In the reporting Week 09 (25th February - 3rd March, 2019) thirty nine new confirmed cases were reported from six states - Edo(20), Ondo(12), Ebonyi (2), Bauchi(2), Taraba(2) and Kogi (1) with eight new deaths in Edo (5), Ondo(2) and Kogi(1)

From 1st January to 3rd March, 2019, a total of 1374 suspected cases have been reported from states that have recorded at least one confirmed case (21 States including FCT). Of these, 420 were confirmed positive, 15 probable and 939 negative (not a case)- Table 1. Overall, 33 States including FCT have reported a total 1447 suspected cases - Figure 1

Since the onset of the 2019 outbreak, there have been 93* deaths in confirmed cases. Case fatality ratio in confirmed cases is 22.1%

Twenty-one States (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Plateau, Taraba, FCT, Adamawa, Gombe, Kaduna, Kwara, Benue, Rivers, Kogi, Enugu, Imo, Delta, Oyo, Kebbi and Cross River) have recorded at least one confirmed case across 66 Local Government Areas- Figure 1

In the reporting week 09, no new health care worker was affected. A total of fifteen health care workers have been infected since the onset of the outbreak in seven states – Edo (7), Ondo (3), Ebonyi (1), Enugu (1), Rivers (1), Bauchi (1) and Benue (1) with one death in Enugu

Sixty-nine patients are currently being managed at various treatment centres across the country: Irrua Specialist Teaching Hospital (ISTH) treatment Centre (34), Federal Medical Centre Owo (16), Federal Teaching Hospital Abakiliki (2), Bauchi (2), Plateau (5) and Taraba (7), Gombe (1), Kaduna (1) and Kebbi (1)

A total of 4902 contacts have been identified from 19 States. Of these 1926 (39.3%) are currently being followed up, 2923 (58.6%) have completed 21 days follow up, while 4(0.1%) were lost to follow up. 80(1.6%) symptomatic contacts have been identified, of which 49 (1.0%) have tested positive

Multi sectoral one health national rapid response teams (NCDC, NFELTP, Federal Ministry of Agricultural and Federal Ministry of Environment) deployed to Ondo, Edo, Ebonyi and Taraba

National Lassa fever multi-partner, multi-sectoral Emergency Operations Centre (EOC) continues to coordinate the response activities at all levels
Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 3rd March, 2019

Figure 2. Epicurve of Lassa fever Confirmed (420) Cases in Nigeria - week 01-09, 2019
Figure 3. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016/week 01-2019/week 09

Figure 4. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 3rd March, 2019
Figure 5. State attack rate of confirmed Lassa fever cases in Nigeria as at 3rd March, 2019

Figure 6. LGA attack rate of confirmed Lassa fever cases in Nigeria as at 3rd March, 2019

* Additional deaths identified during epidemiological data harmonisation

1 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.

2 Any suspected case with laboratory confirmation (positive IgM antibody, PCR or virus isolation)

3 Any suspected case (see definition above) who died without collection of specimen for laboratory testing

4 “Active” means where there has been at least one confirmed case, and contacts within 21 days post exposure

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