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[The genus *Parechovirus* is one of the 9 genera comprising the family *Picomaviridae*, and includes 2 species, *Human parechovirus* and *Ljungan virus*. According to Virus Taxonomy (The Eighth Report of the International Committee on Taxonomy of Viruses), the human parechoviruses replicate in the respiratory and gastrointestinal tracts. Infection is particularly prevalent in young children but is probably mostly asymptomatic. In addition to respiratory infections and diarrhea, infections of the central nervous system have been reported occasionally. The cytopathology may be unusual in including changes in granularity and chromatin distribution in the nucleus when viewed by the electron microscope. Isolates of Ljungan virus appear to infect predominantly rodents. The predicted protein sequences of parechoviruses are highly divergent, with no protein having a greater than 30 percent level of identity compared with corresponding proteins of any other member of the family *Picomaviridae*. The American and Swedish isolates of Ljungan virus show some divergence.

\*\*\*\*Professor Niklasson has indicated that he is seeking collaborators to pursue these observations in greater depth. Anyone with an interest or involvement in the field should contact Professor Niklasson directly.\*\*\*\*  
- Mod.CP]

[see also:  
2008

Cardioviruses, human (02): global presence [20080911.2845](#)  
Cardioviruses, human: 1st report [20080910.2824](#)  
1998

Myocarditis, rodent vector - Sweden [19980720.1371](#)

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## 医薬品 研究報告 調査報告書

識別番号・報告回数		報告日	第一報入手日 2009. 2. 18	新医薬品等の区分 該当なし	総合機構処理欄
一般的名称	乾燥濃縮人血液凝固第Ⅷ因子	研究報告の公表状況	ProMED 20090218.0669, 2009 Feb 18. 情報源: AllAfrica, This Day report, 2009 Feb 16.	公表国	
販売名(企業名)	クロスエイトM250(日本赤十字社) クロスエイトM500(日本赤十字社) クロスエイトM1000(日本赤十字社)			ナイジェリア	
研究報告の概要	<p>○ナイジェリア: ラッサ熱- 専門家が拡大に対する懸念を表明 Irrua の専門病院院長は、最近のラッサ熱の広範囲の感染拡大を懸念しており、2008年1月から12月にかけて、229人の感染疑い患者が報告され、30人が死亡していることを明らかにした。 2009年2月14～15日のNational Lassa Fever Stakeholders Forum(全国ラッサ熱関係者フォーラム)において、2008年12月～2009年1月に感染の疑いのある患者および感染確定患者が、それぞれ60%、80%急増したことが報告された。 しかし、Irruaの専門病院は、ドイツ・ハンブルグのBehard-Notch熱帯疾患協会、米国ハーバード大学の協力を得て、ラッサ熱に対する対策が実施されていることも明らかにした。</p>				使用上の注意記載状況・ その他参考事項等
					<p>クロスエイトM250 クロスエイトM500 クロスエイトM1000</p> <p>血液を原料とすること由来する感染症伝播等 vCJD等の伝播のリスク</p>
報告企業の意見		今後の対応			
<p>ナイジェリアでは、2008年1月から12月にかけて、229人のラッサ熱感染疑い患者が報告され、30人が死亡している。また、2008年12月～2009年1月に感染の疑いのある患者および感染確定患者は、それぞれ60%、80%急増したとの報告である。 ラッサウイルスはアレナウイルス群に属する、脂質膜を持つ比較的大型のRNAウイルスである。これまで、本剤によるラッサウイルス感染の報告はない。本剤の製造工程には、平成11年8月30日付医薬発第1047号に沿ったウイルス・プロセスバリデーションによって検証された2つの異なるウイルス除去・不活化工程が含まれていることから、本剤の安全性は確保されていると考える。</p>		<p>本剤の安全性は確保されていると考えるが、念のため今後も情報収集に努める。なお、日本赤十字社では帰国(入国)後4週間は献血不適とし、輸入感染症の防止に努めている。</p>			

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## Nigeria: Lassa Fever - Specialist Expresses Concern Over Spread

Adibe Emenyonu

16 February 2009

— The Chief Medical Director of Irrua Specialist Hospital, Prof George Akpede, has expressed concern over the wide spread of Lassa fever in recent times, disclosing that out of 229 suspected cases reported between January and December 2008, 30 people died.

Prof Akpede, who spoke at National Lassa Fever Stakeholders Forum at Ekpoma, weekend noted that there had been a marked rise in the number of suspected and confirmed cases between December 2008 and January 2009 representing about 60 percent and 80 percent increases respectively.

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, however, disclosed that some drastic measures were under way as the Irrua Specialist Teaching Hospital had entered into partnerships with Behard-Notch Institutue of Tropical Medicine, Hamburg, Germany and Harvard University, USA for collaboartion in lassa fever research and control efforts.

Part of of the collaboration according to him had resulted in the donation of diagnostic facilities for the confirmation of the disease in the hospital without samples being nedded to be sent out of the country any longer.

In his contribution, member representing Esan Central/Esan West/Igueben Federal Constituency in the House of Representatives, Mr. Patrick Ikhariale, also expressed concern over the spread of the lassa fever epidemic nation-wide and called for urgent control measures at the national level.

