



SITUATION: LASSA FEVER OUTBREAK	LOCATION: LIBERIA
DATE OF REPORT: AUGUST 16, 2024	OUTBREAK START DATE: JAN 6, 2022
REPORTING PERIOD: AUGUST 10-16, 2024	SITREP NO: 114

HIGHLIGHTS

- No new confirmed case reported
- Total of 73 contacts including 26 HCWs under 21 days follow up
- A total of 159 confirmed cases including 46 deaths reported
- Cumulative Case Fatality Rate (CFR): 29% (46/159)
- Two counties are 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 22 outbreaks. The ongoing outbreak, which started January 6, 2022 in Bong County, has recorded 159 laboratory-confirmed cases including 46 deaths (CRF 29%). A total of 1338 contacts have been recorded including 493 healthcare workers.

Table 1: Summary of Lassa fever Outbreak, Liberia, January 6, 2022 – August 16, 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	Ended
	Central Monro	27-Nov-23	1	2	0	1	0	50%	49	0	0	0	49	Completed	Ended
	Central Monro	3-Mar-23	38	2	0	1	0	50%	28	27	0	0	28	Completed	Ended
	Bushrod	30-Apr-24	2	1	0	0	0	0%	14	6	0	0	14	Completed	Ended
	Suakoko	21-Apr-23	192	54	18	13	2	24%	496	114	6	0	417	Completed	Ended
	Jorquelleh	15-Oct-23	14	6	3	1	1	17%	121	86	3	0	169	Completed	Ended
	Kokoyah	6-Jun-24	3	1	0	0	0	0%	8	0	0	0	8	Completed	Ended
Bong	Suakoko	29-Jul-24	5	3	0	0	0	0%	22	4	0	22	0	Active	Ongoing
	Suakoko	23-Feb-24	31	3	0	0	0	0%	29	14	0	0	29	Completed	Ended
	Salala	8-Mar-24	2	2	0	1	0	50%	21	0	0	0	21	Completed	Ended
	Jorquelleh	11-Apr-24	3	2	0	1	0	0%	41	30	0	0	41	Completed	Ended
	District 3A&B	21-Aug-23	87	44	0	10	0	23%	177	40	40	0	159	Completed	Ended
Grand Bassa	Buchanan	11-Aug-23	2	1	0	1	0	100%	4	2	0	0	4	Completed	Ended
	District 3A&B	30-Apr-24	7	3	0	1	0	33%	12	3	0	0	12	Completed	Countdown
	Saclepea-Mah	21-Nov-23	4	2	0	1	0	50%	5	0	0	0	5	Completed	Ended
	Sanniquellie- Mah	6-Feb-23	43	15	0	6	0	40%	43	35	8	0	43	Completed	Ended
Nimbo	Tappita	29-Jul-24	4					0%	8			8		Active	Ongoing
Nimba	Tappita	20-Nov-23	12	5	0	3	0	60%	88	39	4	0	77	Completed	Ended
	Bain-Garr	1-Jun-23	25	6	0	3	0	50%	61	25	0	0	31	Completed	Ended
	Bain-Garr	15-Apr-24	5	2	0	1	0	50%	25	7	0	0	25	Completed	Ended
	Bain-Garr	18-Jul-24	3	2	0	1	0	50%	43	34	0	43	0	Active	Ongoing
River Gee	Putupo	25-Nov-22	2	1	0	1	0	100%	14	0	0	0	14	Completed	Ended
Total			502	159	21	46	3	29%	1338	493	61	73	1175		

Bong County: Jorquelleh, Suakoko and Kokoyah Districts

- No new confirmed case reported
- © Cumulative confirmed cases for the current outbreak: 11
 - o Suakoko District: 6
 - o Salala District: 2
 - o Jorquelleh District: 2
- o Kokoyah: 1
- CFR (2/11): 18%
- Total of 124 contacts including 44 healthcare workers line listed
- Twenty-four (24) contacts including 4 healthcare workers under 21 days follow up
- Safe and dignified burials were conducted for deceased cases
- One confirmed case in isolation under-going treatment

