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2nd February, 2018

NIGERIA CENTRE FOR DISEASE CONTROL

Weekly Epidemiological Report

Main Highlight for the Week

STOPPING SPREAD OF LASSA FEVER: INSTITUTING INFECTION PREVENTION CONTROL MEASURES IN HEALTH FACILITIES



As the Lassa fever outbreak continues in Epi-week 4, more states were affected with more confirmed cases reported in these states. A total of 297 suspected cases were reported from 13 states. 77 of these cases were laboratory confirmed. 21 deaths were recorded in confirmed and suspected giving a case fatality rate (CFR) of 27.6%.

2nd February, 2018

A critical aspect of Lassa fever outbreak management is identification of the index case, transmission mode and instituting measures to break the transmission cycle particularly during management of confirmed cases. During case management of cases, strict infection and prevention control (IPC) measures should be carried out at all times, most especially when final diagnosis of cases is being awaited.

Part of efforts towards curbing transmission of the disease includes instituting infection prevention and control measures in treatment facilities. This can be achieved through:

- 1. Constitution of a Facility IPC Committee: Primary role of the IPC team is to drive the application of IPC measures amongst health care workers in the facility.
- 2. Training and re-training of facility staff on observing universal precautions and IPC measures.
- 3. Implementation of IPC measures using the National Guidelines on IPC.
- 4. On-the-job mentoring sessions on IPC.
- 5. Inclusion of budget line items for procurement of IPC consumables.
- 6. Stocking up on necessary materials for IPC
- 7. Setting up of wash-points across facilities where hand hygiene can be carried out at all times.

Treatment centres across Nigeria are encouraged to constitute an infection and prevention committee to provide guidance on IPC measures, setting up of a holding and isolation unit. Healthcare workers are enjoined to always ensure they are protected at all times in the course of carrying out their clinical duties.

The Nigeria Centre for Disease Control through its National Lassa Fever Emergency Operations Centre (LF-EOC) has continued to coordinate and provide support to States in the ongoing outbreak. States are encouraged to provide updates and notifications to the EOC for better coordination of the outbreak. More information on the outbreak and the guidelines for Lassa fever can be accessed on the NCDC website: www.ncdc.gov.ng

SUMMARY OF REPORTS

In the reporting week ending on January 21, 2018:

o There were 202 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.

- 25 suspected cases of Cholera were reported from ten LGAs in Kano State. Of these, none was laboratory confirmed and two deaths were recorded.
- 53 suspected cases of Lassa fever were reported from 27 LGAs in 13 States (Bauchi 2, Ebonyi 4, Edo 24, FCT- 2, Gombe 3, Kaduna 3, Kogi -4, Nasarawa 1, Osun 1, Oyo 1, Plateau 2, Rivers 4 & Taraba 2). 21 were laboratory confirmed and eight deaths were recorded.
- There were 72-suspected cases of Cerebrospinal Meningitis (CSM) reported from 31 LGAs in 11 States (Borno 1, Cross River 3, Ebonyi 1, Kano 1, Katsina 21, Kebbi 6, Osun 3, Sokoto 12, Taraba 1, Yobe 4 & Zamfara 19). Of these, 17 were laboratory confirmed and three 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.
- There were 331- suspected cases of Measles reported from 34 States.
 None was laboratory confirmed and no death was recorded.

In the reporting week, all States sent in their report. This is a remarkable improvement! Timeliness of reporting increases from 86% in previous week (week 1, 2018) to 91% in the current week (Week 2, 2018) while completeness increased from 89% to 100% at same period. It is very important for all States to ensure timely and complete reporting at all times, especially during an outbreak.

