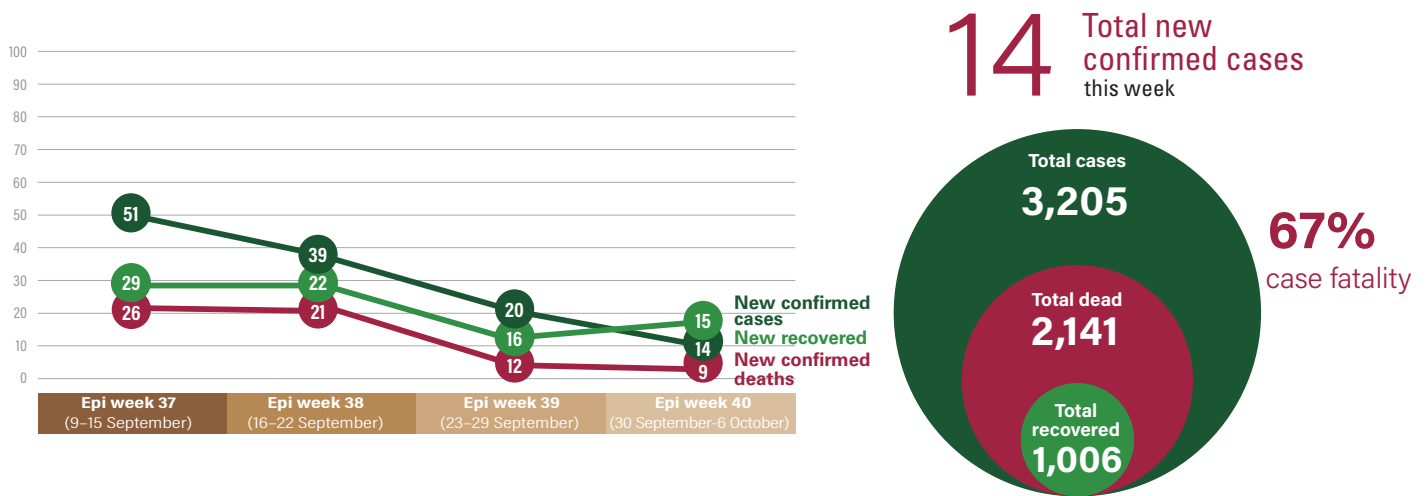


Ebola Virus Disease Outbreak in the Democratic Republic of Congo

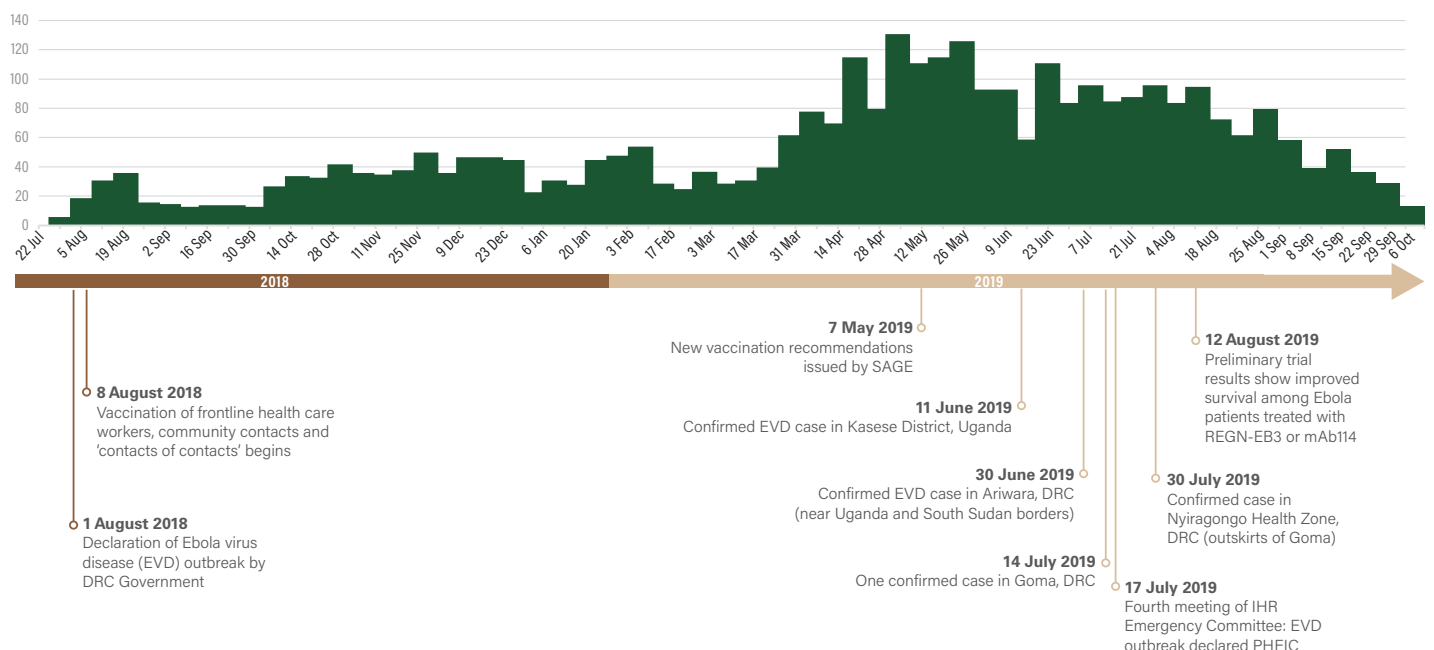
Epidemiological Week 40 (30 September-6 October 2019)

Issue 9, October 8, 2019

1. Ebola virus disease outbreak overview



2. Epidemic curve for confirmed and probable cases by date of onset 10th Ebola outbreak, DRC, 2018–2019



IHR = International Health Regulations; SAGE = Strategic Advisory Group of Experts; PHEIC = Public Health Emergency of International Concern.

3. Affected areas



4. Africa CDC response activities this week

- The Regional Collaborating Centres continued to support preparedness in Member States, including sharing information and discussing preparedness plans during the weekly ECHO sessions.
- Africa CDC volunteers and experts supported tracing of 1,425 contacts and investigation of 1,902 alerts, including active case-finding for 1,131 suspected cases.
- Africa CDC teams made 54 visits to health care facilities and trained 108 health care workers in infection prevention and risk communication. They evaluated 6 health care facilities and accompanied 132 health care workers to ensure compliance with infection prevention measures.
- Africa CDC-supported laboratories received and tested 1,503 samples.
- Africa CDC is organizing a meeting of health ministers of DRC and the nine neighbouring countries and partners in Goma on 21 October 2019 in collaboration with WHO. The meeting will discuss the framework for cross-border collaboration on preparedness and response to Ebola Virus Disease outbreak.
- Response activities remained suspended in Lwemba all through the week due to security challenges.

5. Update on Preparedness by Member States

Malawi is preparing to conduct drill simulation exercises in early November at the Kamuzu International Airport and at Chitipa District, where most asylum seekers from DRC pass through.



Mozambique has reactivated its Technical Working Group, which has elaborated its preparedness and response plan. The focus areas of the plan are surveillance, epidemiology, laboratory, case management, social mobilization, risk communication, and logistics. It conducted training on laboratory diagnosis for the National Institute of Health last week. It also conducted a case management assessment of health facilities and designated one facility as an isolation centre. Equipment and supplies are being procured for the isolation centre.

Surveillance training has been conducted for the rapid response team and point of entry focal points.



Lesotho has developed a public health emergency response contingency plan for its airport, which will be cascaded for use at land crossings. It is currently developing guidelines for referral from points of entry to the health facilities.

