



# SITUATION REPORT

## Nigeria Centre For Disease Control (NCDC)

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|-----------------------|---|
| <b>TITLE:</b>         | <b>2018 LASSA FEVER OUTBREAK IN NIGERIA</b> |
| <b>SERIAL NUMBER:</b> | <b>06</b>                                   |
| <b>EPI-WEEK:</b>      | <b>06</b>                                   |
| <b>DATE:</b>          | <b>11 February, 2018</b>                    |

### HIGHLIGHTS

- **In the reporting Week 06 (February 05-11,2018) nineteen new confirmed<sup>ii</sup> cases** were recorded from Seven States Edo (3), Ondo (7), Bauchi (2), Nasarawa(1), Ebonyi(2) Kogi(2) and Taraba(2) with six new deaths in confirmed cases from four states Ondo (2), Edo(1), Bauchi (2), and Nasarawa (1)
- From 1<sup>st</sup> January to 11<sup>th</sup> February 2018, a total of 615 **suspected<sup>i</sup> cases**, and 57 deaths have been reported from 17 active<sup>iv</sup> States- (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT and Gombe). *Figure 1*
- Since the onset of the 2018 outbreak, 197 cases have been classified as: **193 confirmed** cases, 4 probable cases with 47 deaths (43 in Lab confirmed and 4 in probable)
- Case Fatality Rate in confirmed and probable cases is 23.9% and 9.3% for all cases (including probable, confirmed and suspected)
- **Fourteen Health Care workers have been affected in six states** –Ebonyi (7), Nasarawa (1), Kogi (1), Benue (1), Ondo (1) and Edo (3) with four deaths in Ebonyi (3) and Kogi (1)
- Predominant age group affected is age group 30-50 (Median Age = 32) *Figure 4*
- The male to female ratio for confirmed cases is 2:1
- 75% of all confirmed cases are from Edo (45%) and Ondo (30%) states
- NCDC staff and NFELTP residents (National RRT) deployed to Ebonyi, Ondo and Edo states to support the States
- Irrua Specialist Hospital has 28 cases on admission this weekend. FMC Owo has 19 isolation beds, all occupied. Colleagues in Irrua are also providing clinical management advice for other hospitals
- A total of 1641 contacts have been identified from 11 states and 1388 are currently under follow up
- NCDC is collaborating with ALIMA and MSF in Edo, Ondo and Anambra States to support case management
- NCDC deployed NFELTP Residents/Graduates in four Benin Republic border states (Kebbi, Kwara, Niger and Oyo) for enhanced surveillance activities
- National Lassa fever multi-partner multi-agency Emergency Operations Centre(EOC) continues to coordinate the response activities at all levels
- NCDC is now being supported and strengthened by WHO team from AFRO, Headquarters and Country office.



