



<b>SITUATION: LASSA FEVER OUTBREAK</b>	<b>LOCATION: LIBERIA</b>
<b>DATE OF REPORT: APRIL 26, 2024</b>	<b>OUTBREAK START DATE: JAN 6, 2022</b>
<b>REPORTING PERIOD: APRIL 20 -26, 2024</b>	<b>SITREP NO: 100</b>

## HIGHLIGHTS

- **No new confirmed case reported**
- Total of 57 contacts including 17 HCWs under 21 days follow up
- Total of 145 confirmed cases including 43 deaths reported
- Cumulative Case Fatality Rate (CFR): 30% (43/145)
- Two counties (Bong & Nimba) currently in outbreak

## SITUATIONAL CONTEXT

Lassa fever (LF) is an acute viral hemorrhagic illness that is endemic in West Africa, including Benin, Ghana, Guinea, Liberia, Mali, Sierra Leone, and Nigeria. The incubation period ranges from 2-21 days and transmitted to humans via contact with food or household items contaminated with infected rodent urine or feces. The signs and symptoms are usually gradual, but start with fever, general weakness, malaise, and later headache, sore throat, muscle pain, chest pain, nausea, vomiting, diarrhea, cough, and abdominal pain or facial swelling, and bleeding.

LF is a major public health concern in Liberia. To date, eight (8) out of the fifteen (15) counties (Bong, Grand Bassa, Nimba, Margibi, Lofa, Montserrado, Grand Kru, and River Gee) have reported confirmed cases. Bong, Grand Bassa, and Nimba counties are endemic, while Margibi, Lofa, Montserrado, Grand Kru, and River Gee have reported sporadic cases.

In 2021, the country recorded 12 outbreaks including 25 laboratory-confirmed cases with 15 deaths accounting for a 60% case fatality rate (CFR). These outbreaks generated 325 contacts of which 196 were healthcare workers (HCWs).

From January 6, 2022 to present, we recorded 16 outbreaks. The ongoing outbreak, which started January 6, 2022 in Bong County, has recorded 145 laboratory-confirmed cases including 43 deaths (CRF 30%). A total of 1179 contacts have been recorded including 416 healthcare workers.

**Table 1: Summary of Lassa fever Outbreak, Liberia, January 6, 2022 – April 26, 2024**

County	Outbreak Districts	Outbreak Start Date	Total suspected	Total confirmed	HCWs confirmed	Total Deaths	Deaths in HCWs	CFR %	Total Contacts	# HCW contacts	Contacts_became cases	Contacts under follow up	Contacts completed	Days in countdown	Outbreak Status
Montserrado	Bushrod	13-Feb-23	17	1	0	0	0	0%	29	21	0	0	29	Completed	Over
	Central Monrovia	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Over
	Central Monrovia	3-Mar-23	38	2	0	1	0	50%	28	27	0	0	28	Completed	Over
	Suakoko	21-Apr-24	192	54	18	13	2	24%	496	114	6	0	417	Completed	Over
Bong	Jorquelleh	15-Oct-23	14	6	3	1	1	17%	121	86	3	0	169	Completed	Over
	Suakoko	23-Feb-24	8	2	0	0	0	0%	21	10	0	0	16	Active	Ongoing
	Salala	8-Mar-24	2	2	0	1	0	50%	21	0	0	21	0	Active	Ongoing
	Jorquelleh	11-Apr-24	2	1	0	1	0	0%	22	0	0	22	0	Active	Ongoing
Grand Bassa	District 3A&B	21-Aug-23	87	44	0	10	0	23%	177	40	40	0	159	Completed	Over
	Buchanan	11-Aug-23	2	1	0	1	0	100%	4	2	0	0	4	Completed	Over
Nimba	Saclepea-Mah	21-Nov-23	4	2	0	1	0	50%	5	0	0	0	5	Completed	Over
	Samniquellie-Mah	6-Feb-23	42	15	0	6	0	40%	43	35	8	0	43	Completed	Over
	Tappita	20-Nov-23	12	5	0	3	0	60%	88	39	4	0	77	Completed	Over
	Bain-Garr	1-Jun-23	24	6	0	3	0	50%	61	25	0	0	31	Completed	Over
	Bain-Garr	15-Apr-24	1	1	0	0	0	0%	14	0	0	14	0	Active	Ongoing
River Gee	Putupo	25-Nov-22	1	1	0	1	0	100%	14	0	0	0	14	Completed	Over
<b>Total</b>			<b>447</b>	<b>145</b>	<b>21</b>	<b>43</b>	<b>3</b>	<b>30%</b>	<b>1193</b>	<b>399</b>	<b>61</b>	<b>57</b>	<b>1041</b>		

