Epi Week: 49 2023



Nigeria Centre for Disease Control and Prevention

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Lassa Fever Situation Report

Epi Week 49: 4th – 10th December 2023

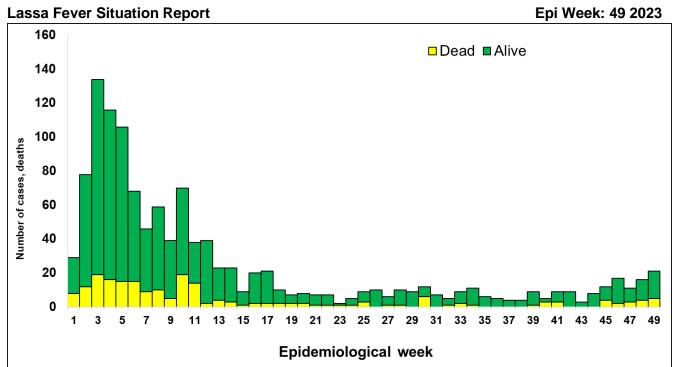
Key Points

Table 1: Summary of the current week (49), cumulative Epi week 1- 49, 2023 and comparison with the previous year (2022)

Reporting Period	Suspected cases	Confirmed cases	Probable cases	Deaths (Confirmed cases)	Case Fatality Ratio (CFR)	States and LGAs affected (Confirmed cases)
Current week (week 49)	165	21	0	5	23.8%	State(s):4 LGA(s): 12
2023 Cumulative (week 1-49)	8707	1191	9	206	17.3%	State(s): 28 LGA(s): 116
2022 Cumulative (week 49)	7909	1028	37	188	18.3%	State(s):26 LGA(s):108

Highlights

- In week 49, the number of new confirmed cases increased from 16 in epi week 48, 2023 to 21 cases. These were reported in Bauchi, Ondo, Edo, and Ebonyi States (Table 3)
- Cumulatively from week 1 to week 49, 2023, 206 deaths have been reported with a case fatality rate (CFR) of 17.3% which is lower than the CFR for the same period in 2022 (18.3%)
- In total for 2023, 28 States have recorded at least one confirmed case across 116 Local Government Areas (Figures 2 and 3)
- Seventy-six (76%) of all confirmed Lassa fever cases were reported from these three states (Ondo, Edo, and Bauchi) while 23% were reported from 25 states with confirmed Lassa fever cases. Of the 76% confirmed cases, Ondo reported 35%, Edo 28%, and Bauchi 13%
- The predominant age group affected is 21-30 years (Range: 1 to 93 years, Median Age: 32 years). The male-to-female ratio for confirmed cases is 1:0.9 (Figure 4)
- The number of suspected cases increased compared to that reported for the same period in 2022.
- No new Healthcare worker was affected in the reporting week 49.
- National Lassa fever multi-partner, multi-sectoral Technical Working Group (TWG) continues coordinating the response activities at all levels.





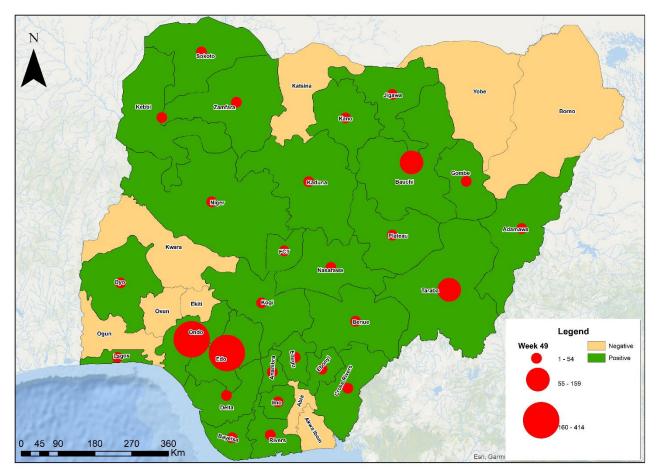


Figure 2. Confirmed Lassa fever cases by States in Nigeria, week 49, 2023

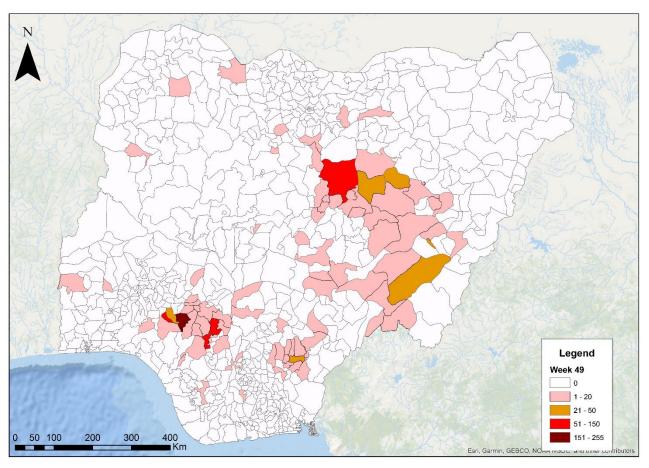


Figure 3. Confirmed Lassa fever rate per 100,000 population for LGAs in Nigeria, week 49, 2023