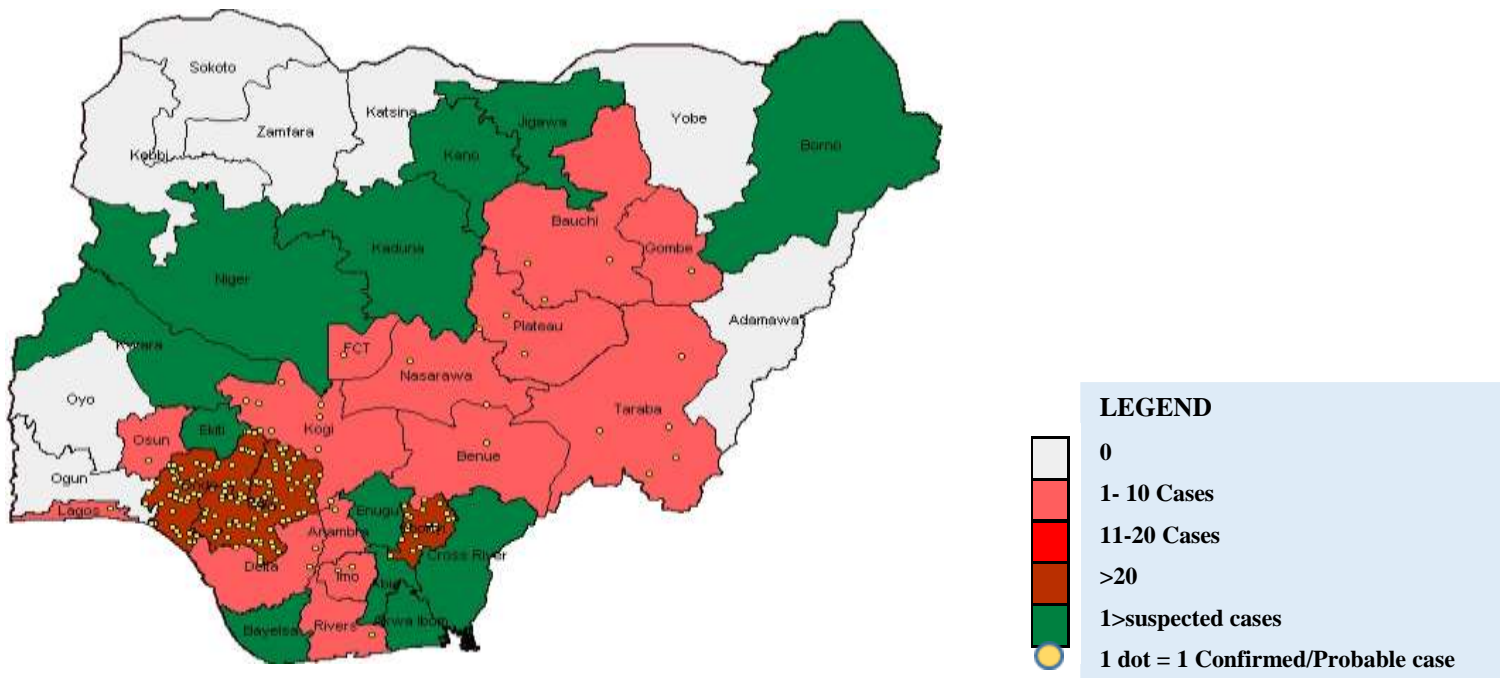


Figure 1. Distribution of Confirmed and Probable Lassa Fever cases in Nigeria as at 11<sup>th</sup> February, 2018

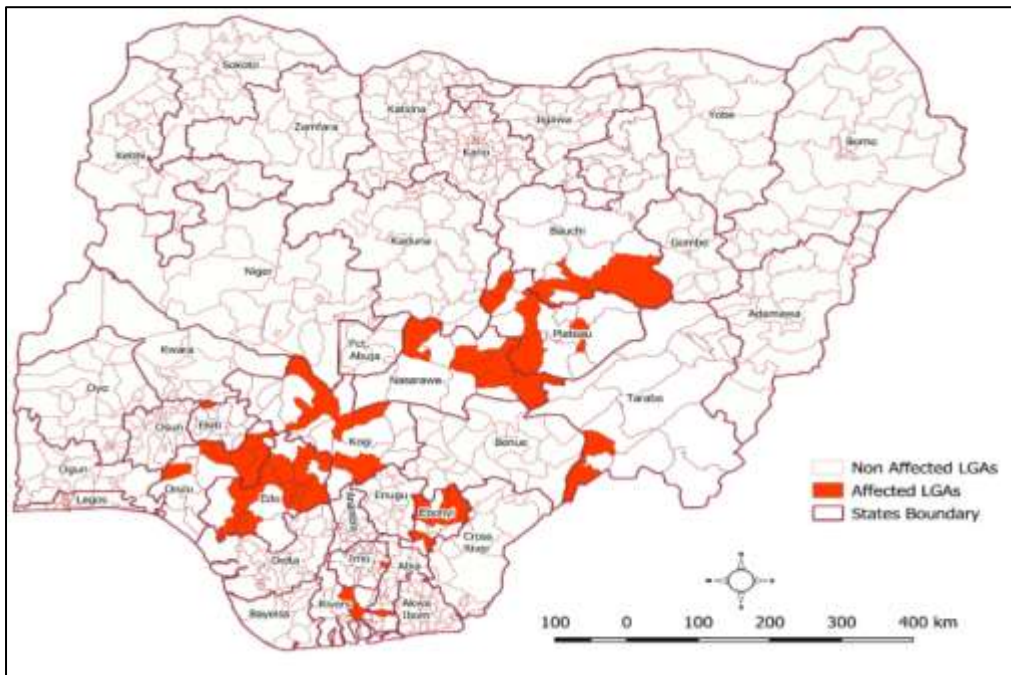


Figure 2. Distribution of Confirmed and Probable Lassa Fever cases in Nigeria by LGA as at 11<sup>th</sup> February, 2018