### Bong County: Jorquelleh, Suakoko and Salala Districts

- ☞ No new confirmed case reported
- ☞ Cumulative confirmed cases: 5
  - Suakoko District: 2
  - Salala District: 2
  - Jorquelleh District: 1
- ☞ CFR (2/5): 40%
- ☞ Safe and dignified burials were conducted for the deceased cases
- ☞ Total of 65 contacts including 27 healthcare workers identified and line listed
  - Twenty-one (21) contacts including 10 HCWs completed 21 days follow up
  - Total of 44 contacts under 21 days follow up

### Nimba County: Bain-Garr District

- ☞ No new confirmed case reported
- ☞ Cumulative confirmed cases: 1
- ☞ Bain-Garr District: 1
- ☞ CFR (0/1): 0%
- ☞ Fourteen (14) contacts identified and line listed
- ☞ The confirmed case in isolation was treated and discharged.

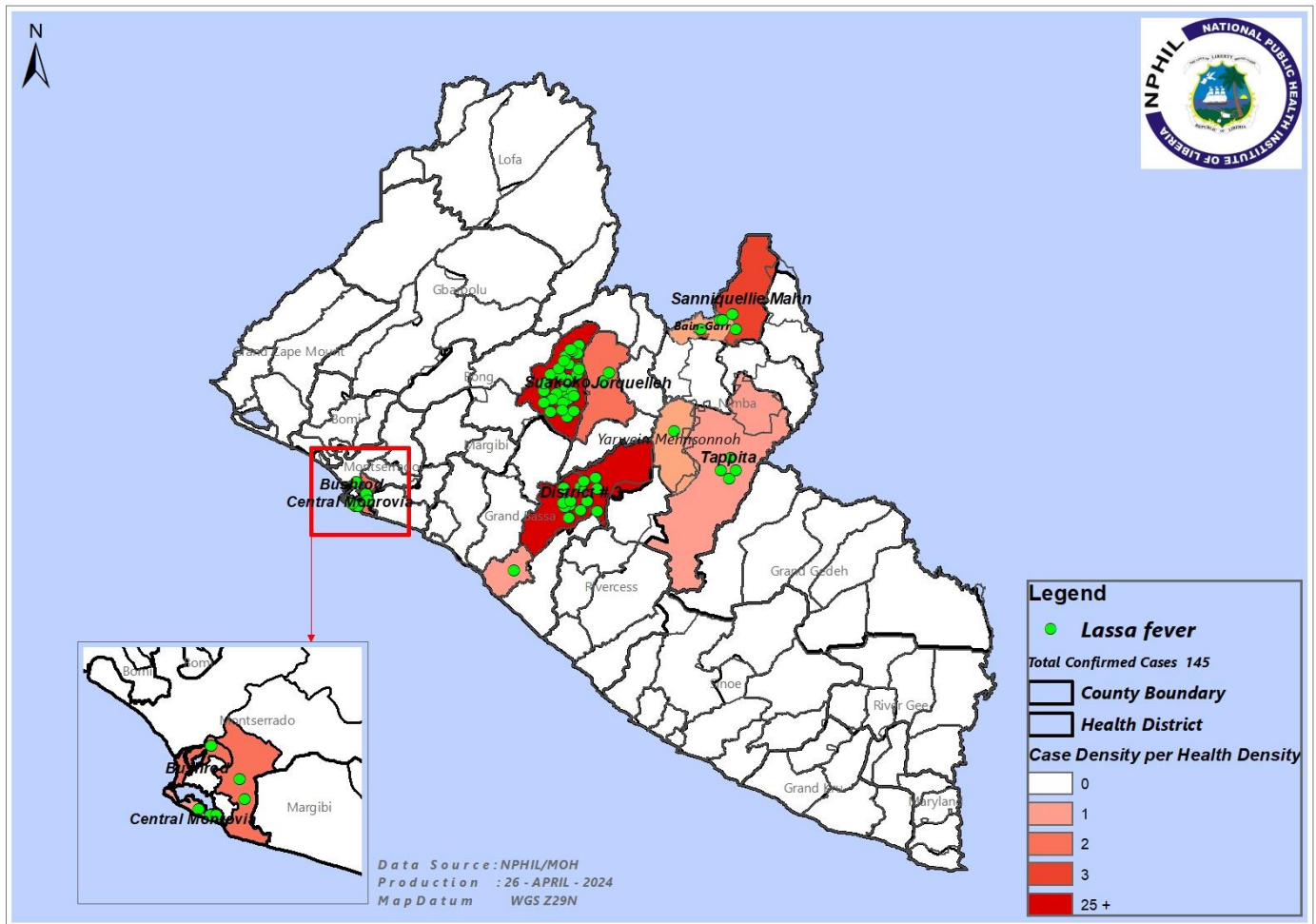
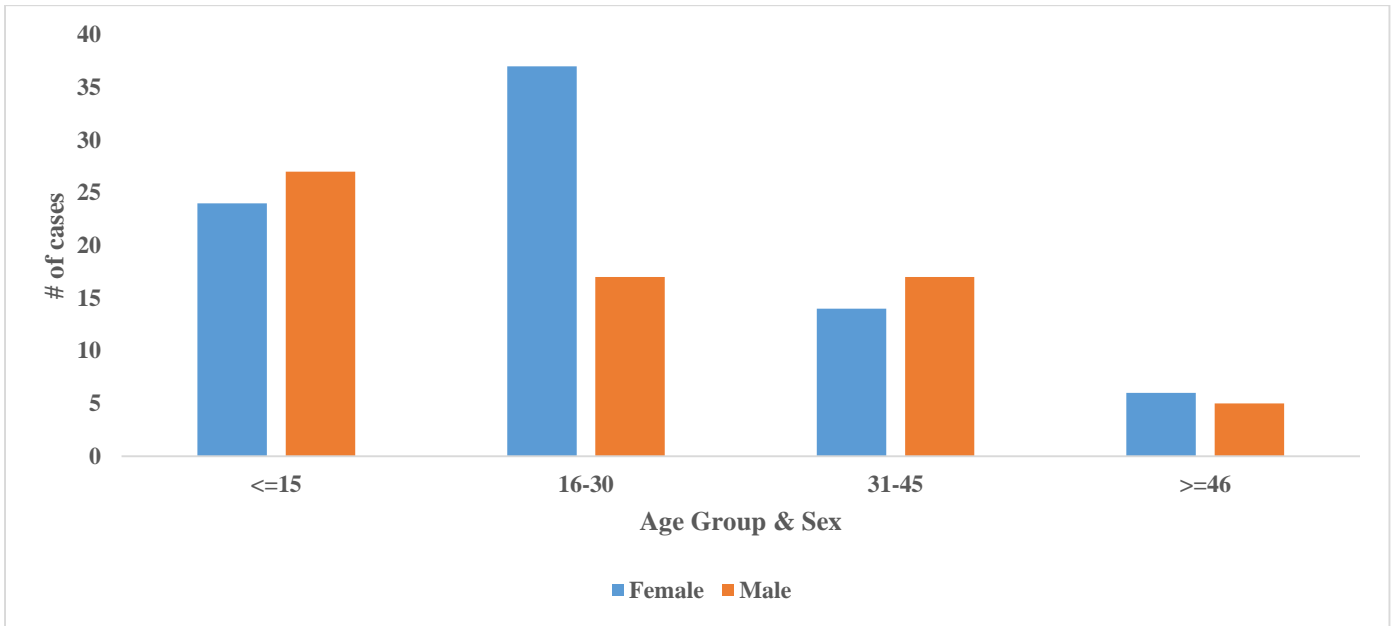