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Disease	Variables	Week 2	Week 3	Cumulative V	Cumulative Weeks			
		2018	2018	Week 1 - 3, 2018	Week 1 - 3, 2017			
AFP	Cases	121	202	380	488			
	Deaths	0	0	0	0			
	CFR	0	0	0	0			
CSM	Cases	48	72	174	88			
	Deaths	3	3	6	11			
	CFR	6.25%	4.17%	3.45%	12.50%			
Cholera	Cases	40	25	149	24			
	Deaths	4	2	11	4			
	CFR	10.0%	8.0%	7.38%	16.67%			
Guinea	Cases	0	0	0	0			
Worm	Deaths	0	0	0	0			
	CFR	0	0	0	0			
Lassa Fever	Cases	23	53	87	72			
	Deaths	6	8	15	10			
	CFR	26.09%	15.1%	17.24%	13.89%			
Measles	Cases	212	331	691	966			
Wicasies	Deaths	0	0	1	13			
	CFR	0	0	0.14%	1.35%			
Yellow Fever	Cases	25	26	84	24			
	Deaths	0	0	0	0			
	CFR	0	0	0	0			
PHEIC	Cases	0	0	0	0			
	Deaths	0	0	0	0			
	CFR	0	0	0	0			

REPORT ANALYSIS AND INTERPRETATION

1. AFP

- 1.1. As at January 21st 2018, no new case of WPV was recorded
- 1.2. In the reporting week, 202 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 1st round of SIPDs in 2018 conducted from 20th 23th January 2018 in the 14 high risk States using bOPV. The schedule for other SIAs is as described in Table 2
- 1.3. Six confirmed WPVs were isolated in 2014.
- 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

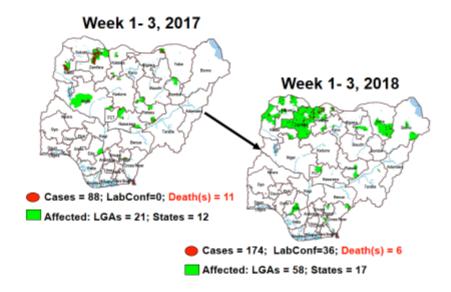
S/No	Month	Dates	Scope		% of the Total Target Population	Antigen
1	January	20 th – 23 rd	SIPDs (14 HR States)	24,494,012	49%	bOPV
2	February	1st-13th	Measles SIA (NCZ)			Measles
3	March	8th-20th	Measles SIA (South 17 States)			Measles
4	March	3rd-6th	SIPDs (Borno,Yobe & Adamawa)	3,741,704	7.6%	bOPV
5	April	5 th - 8 th	NIPDs (36+1)	49,882,036	100%	bOPV
6	May	7 th – 10 th	sNIPDs (33+1) Excluding Borno,Yobe & Adamawa	46,140,332	92.4%	bOPV
7	October	13th – 16th	SIPDs (18 HR States)	31,715,796	63.50%	bOPV
8	December	13 th – 16 th	SIPDs (Borno + 7 HR States)	7,482,305	15%	bOPV

2. CEREBROSPINAL MENINGITIS (CSM)

- 2.1 In the reporting week 3, 72 suspected Cerebrospinal Meningitis (CSM) cases with 17 Laboratory confirmed and three deaths (CFR, 4.17%) were reported from 31 LGAs (11 States; Borno 1, Cross River 3, Ebonyi -1, Kano 1, Katsina 21, Kebbi 6, Osun 3, Sokoto 12, Taraba 1, Yobe 4 & Zamfara 19) compared with 21 suspected cases and three deaths (CFR, 14.3%) from 13 LGAs (nine States) at the same period in 2017 (Figure 2)
- 2.2 Between weeks 1 and 3 (2018), 174 suspected meningitis cases with 36 laboratory confirmed and six deaths (CFR, 3.45%) from 58 LGAs (17 States) were reported compared with 88 suspected cases and 11 deaths (CFR, 12.50%) from 21 LGAs (12 States) during the same period in 2017.

