



Issue: Volume 8 No. 14

20th April, 2018

NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight of the week

STRENGTHENING OF STATE EMERGENCY PREPAREDENSS AND RESPONSE CAPACITY



In the reporting week that ended on the 15^{th} of April 2018, Nigeria recorded the lowest number of new Lassa fever cases since the onset of the outbreak in January 1^{st} 2018. Five new cases were reported across four states.

The outbreak has taught us a lot of lessons including the need to strengthen surveillance and response architecture at state level.

This week, the Nigeria Centre Disease Control (NCDC) supported the Zamfara State Government in setting up a State Public Health Emergency Operations Centre (PHEOC) to promote effective coordination of outbreaks and events of public health

importance. The choice of Zamfara is also based on the large Meningitis outbreak of 2016/2017 where the State was the epicentre.

Following the commissioning of the PHEOC on the 18th of April 2018, a 12-day training for the Zamfara State team and partners commenced, led by a Team from NCDC. The training focused on the overview of the Incident Management System (IMS) structure, highlighting the principles of operations and management of evolving public health events that may require activation of the PHEOC.

The Nigeria Centre for Disease Control through its National Incident Coordination Centre (ICC) will continue to provide support to States in responding to outbreaks through supporting the establishment of State PHEOCs. More information on ongoing outbreaks and activation of PHEOC can be accessed on: www.ncdc.gov.ng

SUMMARY OF REPORTS

In the reporting week ending on April 8, 2018:

- o There were 209 new cases of Acute Flaccid Paralysis (AFP) reported. None was confirmed as Polio. The last reported case of Polio in Nigeria was in August 2016. Active case search for AFP is being intensified as Nigeria has reinvigorated its efforts at eradicating Polio.
- o 602 suspected cases of Cholera were reported from 11 LGAs in nine States (Abia 8, Anambra 20, Bauchi 420, Borno 2, FCT 1, Kaduna 1, Nasarawa 8, Yobe 136 & Zamfara 6). Of these, 13 were laboratory confirmed and nine deaths were recorded.
- 0 19 suspected cases of Lassa fever were reported from ten LGAs in eight States (Ebonyi 1, Edo 3, FCT 2, Gombe 1, Nasarawa 1, Ondo 9, Oyo 1 & Plateau 1). Two were laboratory confirmed and no death was recorded.
- o There were 256 suspected cases of Cerebrospinal Meningitis (CSM) reported from 66 LGAs in 15 States (Bauchi 1, Borno 1, Cross River 1, Ebonyi 1, FCT 1, Jigawa 7, Kaduna 4, Kano 13, Katsina 116, Kebbi 5, Plateau 1, Sokoto 39, Taraba 1, Yobe 2 & Zamfara 63). Of these, one was laboratory confirmed and 13 deaths were recorded. Ongoing surveillance for CSM has been intensified in all the 26 States in the Nigeria meningitis belt and case-based surveillance commenced from 4th December, 2017
- o There were 730 suspected cases of Measles reported from 35 States. No were laboratory confirmed and 12 deaths were recorded.

In the reporting week, all States sent in their report except Benue State. Timeliness of reporting remains 88% in previous & current weeks (week 13 & 14, 2018) while completeness remains from 100% at same period. It is very important for all States to ensure timely and complete reporting at all times, especially during an outbreak.

REPORT ANALYSIS AND INTERPRETATION

1. AFP

- 1.1. As at April 8th 2018, no new case of WPV was recorded
- 1.2. In the reporting week, 209 cases of AFP were reported from 162 LGAs in 31 States & FCT
- 1.2.1. AFP Surveillance has been enhanced and outbreak response is on-going in Borno and other high risk States
- 1.2.2. The 1^{st} round of SIPDs in 2018 conducted from $20^{th} 23^{th}$ January 2018 in the 14 high risk States using bOPV. The schedule for other SIAs is as described in Table 2
- 1.2.3 The 2nd round of SIPDs conducted from 3rd to 6th of March, 2018 in Borno, Yobe, Adamawa and Zamfara (moved from January round) States using bOPV
- 1.3. The first round of NIPDs completed in 36 States & FCT from the $7^{th}-10^{th}$ April, 2018 using bOPV
- 1.4. The SIAs were strengthened with the following events:
- 1.4.1. Immunisation for all vaccine-preventable diseases in some selected wards/LGAs.
- 1.4.2. Use of health camp facilities.
- 1.4.3. Field supportive supervision and monitoring.
- **1.4.4.** Improved Enhanced Independent Monitoring (EIM) and Lots Quality Assessments (LQAs) in all Polio high risk States.
- 1.4.5. High level of accountability framework