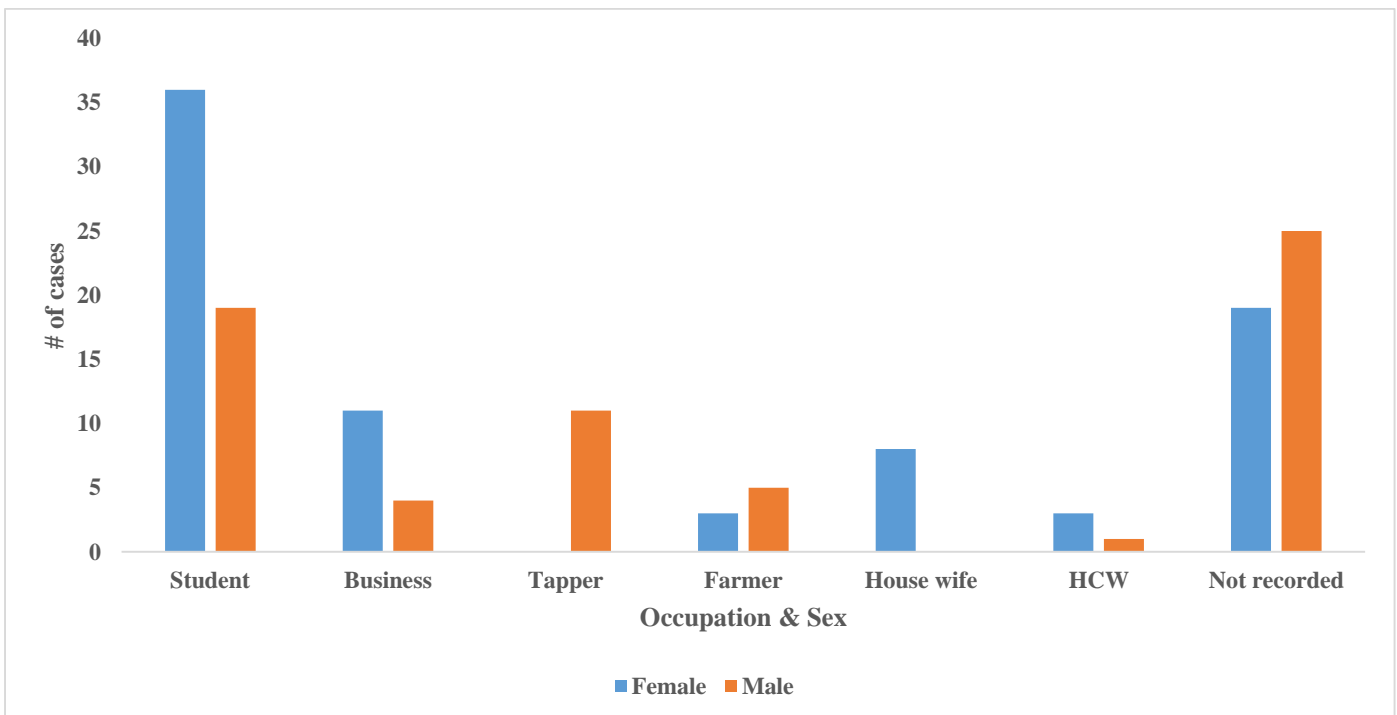
Figure 1: Distribution of Confirmed Lassa fever cases by Health District, Jan 6, 2022-April 26, 2024

Table 2: Summary of Lassa fever cases and samples, Liberia, Jan 6, 2022–April 26, 2024

