

Lassa fever outbreak response in Nasarawa State, Nigeria; Challenges and lessons learnt by the National Rapid Response Team

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Introduction

Lassa fever is a major public health threat, and endemic in West Africa countries. It is primarily transmitted through contact with the urine or faeces of infected multimammate rats or through contact with contaminated materials like food or household items. In Nigeria, outbreaks of the disease are typically observed during the dry season (December-April). Following a report of a confirmed case of Lassa fever in Nasarawa State on 9th January, 2025, the National Rapid Response (NRR) team was deployed to support the state to curtail the outbreak.

Methods

The National Rapid Response (NRR) team supported the outbreak response by conducting epidemiological investigation; capacity building of health workers on surveillance; de-ratization of markets; risk communication and community engagement; observational assessment of the environment as well as assessment of food safety practices among community members.

Results

The index case was a 43-year-old pregnant female who had onset of malaria-like symptoms and bleeding disorder on the 6th of January 2025 and was confirmed as a case of Lassa Fever on the 13th of January 2025 after her demise. The average age among 46 patients line listed was 33.5 ± SD 15.4 and 28 (60.9%) were males. Out of the total samples collected, 2 (4.3%) were positive and 2 (6.5%) died, with case fatality of 100%. There were knowledge gaps in surveillance among health workers and suspected cases.

Conclusion

There was about 72 hours delay in the referral of index case from a private to public health facilities. This challenge may be due poor knowledge of priority diseases among health workers in private health facilities and poor health seeking behaviour of patients. Therefore, continuous public awareness and capacity building of private health workers on enhance surveillance for Lassa fever and priority diseases should be scale up and sustained.