAs in 32 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 SIPDs 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 Table 2
 - 3.2.4. The 2nd and 3rd round of SIPDs completed (25th-28th February and 8th – 11th July, 2017) in 14 & 18 high risk States using bOPV respectively.
 - 3.2.5. The 1st and 2nd rounds of NIPDs completed (from 25th – 28th March, 2017 and 22nd – 25th April, 2017) nationwide respectively.
 - 3.2.6. Between weeks 1 and 52 in 2016, four WPVs were isolated from Borno State compared to no WPV isolated during the same period in 2015.
- 3.3. No circulating Vaccine Derived Polio Virus type 2 (cVDPV2) was isolated in week 1 - 52, in both 2016 and 2015.
- 3.4. Between weeks 1 and 52, 2016 two (2) cVDPV2 were isolated in two LGAs (two 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 6: Polio Compatible cases in Nigeria as at Week 1 - 52, 2014 - 2016 (Data as at 13/08/17)

Table 2: 2017 SIAs



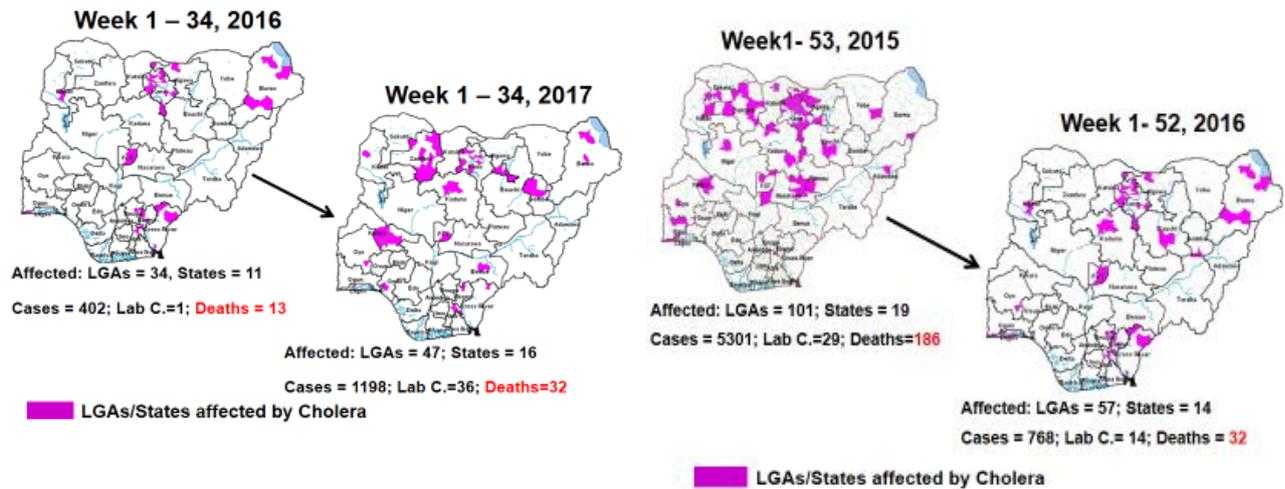
S/N	Month	Dates	Scope	Remarks	Target Populations	Antigen
1	January	28 th - 31 st	SIPDs (18 States)	2nd mOPV2 OBR in 18 states	33,478,035	mOPV2
2	February	25 th - 28 th	SIPDs (14 High Risk States)	List of high risk states reviewed using the HR Algorithm and local information on risk	26,256,251	bOPV
3	March	25 th - 28 th	NIPDs (36+1)	Nationwide	59,961,520	bOPV
4	April	22 nd - 25 th	NIPDs (36+1)	Nationwide	59,961,520	bOPV
5	July	8 th -11 th	SIPDs (18 High Risk States)	High Risk States	33,478,035	bOPV
6	October	14 th - 17 th	SIPDs (18 High Risk States)	High Risk States	33,478,035	bOPV
7	December	9 th - 12 th	SIPDs (6 High Risk States)	High Risk States		bOPV