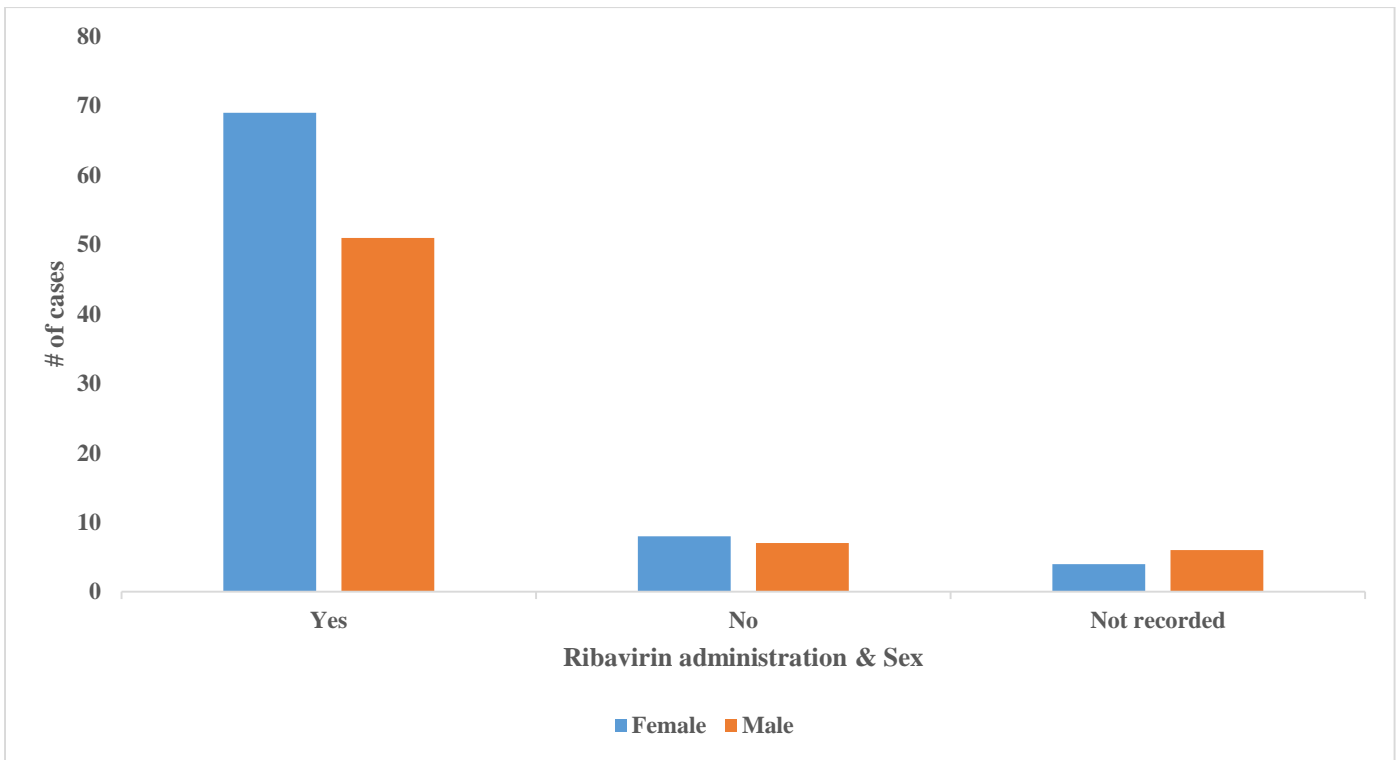
Variables	2022 & 2023	2024	Total
	Epi wk 1-52	Epi wk 1-16	
Total suspected cases reported to the national level	439	61	500
Total samples collected	437	61	498
Total samples tested	416	59	475
Total samples not collected OR samples collected but not sent to NRL	20	1	21
Total samples pending testing	0	2	2
Total samples collected & rejected by the Laboratory	3	0	3
Total Laboratory confirmed	138	7	145
Total confirmed cases alive	97	5	102
Total deaths among confirmed cases	41	2	43
Overall case fatality rate (CFR)	30%	0%	30%
Total confirmed cases currently in isolation	0	1	1
Total suspected cases in isolation	0	0	0



