



Nigeria Centre for Disease Control

Protecting the health of Nigerians

Epi Week: 22, 2022

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Lassa fever Situation Report

Epi Week 22: 30 May - 5 June, 2022

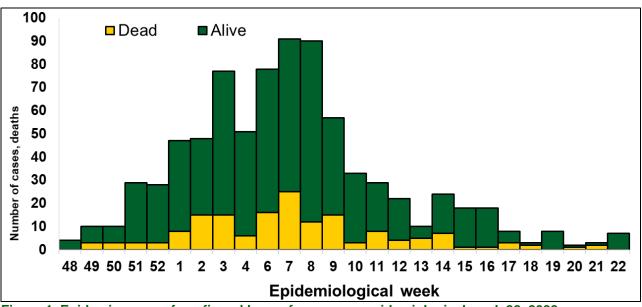
Key Points

Table 1: Summary of current week (22), cumulative from Epi week 1–22, 2022 and comparison with previous year (2021)

Reporting Period	Suspected cases	Confirmed cases	Probable cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases)	
Current week (week 22)	119	7	0	0	0.0%	State(s): 4 LGA(s): 6	
2022 Cumulative (week 22)	4939	782	37	155	19.8%	State(s): 24 LGA(s): 98	
2021 Cumulative (week 22)	2037	292	3	59	20.2%	State(s): 14 LGA(s): 57	

Highlights

- In week 22, the number of new confirmed cases increased from 3 in week 21, 2022 to 7 cases. These were reported from Edo, Ondo, Kogi and Gombe States (Table 3)
- Cumulatively from week 1 to week 22, 2022, 155 deaths have been reported with a case fatality rate (CFR) of 19.8% which is lower than the CFR for the same period in 2021 (20.2%)
- In total for 2022, 24 States have recorded at least one confirmed case across 98 Local Government Areas (Figure 2 and 3)
- Of all confirmed cases, 68% are from Ondo (28%), Edo (25%) and Bauchi (15%) States.
- The predominant age-group affected is 21-30 years (Range: 1 to 90 years, Median Age: 30 years). The male to female ratio for confirmed cases is 1:0.9 (Figure 4)
- The number of suspected cases has increased compared to that reported for the same period in 2021
- No new Healthcare worker affected in the reporting week 22
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues to coordinate the response activities at all levels



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Figure 1. Epidemic curve of confirmed Lassa fever cases epidemiological week 22, 2022

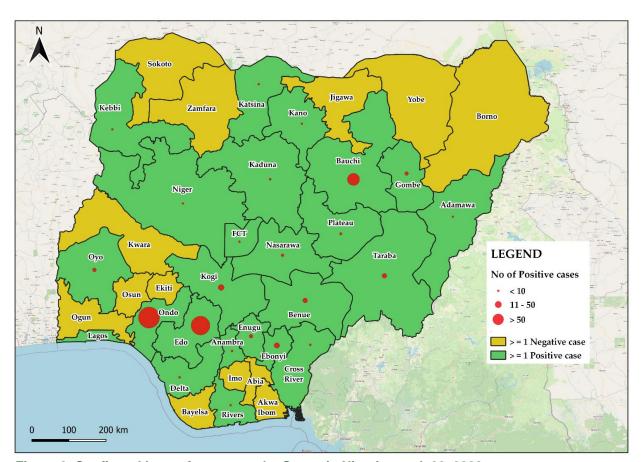
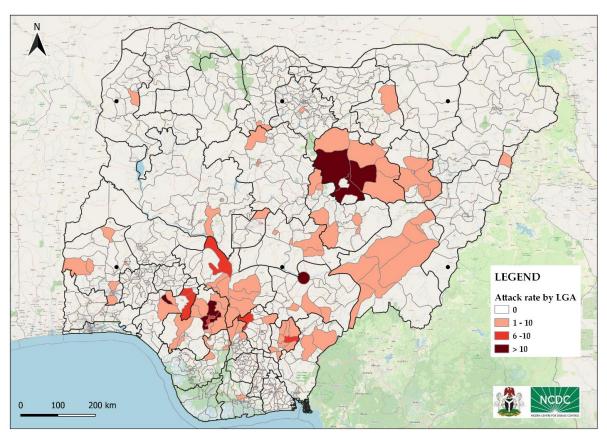