Report

Figure 2: Map of Nigeria showing areas affected by CSM, week 1 - 3, 2017 & 2018

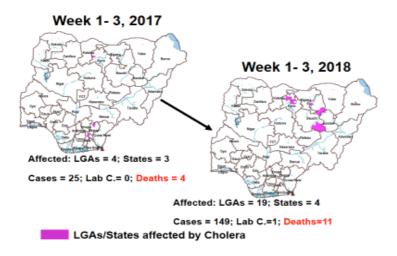


- 2.3 Timeliness/completeness of CSM case-reporting from States to the National Level (2017 versus 2016): on average, 88.5% of the 26 endemic States sent CSM reports in a timely manner while 88.5% were complete in week 1 3, 2018 as against 73.1% timeliness and 78.2% completeness recorded within the same period in 2017
- 2.4 The National CSM Emergency Operations Centre has been activated and is currently on response mode
- 2.5 Enhanced surveillance/ case based surveillance began 1st of December 2017
- 2.6 Rapid Response Teams currently deployed to support response in Zamfara and Katsina States
- 2.7 The National CSM Guidelines have been finalised and available via http://ncdc.gov.ng/themes/common/docs/protocols/51_1510449270.pdf
- 2.8 State CSM Emergency Operations Centre has been activated in Zamfara, Katsina and Sokoto States respectively

3. CHOLERA

- 3.1 25 suspected cases of Cholera and two deaths (CFR, 8.0%) were reported from ten LGAs (Kano State) in week 3, 2018 compared with zero case reported during the same period in 2017 (Figure 3).
- 3.2 Between weeks 1 and 3 (2018), 149 suspected Cholera cases with one laboratory confirmed and 11 deaths (CFR, 7.38%) from 19 LGAs (four States) were reported compared with 24 suspected cases and four deaths (CFR, 16.67%) from 3 LGAs (three 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 States are enjoined to intensify surveillance, implement WASH activities and ensure early reporting.

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



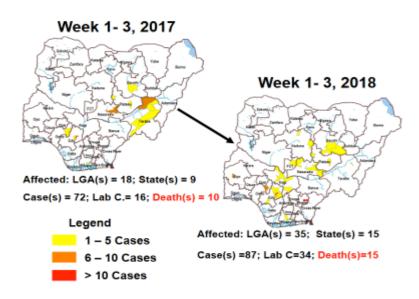
4 LASSA FEVER

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

4.1 53 suspected cases of Lassa fever with 21 Laboratory confirmed and eight deaths (CFR, 15.1%) were reported from 27 LGAs (13 States: Bauchi – 2, Ebonyi – 4, Edo – 24, FCT- 2, Gombe – 3, Kaduna – 3, Kogi -4, Nasarawa – 1, Osun – 1, Oyo – 1, Plateau – 2, Rivers – 4 & Taraba - 2) in week 3, 2018 compared with nine suspected cases with two Lab. Confirmed and two

- death (CFR, 22.2%) reported from six LGAs (five States) at the same period in 2017
- 4.2 Laboratory results of the 53 suspected cases; 21 positive for Lassa fever (Ebonyi 4, Edo 14, Kogi 2, & Plateau 1), 32 were negative for Lassa fever & other VHFs (Bauchi 2, Edo 10, FCT 2, Gombe 3, Kaduna 3, Kogi 2, Nasarawa 1, Osun 1, Oyo 1, Plateau 1, Rivers 4 & Taraba 2)
- 4.3 Between weeks 1 and 3 (2018), 87 suspected Lassa fever cases with 34 laboratory confirmed cases and 15 deaths (CFR, 17.24%) from 35 LGAs (15 States) were reported compared with 72 suspected cases with 16 laboratory confirmed cases and ten deaths (CFR, 13.89%) from 18 LGAs (nine States) during the same period in 2017 (Figure 4)
- 4.4 Investigation and active case search ongoing in affected States with coordination of response activities by the NCDC with support from partners
- 4.5 National Lassa Fever Working Group has been escalated to National Emergency Operations Centre on the 22nd January, 2018
- 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 Onsite support ongoing in Ebonyi, Edo and Ondo States by the NCDC and partners
- 4.9 Offsite support provided by NCDC/partners in all affected States
- 4.10 States are enjoined to intensify surveillance and promote Infection, Prevention and Control (IPC) measures in health facilities