Symptomatic contacts	Number for current week	Trend from previous week	Cumulative number for 2023	
Probable cases	0	$\leftarrow \rightarrow$	9	
Health Care Worker affected	0	Ļ	52	
Cases managed at the treatment centres	16	↑	985	
Contact tracing				
Cumulative contact listed	24	Ļ	4749	
Contacts under follow up	210	Ļ	210	
Contacts completed follow up	0	←→	4536	
Symptomatic contacts	0	$\leftrightarrow \rightarrow$	109	
Positive contacts	0	$\leftrightarrow \rightarrow$	43	
Contacts lost to follow up	0	<i>←→</i> 0		

Table 2: Key indicate	are for ourrept wool	2022 and trand com	anarod to the proviou	a wook Nigoria
Table Z. Rey multar	ors for current weer	2025 and trend com	ipared to the previou	5 week, Nigeria

Key

Increase Decrease No difference

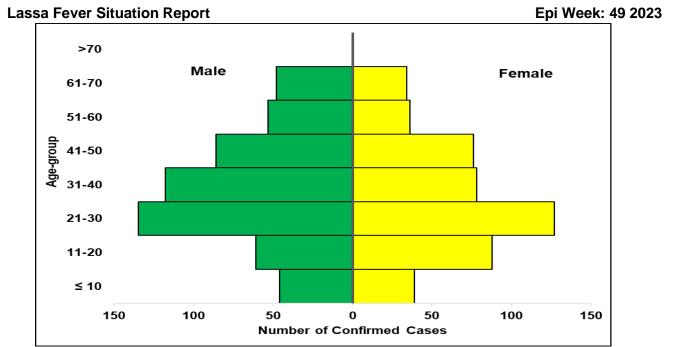
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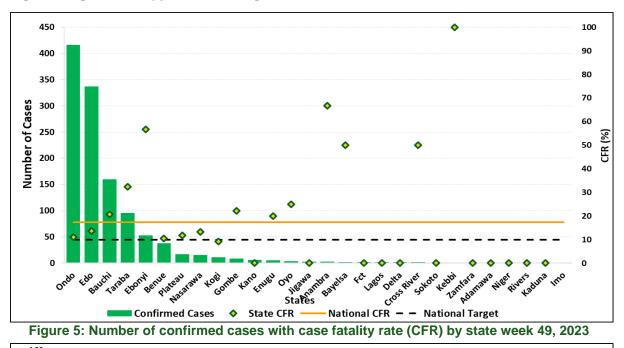
Table 3. Weekly and Cumulative number of suspected and confirmed cases for 2023

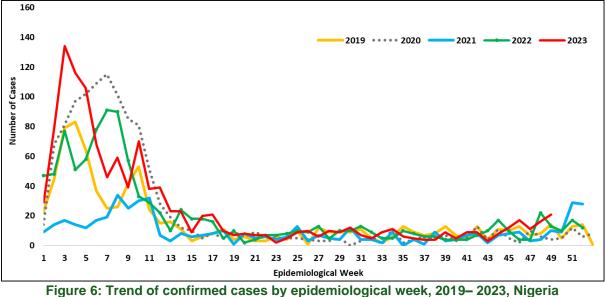
		Current week: (Week 49)					Cumulative (Week 1 - 49)				
	.	Cases				Deaths		Cases			Deaths
	States	Suspected	Confirmed	Trend	Probable HCW*	(Confirmed Cases)	Suspected	Confirmed	Probable	HCW*	(Confirmed Cases
1	Ondo	53	8			1	2558	416	1	19	46
2	Edo	40	3			1	3329	337	2	5	46
3	Bauchi	39	9	▼		3	945	160	1	9	33
4	Taraba	4					302	96		6	31
5	Ebonyi	3		▼			328	53	1	3	30
6	Benue						189	38	2	1	4
7	Plateau	3	1	A			105	17		1	2
8	Nasarawa	1					159	15		5	2
9	Kogi	1					48	11		1	1
10	Gombe	5					80	9			2
11	Kano						63	6			
12	Enugu	1					42	5			1
13	Оуо	3					59	4			1
14	Jigawa						24	3			
15	Anambra						41	3		1	2
16	Bayelsa						40	2			1
17	Fct	1					64	2			
18	Lagos						27	2			
19	Delta	6					56	2		1	
20	Cross River	1					28	2			1
21	Sokoto						7	1			
22	Kebbi	1					5	1			1
23	Zamfara						6	1			
24	Adamawa						17	1			
25	Niger						5	1			
26	Rivers						15	1			
27	Kaduna						41	1			
28	Imo						18	1			2
29	Borno						6				
30	Katsina						б				
31	Abia	1					16				
	Akwa Ibom						4				
	Yobe						8				
	Ekiti						16				
	Ogun						26		2		
	Kwara	2					16				
37	Osun						8				
		4.07				_					
	Total	165	21		0 0	5	8707	1191	9	52	206

