

Improved Lassa fever control in a tertiary health facility, Nigeria: The role of partnership

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Citation: Azuka Stephen Adeke et al. Improved Lassa fever control in a tertiary health facility, Nigeria: The role of partnership. Journal of Interventional Epidemiology and Public Health. 2025; 8 (Conf Proc 5): 00011.

DOI: <https://doi.org/10.37432/JIEPH-CONFPRO5-00011>

LINK: <https://afenet-journal.org/improved-lassa-fever-control-in-a-tertiary-health-facility-nigeria-the-role-of-partnership/>

Received: 10/05/25 **Accepted:** 09/07/25 **Published:** 08/08/25

Keywords: Lassa fever, Control, Healthcare workers, Partnership, Abakaliki, Nigeria

This is part of the proceedings of the ECOWAS 2nd Lassa fever International Conference in Abidjan, September 8 – 11, 2025

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Introduction

Ebonyi State is one of the high-burden states with Lassa fever in Nigeria, and has recorded high healthcare worker infection/mortality. This study was conducted to identify the role of partnership in controlling the burden of Lassa fever in the study hospital.

Methods

Data were collected through retrospective record reviews and confidential inquiries from Alex Ekwueme Federal University Teaching Hospital, Abakaliki, Nigeria. Data from records were extracted using checklist. The checklist included number of Lassa fever-infected staff, cadre, year of diagnosis, and outcome of illness. Data from inquiries were collected through oral interviews with an interview guide. There was assessment of interventions and investments made by Ebonyi State Government, Nigeria Center for Disease Control (NCDC), and Médecins Sans Frontières (MSF) in specific areas of the hospital.

Results

From 2005 to May 2025, the hospital had recorded 68 cases and 17 deaths among its workforce. Following a rise in healthcare worker

infection/mortality in 2018 (16 cases and 5 deaths), NCDC provided diagnostic and personal protective equipment. MSF improved IPC through establishment of standard triage system and flow for patients, provision of an incinerator and a system for better medical waste management for Lassa fever. MSF built a mini-morgue attached to the treatment centre to promptly isolate corpses of Lassa fever patients. Since the interventions of the NCDC and MSF began in 2018, between 2019 and May 2025, 13 cases and 4 deaths have been reported among the staff. However, MSF project ended in the hospital in 2024.

Conclusion

The study hospital has benefitted from interventions of partners in improving its IPC measures since 2018 through a reduction in morbidity/mortality from Lassa fever. This is a demonstration of the value of partnership in the control of Lassa fever. We request partners' support to improve gains achieved, especially with withdrawal of MSF support.