Table 2: 2018 SIAs

S/No	Month	Dates	Scope	% of the Total Target Population	Antigen	Remark		
1	January	16th - 20th	Zamfara			CSM		
2	January	20 th = 23 rd	5IPDs (13 HR States) (Excluding Zamfara)	22,958,038	46%	ьору		
a	Jan-Feb	25th Jan- ard Feb	Zamfara			YF		
4	February	141-13th	Measles SIA (NCZ)			Measles		
5	March	8th-20th	Measles 5IA (South 17 States)			Measles	Done	
6	February & March	1st Feburary - 21st March	HH based Micro plan with Enumeration of <1yr, <5yrs &≈15yrs	Kebbi, Gambe, Bauchi & Taraba				
7	March	3rd-6th	5IPDs (Borno,Yobe, Adamawa) & Zamfara (Moved Jan round)	5,277,401	10.60%			
а	March	24th-27th	35th ERC					
9	April	7th-10th	NIPDs (36+1)	49,882,036	100%	ьору		
10	April - June	April 23rd - June 23rd	HH based Micro plan with Enumeration of <1yr, <5yrs &=15yrs	Yobe & Adamawa				
11	May	Sth-Ath	sNIPDs (33+1) Excluding Borno,Yobe & Adamawa	46,140,332	92.40%	ьору		
12	July-August	1st July - 30th Aug	HH based Micro plan with Enumeration of <1yr, <5yrs &<15yrs	Zamfara, Katsina & Jigawa			Pending	
13	October	13th-16th	5IPDs (18 HR States)	31,715,796	63.50%	ьору	Pel	
14	October	23rd-24th	36th ERC					

CEREBROSPINAL MENINGITIS (CSM)

8th-11th

December

2.1 In the reporting week, 256 suspected Cerebrospinal Meningitis (CSM) cases with one Lab. Confirmed and 13 deaths (CFR, 5.08%) were reported from 66 LGAs (15 States; Bauchi – 1, Borno – 1, Cross River – 1, Ebonyi – 1, FCT – 1, Jigawa – 7, Kaduna – 4, Kano – 13, Katsina - 116, Kebbi – 5, Plateau – 1, Sokoto – 39, Taraba – 1, Yobe - 2 & Zamfara - 63) compared with 1517 suspected cases with 16 Lab. Confirmed cases and 114 deaths (CFR, 7.52%) from 113 LGAs (23 States) at the same period in 2017 (Figure 2)

7,482,305

DOPV

SIPDs (Borno + 7 HR States)

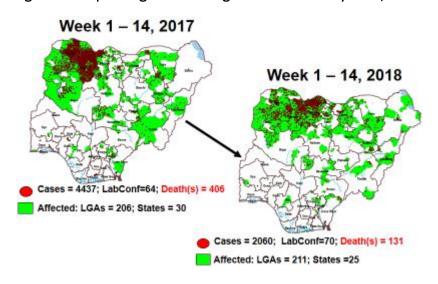
- 2.2 Between weeks 1 and 14 (2018), 2060 suspected meningitis cases with 70 laboratory confirmed and 132 deaths (CFR, 6.41%) from 211 LGAs (25 States) were reported compared with 4437 suspected cases and 406 deaths (CFR, 9.15%) from 206 LGAs (30 States) during the same period in 2017.
- 2.3 Timeliness/completeness of CSM case-reporting from States to the National Level (2018 versus 2017): on average, 88.2% of the 26 endemic States sent CSM reports in a timely manner while 98.2% were complete in week 1 14, 2018 as against 76.4% timeliness and 92.3% completeness recorded within the same period in 2017

2.4 The National CSM Emergency Operations Centre has been activated and is currently on response mode

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- 2.5 Enhanced surveillance/ case based surveillance began 1st of December 2017
- 2.6 Rapid Response Team has been deployed to Niger State
- 2.7 The National CSM Guidelines have been finalised and available via http://ncdc.gov.ng/themes/common/docs/protocols/51 1510449270.pdf

Figure 2: Map of Nigeria showing areas affected by CSM, week 1 - 14, 2017 & 2018



- 2.8 State CSM Emergency Operations Centre has been activated in Zamfara, Katsina and Sokoto States respectively
- 2.9 Preventive vaccination conducted in Yobe State with Men Afrivac in two phases -7^{th} to 11^{th} and 14^{th} to 18^{th} February, 2018
- 2.10 NCDC deployed multi-disease response team to Bauchi State on the 11th March, 2018 to support the State
- 2.11 NCDC, NPHCDA and partners to commence reactive vaccination approved by ICG in 12 wards (three States: Zamfara, Katsina & Sokoto) from 21st 25th April, 2018
- 2.12 CSM preventive messages & action were disseminated through a live phone-in discussion programme on a National radio station on the 10th March, 2018
- 2.13 Monitoring of risk communication activities in all States especially high risk States
- 2.14 Surveillance Outbreak and Response Management Analysis System (SORMAS) tool deployed in Zamfara, Sokoto and Katsina states