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 22, 2022



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Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 22, 2022

Table 2: Key indicators for current week 2022 and trend compared to previous week, Nigeria

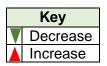
Indicator	Number for current week	Trend from previous week	Cumulative number for 2022	
Probable cases	0	←→	37	
Health Care Worker affected	0	←→	52	
Cases managed at the treatment centres	7	↑	742	
Contact tracing				
Cumulative contact listed	0	←→	3323	
Contacts under follow up	50	→	50	
Contacts completed follow up	37	↓	3213	
Symptomatic contacts	0	←→	101	
Positive contacts	0	←→	49	
Contacts lost to follow up	0	←→	11	

Increase
Decrease
No difference

Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2022

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			Cur	rent we	ek: (Week 22)		Cumulative (Week 1 - 22)				2)
		Cases				Deaths		Cases			Deaths
	States	Suspected	Confirmed	Trend	Probable HCW*	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW*	(Confirmed Cases)
1	Ondo	35	2	A			872	221		9	40
2	Edo	52	3	_			1674	196		3	27
3	Bauchi	7					747	115		26	12
4	Kogi	2	1	_			123	45			7
5	Ebonyi	2					223	39	1	3	19
6	Benue						221	32	2	3	8
7	Taraba						92	32	3	1	
8	Oyo						99	21	14	4	4
9	Gombe	2	1	A			198	21	8	2	
10	Enugu						91	20			2
11	Nasarawa	4					85	11	5		E
12	Plateau						46	8			
13	Kaduna						85	4	3	1	3
14	Anambra						23	3			1
15	Delta	2					61	3			
16	FCT						47	2			
17	Cross River						11	2			1
18	Adamawa						12				
19	Niger						10	1			
	Kebbi						5	1			
21	Lagos	8		_			26	1			1
	Kano	1					35				1
23	Katsina						17	1			1
24	Rivers						5	1			
25	Zamfara						5				
	Sokoto						2				
27	Akwa Ibom	1					4				
	Osun						6		1		
29	Yobe						26				
	Imo						15				
	Ekiti						2				
	Abia						18				
	Borno	1					11				
	Bayelsa	_					5				
	Jigawa						9				
	Ogun	1					13				
	Kwara	1					12				
		_									
	Total	119	7	A	0 0	0	4936	782	37	52	155



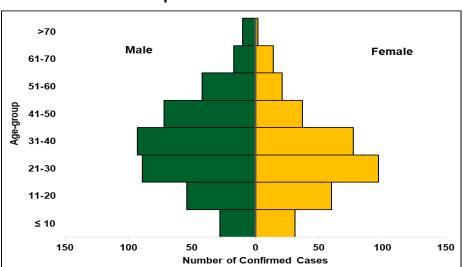


Figure 4. Age and sex pyramid showing number of confirmed Lassa fever cases for 2022

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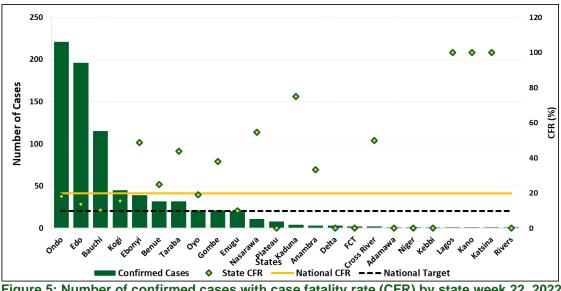