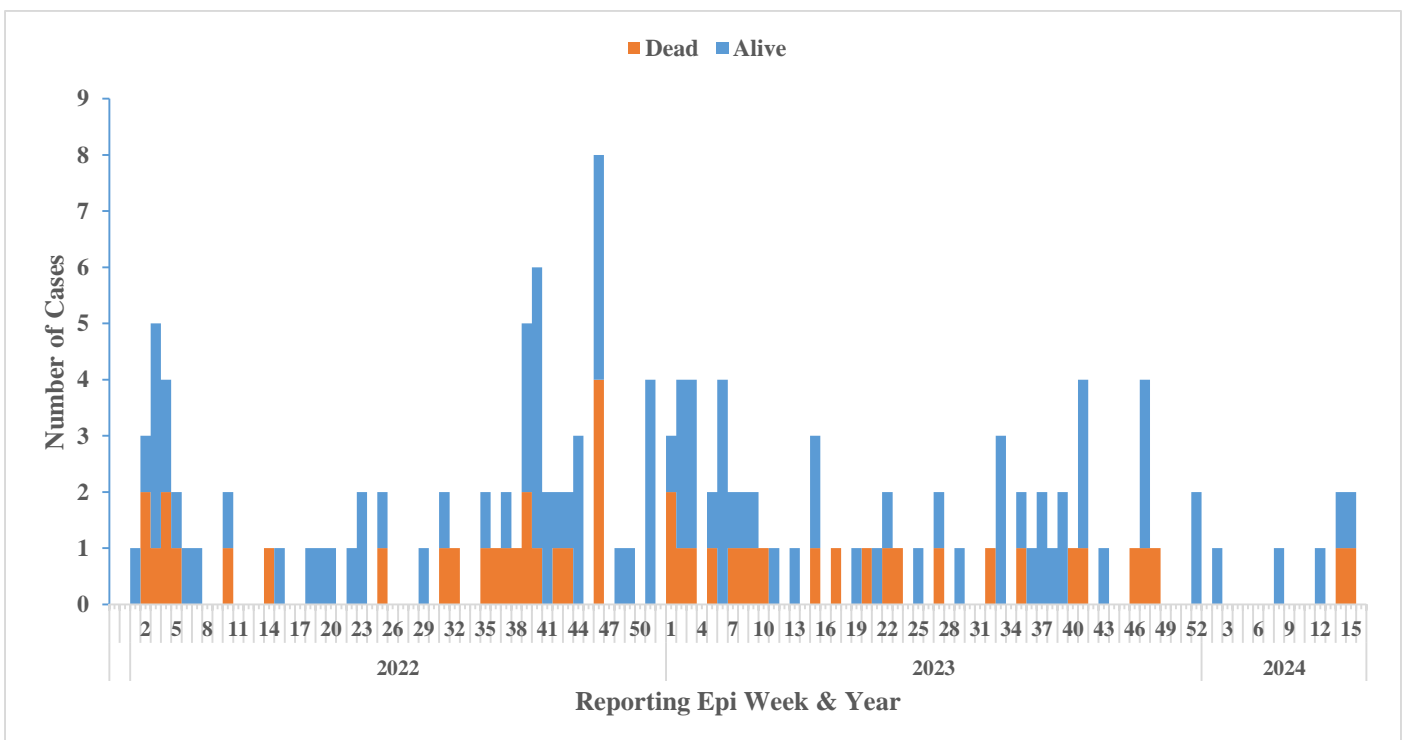
**Figure 2: Distribution of confirmed Lassa fever cases by Age and Gender, Liberia, Jan. 6, 2022-April 26, 2024**



**Figure 3: Distribution of confirmed Lassa fever cases by Occupation and Gender, Liberia, Jan. 6, 2022 – April 26, 2024**



**Figure 4: Confirmed Lassa fever cases by Ribavirin administration and Outcome, Liberia, Jan. 6, 2022 – April 26, 2024**



**Figure 5: Epi-curve of confirmed Lassa fever cases and deaths by reporting Epi week & Year, Liberia, January 6, 2022-April 26, 2024**

## PUBLIC HEALTH INTERVENTIONS

Since the inception of the 2022 outbreak, several measures including response initiatives have been instituted including surveillance and laboratory testing, vector surveillance and control, case management,

etc. These interventions aim to protect at-risk populations; prevent international spread; containing outbreaks rapidly. Below are details of the measures taken in the ongoing outbreak:

## **I. Coordination**

- The response has been led by the County Health Teams with technical support from the National Public Health Institute of Liberia (NPHIL), the Ministry of Health (MOH) and partners
  - The Incident Management Systems (IMSs) have been activated in the affected counties
  - The PHEOCs in the response counties are in response mode coordinating the response

## **II. Epidemiological Surveillance**

- Active case search and contact tracing ongoing in affected communities and districts
- Thirty-six (36) contacts including HCWs identified and line listed
- Situational reports have been developed and disseminated to stakeholders

## **III. Laboratory**

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- Total of 145 Lassa fever cases have been confirmed since this outbreak

## **IV. Case management and IPC**

- The confirmed case has been treated at Ganta United Methodist Hospital isolation
- Ribavirin supply in country and being distributed for treatment of Lf cases to affected counties

## **V. Risk Communication and Community Engagement**

- Risk communication and community engagement ongoing in affected and surrounding communities

## **VI. Dead Body Management**

- The confirmed death was buried under safe and dignified burial condition
- Total of 43 confirmed deaths recorded and buried under safe and dignified condition

## **VII. Key Challenges**

- Limited supply of IPC materials in affected counties
- Lack of IEC materials for community sensitization
- Lack of logistics (gasoline, communication cards, fuel, etc) to support active case search and contact tracing in affected county
- Limited stationeries in the EOC to produce case alert forms, contact tracing form and other tools for investigation

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