4. CHOLERA

- 4.1. 106 suspected cases of Cholera and two deaths (CFR, 4.17%) were reported from six LGAs (two States) in week 34 compared with zero case reported during the same period in 2016.
- 4.2. Between weeks 1 and 34 (2017), 1198 suspected Cholera cases with 36 laboratory confirmed and 32 deaths (CFR, 2.67%) from 47 LGAs (16 States) were reported compared with 402 suspected cases and 13 deaths (CFR, 3.23%) from 34 LGAs (11 States) during the same period in 2016 (Figure 7).
- 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) 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 8).
- 4.4. Cholera preparedness workshop held from 31st May – 1st June, 2017 in Abuja to develop Cholera preparedness plan as the season set in.
- 4.5. NCDC/partners provided onsite support in Kwara State and Zamfara.
- 4.6. NCDC/partners are providing onsite support in Kebbi State.
- 4.7. Cholera Preparedness Checklist sent to all States to assess their level of preparedness with recommendations for prevention of and response to an outbreak.
- 4.8. RDT procured by NCDC and WHO currently being prepositioned in affected States
- 4.9. States are enjoined to intensify surveillance, implement WASH activities and ensure early reporting.

Figure 7: Status of LGAs/States that reported Cholera cases in week 1- 34, 2016 & 2017

Figure 8: Status of LGAs/States that reported Cholera cases in week 1- 52, 2015 & 2016



5. CEREBROSPINAL MENINGITIS (CSM)

- 5.7. In the reporting week 34, eight suspected Cerebrospinal Meningitis (CSM) cases were reported from three LGAs (three States) compared with three suspected cases from two LGAs (two States) at the same period in 2016.
- 5.8. Between weeks 1 and 34 (2017), 9776 suspected CSM cases with 108 laboratory confirmed cases and 602 deaths (CFR, 6.16%) were recorded from 311 LGAs (33 States) compared with 600 suspected cases and 29 deaths (CFR, 4.86%) from 133 LGAs (27 States) during the same period in 2016 (Figure 9).
- 5.9. 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 10)

Figure 9: Map of Nigeria showing areas affected by CSM, Week 1 - 34, 2016 & 2017

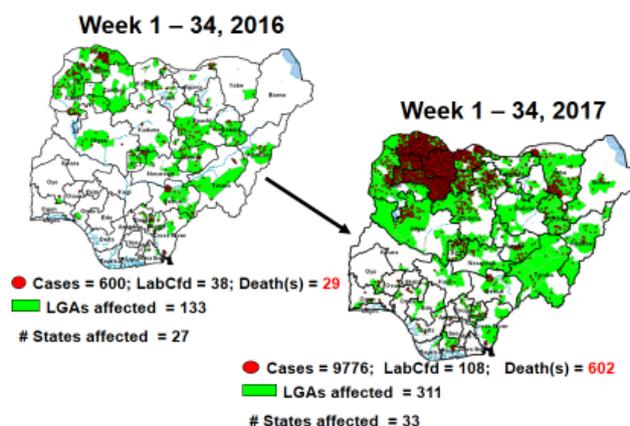
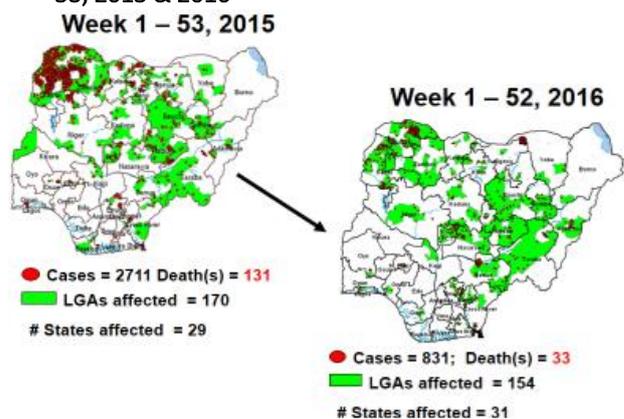