Nimba County: Bain-Garr & Tappita Districts

- No new confirmed case reported
- Cumulative confirmed cases for the current outbreak: 3
- CFR (1/3): 33%
- Twenty-three (23) contacts including 18 HCWs line listed
- Total of 51 contacts including 42 healthcare workers under 21 days follow up
- Safe and dignified burial was conducted for the deceased case
- One confirmed case in isolation under-going treatment

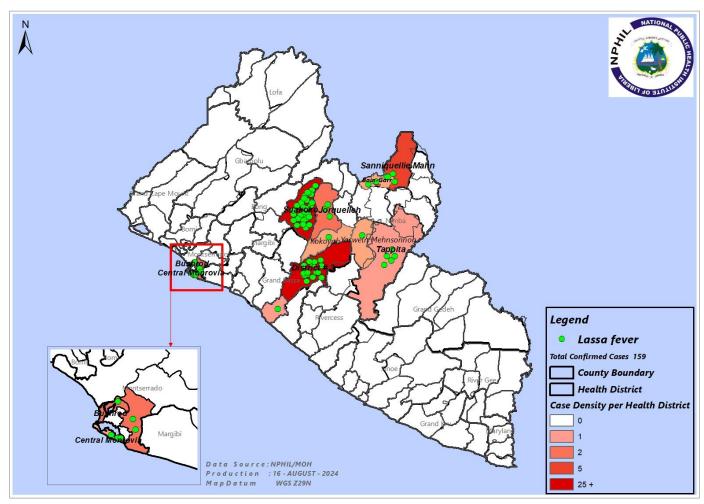


Figure 1: Distribution of Confirmed Lassa fever cases by Health District, Jan 6, 2022-Aug 16, 2024

Table 2: Summary of Lasa fever cases and samples, Liberia, Jan 6, 2022-Aug 16, 2024

	2022 & 2023	2024		
Variables	Epi wk 1-52	Epi wk 1-32	Total	
Total suspected cases reported to the national level	439	146	585	
Total samples collected	437	146	583	
Total samples tested	416	139	555	
Total samples not collected OR samples collected but not sent to NRL	20	7	27	
Total samples pending testing	0	0	0	
Total samples collected & rejected by the Laboratory	3	0	3	
Total Laboratory confirmed	138	21	159	
Total confirmed cases alive	97	16	113	
Total deaths among confirmed cases	41	5	46	
Overall case fatality rate (CFR)	30%	24%	29%	
Total confirmed cases currently in isolation	0	2	2	
Total suspected cases in isolation	0	0	0	

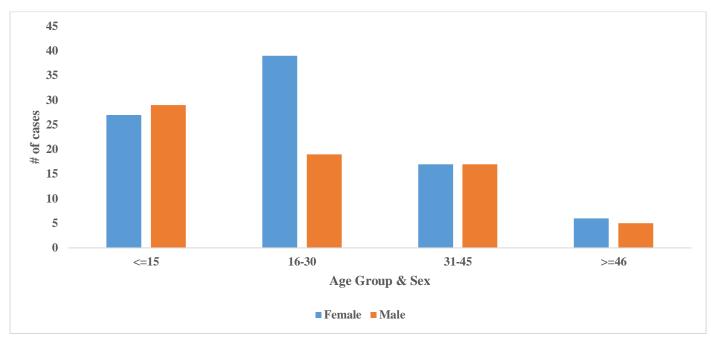


Figure 2: Distribution of confirmed Lassa fever cases by Age and Sex, Lib, Jan.2022-Aug 16, 2024

