LASSA FEVER PREVALENCE

Lassa fever, also known as Lassa hemorrhagic fever (LHF), is a type of viral hemorrhagic fever caused by the Lassa virus. Many of those infected by this virus do not develop symptoms. The disease spread to people via contact with the urine or faeces of an infected multimammate rat.

MODE OF TRANSMISSION.

Humans usually become infected with Lassa virus from exposure to urine or faeces of infected Mastomys rats. Lassa virus may also be spread between humans through direct contact with the blood, urine, faeces, or other body secretions of a person infected with Lassa fever.

HISTORICAL PERSPECTIVE

Lassa fever is an acute viral illness that occurs majorly in West Africa. The infection was first discovered in 1969 at a town called Lassa, Southern part of Borno state when two missionary nurses working in Lassa Mission Hospital died in Nigeria. The virus is named after the town in Nigeria where the first fatal cases occurred.

The outbreak usually occurs in January to March, a total of 121 cases have been reported so far in Nigeria in states such as Edo, Ebonyi, Taraba, Plateau, Bauchi, Ogun, Kano, Ondo, Delta and 21 deaths in Ondo, Delta and kano, the disease have propensity to spread very fast.

INCUBATION PERIOD.

The incubation period following infection is usually between 7-10 days, with a maximum of 21 days.

SIGNS AND SYMPTOMS. (Clinical manifestations)

Lassa fever occurs in all age groups, sexes and is associated with a broad spectrum of clinical manifestations. The clinical presentation is mild or asymptomatic in majority (80%) of infections.

The onset of symptomatic disease is usually gradual, starting with mild fever, weakness, and general malaise. After a few days, headache, sore throat, muscle pain, chest pain, nausea, vomiting, diarrhea, cough, and abdominal pain may occur.

In mild cases the fever subsides, and the patient usually recovers. Other symptoms include diarrhea, cough, and abdominal pain.

DIAGNOSIS

Lassa fever is most often diagnosed by using enzyme-linked immunosorbent serologic assays (ELISA), which detect IgM and IgG antibodies as well as Lassa antigen.

Reverse transcription-polymerase chain reaction (RT-PCR) can also be used in the early stage of disease.

TREATMENTS

- a. Ribavirin, is an antiviral drug that has been used with success in people affected by Lassa fever. It has shown to be most effective when it is administered early in the course of the illness.
- b. Infected patient also receive supportive care that consists of maintenance of:
- i Oxygenation
- ii Blood pressure
- iii Treatment of complicating infections
- iv Appropriate fluid and electrolyte balance

IMPLICATIONS FOR FRSC

Lassa fever is prevalence in states where our patrol men and women operates.

FRSC operatives is involve in Rescue activities and therefore **UNIVERSAL** precautionary measures must be observed when carrying out rescue services.

PREVENTION AND CONTROL.

- a. Store foodstuffs in rodent proof containers
- b. The transmission of the Lassa virus from rodent to humans can be prevented by avoiding contact with Mastomys rodents.
- c. Wearing protective clothing, such as Masks, gloves, gowns, and Glasses.
- d. And as soon as you suspect Lassa fever, or you have persistent fever not responding to the normal/common treatment for malaria and typhoid, report to the nearest Health facility.

THIS PUBLICATION IS FROM THE MEDICAL UNIT OF CMRS.