Figure 10: Nigeria: Dot maps of CSM cases, week 1 - 53, 2015 & 2016



- 5.10. Timeliness/completeness of CSM case-reporting from States to the National Level (2017 versus 2016): on average, 86.64% of the 26 endemic States sent CSM reports in a timely manner while 99.8% were complete in week 1 – 34, 2017 as against 85.0% timeliness and 99.0% completeness recorded within the same period in 2016

- 5.11. CSM preparedness checklist sent to 36 States and FCT ahead of 2017 meningitis season
- 5.12. Confirmed cases treated at identified treatment centres in affected States (Zamfara, Sokoto, Katsina, Kebbi, Niger, Kano, Yobe and Jigawa) and necessary supportive management also instituted
- 5.13. CSM National Emergency Operations Centre constituted at the Nigeria Centre for Disease Control
- 5.14. Onsite support provided to Zamfara, Sokoto, Katsina, Kebbi, Kano, Yobe and Niger States by NCDC and partners
- 5.15. Off-site support provided to other States
- 5.16. Intensive Surveillance in high risk States and NCDC in communication with States reporting suspected cases.
- 5.17. Reactive vaccination completed in Zamfara State for people aged one to 29 years using polysaccharide meningococcal A & C vaccine.
- 5.18. Reactive vaccination completed in two wards (Gada and Kaffe) in Gada LGA in Sokoto State using polysaccharide meningococcal A & C vaccine for people aged two to 29 years.
- 5.19. Reactive vaccination completed in nine LGAs in Sokoto State using monosaccharide meningococcal conjugate C vaccine for aged one to 20 years.
- 5.20. Reactive vaccination campaign completed in Yobe State for people aged two to 29 years using polyvalent ACW conjugate vaccine.
- 5.21. Medical teams were trained and deployed to support case management in Sokoto and Zamfara States completed (from Friday 5th - 26th May, 2017).
- 5.22. Deployed mobile testing laboratory to Zamfara State to aid diagnosis
- 5.23. A Team was deployed by NCDC/WHO to support surveillance activities, laboratory data harmonization and monitoring of the implementation plan in Yobe state
- 5.24. National CSM EOC has been stepped down
 - 5.25. Evaluation of the CSM outbreak response in Zamfara and Sokoto States is ongoing by NCDC and WHO
 - 5.26. National CSM After-Action Review meeting conducted in Sokoto State from the 24th – 25th of July 2017.

6. GUINEA WORM DISEASE

- 6.7. In the reporting week, no rumour report of Guinea Worm disease was received from any State.
- 6.8. Nigeria has celebrated eight 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 Nigeria Guinea Worm Eradication Program / Neglected Tropical Diseases Division, Public Health Department/Federal Ministry of Health)

FOR MORE INFORMATION CONTACT
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epidreport@ncdc.gov.ng
www.ncdc.gov.ng/reports
0800-970000-10

Table 3: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1 - 34, 2017, as at 1st September, 2017

