West Africa Health Organization (WAHO)

Dear Colleagues and Partners,

Welcome to the fourth edition of the Lassa Lens Initiative, your quarterly insight into ongoing efforts to combat Lassa fever across the ECOWAS region. This platform is a shared space for knowledge, collaboration, and collective action against one of the region's most persistent public health threats.

As we enter the fourth quarter of 2025, the urgency of our mission is once again underscored by the latest data: between January and September, the ECOWAS region recorded 7,343 suspected Lassa fever cases, 904 confirmed cases, and 175 deaths across five member states. These figures reflect the enduring burden of the disease and the need to continue building strong, resilient, and coordinated preparedness and response systems.

The 2nd ECOWAS Lassa Fever International Conference (LIC) was held from September 8–11, 2025, in Abidjan with the theme “Beyond Borders: Strengthening Regional Cooperation to Combat Lassa Fever and Emerging Infectious Diseases.” Our gratitude goes to the Government of Côte d’Ivoire for hosting the event, which provided an opportunity for Member States and partners to reflect on research and development (R&D) efforts, strengthen outbreak preparedness, and foster cross-border collaboration for Lassa fever and other emerging infectious diseases. A key highlight of the conference was the Ministerial Roundtable on vaccine readiness, where ECOWAS Health Ministers issued a joint communiqué pledging to accelerate Lassa fever vaccine development and access, enhance surveillance and research, and secure sustainable financing.

In August 2025, the UNVEIL Initiative (Unraveling Natural and Vaccine Elicited Immunity to Lassa fever) was launched to fast track the development of a Lassa fever vaccine. The University of Texas Medical Branch’s Galveston National Laboratory were awarded up to $6.4 million through a joint CEPI–Welcome funding call to lead this international research effort.

Over the coming years, UNVEIL will work with four frontline clinical sites in Nigeria and Sierra Leone; Jos University Teaching Hospital, Irrua Specialist Teaching Hospital, Abubakar Tafawa Balewa Teaching Hospital (Bauchi), and Kenema Government Hospital to collect samples and build local capacity in diagnostics, biobanking, and clinical research. Using machine learning models and large preclinical datasets, the team aims to identify immune markers of protection that can guide vaccine testing and regulatory approval.

As you explore this edition, you’ll find updates on the latest epidemiological trends, frontline worker stories, R&D efforts, new partnerships, and upcoming opportunities for engagement.

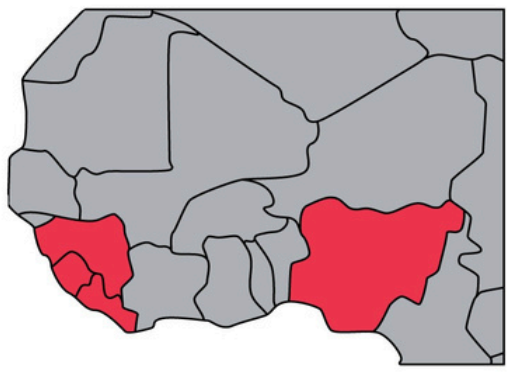
Thank you for being part of this journey.

Warm regards,
Dr. Melchior Athanase Joël C. AISSI
Director General West African Health Organization (WAHO)

LASSA IN NUMBERS

01 January - 01 September 2025

	CONFIRMED CASES	DEATHS
Nigeria	871	162
Liberia	22	6
Sierra Leone	9	5
Guinea	2	2



Source: WHO Epidemiology Bulletin; Africa CDC Epidemiology Bulletin; NCDC sitrep

DRIVING VACCINE READINESS ACROSS WEST AFRICA: COALITION FEATURED AT 15TH BEST PRACTICES FORUM:

The WAHO participated in the 15th Best Practices Forum (BPF) and the 31st Directors' Joint Consultative Committee (DJCC) Meeting of the East, Central and Southern Africa Health Community (ECSA-HC), held from 4–6 August 2025 at the InterContinental Mauritius Resort in Mauritius. The meeting, provided a strategic platform for regional health stakeholders to share lessons, promote collaboration, and strengthen inter-regional partnerships.

