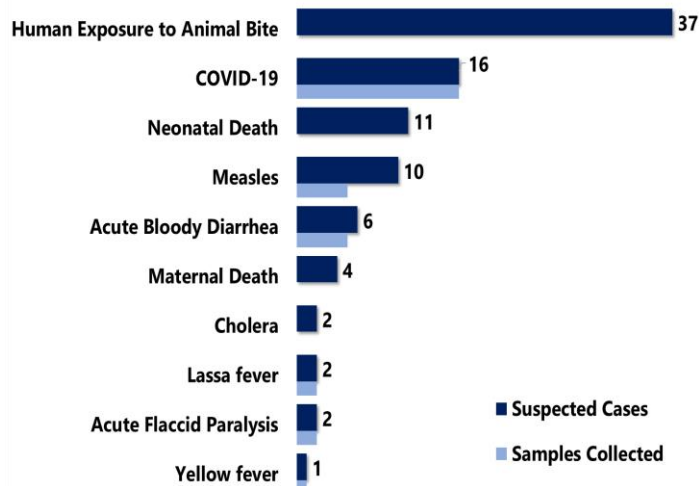


## Highlights

### Figure 1: Public Health Events Reported during this week



### Keynotes and Events of Public Health Significance

- ♦ **A total of 91** events of public health importance including **16** deaths were reported
- ♦ **Completeness and timeliness** of health facility reports were both **100%** and **99%**
- ♦ **Ongoing Lassa fever outbreak** in Grand Bassa and Bong Counties
- ♦ **Sixteen** new COVID-19 cases recorded from Montserrado, Margibi, and Grand Cape Mount Counties

## Reporting Coverage

Table 1: Health Facility Weekly DSR Reporting Coverage, Liberia, Epi week 5, 2021

County	Expected Report from Health Facility	Reports Received	Received on Time	Completeness (%)	Timeliness (%)
Bomi	26	26	26	100	100
Bong	57	42	42	73	73
Gbarpolu	16	15	14	94	88
Grand Bassa	36	36	36	100	100
Grand Cape Mount	34	34	34	100	100
Grand Gedeh	24	24	24	100	100
Grand Kru	19	19	19	100	100
Lofa	61	61	61	100	100
Margibi	55	55	55	100	100
Maryland	27	27	27	100	100
Montserrado	365	365	365	100	100
Nimba	91	91	91	100	100
Rivercess	20	20	20	100	100
River Gee	20	20	20	100	100
Sinoe	37	37	37	100	100
<b>Liberia</b>	<b>888</b>	<b>872</b>	<b>871</b>	<b>98</b>	<b>98</b>

872(98%)  
Health facilities reported IDSR data

86 (93%)  
Health districts reported IDSR data

871(98%)  
Health facilities reported timely IDSR data

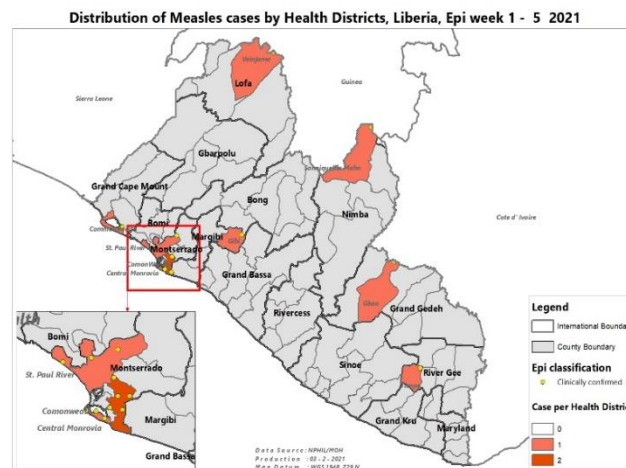
- ♦ The national target for weekly IDSR reporting is 80%. Health facility timeliness is monitored at health district level
- ♦ Rivercess County submitted weekly IDSR report late to the national level

Legend: ≥80 <80

## Vaccine Preventable Diseases

### Measles

- ✍ Ten (10) suspected cases were reported from Grand Gedeh (3), Nimba (2), Lofa (1), River Gee (1), Grand Cape Mount (1), Sinoe (1), and Montserrado (1) Counties
  - Five (5) specimens collected and pending testing
- ✍ Vaccination status among suspected cases
  - Vaccinated 6 (60%)
  - Unknown 4 (40%)
- ✍ Age distribution among suspected cases
  - ≥5 years: 4 (40%)
  - <5 years: 6 (60%)
- ✍ Cumulatively, since Epi week one, twenty-four (24) suspected cases have been reported
- ✍ Epi-classification is as follows: twenty confirmed (20 clinically confirmed, 0 epi-linked, 0 lab confirmed), and 4 discarded (negative)