Keys																																				<table border="1"> <tr> <td>Timely Reports</td> <td><50%</td> <td>Poor</td> <td>0 States</td> </tr> <tr> <td></td> <td>50-79%</td> <td>Good</td> <td>12 States</td> </tr> <tr> <td></td> <td>80-100%</td> <td>Excellent</td> <td>25 States</td> </tr> </table>				Timely Reports	<50%	Poor	0 States		50-79%	Good	12 States		80-100%	Excellent	25 States
Timely Reports	<50%	Poor	0 States																																																
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State	GenZones	W01	W02	W03	W04	W05	W06	W07	W08	W09	W10	W11	W12	W13	W14	W15	W16	W17	W18	W19	W20	W21	W22	W23	W24	W25	W26	W27	W28	W29	W30	W31	W32	W33	W34	Expected (Es)	Timely Rpts (Ts)	Late Rpts (Ls)	Rpts Not Recvd (Ns)	% Timely	% Complete										
1 Abia	SEZ	L	L	L	L	L	T	L	T	L	T	T	L	T	T	L	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	34	23	11	0	68%	100%									
2 Adamawa	NEZ	L	L	L	L	L	L	T	T	T	T	T	T	L	L	T	L	T	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	21	13	0	62%	100%									
3 Akwa Ibom	SSZ	T	L	T	T	T	T	L	T	T	T	L	L	T	T	T	T	T	T	T	T	L	T	T	L	L	L	L	L	T	T	T	T	T	T	N	34	23	10	1	68%	97%									
4 Anambra	SEZ	T	T	T	T	L	T	T	T	T	L	L	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	30	4	0	88%	100%									
5 Bauchi	NEZ	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	34	32	2	0	94%	100%									
6 Bayelsa	SSZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
7 Benue	NCZ	T	T	T	T	T	L	T	T	T	T	T	L	L	T	L	T	T	T	L	T	T	L	T	T	L	T	T	T	T	T	T	T	T	T	T	34	28	6	0	82%	100%									
8 Borno	NEZ	L	T	T	T	T	L	L	L	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	L	L	T	T	T	T	L	T	T	T	T	34	26	8	0	76%	100%									
9 Cross River	SSZ	L	L	L	L	L	L	L	L	L	T	T	T	T	T	L	L	T	T	L	T	T	L	T	T	L	T	T	L	T	T	T	T	T	T	T	34	20	14	0	59%	100%									
10 Delta	SSZ	L	L	L	L	L	L	L	L	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	25	9	0	74%	100%									
11 Ebonyi	SEZ	T	L	L	L	T	L	T	L	T	T	T	T	T	T	L	L	T	T	T	T	L	T	T	T	T	T	T	T	L	T	L	L	L	T	34	24	10	0	71%	100%										
12 Edo	SSZ	L	L	L	L	T	L	T	T	T	T	L	T	L	L	L	L	T	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	T	34	17	17	0	50%	100%									
13 Ekiti	SWZ	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	33	1	0	97%	100%									
14 Enugu	SEZ	L	L	L	L	T	L	T	L	T	T	T	L	T	T	T	T	T	T	T	T	T	L	L	T	T	L	T	T	T	T	T	T	T	T	T	34	24	10	0	71%	100%									
15 FCT	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
16 Gombe	NEZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	L	T	L	L	L	L	L	L	L	L	L	34	27	7	0	79%	100%										
17 Imo	SEZ	L	L	L	L	L	L	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	25	9	0	74%	100%									
18 Jigawa	NWZ	T	T	T	L	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	L	T	L	L	L	L	L	L	L	L	L	L	L	L	L	T	34	21	13	0	62%	100%									