WAHO made a strong technical contribution through a presentation by Dr. Aishat Bukola Usman on "The Lassa Fever Vaccine Coalition – A Strategic Response to Strengthening Regional R&D and Health Security in West Africa." The presentation showcased WAHO's leadership in advancing vaccine research and development for epidemic-prone diseases. It also emphasized the critical role of regional coordination in driving innovation, expanding local manufacturing, and ensuring equitable access to medical countermeasures.

In addition, WAHO participated in a panel discussion on "The Role of Regional Health and Economic Communities (RECs) in Advancing Regional Coordination Mechanisms and Health Security in Africa." The panel featured representatives from ECSA-HC, COMESA, the Commonwealth, and the GIZ Health Project. WAHO highlighted its ongoing work in strengthening cross-border surveillance, supporting Member States with the implementation of the International Health Regulations (IHR), and enhancing regional preparedness and response through platforms such as the West Africa Disease Surveillance Network (WARDSNet).

Looking ahead, WAHO is following up on opportunities for joint programming and knowledge exchange with ECSA-HC, especially in research and regulatory capacity. Both organizations will also explore co-authorship of regional position papers and alignment with broader regional frameworks on health security.

THE 2ND ECOWAS LASSA FEVER INTERNATIONAL CONFERENCE (ELFIC 2025)

The 2nd ECOWAS Lassa Fever International Conference (ELFIC 2025) came to a close on 11 September in Abidjan, Côte d'Ivoire, after four days of intense dialogue and collaboration. Held under the theme "Beyond Borders: Strengthening Regional Cooperation to Combat Lassa Fever and Emerging Infectious Diseases," the gathering brought together more than 800 policymakers, scientists, health professionals, and partners from across West Africa and beyond.

Throughout the week, participants explored six core areas—regional coordination, countermeasures, surveillance, technology, community engagement, and financing—each critical to building a stronger, more united front against Lassa fever. The sessions provided space not only to reflect on progress and share scientific evidence, but also to identify gaps and chart a forward-looking path that places Africa at the centre of solutions.

One of the highlights of the conference was the Ministerial Roundtable on vaccine readiness, where ECOWAS Health Ministers issued a joint communiqué pledging to accelerate Lassa fever vaccine development and access, strengthen surveillance and research, and secure sustainable financing. This collective commitment, documented in the Ministerial press release and communiqué, was recognised as a milestone in regional solidarity—underscoring that Lassa fever is a shared challenge that no country can overcome alone.

The conference also shone a spotlight on the broader ecosystem that shapes epidemic preparedness and response. Experts emphasized food safety as a vital measure to reduce rodent exposure, the primary source of Lassa transmission. Media and civil society actors were recognized as indispensable partners in building trust, countering misinformation, and ensuring communities are meaningfully engaged. Researchers and policymakers alike highlighted the need for African-led studies and interventions, making clear that responses must be context-specific and owned by the region. Stronger cross-border collaboration, particularly in outbreak preparedness and data sharing, was identified as essential to keeping pace with the evolving threat of emerging infectious diseases.

The conference also featured a series of vaccine-related organised sessions, which included:

Partnering with Communities for Ethical Lassa Fever Research and Response (Convened by West African Health Organization & West African Network of National Ethics Committees)

This session stressed the importance of ethics and community engagement in research. Gaps such as reinfection studies were identified, alongside the need for stronger collaboration among national ethics committees, digitalising protocol submissions, and systematic follow-up after approvals. Participants also called for communities to receive feedback on research outcomes, reinforcing trust and accountability.

Critical Partnerships for End-to-End Vaccine Development (Convened by the International AIDS Vaccine Initiative - IAVI)

Discussions focused on bridging regulatory gaps through harmonisation and capacity-building, preparing trial sites in endemic regions, and addressing cultural concerns around participation. The session also highlighted opportunities to expand African-led manufacturing, strengthen regulatory expertise, and ensure affordability and equitable access through sustainable financing.

Regional Readiness for Lassa Vaccines – From Development to Delivery (Convened by Coalition for Epidemic Preparedness Innovations – CEPI)

This session explored preparedness for vaccine rollout, emphasising integration into existing immunisation systems, stronger regulatory and manufacturing capacity, and sustained political will. Community engagement and social science research were highlighted as vital to counter hesitancy, while logistics and financing were recognised as priorities to be built into vaccine planning from the outset.