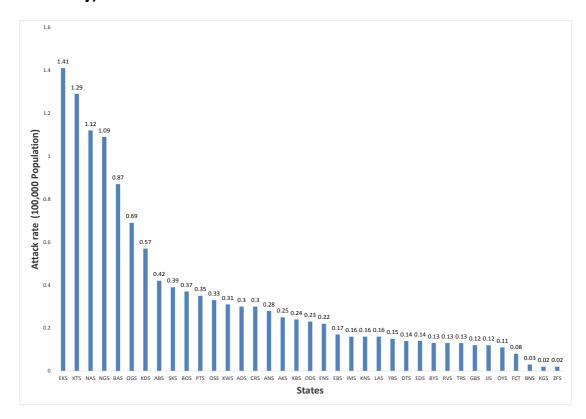
Figure 4: Map of Nigeria showing areas affected by Lassa fever, week 1 - 3, 2017 & 2018



5 MEASLES

- In the reporting week, 331 suspected cases of Measles were reported from 34 States compared with 356 suspected cases with four Laboratory confirmed and one death (CFR, 0.28%) reported from 28 States during the same period in 2017
- 5.2 So far, 691 suspected Measles cases and one death (CFR, 0.14%) were reported from 36 States and FCT compared with 966 suspected cases with six laboratory confirmed and 13 deaths (CFR, 1.35%) during the same period in 2017
- 5.3 Response measures include immunisation for all vaccine-preventable diseases in some selected/affected wards/LGAs during SIAs, as well as case management
- 5.4 Measles mass campaign conducted in seven North West and North East States from $9^{th} 14^{th}$ November 2017 and 30^{th} November 5^{th} December 2017 respectively.
- 5.5 Proposed Measles mass campaign for North Central and Southern States schedule for February 1 13 and March 8 20, 2018 respectively.

Figure 3: Suspected Measles attack rate by States, week 1 - 3, 2018 as at 21st January, 2018



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 - 52, 2017

- 7.1. From week 1-52, 161-suspected cases were reported, of which 153 were Influenza like-illness (ILI), eight Severe Acute Respiratory Infection (SARI).
- 161 samples were received of which 107 were processed. Of the processed samples, 99(92.5%) were ILI cases, eight (7.5%) were Severe Acute Respiratory Infection (SARI).
- 7.4. Of the 99 processed ILI samples, 1(1.01%) was positive for Influenza A; two (2.02%) positive for Influenza B and 96(96.97%) were negative.
- 7.5. Of the eight processed SARI samples, none was positive for Influenza A and Influenza B.
- 7.6. Three (2.80%) of the processed 107 samples were positive for Influenza, with one (33.3%) of these positive for Influenza A and two (66.7%) positive for Influenza B.
- 7.7. The subtypes A seasonal H3, 2009A/H1N1 and A/not subtyped account for (100%), 0 (0.0%) and 0 (0.0%) of the total influenza A positive samples respectively.
- 7.8. The percentage influenza positive was highest (50.0%) in week 14, 2017
- 7.9. In the reporting week 52, 54 samples were left unprocessed

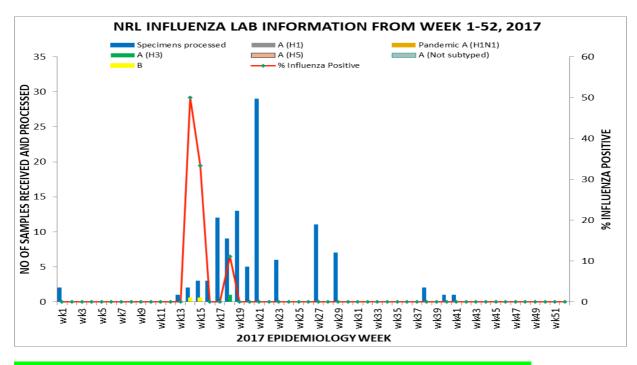


Figure 19: Number of Influenza Positive Specimens and Percent Positive by Epidemiological Week (Week 1- 52, 2017)

FOR MORE INFORMATION CONTACT

Surveillance Unit: Nigeria Centre for Disease Control, 801 Ebitu Ukiwe Street, Jabi, Abuja, Nigeria. epidreport@ncdc.gov.ng www.ncdc.gov.ng/reports 0800-970000-10

