In the reporting Week 52 (December 24 - 31, 2018) twenty-two new confirmed cases were reported from Edo(9), Ondo (6), Bauchi (5), and Taraba(2) States with five new deaths in Ondo(2), Bauchi(2) and Taraba (1) State and one probable case from Ondo State.

From 1st January to 31st December 2018, a total of 3498 suspected cases have been reported. Of these, 633 were confirmed positive, 20 probable, 2853 negative (not a case).

Since the onset of the 2018 outbreak, there have been 171 deaths in confirmed cases and 20 in probable cases. Case Fatality Rate in confirmed cases is 27.0%.

23 states have recorded at least one confirmed case across 93 Local Government Areas (Edo, Ondo, Bauchi, Nasarawa, Ebonyi, Anambra, Benue, Kogi, Imo, Plateau, Lagos, Taraba, Delta, Osun, Rivers, FCT, Gombe, Ekiti, Kaduna, Abia, Adamawa, Enugu and Kano). Nine States - Edo, Ondo, Plateau, Bauchi, Nasarawa, Adamawa, FCT, Taraba and Delta are in active phase of the outbreak - Figure 1.

In the reporting week 52, no new healthcare worker was affected. Forty-five health care workers have been affected since the onset of the outbreak in seven states – Ebonyi (16), Edo (15), Ondo (8), Kogi (2), Nasarawa (1), Taraba (1) and Abia (1) with ten deaths in Ebonyi (5), Kogi (1), Abia (1), Ondo (2) and Edo (1).

80% of all confirmed cases are from Edo (44%), Ondo (25%) and Ebonyi (11%) states.

Twenty patients are currently being managed at Irrua Specialist Teaching Hospital (ISTH) treatment Centre (9), Federal Medical Centre Owo (6), Bauchi (3), FCT(1) and Plateau (1) States - Table 1.

A total of 9643 contacts have been identified from 23 states. Of these 421 (4.4%) are currently being followed up, 9089 (94.3%) have completed 21 days follow up while 15 (0.2%) were lost to follow up. 118 (1.2%) symptomatic contacts have been identified, of which 38 (0.4%) have tested positive from five states (Edo -21, Ondo-8, Ebonyi-3, Kogi -3, Bauchi-1 and Adamawa-1) - Table 1.

Lassa fever international conference scheduled for 16th to 17th of January 2019, visit www.lic.ncdc.gov.ng

Lassa fever national multi-partner, multi-agency Technical Working Group (TWG) continues to coordinate response activities at all levels.
Figure 1. Distribution of Confirmed Lassa Fever cases in Nigeria as at 31st December, 2018

Figure 2. Distribution of Confirmed Lassa Fever cases in Nigeria by LGA as at 31st December 2018
Figure 3. Epicurve of Lassa fever Confirmed 633 Cases in Nigeria week 1-52, 2018

Figure 4. Weekly trends of Lassa fever Confirmed Cases in Nigeria, 2016-2018/Week 52
Figure 5. Confirmed Lassa fever cases in Nigeria with state specific Case Fatality Rates (CFR) as at 31st December, 2018

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.

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

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

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

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