Purpose of this Message:
This message serves to update the MLS laboratories about the importance of travel-associated illness such as Lassa fever. Please be advised of the following points:

- A man returning to Minnesota from West Africa was admitted to a hospital in Minnesota and diagnosed with Lassa fever.
- Lassa fever is an acute viral disease common in West Africa but rarely seen in the U.S.
- Lassa virus is transmitted by direct contact with blood, tissue, secretions or excretions of an infected individual. It is not spread through the air.
- Persons who were in contact with the patient are being contacted. The public is not at risk.

Action items: None

Background:
On March 31, 2014, a man returning to Minnesota from West Africa was admitted to a hospital in Minnesota with fever and confusion. Promptly after his arrival, the patient was seen by a physician who, given the patient’s travel history and condition, suspected a possible hemorrhagic fever and immediately reported to MDH. Blood samples submitted to the Centers for Disease Control and Prevention (CDC) tested positive for Lassa fever.

The Lassa virus is a single-stranded RNA virus and is carried by *Mastomys* rodents in West Africa. It is transmitted to humans through contact with urine or droppings of infected rodents. Though rare, it can also be transmitted from person to person through blood or bodily fluids that penetrate the skin, through mucous membrane or through sexual contact. The virus is not transmitted through casual contact or through the air. The incubation period for Lassa fever is one to three weeks.

In West Africa, there are about 100,000 to 300,000 cases of Lassa fever and about 5,000 deaths annually. Eighty percent of human infections are asymptomatic. Overall, death is rare in patients who contract Lassa fever, with only 1 percent of all cases resulting in death in areas of West Africa where infection is common. The last case of Lassa fever in the United States was in 2010 and was travel-related.

The Minnesota Department of Health (MDH) is working in close cooperation with the MN hospital, CDC and other local, state, and federal agencies. CDC is leading efforts to follow up with travel contacts of the patient. MDH is working with the hospital to follow up with healthcare workers and family members who had contact with the patient. The public is not at risk.

This situation serves as a great reminder of the importance of obtaining travel history when accessing patients. We encourage clinicians to contact MDH whenever there is suspicion of a travel-associated illness.

Questions can be directed to MDH at 651-201-5414 or 1-877-676-5414. More information about Lassa fever is available on the CDC website at [http://www.cdc.gov/vhf/lassa/](http://www.cdc.gov/vhf/lassa/).

Thank you,
This is an update from the Minnesota Department of Health – Public Health Laboratory (MDH-PHL) and the Minnesota Laboratory System (MLS). This message is being sent to MLS laboratory contacts serving Minnesota residents. You are not required to reply to this message.

**Please forward this to all appropriate personnel within your institution and Health System**

The content of this message is intended for public health and health care personnel and response partners who have a need to know the information to perform their duties. It is for official use only. Do not distribute beyond the intended recipient groups as described in this message.