Table 3: Status of Reporting by the State Epidemiologists, Nigeria, Weeks 1 -3, 2018, as at 26th January, 2018

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	Keys:							Timely	<50%	Poor	3 States
	T= Arrived on Time							Reports	50-79%	Good	3 States
	L= Arrived late		N	Report	not rec	eived		TE POILO	80-100%	Excellent	31 States
	N = No Report (Report not received)										
	State	GeoZones	W01	W02	W03	Expected (Es)	Timely Rpts (Ts)	Late Rpts (Ls)	Rpts Not Recvd (Ns)	% Timely	% Complete
1	Abia	SEZ	Т	Т	Т	3	3	0	0	100%	100%
2	Adamawa	NEZ	T	T	T	3	3	0	0	100%	100%
3	Akwa Ibom	SSZ	T	T	T	3	3	0	0	100%	100%
4	Anambra	SEZ	T	T	T	3	3	0	0	100%	100%
5	Bauchi	NEZ	T	T	T	3	3	0	0	100%	100%
6	Bayelsa	SSZ	T	T	T	3	3	0	0	100%	100%
7	Benue	NCZ	L	T	L	3	1	2	0	33%	100%
8	Borno	NEZ	T	T	T	3	3	0	0	100%	100%
9	Cross River	SSZ	T	T	T	3	3	0	0	100%	100%
0	Delta	SSZ	T	T	T	3	3	0	0	100%	100%
11	Ebonyi	SEZ	T	L	L	3	1	2	0	33%	100%
12	Edo	SSZ	T	T	T	3	3	0	0	100%	100%
13	Ekiti	SWZ	T	T	T	3	3	0	0	100%	100%
14	Enugu	SEZ	T	T	T	3	3	0	0	100%	100%
15	FCT	NCZ	T	T	T	3	3	0	0	100%	100%
6	Gombe	NEZ	T	T	T	3	3	0	0	100%	100%
7	Imo	SEZ	L	T	T	3	2	1	0	67%	100%
18	Jigawa	NWZ	T	T	T	3	3	0	0	100%	100%
19	Kaduna	NWZ	T	T	T	3	3	0	0	100%	100%
20	Kano	NWZ	T	T	T	3	3	0	0	100%	100%
21	Katsina	NWZ	T	T	T	3	3	0	0	100%	100%
22	Kebbi	NWZ	L	L	L	3	0	3	0	0%	100%
23	Kogi	NCZ	T	T	T	3	3	0	0	100%	100%
24	Kwara	NCZ	T	T	T	3	3	0	0	100%	100%
25	Lagos	SWZ	T	T	T	3	3	0	0	100%	100%
26	Nasarawa	NCZ	T	T	T	3	3	0	0	100%	100%
27	Niger	NCZ	T	T	T	3	3	0	0	100%	100%
28	Ogun	SWZ	T	T	T	3	3	0	0	100%	100%
	Ondo	SWZ	T	T	T	3	3	0	0	100%	100%
30	Osun	SWZ	T	T	T	3	3	0	0	100%	100%
31	Oyo	SWZ	L	T	T	3	2	1	0	67%	100%
32	Plateau	NCZ	T	T	T	3	3	0	0	100%	100%
33	Rivers	SSZ	T	T	T	3	3	0	0	100%	100%
34	Sokoto	NWZ	T	T	T	3	3	0	0	100%	100%
35	Taraba	NEZ	L	T	T	3	2	1	0	67%	100%
	Yobe	NEZ	T	T	T	3	3	0	0	100%	100%
37	Zamfara	NWZ	T	T	T	3	3	0	0	100%	100%
	Total number of reports expected (E)		37	37	37	111					
	Total reports sent on time (T)		32	35	34		101				
	Total reports sent late (L)		5	2	3			10			
	Total number of reports not received (N)		0	0	0				0		
	Timeliness of reports =100*T/E		86.5	94.6	91.9					91%	
	Completeness of reporting=100*(E-N)/E		100.0	100.0	100.0						100%
									Last update		