Strengthening Clinical Trial Capacity and Advancing Regional Epidemic Preparedness for Lassa Fever – Lessons from the ARC-WA Project and Future Opportunities (Convened by Medical Research Council Unit The Gambia at the London School of Hygiene & Tropical Medicine (LSHTM)

This session explored how lessons from the ARC-WA project can inform stronger clinical trial capacity and regional epidemic preparedness. Presentations covered community engagement strategies to build trust and participation in Lassa fever vaccine trials, the role of Nigeria's Irrua Specialist Teaching Hospital laboratory in surveillance and data management, and the Kenema Government Hospital project in Sierra Leone as a hub for Lassa fever research and emergency response. Key recommendations included improving laboratory and treatment infrastructure, optimizing spaces for research and care, reinforcing epidemic surveillance and response skills, supporting observational studies, strengthening data management, and fostering national and international collaborations.

Strengthening Vaccine Acceptance and Delivery in West Africa – From Science to Public Trust (Convened by WAHO)

The session addressed vaccine hesitancy and strategies to boost acceptance in West Africa. Speakers highlighted the importance of community ownership, trust-building, and tackling misinformation. WHO outlined its support to member states through global frameworks and tools, while participants emphasized training health workers, using local languages and media, and engaging religious and community leaders. Rapid feedback systems were also noted as vital for addressing concerns in real time. The session concluded that trust, cultural relevance, and community engagement are central to improving vaccine uptake across the region.

The official conference press release highlights the resolve of West African nations to fast-track vaccine access and strengthen epidemic preparedness, while the Book of Abstracts captures the scientific evidence and insights presented by researchers across the region.

SPOTLIGHT

LASSA FEVER SURVIVOR STORY

Can you tell us about yourself and how you first had Lassa fever?

“My name is Adejoke Olajumoke, and I am a Lassa fever survivor. I contracted the disease in 2018. At the time, I was living in Akure, but I had travelled to Owo in Ondo State to seek medical care for my newborn baby at the Federal Medical Centre. After my baby was discharged, I stayed back with family in Owo so they could help care for her. Although the food was well covered, there were rats in the house where I stayed. About a week later, I began to feel unwell, with symptoms similar to malaria.”

What was your experience like before you were diagnosed?

“At first, I self-medicated with malaria drugs from a pharmacy, but my health kept deteriorating. I went back to Akure still feeling very sick, and when I returned to Owo, I sought treatment at the general hospital. There, I was treated for malaria and typhoid, but my fever remained high despite antibiotics. Unfortunately, the doctors went on strike, and I was discharged without improvement.”

“I went to stay with my mother in Owo. After a few days, my condition worsened so much that one night around 2 a.m. I felt like I would not survive till daybreak if I did not get help. Neighbours rushed me to the Federal Medical Centre in Owo, where I was admitted.”

How did you finally learn it was Lassa fever?

“After several days of treatment, a doctor took my blood sample for testing. When he mentioned that my temperature had finally come down, I suspected they were testing for Lassa fever, as I had heard of the disease. A few days later, the result came back positive. I was immediately moved to the isolation ward, while my mother and baby were monitored for contact tracing.”

What challenges did you face after recovery?

“Surviving was just the first battle. When we returned home, we faced serious stigma. People were afraid of us because of myths that “nobody comes out alive from the Lassa ward” or that survivors could still infect others. Many neighbours avoided us, and even my relatives advised me not to speak openly about my illness.”

“But I chose to share my story. Whenever I heard people spreading misinformation, I would tell them: I am a survivor. I was treated at Federal Medical Centre, and not only did I survive, my six-week-old baby survived too. By speaking out, I wanted others to know that there is hope, that treatment works, and that survivors deserve acceptance.”

Did your family also get affected?

“Yes. Not long after, my six-week-old baby developed a fever and was admitted to the suspect ward. Her test result confirmed Lassa fever. Soon after, my mother, who had been caring for both of us, also tested positive. So, three generations—myself, my baby, and my mother—were admitted in the Lassa ward at the same time.”

“The treatment was very difficult, especially the ribavirin, which made me feel even weaker at first. My baby struggled too; at one point her veins had collapsed from too many drips, so she was switched to syrup medication. Despite everything, we all pulled through. I was the first to test negative, then my mother, and finally my baby after several follow-up visits.”

How has life been since then?