	Key
	Decrease
ſ	Increase









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Lassa Fever Situation Report

Response activities

- Conducted the 2023/2024 Lassa fever surge preparedness workshop, with support from ${\sf BA}_N$
- Commenced the Lassa fever webinar series
- Participated in National Enhanced Situational Awareness (ESA) Project Implementation Workshop
- Serve as secretariat for continuous support to the Emergency Task Force inaugurated for Lassa fever vaccine
- Concluded the pilot of LF Clinical Management Fellowship with support from GU and CDC
- Conducted 2023 After Action Review with support from CDC, IHVN and WHO; with report shared with stakeholders
- Conducted one-day Accelerating Lassa fever Vaccine workshop with CEPI and key stakeholders, experts and policy makers
- De-escalation of the IMS/EOC
- Finalized plans structure and modules to pilot case management fellowship with support from GU and CDC
- Conducted risk assessment in preparation for de-escalation of the response and/or deactivation of the IMS/EOC.
- Conducted a three-day LF Human-Centred Design synthesis workshop with support from BA-N.
- Off-site coordination support to states
- Engagement with CEPI on proposed visit to Nigeria towards LF vaccine development/clinical trials
- Coordinated LF Colloquium & workshop with support from UCL and Jhpiego to develop a 5-year LF research agenda
- Updating IPC focal persons database
- Engagement of surge staff at treatment centres
- Identification and Assessment of treatment centres
- Intensive response activities through a one-health approach in affected LGAs
- Designed a tool to collect geo-points for all Lassa fever confirmed cases in the States
- Update of VHF Case Investigation Form (CIF) database
- Enhanced surveillance (contact tracing and active case finding) in affected states.
- Monitoring of outbreak emergency composite indicators to guide action
- Implementation of targeted risk communication activities in most affected States
- Diagnosis of all samples in the Eight Lassa fever testing laboratories across the country
- External Quality Assurance (EQA) panel preparation for all testing laboratories ongoing
- Dissemination of reviewed IPC guideline, health facility IPC advisory and healthcare worker advisories
- Deployed NRRT to 6 states Bauchi, Benue, Ebonyi, Edo, Ondo & Taraba
- Periodic implementation of vector control measures in Edo and Ondo States
- Sent Lassa fever alert letters to Governors' forum, State Ministries of Health, professional bodies (NMA, MDCAN, NARD, NDA, MWAN, AGPMPN, AMLSN, NANNM) etc.
- Conducted Lassa fever risk assessment
- Confirmed cases are treated at identified treatment centres across the states.
- Dissemination of reviewed case management and safe burial practices guidelines
- 1st Draft of protocol for identification and management of LF in pregnant women completed
- Mortality review of Lassa fever deaths
- In-depth investigation of healthcare worker infections
- External Quality Assurance (EQA) panel preparation for all testing laboratories ongoing
- Distribution of response commodities -PPEs, Ribavirin (injection and tablets) body-bags, thermometers, hypochlorite hand sanitizers, IEC materials distributed to states and treatment centres.
- Implementation of Nigeria Lassa fever epidemiological Study supported by CEPI

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Multi-sectoral Public Health Emergency Operation Centres (PHEOC) activated at the National and affected States

Challenges

- Late presentation of cases leading to an increase in CFR
- Poor health-seeking behaviour due to the high cost of treatment and clinical management of Lassa fever
- Poor environmental sanitation conditions observed in high-burden communities
- Poor awareness observed in high-burden communities

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 HAEMORRHAGIC FEVER QUICK REFERENCE GUIDE

For social mobilisation 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 healthcare workers https://ncdc.gov.ng/themes/common/docs/vhfs/80_1517222586.pdf For community informants https://ncdc.gov.ng/themes/common/docs/vhfs/79 1517222512.pdf

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 HAEMORRHAGIC FEVER

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RESOLVE

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

INFORMATION RESOURCE

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