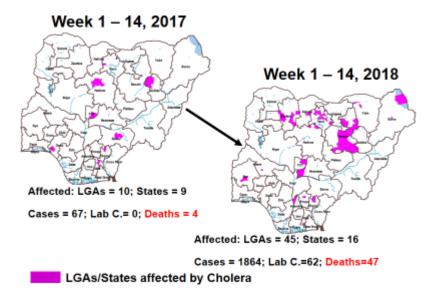
3. CHOLERA

3.1 602 suspected cases of Cholera with 13 Lab. Confirmed cases and nine deaths (CFR, 1.5%) were reported from 11 LGAs (nine States; Abia – 8, Anambra – 20, Bauchi – 420, Borno – 2, FCT – 1, Kaduna – 1, Nasarawa – 8, Yobe – 136 & Zamfara – 6) in week 14, 2018 compared with zero case reported during the same period in 2017 (Figure 3).

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- 3.2 Between weeks 1 and 14 (2018), 1864 suspected Cholera cases with 62 laboratory confirmed and 47 deaths (CFR, 2.52%) from 45 LGAs (16 States) were reported compared with 67 suspected cases and four deaths (CFR, 5.97%) from ten LGAs (ten States) during the same period in 2017.
- 3.3 National Preparedness and Response to Acute Watery Diarrhoea/ Cholera Guidelines have been finalised: http://ncdc.gov.ng/themes/common/docs/protocols/45 1507196550.pdf
- 3.4 Ongoing plans for nationwide Cholera campaign with Federal Ministry of Water Resources and partner agencies
- 3.5 Rapid Response Team deployed to respond to recent cluster of cases in Bauchi State

Figure 3: Status of LGAs/States that reported Cholera cases in week 1 - 14, 2017 & 2018



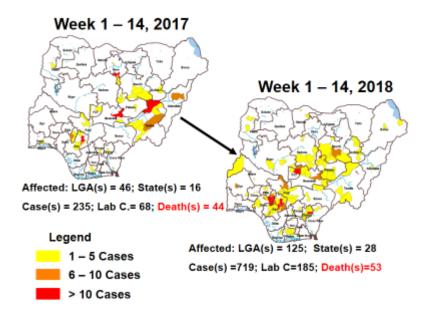
4 LASSA FEVER

Please note that the data reflects the routine reports i.e. all suspected cases including the laboratory positive and negative cases

4.1 19 suspected cases of Lassa fever with two Laboratory confirmed were reported from ten LGAs (eight States: Ebonyi - 1, Edo – 3, FCT – 2, Gombe – 1, Nasarawa – 1, Ondo – 9, Oyo – 1 & Plateau – 1) in week 14, 2018 compared with four suspected cases with one Lab. Confirmed and one death (CFR,25.0%) reported from three LGAs (three States) at the same period in 2017

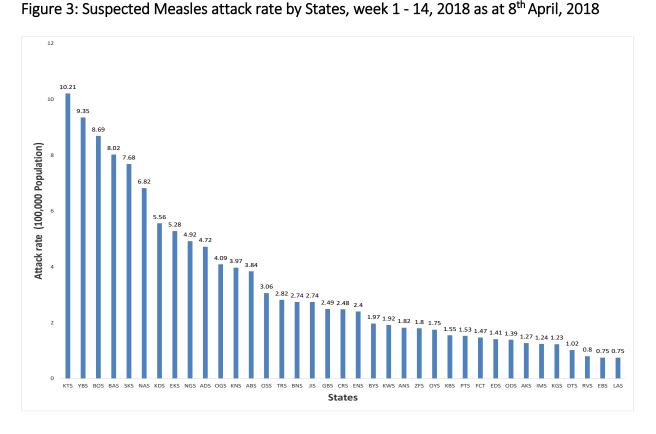
- **4.2** Laboratory results of the 19 suspected cases; two positive for Lassa fever (Ebonyi -1 & Edo -1), 17 were negative for Lassa fever & other VHFs (Edo -2, FCT-2, Gombe -1, Nasarawa -1, Ondo -9, Oyo -1 & Plateau -1)
- 4.3 Between weeks 1 and 14 (2018), 719 suspected Lassa fever cases with 185 laboratory confirmed cases and 53 deaths (CFR, 7.37%) from 125 LGAs (28 States) were reported compared with 235 suspected cases with 68 laboratory confirmed cases and 44 deaths (CFR, 18.72%) from 46 LGAs (16 States) during the same period in 2017 (Figure 4)
- **4.4** Surveillance Outbreak and Response Management Analysis System (SORMAS) tool deployed in Edo, Ondo and Ebonyi States
- **4.5** Investigation and active case search ongoing in affected States with coordination of response activities by the NCDC with support from partners
- 4.6 Response materials for VHF provided to support States and health facilities
- **4.7** National VHF guidelines (National Viral Haemorrhagic Fevers Preparedness guidelines, Infection Prevention and Control of VHF and Standard Operating Procedures for Lassa fever management) are available on the NCDC website-http://ncdc.gov.ng/diseases/guidelines
- 4.8 Offsite support provided by NCDC/partners in all affected States
- **4.9** NCDC in collaboration with ALIMA is providing support to treatment centres in Ebonyi, Ondo and Edo States where most of the patients are managed
- 4.13 NCDC deployed data management tools (SORMAS) on the field to encourage real time reporting and data analysis/interpretation to inform prompt decision making
- 4.14 NCDC and Irrua Specialist teaching Hospital is organising a nationwide training on Lassa fever case management from 2nd May, 2018
- 4.15 States are enjoined to intensify surveillance and promote Infection, Prevention and Control (IPC) measures in health facilities