“Today, my daughter is seven years old, healthy, and thriving. My mother and I are also doing well, with no complications. Looking back, I am grateful for the doctors, nurses, and everyone who cared for us. I believe my story is proof that with early treatment, strong support systems, and proper care, Lassa fever can be survived.”

LASSA FEVER END-TO-END (E2E) ACCESS PLAN WORKSHOP

The Lassa Fever End-to-End (E2E) Access Plan Workshop was held in Abuja on 16 September 2025. The workshop was convened by the Nigeria Lassa fever vaccine taskforce co-chaired by Nigeria Centre for Disease Control and Prevention (NCDC) and National Agency for Food and Drug Administration and Control (NAFDAC) in collaboration with CEPI and partners, to strengthen Nigeria's preparedness for future Lassa fever vaccines. The workshop brought together key national and regional stakeholders to adapt CEPI's draft E2E access framework to Nigeria's context.

In opening remarks, the NCDC Director General emphasised that vaccine development is vital, but ensuring availability, affordability, and accessibility is the greater challenge. CEPI stressed its commitment to making Lassa vaccines acceptable, affordable, and accessible, building on momentum from the recent ECOWAS Lassa Fever Conference in Abidjan. Discussions highlighted the need for early regulatory engagement, sustainable financing, regional manufacturing hubs, and strong community engagement to counter misinformation. Participants also underscored the importance of integrating Lassa vaccines into routine immunization and targeting high-risk populations such as health workers and endemic communities. Inputs from the workshop will feed into the Nigeria Lassa E2E Access Roadmap, to be published by the end of 2025 as a living document to guide vaccine readiness efforts.

WEBINAR: FINANCING THE FUTURE – INTEGRATING VACCINE R&D PREPAREDNESS INTO SUSTAINABLE HEALTH POLICY

The latest edition of the ECOWAS R&D Lassa Fever Webinar Series Themed: "Financing the Future – Integrating Vaccine R&D Preparedness into Sustainable Health Policy" held on Thursday, 2nd September, 2025.

This webinar focused on practical strategies to secure sustainable financing for vaccine research and development and integrate preparedness into national health policies. The webinar also featured examples of successful vaccine financing arrangements and co-financing mechanisms across the region. The discussion highlighted how countries can move beyond reactive, emergency-driven approaches toward resilient, long-term systems that support accelerated vaccine development, equitable access, and strengthened epidemic preparedness. The webinar also emphasises the importance of aligning national health financing frameworks with proactive vaccine R&D, illustrating pathways for sustaining investments that protect populations and advance regional health security.

Missed it? Watch the playback here: https://youtu.be/9vQesx1vg4U

LASSA R&D UPDATES

ENABLE 1.5 Study in Nigeria - Activities and Progress:

The ENABLE 1.5 project is currently preparing for the Tier 4 (T4) phase. This step forward follows the successful completion of Tier 3, which included quarterly follow up activities, blood sample collection and community engagement at the project's three sites: AEFUTHA, FMC owo and ISTH Irrua. The project is Funded by CEPI Vaccines and Coordinated by the National Coordination Team at NCDC Abuja.

Study Follow-Up Activities: We are currently preparing for the T4 (which is the last quarter of blood sample collection at the three study sites). The ENABLE Coordination Team at NCDC, visited each site to provide oversight and technical support to ensure smooth implementation during the last T3 phase. The ENABLE coordination team at NCDC continues to closely monitor progress, with the T4 activities expected to begin in October 2025, at the three study sites.

Community Engagement/Rumor Management Update: Community engagement remains a key pillar of the ENABLE 1.5 project. The team has continued its advocacy and engagement efforts at the site level. The National coordination team continues to follow up with the Rumor Management tool. The tool is helping in providing insights into some of this misinformation ongoing at the study sites, which will provide insight to address misinformation in study communities.

The ENABLE 1.5 project is making significant strides in advancing a Lassa fever vaccine by generating essential scientific data

Kenema Government Hospital Tests Readiness with Simulated Vaccine Trial:

In August 2025, Kenema Government Hospital's Viral Hemorrhagic Fever unit (KGH VHF) in Sierra Leone conducted a full-scale dry run of a Lassa Fever vaccine clinical trial, marking a pivotal milestone under the Advancing Research Capacity in West Africa (ARC WA) project.