### Acute Flaccid Paralysis

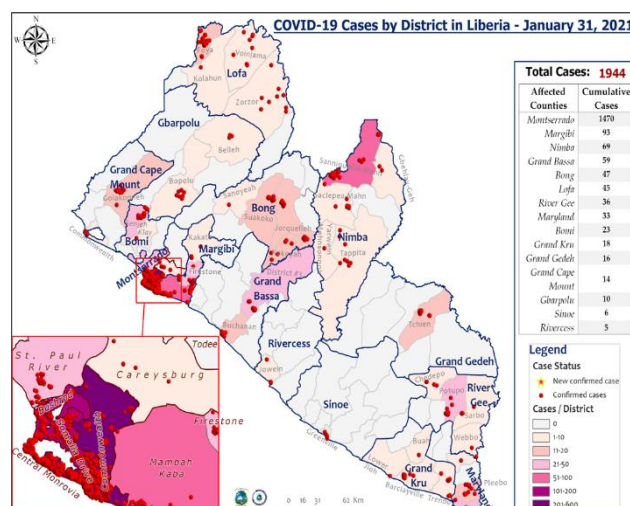
- ✍ Two (2) cases were reported from Nimba and Montserrado Counties
- ✍ Specimens were collected, shipped and pending testing
- ✍ Cumulatively, since Epi week one, six (6) cases have been reported

## Influenza-Like Illnesses

### Coronavirus Disease (COVID-19)

#### Outbreak

- ✍ Sixteen (16) new confirmed cases were reported from Montserrado (14), Margibi (1), and Grand Cape Mount (1) Counties with female accounting for 69%
- ✍ Since Epi week one, a total of one hundred thirty-three (133) confirmed cases have been reported
- ✍ Cumulatively, one thousand nine hundred forty-four (1,944) confirmed cases recorded including 84 deaths



### Public Health Actions

- ✍ Daily IMS coordination meeting on-going
- ✍ Surveillance activities including active case search, contact tracing and case investigation on-going in affected counties using WHO interim guidelines
- ✍ Reinforcing hand washing in all public areas (markets, health facilities, public offices, checkpoints etc.)
- ✍ Case management ongoing for confirmed cases
- ✍ Compulsory testing among outgoing and incoming travelers ongoing

## Viral Hemorrhagic Diseases

### Lassa fever

- ✍ Two (2) suspected cases were reported from Bong (dead) and Nimba Counties
- ✍ Specimens were collected and pending testing
- ✍ Cumulatively, since Epi week one, nine (9) suspected cases have been reported including two (2) deaths

👉 Epi-classification is as follows: two (2) confirmed and five (5) not a case with two (2) pending laboratory testing

- Proportion of suspected cases with sample collected 100% (9/9)
- Proportion of suspected cases with sample tested 80% (7/9)
- Laboratory confirmed: 22% (2/9)

## Outbreak

### Suakoko District, Bong County

- No new confirmed case reported
- The case, a 39-year old male and resident of Phebe Airstrip had symptom onset of illness on January 10, 2021. Case visited the Phebe Hospital on January 11 2021 and was admitted, specimen collected and sent to the NPHRL on January 11, 2021. The case expired on January 12, 2021 and safe burial was conducted. On January 17., 2021, the case was tested positive for Lassa virus. 21 contacts including 18 health workers were identified and line-listed
- Outbreak began Jan 17, 2021
- A total of one (1) confirmed case recorded

### Public Health Actions

- Daily contact follow-up ongoing
- Continue to conduct community engagement on the prevention of Lassa fever and rodents control measure

### District #3A&B, Grand Bassa County

- No new confirmed case reported
- The recent case, a 25-year old female and resident of Biabia Camp, LAC Plantation had symptom onset of illness on December 12, 2020 and admitted at the LAC Hospital on December 24, 2020 for malaria Based on the high index of suspicion for Lassa fever, the case was isolated, specimen collected and sent to the National Public Health Reference Laboratory (NPHRL) on December. 25, 2020. The case expired on December 27, 2020 at about 7:00 am and

buried the same day under the supervision of the District Health Team. On December 29, 2020, the case was tested positive for Lassa virus. Six contacts were identified and line-listed including 4 high risks (1 health care worker)