19 Kaduna	NWZ	T	T	T	L	L	L	L	L	L	L	L	L	T	T	T	T	T	T	T	T	T	T	L	L	L	L	L	L	L	L	L	L	L	L	N	34	28	5	1	82%	97%									
20 Kano	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
21 Katsina	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	T	T	L	L	T	T	T	T	T	T	T	T	T	T	T	T	34	31	3	0	91%	100%									
22 Kebbi	NWZ	T	T	T	L	L	L	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	31	3	0	91%	100%									
23 Kogi	NCZ	T	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	T	34	32	2	0	94%	100%										
24 Kwara	NCZ	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	18	16	0	53%	100%									
25 Lagos	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	33	1	0	97%	100%									
26 Nasarawa	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	L	T	T	T	T	T	T	T	T	T	T	T	34	33	1	0	97%	100%									
27 Niger	NCZ	T	T	T	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	L	L	T	L	T	L	T	L	L	L	L	34	27	7	0	79%	100%										
28 Ogun	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
29 Ondo	SWZ	T	T	T	T	T	T	T	T	T	T	T	L	T	L	T	T	T	T	L	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	34	30	4	0	88%	100%									
30 Osun	SWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
31 Oyo	SWZ	T	T	L	T	T	T	T	L	T	T	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	28	6	0	82%	100%									
32 Plateau	NCZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	T	T	T	T	34	33	1	0	97%	100%										
33 Rivers	SSZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
34 Sokoto	NWZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	34	0	0	100%	100%									
35 Taraba	NEZ	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	L	L	L	L	L	L	L	L	L	L	L	T	34	29	5	0	85%	100%									
36 Yobe	NEZ	T	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	34	33	1	0	97%	100%									
37 Zamfara	NWZ	T	T	T	L	L	L	L	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	T	L	34	30	4	0	88%	100%										
Total number of reports expected (E)		37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	37	1258														
Total reports sent on time (T)		28	27	27	26	27	27	26	28	28	36	31	32	31	31	32	33	29	35	34	34	30	34	31	34	28	27	31	36	31	36	33	34	34	32		1053														
Total reports sent late (L)		9	10	10	11	10	10	11	9	9	1	6	5	6	6	5	4	8	2	3	3	7	3	6	3	9	10	6	1	6	1	4	3	3	3		203														
Total number of reports not received (N)		0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	2			2												
Timeliness of reports =100*(T)/E		75.7	73.0	73.0	70.3	73.0	73.0	70.3	75.7	75.7	97.3	83.8	86.5	83.8	83.8	86.5	80.2	78.4	94.6	91.9	91.9	81.1	91.9	83.8	91.9	75.7	73.0	83.8	97.3	83.8	97.3	89.2	91.9	91.9	86.5				84%												
Completeness of reporting =100*(E-N)/E		100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	100.0	94.6				100%												
Latest Week		34																																							Last updated 1 st September, 2017										

