

SUMMARY

Performance indicators (Epi week 09):

In Epidemiological Week 09 - 2018, a total of 21 out of 21 LGAs (including 06 IDP camps) submitted their weekly reports as timeliness and completeness of reporting were 100% and 100% respectively at LGA level **(target 80% timeliness, 90% completeness).**

<u>Measles</u>: 07 cases of suspected measles reported with cumulative case count of 138 and 03 deaths
<u>AFP</u>: 05 cases of AFP reported with cumulative case count of 69.
<u>YELLOW FEVER</u>: No case of suspected YF reported and cumulative case count is 06
<u>CSM</u>: 02 cases of suspected CSM reported and cumulative case count is 09
<u>LASSA FEVER</u>: No case of suspected Lassa Fever reported and cumulative case count is 03 and 02 death

For Monthly IDSR (Feb, 2018), a total of 18 out of 21 LGAs submitted their monthly reports as timeliness and completeness of reporting were 93% and 95% respectively at LGA level (target 80% timeliness, 90% completeness).

<u>Malaria (Jan – Feb)</u>: At end of February 2018, 69279 cases of suspected malaria were reported with 26 deaths representing 1552 of reported morbidities per 100,000 population.

<u>Acute Watery Diarrhea (Jan – Feb)</u>: At end of February 2018, 1819 cases of AWD were reported with 02 deaths representing 41 of reported morbidities per 100,000 population.

<u>Acute Respiratory Infection (Jan – Feb)</u>: At end of February 2018, 1885 cases of ARI were reported with No deaths representing 42 of reported morbidities per 100,000 population.

<u>Malnutrition (Jan – Feb)</u>: At end of February 2018, 1227 cases of Malnutrition were reported representing 27 of reported morbidities per 100,000 population.

Maternal Death: February 2018, No reported maternal death from the State IDSR003.

Activities Done

- Detection and surveillance on IDSR diseases in 21 LGAs of the State through DSNOs and network of surveillance focal sites.
- 40 staffs from State Specialist Hospital were sensitized/trained on CSM and VHF. The cadre of staff sensitized were Nurses and Midwives.
- 44 LGAs DSNOs/ADSNs across 21 LGAs were trained on AFP and Other priority diseases surveillance.
- 4 suspected cases of meningitis were reported from Chakawo settlement in Guyuk ward of Guyuk LGA, 2 in WK09 and 2 in WK08. One CSF sample taken and tested positive to type Nm. C using Pastorex. The sample has been sent to Abuja lab for further culture as we await culture result.
- 16 cases of suspected pertussis reported in Mubi North (13) and Yola North (3) LGAs. Investigation carried out by the DSNOs and plans to improve RI outreach ongoing.

Planned Activities

- Continuous surveillance and case detection on IDSR diseases at LGA levels.
- Training of State team and Cluster consultants on AFP and Other priority diseases surveillance.

Challenge(s)

• Tracking IDSR surveillance HF data timeliness and completeness of reporting.



SURVEILLANCE | *Performance Indicator - Weekly*

21

Number

of LGA

21

207

Number of LGA No of recognized that report IDSR surveillance focal sites No of surveillance focal sites in IDP camps and vulnerable communities

6

Completeness of reporting by LGAs

100%

Timeliness of reporting by LGAs

100%



SURVEILLANCE | Performance Indicator - Monthly

21





Number of LGA that report IDSR

21



*596

Completeness of reporting by LGAs

95%

93% Timeliness of reporting by

LGAs

Alerts | WK 09

14 Total alerts received^{*} 100% % alerts investigated **D** # alerts requiring response ^a

- Alerts are sent from the health facilities to the LGA DSNOs through the normal reporting of health facility level IDSR data. No data on timeliness and completeness of reporting by Health facilities.
- 05 AFP cases, 07 suspected cases of measles and 2 suspected CSM making a total of 14 Alerts.

Immediately notifiable diseases | IDSR 002

Table 1

Disease	WK09	WK09, 2018		Cumulative 2018	
	# cases	# deaths	# cases	# deaths	
AFP	5	0	69	0	
Suspected Measles	7	0	138	03	
Suspected CSM	2	0	09	0	
Suspected Cholera	0	0	0	0	
Suspected VHF - Lassa Fever	0	0	03	02	
Suspected Yellow Fever	0	0	06	0	
Guinea worm	0	0	0	0	
Human Influenza	0	0	0	0	

Table 2: Case distribution by Sex per disease, 2018

Disease	*Week 09		*Cumulative 2018	
	# Males	# Females	# Males	# Females
AFP	4	1	42	27
Suspected Measles	6	1	76	62
Suspected CSM	2	0	06	03
Suspected Yellow Fever	0	0	05	0
Suspected VHF - Lassa Fever	0	0	01	02

*This may not equal the total on Table 1 as not all cases have been line-listed yet.

Diseases of Public Health Importance ¹| *IDSR 003*

¹Table 3: Disease Morbidity and Mortality Rate.

Syndrome		Cumulative January - February 2018				
	# cases	morbidity/ 100,000 pop.	# deaths	mortality/ 100,000 pop.		
Malaria (confirmed)	NA	NA	NA	NA		
Malaria (suspected)	69279	1552	26	0.58		
Acute Respiratory infection ²	1885	42	0	0.00		
Acute watery diarrhea ³	1819	41	2	0.04		
Malnutrition	1222	27	0	0		
Mental Health	0	0.0	0	0		

¹Data is only available monthly from normal IDSR 003

²Acute Respiratory infection is a summation of cases of SARI and pneumonia (<5yrs) from IDSR 003 ³Acute watery diarrhea are the cases reported as of diarrhea (with blood) in IDSR 003

WEEKLY TREND ANALYSIS, WeeK 09 2018

Mo

Trend of Epidemic prone diseases |Suspected Measles







Fig 1b. Number of Suspected Measles cases by LGA, Week 01 – 09, 2018.

Trend of Epidemic prone diseases | Suspected Cerebrospinal Meningitis

Fig 2a. Weekly trend of suspected cases of CSM, Week 01 – 09, 2018.









Fig 3a. Weekly trend of suspected cases of Yellow Fever, Week 01 – 09, 2018.



Fig 3b. Number of suspected Yellow Fever cases by LGA, Week 01 – 09, 2018.





Trend of Diseases Targeted for Elimination | AFP Cases

Fig 4a. Weekly trend of AFP Cases, Week 01 – 09, 2018.



Fig 4b. Number of AFP Cases by LGA, Week 01 – 09, 2018.



Contact Information Mi

State Epidemiologist Ministry of Health Yola, Nigeria Email: <u>giblika25@gmail.com</u> Tel: 08051009665

Babayo Jahknwa

Dr Jerry S. Pantuvo Surveillance Officer WHO State Office Yola, Nigeria Email: <u>pantuvoj@who.int</u> Tel: 08061203546

Iyobosa F. Igbinovia

State Coordinator, WHO State Office Yola, Nigeria Email: <u>igbinoviaf@who.int</u> Tel: 08035976029