- Outbreak began October 17, 2020
- A total of four (4) confirmed cases recorded with female accounting for 75%
  - Case fatality rate recorded is 75% (3/4)
- Twenty-nine contacts generated including 15 healthcare workers and 14 community members
- All contacts completed follow up

### Public Health Actions

- Continue to conduct community engagement on the prevention of Lassa fever and rodents control measure

Geographical Distribution of confirmed Lassa fever cases, Liberia Epi week 1 - 5, 2021



## Yellow fever

- 👉 One (1) suspected case was reported from Grand Cape Mount County
- 👉 Specimen was collected and pending laboratory testing
- 👉 Cumulatively since Epi week one, six (6) suspected cases have been reported with 3 negative and 2 pending
  - Proportion of suspected case with sample collected 83% (5/6)
  - Proportion of suspected case with sample tested 50% (3/6)

## Diarrheal Diseases

### Acute Bloody Diarrhea (Suspected Shigellosis)

- 👉 Six (6) cases were reported from Grand Gedeh (5) and Lofa (1) Counties
  - Five (5) specimens were collected and pending laboratory testing
- 👉 Cumulatively, since Epi week one, thirty-four (34) suspected shigellosis cases have been reported with 19 specimens collected, 3 tested negative and sixteen (16) pending laboratory testing

## Severe Acute Watery Diarrhea (Suspected Cholera)

- 👉 Two (2) suspected cases were reported from Grand Kru and Rivercess Counties
  - No specimen collected
- 👉 Cumulatively, since Epi week one, thirteen (13) suspected cholera cases have been reported

## Other Reportable Diseases

### Animal Bites (Human Exposure to Rabies)

- 👉 Thirty-seven (37) animal bite cases were reported from: Montserrado (12), Nimba (8) River Gee (3), Grand Gedeh (2) Maryland (2), Grand Bassa (2), Grand Kru (2), Rivercess (2), Lofa (1), Margibi (1), Bong (1), and Sinoe (1) Counties
  - No prophylaxes were administered at health facility
- 👉 Cumulatively, since Epi week one, one hundred and fifty-five (155) animal bite cases have been reported

## Meningitis

- 👉 Zero (0) suspected cases reported
- 👉 Cumulatively, since Epi week one, two (2) suspected cases have been reported

## Events of Public Health Importance

### Maternal Mortality

- 👉 Four (4) deaths were reported from Montserrado, Grand Gedeh, Margibi and Nimba Counties
- 👉 Causes of deaths: postpartum hemorrhage (2), obstructed labor, and eclampsia
- 👉 Reporting sites: Health facility 4 (100%)
- 👉 Cumulatively, since Epi week one, twenty (20) deaths have been reported

### Neonatal Mortality

- 👉 Eleven (11) deaths were reported from Sinoe (3), Margibi (1), Bong (1), Gbarpolu (1), Grand Kru (1), Bomi (1), Nimba (1), Rivercess (1), and Montserrado (1) Counties
- 👉 Causes of deaths: birth asphyxia (5), sepsis (3), and preterm (1)
- 👉 Reporting sites: Health facility 11 (100%)
- 👉 Cumulatively, since Epi week one, forty-two (42) deaths have been reported

## Unexplained Death

- 👉 Zero (0) deaths were reported
- 👉 Cumulatively, since Epi week one, one (1) death has been reported

## Cross Border Surveillance Update

- 👉 A total of 3519 travelers recorded for the week with incoming travelers accounting for 42.0% and outgoing travelers 58.0%
- 👉 None of the travelers were reactive for COVID-19
- 👉 The airport accounted for the highest number of travelers for the week

**Table 2: Cross border activity at the PoE for Incoming and Outgoing Travelers, Liberia, Epi week 5, 2021**

Type of PoE	Point of Entry	Weekly total	Arrival	Departure	Yellow Book Issued	Yellow Book Damaged	Card Replaced	Travelers Vaccinated	Alerts Verified	COVID-19 Reactive
Airport	James S. Paynes	59	11	48	0	0	0	0	0	0
	Robert International Airport	1979	775	1204	0	0	0	0	0	0
Seaport	Freeport of Monrovia	244	122	122	0	0	0	0	0	0
	Buchanan Port	122	61	61	0	0	0	0	0	0
Land Crossing	Bo Water Side	1115	510	605	0	0	0	0	0	0
Total travelers		3,519	1,479	2,040	0	0	0	0	0	0

## Public Health Measures

### National level

- ✎ Providing technical, logistical and financial support to counties
  - Heighten surveillance in affected and surrounding communities
- ✎ Publishing situational reports to inform stakeholders