Table 4: Updates on Epidemics, Week 1- 34 (21th – 27th August 2017) as at 1st September, 2017)

SNO	State	Sero-Positive	APP		CSH		Cholera		Measles		Lassa Fever		Guinea Worm Disease		HPAI		Other Diseases/Events		Remarks
			New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	New	Combine Data Wk-34	
			Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	Cases	Lab/Cl/Deaths	
1	Abia	3,868,169	3	146															
2	Adamawa	4,216,935	18	323	25	5													
3	Abia State	5,476,844	100	1,000	100	1,000													
4	Abia State	5,521,115	3	69	8	8													
5	Abia State	6,631,577	14	415	13	4	0.17												
6	Abia State	7,271,043	1	126	1	1													
7	Abia State	5,570,011	8	253	38	20													
8	Abia State	5,739,337	9	278	23	2	8.70	84											
9	Abia State	3,844,929	6	202	39	3	7.76												
10	Abia State	5,657,724	1	108	12	1													
11	Abia State	2,865,775	2	93	10	2		444											
12	Abia State	4,200,032	9	304	2	1	0.00												
13	Abia State	3,226,505	7	292	4	1	11.1												
14	Abia State	4,977,935	10	226	9	1													
15	Abia State	3,492,923	12	271	5	2	0.20												
16	Abia State	3,225,382	6	285	50	2	4.00												
17	Abia State	5,297,780	5	319	1	1													
18	Abia State	5,707,728	12	745	49	2	2.29												
19	Abia State	8,502,624	4	381	81	2	4.94												
20	Abia State	6,280,943	19	659	293	24	7.76	22											
21	Abia State	7,767,470	12	499	600	61	9.17												
22	Abia State	4,394,897	1	719	112	19	10.89												
23	Abia State	4,480,072	11	190	6	6													
24	Abia State	3,965,645	3	61	1	1													
25	Abia State	6,297,714	3	247	15	2	0.29												
26	Abia State	2,510,096	8	220	22	1													
27	Abia State	5,598,912	2	68	114	38	8.26												
28	Abia State	5,920,192	4	299	15	2	0.29												
29	Abia State	4,624,449	3	272	19	1													
30	Abia State	4,691,063	2	244	8	1	0.29												
31	Abia State	7,918,171	8	279	5	1													
32	Abia State	4,981,915	15	357	52	2	5.77												
33	Abia State	7,244,154	5	317	29	1													
34	Abia State	4,984,663	14	267	297	194	4.72												
35	Abia State	3,065,153	4	247	25	1													
36	Abia State	3,274,833	9	353	294	11	11.14												
37	Abia State	4,963,715	4	570	388	19	29.2	5.67											
38	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
39	Abia State	4,981,915	15	357	52	2	5.77												
40	Abia State	7,244,154	5	317	29	1													
41	Abia State	4,984,663	14	267	297	194	4.72												
42	Abia State	3,065,153	4	247	25	1													
43	Abia State	3,274,833	9	353	294	11	11.14												
44	Abia State	4,963,715	4	570	388	19	29.2	5.67											
45	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
46	Abia State	4,981,915	15	357	52	2	5.77												
47	Abia State	7,244,154	5	317	29	1													
48	Abia State	4,984,663	14	267	297	194	4.72												
49	Abia State	3,065,153	4	247	25	1													
50	Abia State	3,274,833	9	353	294	11	11.14												
51	Abia State	4,963,715	4	570	388	19	29.2	5.67											
52	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
53	Abia State	4,981,915	15	357	52	2	5.77												
54	Abia State	7,244,154	5	317	29	1													
55	Abia State	4,984,663	14	267	297	194	4.72												
56	Abia State	3,065,153	4	247	25	1													
57	Abia State	3,274,833	9	353	294	11	11.14												
58	Abia State	4,963,715	4	570	388	19	29.2	5.67											
59	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
60	Abia State	4,981,915	15	357	52	2	5.77												
61	Abia State	7,244,154	5	317	29	1													
62	Abia State	4,984,663	14	267	297	194	4.72												
63	Abia State	3,065,153	4	247	25	1													
64	Abia State	3,274,833	9	353	294	11	11.14												
65	Abia State	4,963,715	4	570	388	19	29.2	5.67											
66	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
67	Abia State	4,981,915	15	357	52	2	5.77												
68	Abia State	7,244,154	5	317	29	1													
69	Abia State	4,984,663	14	267	297	194	4.72												
70	Abia State	3,065,153	4	247	25	1													
71	Abia State	3,274,833	9	353	294	11	11.14												
72	Abia State	4,963,715	4	570	388	19	29.2	5.67											
73	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
74	Abia State	4,981,915	15	357	52	2	5.77												
75	Abia State	7,244,154	5	317	29	1													
76	Abia State	4,984,663	14	267	297	194	4.72												
77	Abia State	3,065,153	4	247	25	1													
78	Abia State	3,274,833	9	353	294	11	11.14												
79	Abia State	4,963,715	4	570	388	19	29.2	5.67											
80	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
81	Abia State	4,981,915	15	357	52	2	5.77												
82	Abia State	7,244,154	5	317	29	1													
83	Abia State	4,984,663	14	267	297	194	4.72												
84	Abia State	3,065,153	4	247	25	1													
85	Abia State	3,274,833	9	353	294	11	11.14												
86	Abia State	4,963,715	4	570	388	19	29.2	5.67											
87	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
88	Abia State	4,981,915	15	357	52	2	5.77												
89	Abia State	7,244,154	5	317	29	1													
90	Abia State	4,984,663	14	267	297	194	4.72												
91	Abia State	3,065,153	4	247	25	1													
92	Abia State	3,274,833	9	353	294	11	11.14												
93	Abia State	4,963,715	4	570	388	19	29.2	5.67											
94	Abia State	9,194,144	25	1,096	878	108	20.1	6.59											
95	Abia State	4,981,915	15	357	52	2	5.77												
96	Abia State	7,244,154	5	317	29	1													
97	Abia State	4,984,663	14	267	297	194	4.72												
98	Abia State	3,065,153	4	247	25	1													
99	Abia State	3,274,833	9	353	294	11	11.14												