
A Comprehensive Study on Lassa Fever

Suman O

Assistant professor, Department of Forensic Science,
School of Sciences, B-II, Jain (Deemed to be University), Bangalore-560027, India.
Email Id: o.suman@jainuniversity.ac.in

Abstract

Lassa fever is an acute viral hemorrhagic disease found in West Africa that lasts for 2-21 days. There are signs that usually include fever, fatigue, vomiting, headaches, and body pain. Bleeding from the mouth or the gastrointestinal tract can occur less frequently. The risk of death if infected is about one percent and happens frequently within two weeks of symptom onset. The Lassa virus is spread to humans by contact with food or household products that are infected with urine or faeces from rodents. There may also be person-to-person infections and laboratory transmission, especially in hospitals that lack sufficient prevention and control measures for infection. In Benin, Ghana, Guinea, Liberia, Mali, Sierra Leone, and Nigeria, Lassa fever is considered to be endemic, but potentially still occurs in other West African nations. The average rate of case-fatality is 1% . The case-fatality rate observed amongst patients hospitalised with serious cases of Lassa fever is 15% . Survival is improved by early compassionate care with rehydration and symptomatic medication.

Keywords: Lassa, Fever, Health, Infected, Virus.

I. INTRODUCTION

Lassa fever is likewise referred to as Lassa hemorrhagic fever (LHF), is a sort of viral hemorrhagic fever as a result of the Lassa virus. Many of the ones inflamed by means of the virus do not develop symptoms. While signs and symptoms arise they normally include fever, weakness, complications, vomiting, and muscle pains. Less normally there can be bleeding from the mouth or gastrointestinal tract. The threat of death once infected is ready one percent and frequently takes place inside two weeks of the onset of signs. Among individuals who live to tell the tale approximately a quarter have listening to loss, which improves inside three months in approximately half of those instances. The sickness is normally to begin with unfold to people through contact with the urine or feces of an infected multi mammary mouse. Spread can then occur thru direct touch between human beings. Diagnosis primarily based on symptoms is hard. Affirmation is by using laboratory checking out to stumble on the virus's RNA, antibodies for the virus, or the virus itself in cellular tradition. Different situations which could gift further include Ebola, malaria, typhoid fever, and yellow fever.

The Lassa virus is a member of the Arenaviridae own family of viruses. There is no vaccine. Prevention requires keeping apart people who are infected and lowering contact with the mice. Different efforts to govern the unfold of sickness encompass having a cat to seek vermin, and storing food in sealed boxes. Remedy is directed at addressing dehydration and improving symptoms. The antiviral medication ribavirin has been advocated, but proof to support its use is susceptible. Descriptions of the sickness date from the 1950s. The virus was first defined in 1969 from a case inside the city of Lassa, in Borno kingdom, Nigeria. Lassa fever is exceptionally commonplace in West Africa together with the nations of Nigeria, Liberia, Sierra Leone, Guinea, and Ghana. There are approximately 300,000 to 500,000 instances which result in 5,000 deaths per year[1][2][3].

A. **Transmission:** -

Human beings typically turn out to be infected with Lassa virus from publicity to urine or faeces of infected Mastomys rats. Lassa virus will also be unfold between humans via direct contact with the blood, urine, faeces, or other bodily secretions of someone infected with Lassa fever. There is no epidemiological proof helping airborne spread among human beings. Person-to-person transmission happens in both community and health-care settings, in which the virus can be unfold by way of contaminated medical equipment, together with re-used needles. Sexual transmission of Lassa virus has been stated. Lassa fever occurs in all age organizations and each sex. Folks at greatest threat are the ones dwelling in rural areas in which Mastomys are typically found, especially in communities with terrible sanitation or crowded residing situations. Health workers are at risk if caring for Lassa fever sufferers in the absence of right barrier nursing and infection prevention and control practices[4].

B. **Sign and symptoms:** -

1. Onset of symptoms is typically 7 to 21 days after publicity. In 80% of folks who are infected little or no signs arise. Those slight signs may additionally include fever, tiredness, weak point, and headache.
2. Protein may be stated within the urine. Surprise, seizures, tremor, disorientation, and coma may be visible within the later ranges. Deafness takes place in 25% of patients who survive the disease. In 1/2 of those cases, hearing returns
3. Partly after 1–3 months. Temporary hair loss and gait disturbance can also arise during recuperation.
4. In 20% of people more excessive signs and symptoms along with bleeding gums, breathing problems, vomiting, chest ache, or dangerously low blood stress may arise. Long term headaches may additionally include listening to loss. In people who are pregnant, miscarriage may also occur in 95%. In cases in which dying happens, this typically occurs inside 14 days of onset.
5. Approximately 1% of all Lassa virus infections result in loss of life. Approximately 15%-20% of those who've required hospitalization for Lassa fever die. The hazard of dying is greater in folks that are pregnant. A "Swollen infant syndrome" may also

occur in newborns, babies and babies with pitting edema, abdominal distension and bleeding.