### County level

- ✎ Publication of situational reports to inform stakeholders
- ✎ Active case search ongoing in affected and surrounding communities
- ✎ Contact tracing, health education, and community engagement ongoing in affected communities
- ✎ Case management ongoing for isolated cases

## Appendix

### Summary of Immediately Reportable Diseases, Conditions, and Events by County

Counties			Bomi	Bong	Gbarpolu	Grand Bassa	Grand Cape Mount	Grand Gedeh	Grand Kru	Lofa	Margibi	Maryland	Montserrado	Nimba	Rivercess	River Gee	Sinoe	Total Weekly	Cumulative Reported	Cumulative Lab-confirmed
No. of Expected Health District			4	9	5	8	5	6	5	6	4	6	7	6	6	6	10	93		
No. of Health District Reported			4	8	5	8	5	6	5	5	4	6	7	6	6	6	10	91		
Vaccine Preventable Diseases	Acute Flaccid Paralysis (Suspected Polio)	A	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	2	6	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Measles	A	0	0	0	0	1	3	0	1	0	0	1	2	0	1	1	10	24	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Neonatal Tetanus	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Yellow fever	A	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	1	6	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Viral Hemorrhagic Fever	Dengue fever	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Ebola Virus Disease	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Lassa fever	A	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	6	0
		D	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	1	3	2
Influenza-Like Illnesses	COVID-19	A	0	0	0	0	1	0	0	0	1	0	14	0	0	0	0	16	133	133
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Diarrheal Diseases	Acute Bloody Diarrhoea (Shigellosis)	A	0	0	0	0	0	5	0	1	0	0	0	0	0	0	0	6	34	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Severe Acute Watery Diarrhoea (Cholera)	A	0	0	0	0	0	0	1	0	0	0	0	0	1	0	0	2	13	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Events of Public Health Importance	Maternal Mortality	D	0	0	0	0	0	1	0	0	1	0	1	1	0	0	0	4	20	
	Neonatal Mortality	D	1	1	1	0	0	0	1	0	1	0	1	1	1	0	3	11	42	
	Adverse Events Following Immunization (AEFI)	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Unexplained Cluster of Health Events/Disease	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Other Reportable Diseases	Monkeypox	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Tuberculosis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Human Exposure to Animal bites (Suspected Rabies)	A	0	0	1	2	0	2	2	1	1	2	12	8	2	3	1	37	155	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Meningitis	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Unexplained Cluster of deaths	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Neglected Tropical Diseases	Buruli Ulcer	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	Yaws	A	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
		D	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
TOTAL			1	2	2	2	3	11	4	3	4	2	30	14	4	4	5	91	443	135

D = Dead A = Alive



## Notes

- 👉 **Completeness** refers to the proportion of expected weekly IDSR reports received (target:  $\geq 80\%$ )
- 👉 **Timeliness** refers to the proportion of expected weekly IDSR reports received by the next level on time (target:  $\geq 80\%$ ). Time requirement for weekly IDSR reports:
  - Health facility - required on or before 5:00pm every Saturday to the district level
  - Health district - required on or before 5:00pm every Sunday to the county level
  - County - required on or before 5:00pm every Monday to the national level
- 👉 **Non-polio AFP rate** is the proportion of non-polio AFP cases per 100,000 among the estimated population under 15 years of age in 2017 (annual target:  $\geq 2/100,000$ )
- 👉 **Non-measles febrile rash illness rate** refers to the proportion of Negative measles cases per 100,000 population
- 👉 **Annualized maternal mortality rate** refers to the maternal mortality rate of a given period less than one year and it is the number of maternal deaths per 100,000 live births
- 👉 **Annualized neonatal mortality rate** refers to the neonatal mortality ratio of a given period less than one year and it is the number of neonatal deaths per 1,000 live births
- 👉 **Epi-linked** refers to any suspected case that has not had a specimen taken for serologic confirmation but is linked to a laboratory confirmed case
- 👉 **Confirmed case** refers to a case whose specimen has tested positive or reactive upon laboratory testing, or has been classified as confirmed by either epidemiologic linkage with a confirmed case, or clinical compatibility with the disease or condition

## National Public Health Institute of Liberia (NPHIL)

### MISSION

To prevent and control public health threats by promoting healthy outcomes and serving as a source of knowledge

### VISION

A center of excellence to create health outcomes for Liberians through a strong preventive health system and expertise

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#### Data sources

Data and information is provided by the fifteen County Surveillance Officers and National Public Health Reference Laboratory via regular weekly reports, telephone calls and email exchanges. Situations are evolving and dynamic therefore numbers stated are subject to change.