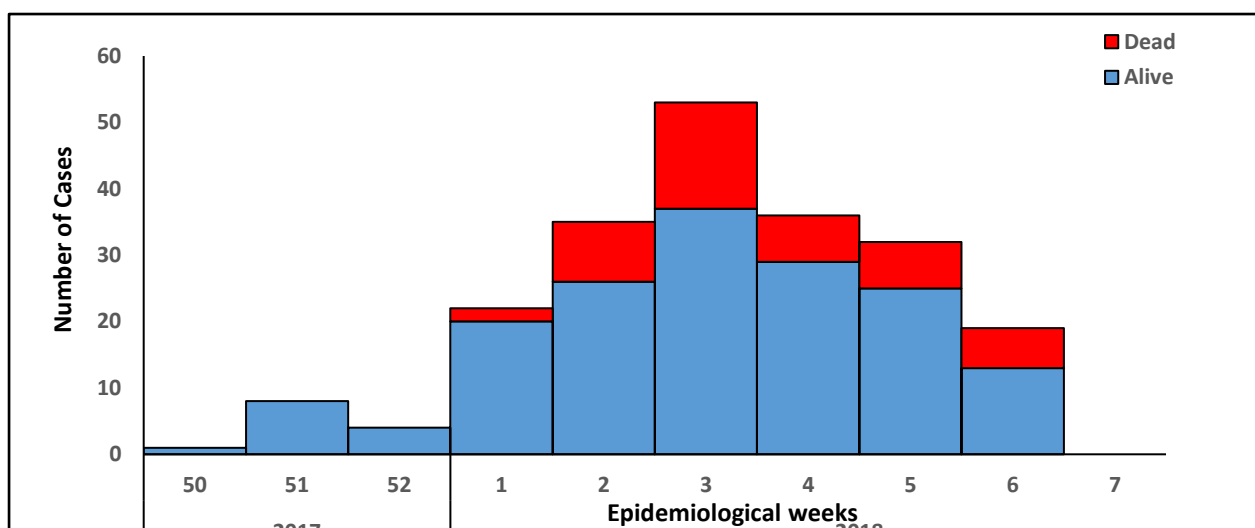


Figure 3. Confirmed and Probable Cases of Lassa fever by epidemiological week in Nigeria Dec 2017 week 50 – 11 Feb 2018 (N = 197)

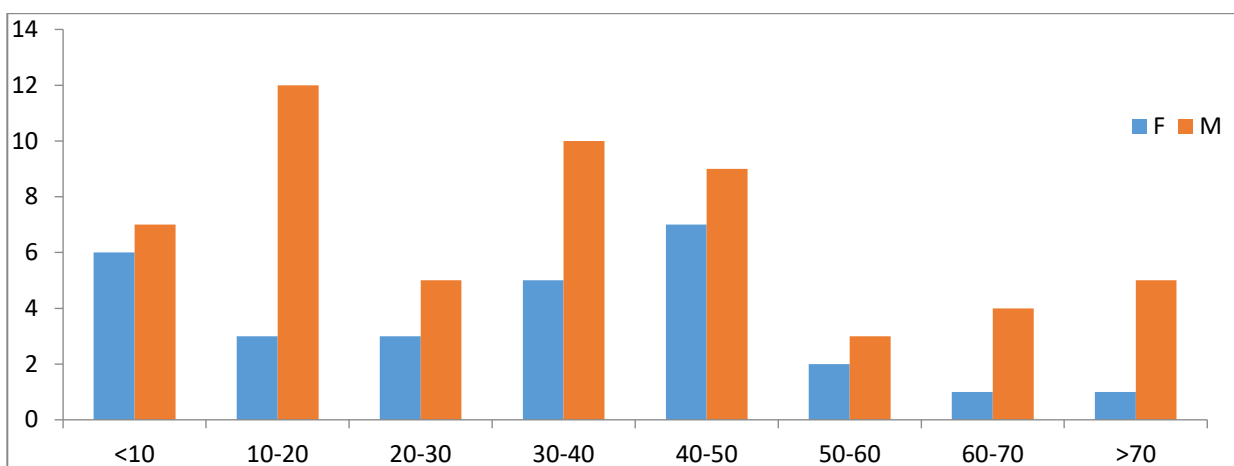


Figure 4. Age –Sex distribution of Confirmed Lassa fever cases in Nigeria as at 11<sup>th</sup> February 2018

<sup>i</sup>Suspected case describes any individual presenting with one or more of the following: malaise, fever, headache, sore throat, cough, nausea, vomiting, diarrhoea, myalgia, chest pain, hearing loss and either a. History of contact with excreta or urine of rodents b. History of contact with a probable or confirmed Lassa fever case within a period of 21 days of onset of symptoms OR Any person with inexplicable bleeding/hemorrhagia.

<sup>ii</sup>Any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)

<sup>iii</sup>Any suspected case (see definition above) who died without collection of specimen for laboratory testing

<sup>iv</sup>“Active” means where there has been at least one confirmed case, and contacts within 21 days post exposure