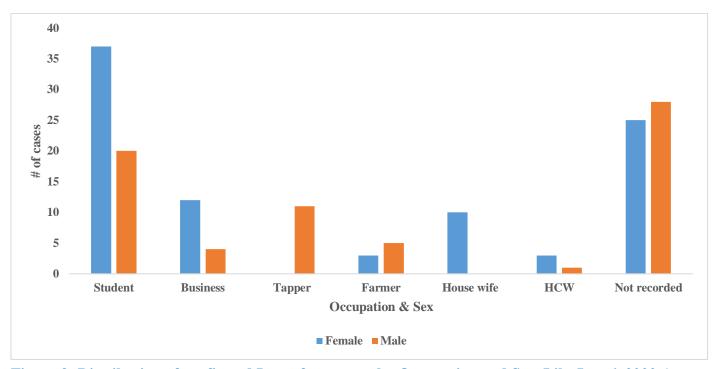


Figure 3: Distribution of confirmed Lassa fever cases by Occupation and Sex, Lib, Jan. 6, 2022-Aug 16, 2024

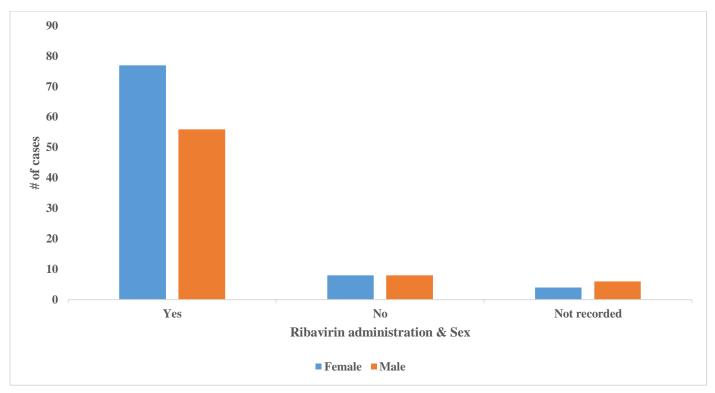


Figure 4: Confirmed Lassa fever cases by Ribavirin administration and Outcome, Liberia, Jan. 6, 2022 – Aug 16, 2024

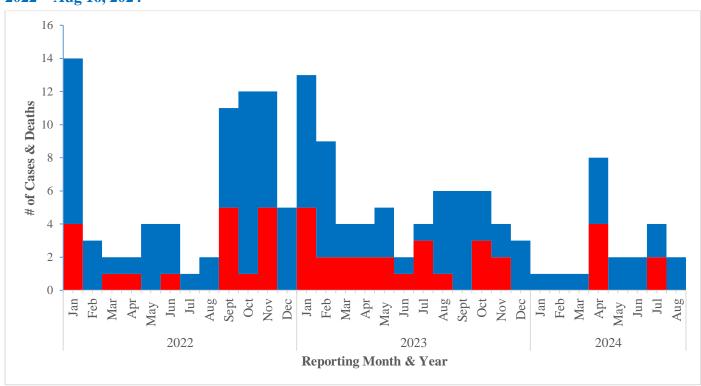


Figure 5: Epi-curve of confirmed Lassa fever cases and deaths by reporting Epi week & Year, Liberia, Jan 6, 2022-Aug 16, 2024

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
 - o The Incident Management Systems (IMSs) have been activated in the affected counties
 - o The PHEOCs in the response counties are in response mode coordinating the response

II. Surveillance

- Active case search ongoing in affected communities
- Seventy-three (73) contacts including 42 HCWs line listed and under 21 days follow-up
- Weekly sit-reps developed and disseminated to stakeholders

III. Case management and IPC

- Ribavirin distributed to all affected counties
- Cases treated with ribavirin and discharged
- Two (2) confirmed cases are currently in isolation under-going treatment

IV. Laboratory

- The National Public Health Reference Laboratory continues testing of Lassa fever samples
- A total of 159 Lassa fever cases have been confirmed since this outbreak

V. Risk Communication and Community Engagement

 Risk communication and community engagement ongoing in affected and surrounding communities

VI. Dead Body Management

• Total of 46 confirmed deaths recorded and were buried under safe and dignified condition

VII. Key Challenges

- Limited supply of IPC materials in affected counties
- 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 fo investigation
- Lack of computer for District and County Surveillance Officers (Bong & Nimba)

For comments or questions, please contact:

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