Figure 5: Number of confirmed cases with case fatality rate (CFR) by state week 22, 2022

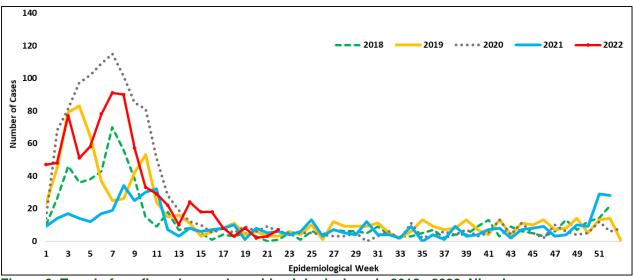


Figure 6: Trend of confirmed cases by epidemiological week, 2018–2022, Nigeria

Lassa Fever Situation Report Response activities

- Lassa fever alert letters sent to States
- The National Emergency Operations Centre response mode Level 2 activated for effective multi-sectoral, multi-disciplinary coordination of 2022 Lassa fever outbreak response

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- Lassa fever preparedness assessment carried out for 36 States and FCT
- · State Public Health Emergency Operations Centre activated in affected States
- The Eight Lassa fever molecular laboratories in the NCDC network are working full capacity to ensure that all samples are tested, and results provided within the shortest turnaround time
- Confirmed cases are treated at identified treatment centres across the states
- Dissemination of reviewed case management and safe burial practices guidelines
- Dissemination of reviewed IPC guideline and health facility IPC advisory
- Risk communications and community engagement activities have been scaled up across states using television, radio, print, social media and other strategies
- Implementation of Lassa fever Environmental response campaign in high burden states by Federal Ministry of Environment
- Distribution of medical response commodities to states and treatment centre
- Engagement of adhoc data clerks to upload case management data on SORMAS
- Deployment of National Rapid Respond Teams (NRRT) deployment to Nasarawa, FCT, Edo, Ondo, Bauchi, Ebonyi, Oyo, Taraba, and Benue
- Coordinated sub-national Lassa fever surveillance and response intensive workshop

Notes on this report

Data Source

Information for this disease was case based data retrieved from the National Lassa fever Emergency Operations Centre.

Case definitions

- Suspected case: 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.
- **Confirmed case**: any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)
- Probable case: any suspected case (see definition above) who died or absconded without collection of specimen for laboratory testing
- Contact: Anyone who has been exposed to an infected person, or to an infected person's secretions, excretions, or tissues within three weeks of last contact with a confirmed or probable case of Lassa fever

Calculations

• Case Fatality Rate (CFR) for this disease is reported for confirmed cases only

VIRAL HAEMORRAGHIC FEVER QUICK REFERENCE GUIDE

For social mobilization https://ncdc.gov.ng/themes/common/docs/vhfs/83_1517222929.pdf
For LGA Rapid Response Team https://ncdc.gov.ng/themes/common/docs/vhfs/82_1517222811.pdf
Healthcare worker laboratory https://ncdc.gov.ng/themes/common/docs/vhfs/81_1517222763.pdf
For community informant https://ncdc.gov.ng/themes/common/docs/vhfs/80_1517222586.pdf
For community informant https://ncdc.gov.ng/themes/common/docs/vhfs/80_1517222586.pdf

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NATIONAL GUIDELINES FOR LASSA FEVER CASE MANAGEMENT

https://ncdc.gov.ng/themes/common/docs/protocols/92_1547068532.pdf

VIRAL HAEMORRHAGIC FEVER AND RESPONSE PLAN

https://ncdc.gov.ng/themes/common/docs/protocols/24_1502192155.pdf

NATIONAL GUIDELINE FOR INFECTION, PREVENTION AND CONTROL FOR VIRAL HAEMORRAGHIC FEVER

https://ncdc.gov.ng/themes/common/docs/protocols/24 1502192155.pdf

INFROMATION RESOURCE

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