ARC WA is funded by the CEPI and implemented by the Technical Coordinating Partner, a collaboration between the International Vaccine Institute (IVI) and the Medical Research Council Unit The Gambia at the London School of Hygiene & Tropical Medicine (MRCG). The mission aims to establish a strong network of clinical trial sites across West Africa. Kenema Government Hospital is one of six selected sites in Nigeria, Liberia, and Sierra Leone undergoing targeted capacity strengthening in infrastructure, operations, laboratories, data systems, and community engagement.

The dry run at KGH simulated every stage of a clinical trial, from community engagement and participant consent to mock vaccinations, safety monitoring, and follow up protocols. The dry run served as a real-world test of readiness, evaluating the site's ability to coordinate teams, manage biological samples, document processes, protect participants, and respond to unforeseen situations. By stress testing systems before live trials, the site strengthened its preparedness to host future Lassa fever and emerging infectious disease vaccine studies.

Global UNVEIL Initiative to Accelerate Lassa Fever Vaccine Development:

A new international consortium, UNVEIL (Unraveling Natural and Vaccine-Elicited Immunity to Lassa fever), has been launched with up to $6.4 million in funding to speed up the development of a long-awaited Lassa fever vaccine. Led by scientists at the University of Texas Medical Branch (UTMB), the initiative brings together partners from Nigeria, Sierra Leone, the U.K., and the U.S.

Despite several promising Lassa fever vaccine candidates, progress has been stalled by the absence of clear immune markers that indicate protection. UNVEIL aims to change this by identifying these markers, enabling vaccines to be evaluated more quickly and without the need for prolonged efficacy trials. The project will combine machine learning approaches with African clinical data and extensive preclinical datasets to define what effective immunity looks like. It will also strengthen research capacity at key clinical sites in Jos, Irrua, and Bauchi (Nigeria) and Kenema (Sierra Leone), while developing standardized laboratory tests that can guide regulators and vaccine developers globally.

Funded by

CEPI and supported by Wellcome, UNVEIL is also designed to establish frameworks that can be adapted to other emerging viral threats—strengthening both global health security and regional outbreak preparedness.

PREPARE Study:

The ongoing observational study funded by the US National Institute of Health (NIH) enrols adults and children presenting to Phebe hospital with an acute febrile illness. The primary objectives include assessing the incidence rate of symptomatic reverse transcription (RT)-PCR-confirmed Lassa virus (LASV) infection and evaluating the incidence of LASV infection with symptomatic malaria co-infection. Secondary objectives involve exploring the use of predetermined unfavourable Lassa fever outcomes to inform severity scores and assessing the prevalence of baseline sensorineural hearing loss among participants. Consented individuals are tested for LASV with PCR and those diagnosed with.

Lassa fever are followed longitudinally during and after their acute illness. An initial finding is that of 362 participants presenting with fever, 11% were found to have LASV detected by PCR in their plasma. Most were not clinically suspected of having Lassa fever. The study indicates that Lassa fever is under diagnosed in this region. The study has also allowed for a better characterization of the acute illness and factors associated with outcomes. Seventy Individuals with Lassa fever have been followed in the PREPARE study. Specimens are collected for PCR blood as well as genital secretions following acute illness. Audiometry has been conducted, as well, on survivors. Main findings from the study will be published in Lancet Infectious Diseases.

INNOVATIONS IN LASSA FEVER RESEARCH

Licoisoflavone B and glabridin from Glycyrrhiza glabra as potent nucleoprotein antagonists of Lassa virus:

A study by Ahmed and colleagues explored the potential of two natural flavonoids—licoisoflavone B and glabridin, both derived from Glycyrrhiza glabra (licorice)—. These compounds may help fight Lassa fever by blocking a viral protein called the nucleoprotein (NP), which the virus needs to multiply and hide from the body's immune system

The researchers conducted a comprehensive investigation of 69 phytochemicals from licorice. Among these, licoisoflavone B and glabridin stood out as the most effective, showing strong binding to the virus's NP protein and favourable safety profiles. To see how stable these interactions were, the team ran simulations that mimicked how the compounds and the protein would behave over time. Both compounds stayed firmly attached to the NP, showing little change in their structure.

Overall, the findings identify licoisoflavone B and glabridin as promising candidates to inhibit the Lassa virus by targeting its nucleoprotein. However, the study's authors emphasize that these computational predictions must now be confirmed through experimental validation in biological systems before advancing toward therapeutic development.