In round 1 percentage of all cases, Lassa fever is deadly, and round 15 to twenty percentage of all hospitalizations for the disease will lead to dying. Demise can occur within 2 weeks after the onset of signs and symptoms because of multiple organ failure. One of the maximum common headaches of Lassa fever is listening to loss, which takes place in round 1 in 3 infections. This listening to loss varies in diploma and isn't always necessarily associated with the severity of the symptoms. Deafness as a result of Lassa fever can be permanent and overall. It's far specially risky for ladies within the third trimester of pregnancy. Spontaneous loss of pregnancy takes place in around 95 percentage of pregnancies[5].

C. **Diagnosis:** -

Lassa fever is most often diagnosed with the aid of using enzyme-linked immunosorbent serologic assays (ELISA), which detect IgM and IgG antibodies as well as Lassa antigen. Reverse transcription-polymerase chain response (RT-PCR) may be used inside the early level of disorder. The virus itself may be cultured in 7 to ten days, but this technique should best be accomplished in a high containment laboratory with suitable laboratory practices. Immunohistochemistry, executed on formalin-fixed tissue specimens, may be used to make a post-mortem analysis[5][6].

D. **Treatment:** -

Remedy is directed at addressing dehydration and enhancing signs. All men and women suspected of Lassa fever infection must be admitted to isolation centers and their body fluids and excreta nicely disposed of.

1. Medications: -The antiviral medicine ribavirin has been encouraged, but evidence to help its use is vulnerable. A few evidence has found that it can worsen results in sure cases. Fluid replacement, blood transfusions, and remedy for low blood pressure may be required. Intravenous interferon therapy has also been used.
2. Pregnancy: - whilst Lassa fever infects pregnant women late in their 0.33 trimester, inducing shipping is essential for the mother to have an awesome threat of survival. That is because the virus has an affinity for the placenta and other especially vascular tissues. The fetus has handiest a one in ten threat of survival no matter what course of action is taken; therefore, the focal point is continually on saving the life of the mother. Following delivery, women should obtain the same treatment as different people with Lassa fever[7].

E. **Prevention:** -

1. Prevention of Lassa fever is predicated on promoting good “network hygiene” to discourage rodents from coming into houses. Powerful measures encompass storing grain and other foodstuffs in rodent-evidence bins, eliminating rubbish a ways from the home, retaining easy households and maintaining cats. Due to the fact Mastomys are so plentiful in endemic areas, it isn't always feasible to absolutely do away with them from the surroundings. Own family individuals need to usually be careful to

keep away from touch with blood and frame fluids whilst being concerned for unwell individuals.

2. Control of the Mastomys rodent populace is impractical, so measures consciousness on retaining rodents out of houses and food substances, encouraging effective personal hygiene, storing grain and other foodstuffs in rodent-evidence bins, and casting off garbage a ways from the home to assist preserve smooth households[8].
3. Gloves, masks, laboratory coats, and goggles are advised at the same time as in contact with an infected individual, to avoid touch with blood and body fluids. These problems in many countries are monitored by a branch of public fitness. In much less advanced international locations, those sorts of groups may not have the necessary manner to correctly manage outbreaks.
4. Vaccine: -there's no vaccine for humans as of 2019. Researchers at the USA military scientific research Institute of Infectious sicknesses facility had a promising vaccine candidate in 2002. They have advanced a replication-equipped vaccine towards Lassa virus based totally on recombinant vesicular stomatitis virus vectors expressing the Lassa virus glycoprotein. After a unmarried intramuscular injection, take a look at primates have survived lethal project, while displaying no clinical signs[3][9].

F. **Prognosis: -**

1. About 15–20% of hospitalized people with Lassa fever will die from the contamination. The general case fatality charge is expected to be 1%, however throughout epidemics, mortality can climb as high as 50%. The mortality price is more than eighty% when it occurs in pregnant women during their 1/3 trimester; fetal loss of life also takes place in nearly all the ones instances. Abortion decreases the hazard of dying to the mom. A few survivors revel in lasting outcomes of the sickness, and can encompass partial or whole deafness[10].
2. Due to remedy with ribavirin, fatality rates have declined.

II. CONCLUSION

It is clear from this summary that Lassa fever is a very serious vector-borne disease that has attained an epidemiological proportion in West Africa, where elevated endemicity is reported. It is difficult to overstate the public health ramifications of this. The exponential rise in inter-border traffic and international travel, in addition to potential periodic outbreaks of the Lassa fever epidemic within the region, increases the chances of introducing the virus to other regions within and outside the African continent. The lack of available health care system services and the political uncertainty that characterises Western African countries will continue to hamper attempts in the region to combat both emerging and currently debilitating infectious diseases. However, proper training of health care professionals and other public health staff, as well as the establishment of well-equipped labs and testing centres for infectious diseases, will help to promptly detect and manage highly infectious diseases such as Lassa fever and help deter future outbreaks. Ribavirin should also be made available in

hospitals and health centres in endemic areas, especially in rural areas. This will allow the disease to be regulated.

III. REFERENCES

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