Ikhariale assured that he would draw the attention of the National Assembly to the menace posed by the disease to millions of Nigerians.

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Subject PRO/AH/EDR> Lassa fever - Nigeria

LASSA FEVER -- NIGERIA

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A ProMED-mail post

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<http://www.isid.org>

Date: Mon 16 Feb 2009

Source: AllAfrica, This Day report [edited]

<http://allafrica.com/stories/200902160188.html>

Nigeria: Lassa fever -- specialist expresses concern over spread

The chief medical director of Irrua Specialist Hospital, Prof George Akpede, has expressed concern over the wide spread of Lassa fever in recent times, disclosing that out of 229 suspected cases reported between January and December 2008, 30 people died.

Prof Akpede, who spoke at National Lassa Fever Stakeholders Forum at Ekpoma [at the] weekend [14-15 Feb 2009] noted that there had been a marked rise in the number of suspected and confirmed cases between December 2008 and January 2009 representing about 60 percent and 80 percent increases respectively. He, however, disclosed that some drastic measures were under way as the Irrua Specialist Teaching Hospital had entered into partnerships with Behard-Notch Institute of Tropical Medicine, Hamburg, Germany, and Harvard University, USA for collaboration in Lassa fever research and control efforts. Part of the collaboration, according to him, had resulted in the donation of diagnostic facilities for the confirmation of the disease in the hospital without samples having to be sent out of the country any longer.

In his contribution, [the] member representing Esan Central/Esan West/Igueben Federal Constituency in the House of Representatives, Mr. Patrick Ikhariale, also expressed concern over the spread of the Lassa fever epidemic nation-wide and called for urgent control measures at the national level. Ikhariale assured that he would draw the attention of the National Assembly to the menace posed by the disease to millions of Nigerians.

[Byline: Adibe Emenyonu]

Communicated by:

ProMED-mail Rapporteur A-Lan Banks

[Lassa fever is a zoonotic disease, whereby humans become infected from contact with infected animals. The animal reservoirs of Lassa virus are rodents of the genus *Mastomys*, the "multimammate rat." Lassa virus-infected animals do not become ill, but they can shed the virus in their urine and faeces. (A photograph of a multimammate rat can be accessed at

<http://i127.photobucket.com/albums/pl45/hawthornrats/other%20pets/multis/>

In humans Lassa viral haemorrhagic fever is an acute illness of 1-4 weeks duration that occurs in West Africa. The virus is a single-stranded RNA virus belonging to the virus family *Arenaviridae*. Lassa fever is known to be endemic in Guinea (Conakry), Liberia, Sierra Leone, and parts of Nigeria, but probably exists in other West African countries as well.

About 80 percent of human infections are asymptomatic; the remaining cases have severe multi-system disease, where the virus affects several organs in the body, such as the liver, spleen, and kidneys. The incubation period of Lassa fever ranges from 6-21 days. It has been estimated that about 300 000 to 500 000 cases of Lassa fever and 5000 deaths occur yearly across West Africa. The overall case-fatality rate is 1 percent, and up to 15 percent among hospitalized patients.

The disease is especially severe late in pregnancy, with maternal death and/or fetal loss occurring in greater than 80 percent of cases during the 3rd trimester.

Humans usually become infected with Lassa virus from exposure to excreta of infected Mastomys. Lassa virus may also be spread between humans through direct contact with the blood, urine, faeces, or other bodily secretions of a person with Lassa fever. There is no epidemiological evidence supporting airborne spread between humans. Person-to-person transmission occurs in both community and health care settings, where the virus may be spread by contaminated medical equipment, such as re-used needles.

The current increase in cases of Lassa fever in some parts of Nigeria may be a consequence of increased abundance of the vector or some other factor resulting in increased contact between humans and rodents promoting the spread of the disease in the human population. - Mod.

The HealthMap/PromED-mail interactive map of Nigeria is available at <http://healthmap.org/promed/en?v=9.6,6.1,6>. - CopyEd.MJ]

[see also:

Lassa fever - UK ex Nigeria (03): fatal [20090130.0414](#)

Lassa fever - UK ex Nigeria (02) [20090124.0308](#)

Lassa fever - UK ex Nigeria [20090123.0296](#)

2008

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Lassa fever - Nigeria (02) [20080611.1847](#)

Lassa fever - Nigeria: (Ebonyi) [20080323.1100](#)

2007

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Lassa fever - Nigeria [20071205.3925](#)

Lassa Fever - South Africa ex Nigeria [20070222.0657](#)

2005

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Lassa fever - Nigeria (Edo) [20050303.0654](#)

2004

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Lassa fever - Nigeria (Edo) [20040214.0487](#)

Lassa fever - Nigeria: RFI [20040213.0482](#)

2001

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Lassa fever, suspected - Nigeria (Edo) (02) [20010319.0552](#)

Lassa fever, suspected - Nigeria (Edo): RFI [20010315.0524](#)

2000

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Lassa fever - Germany ex Nigeria (03) [20000424.0609](#)

Lassa fever - Germany ex Nigeria (02) [20000405.0497](#)

Lassa fever - Germany ex Nigeria [20000404.0495](#)

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