AI-Driven Diagnosis of Lassa Fever in Nigeria

This study introduced an how artificial intelligence (AI) can help doctors tell the difference between Lassa fever and malaria, two illnesses that often look very similar in patients. Researchers used hospital data from Akure and Makurdi in Nigeria to train a computer model that combined three different machine learning methods.The AI tool was tested on 500 patient cases (about 400 with Lassa fever and 100 with malaria) and delivered impressive results - almost 99% accuracy, with perfect detection of all Lassa fever cases.

These findings underscore the potential of AI-powered tools to drastically reduce misdiagnosis and improve early detection of Lassa fever in resource-constrained healthcare settings across West Africa, offering a powerful complement to existing diagnostic methods.

INSIGHTS AND ANALYSIS

Epidemiological Trends & Surveillance:

A Review of the Epidemiology of Lassa Fever in Nigeria

A recent study provides an updated overview of the disease's trends and control efforts, covering data up to 2024. It outlines the widening geographic spread, rising case numbers, and seasonal patterns linked to increased rodent activity during the rainy season. The review notes progress in surveillance and response through the Integrated Disease Surveillance and Response framework and the Nigeria Centre for Disease Control, while also highlighting persistent challenges such as underreporting, limited diagnostics, and surveillance gaps. The authors call for sustained investment, stronger community engagement, and coordinated action to improve prevention and response strategies for Lassa fever in Nigeria

Lassa fever survivors: long-term health effects and chronic sequelae - a scoping review

This study reviews studies from Nigeria, Sierra Leone, and Germany, highlighting the lasting health issues faced by Lassa fever survivors. Common complications include hearing loss (16–35%), balance disorders, neurological problems like seizures and cognitive impairment, eye conditions such as cataracts, and psychiatric symptoms like depression. The review emphasizes the need for multidisciplinary care, further research, and evidence-based policies to improve survivor support and resource allocation in affected regions.

Environmental Drivers and Changing Ecology:

Assessing the environmental drivers of Lassa Fever in West Africa: A systematic review:

This systematic review provides a comprehensive overview of the environmental drivers of LASV in West Africa. Climate models predict an expansion of suitable environmental conditions for M.Natalensis due to rising temperatures and increased precipitation, while rapid population growth in West Africa is influencing the conversion of natural habitats to agricultural lands and threatening to expand the ecological niche of LASV host reservoirs. The mechanisms by which seasonal precipitation, land-use change, and host dynamics drive human LASV epidemics in West Africa are not fully understood, highlighting a need for further research to guide future public health efforts and targeted research. Ultimately, this review underscores the urgent need for interdisciplinary research and proactive preventative strategies to mitigate the impacts of environmental change on LASV transmission and protect vulnerable populations in West Africa.

Regional Spread & Global Health Context

Lassa fever outbreak in West Africa: Rising regional cases with global implications:

The study highlights the increasing spread of Lassa fever in West Africa, notably with outbreaks in Guinea, Nigeria, and Liberia. It underscores the zoonotic nature of the disease, challenges in diagnosis due to genetic diversity, and limited treatment options. The article calls for improved diagnostics, expanded surveillance, and accelerated vaccine development, including new mRNA and recombinant approaches. It also stresses the need for global cooperation and investment to address Lassa fever as a significant public health threat.

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Shaping the Future of Global Health: Innovation, Sustainability and Access in Vaccine Manufacturing

Highlights how vaccine development is leveraging AI, robotics, and digital innovation to improve testing, accelerate access, and ensure consistent quality.

Events and Opportunities

Innovations to Prepare for Future Epidemics and Pandemics

Innovative analytical technologies to improve vaccine manufacturing speed and equitable access

CURATED CONVERSATIONS

In this episode of curated conversations, Dr Amadou Sall stresses the urgent need for Africa to strengthen healthcare by fostering regional collaboration, adopting innovative business models, and using emerging technologies such as artificial intelligence. He draws lessons from COVID-19, emphasising that unity and partnerships are central to sustainable health security and economic growth.

From building local manufacturing ecosystems to reimagining financing models, his insights chart a roadmap for Africa to shift from dependency to self-sufficiency while contributing to global health equity.

Share Your Thoughts

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