Figure 4: Map of Nigeria showing areas affected by Lassa fever, week 1 - 14, 2017 & 2018



5 MEASLES

- 5.1 In the reporting week, 730 suspected cases of Measles and 12 deaths (CFR, 1.64%) were reported from 35 States compared with 623 suspected cases and one deaths (CFR, 0.14%) reported from 31 States during the same period in 2017
- 5.2 So far, 6828 suspected Measles cases with nine Lab. Confirmed and 65 deaths (CFR, 0.95%) were reported from 36 States and FCT compared with 8211 suspected cases with 55 laboratory confirmed and 51 deaths (CFR, 0.62 %) from 37 States during the same period in 2017
- 5.3 Response measures include immunization for all vaccine-preventable diseases in some selected/affected wards/LGAs during SIAs, as well as case management
- 5.4 Measles mass campaign completed in the 17 Southern States from March 8 20, 2018
- 5.5 Measles mass campaign completed in the North central States in February, 2018while North East and North Western States were conducted in 2017



6 GUINEA WORM DISEASE

- 6.1 In the reporting week, no rumour report of Guinea Worm disease was received from any State.
- 6.2 Nigeria has celebrated eight consecutive years of zero reporting of Guinea worm disease in the country. The Country has been officially certified free of Dracunculiasis transmission by the International Commission for the Certification of Dracunculiasis Eradication (ICCDE).

(For further information, contact Nigeria Guinea Worm Eradication Program / Neglected Tropical Diseases Division, Public Health Department/Federal Ministry of Health)

7. Update on national Influenza sentinel surveillance, Nigeria week 1 - 15, 2018

- 7.1. From week 1- 15, 142-suspected cases were reported, of which 133 were Influenza like-illness (ILI), nine Severe Acute Respiratory Infection (SARI).
- 7.2 142 samples were received and 124 samples were processed. Of the processed samples, 115(92.7%) were ILI cases, nine (7.3%) were Severe Acute Respiratory Infection (SARI).

7.4. Of the 124 processed ILI samples, 16 (12.9%) was positive for Influenza A; 26(21.0%) positive for Influenza B and 82(66.1%) were negative.

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- 7.5 For the processed nine SARI samples, five (55.56%) were positive for Influenza A while the remaining four (44.44%) were negative.
- 7.6 42 (35.0%) of the processed 124 samples were positive for Influenza, with 16 (38.1%) of these positive for Influenza A and 26 (61.9%) positive for Influenza B.
- **7.5.** The subtypes A seasonal H3, 2009A/H1N1 and A/not subtyped account for (0.0%), 11 (68.8%) and 5 (31.2%) of the total influenza A positive samples respectively.
- 7.6 The subtypes B VICTORIA, B Not subtyped and B Yamagata account for 10(38.5%), 16(61.5%) and 0(0.0%) of the total influenza B positive samples respectively
- 7.7 The percentage influenza positive was highest (75.0%) in week 6, 2018
- 7.8 In the reporting week 1 -15, eighteen (18) samples were left unprocessed

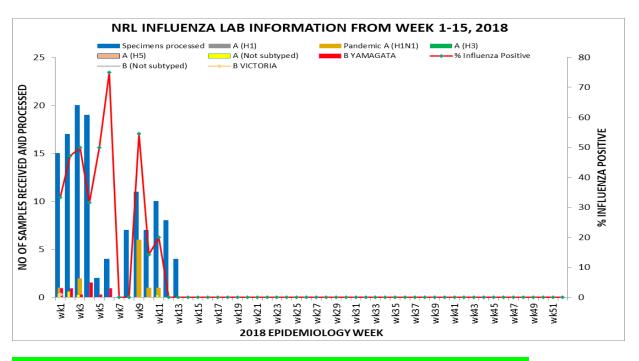


Figure 19: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 15, 2018)

FOR MORE INFORMATION CONTACT

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Table 3: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1-14, 2018, as at 8th April, 2018

30th March, 2018

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