Outbreak Brief #5: Ebola virus disease (EVD)
Date of Issue: 24 March 2021

30 cases and 15 deaths

Data sources: African Union Member States

Outbreak Update: Since the last brief (16 March 2021), no new cases or deaths have been reported. However six new recoveries of Ebola virus disease (EVD) have been reported from the Democratic Republic of Congo (DR Congo) and Guinea. Cumulatively, 30 EVD cases, 15 deaths (CFR: 50%), and 14 recoveries have been reported from DR Congo (12 cases; 6 deaths; 6 recoveries) and Guinea (18; 9; 8). Seven healthcare workers are amongst the confirmed cases: DR Congo (2) and Guinea (5) - see Table 1 for the subnational breakdown. It has been 22 and 19 days since the last confirmed cases were reported from DR Congo and Guinea, respectively.

Cross-border updates: Between 15 February to 20 March 2021, 23 EVD-related alerts were reported in 10 health districts, six of which border Guinea. Twenty-one alerts were investigated and tested negative for EVD by PCR. As of today no confirmed case has been reported from Sierra Leone.

Figure 1: New (a) and cumulative (b) cases reported by day in DR Congo and Guinea, 15 January - 24 March 2021.

Event Geoscope and Risk Assessment Levels

Geoscope: low  Risk level: high

No updates have been made to the existing geographic scope (geoscope) and risk level for the EVD events being reported for both DR Congo and Guinea. We will continue to monitor the situation and update this assessment as
needed. The World Health Organization\(^1\) and European Centres for Disease Prevention and Control\(^2\) have also issued risk assessments for the EVD events.

Table 1. The cumulative and new number of Ebola virus disease cases, deaths, and recoveries; identified contacts; and population vaccinated reported by African Union Member States as of 24 March 2021\(^3\)

<table>
<thead>
<tr>
<th>Location</th>
<th>Number of cases (new)*</th>
<th>Number of deaths (new)</th>
<th>Number of recoveries (new)</th>
<th>Number of contacts (^4) (% monitored)</th>
<th>Total number vaccinated(^5)</th>
</tr>
</thead>
<tbody>
<tr>
<td>DR Congo</td>
<td>12 (0)</td>
<td>6 (0)</td>
<td>6 (4)</td>
<td>123 (85%)</td>
<td>1,763</td>
</tr>
<tr>
<td>North Kivu province</td>
<td>12 (0)</td>
<td>6 (0)</td>
<td>6 (4)</td>
<td>123 (85%)</td>
<td>1,763</td>
</tr>
<tr>
<td>Biena HZ</td>
<td>6 (0)</td>
<td>4 (0)(^6)</td>
<td>--</td>
<td>0</td>
<td>1,061</td>
</tr>
<tr>
<td>Butembo HZ</td>
<td>3 (0)</td>
<td>1 (0)</td>
<td>--</td>
<td>84 (87%)</td>
<td>277</td>
</tr>
<tr>
<td>Katwa HZ</td>
<td>2 (0)</td>
<td>1 (0)</td>
<td>--</td>
<td>33 (73%)</td>
<td>360</td>
</tr>
<tr>
<td>Musienene HZ</td>
<td>1 (0)</td>
<td>0</td>
<td>--</td>
<td>6 (83%)</td>
<td>65</td>
</tr>
<tr>
<td>Guinea</td>
<td>18 (0)</td>
<td>9 (0)</td>
<td>8 (2)</td>
<td>19 (47%)</td>
<td>4,025</td>
</tr>
<tr>
<td>Conakry region</td>
<td>1</td>
<td>0</td>
<td>1 (0)</td>
<td>0</td>
<td>--</td>
</tr>
<tr>
<td>Dixinn</td>
<td>0</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>--</td>
</tr>
<tr>
<td>Matoto</td>
<td>0</td>
<td>0</td>
<td>N/A</td>
<td>0</td>
<td>--</td>
</tr>
<tr>
<td>Ratoma</td>
<td>1 (0)</td>
<td>0</td>
<td>1 (0)</td>
<td>0</td>
<td>--</td>
</tr>
<tr>
<td>Nzérékoré region</td>
<td>17 (0)</td>
<td>9 (0)</td>
<td>7 (2)</td>
<td>19 (47%)</td>
<td>--</td>
</tr>
<tr>
<td>Total</td>
<td>30 (0)</td>
<td>15 (0)</td>
<td>14 (6)</td>
<td>142 (66%)</td>
<td>5,788</td>
</tr>
</tbody>
</table>

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\(^1\) WHO | Ebola virus disease – Guinea and Ebola virus disease – Democratic Republic of the Congo
\(^2\) Ebola virus disease outbreak in Guinea, 2021
\(^3\) Abbreviations: HZ = health zone; *cases = confirmed and probable.
\(^4\) Number of contacts reported as of the EVD Outbreak Brief release day. The number of contacts fluctuate week by week as they complete their mandatory 21-day monitoring period.
\(^5\) Populations targeted for vaccination include case contacts and frontline healthcare workers.
\(^6\) Inadvertently reported two deaths in Biena in the last brief that should have been listed form Butembo and Katwa health zones.
Africa CDC Response Activities

- Africa CDC shipped thermo-scanners and infrared thermometers to Guinea to strengthen cross-border surveillance in the western region.
- Africa CDC finalized its incident action plan and will be deploying a technical team to support response efforts in the affected countries.
- Africa CDC continues to organise weekly press briefing on the EVD situation in Guinea and DRC to raise awareness on the evolution of the situation while underpinning the need for the harmonization of efforts in the fight against the virus.
- Africa CDC continues to heighten rumour monitoring through media scanning to support early warning and response within the continent.

Recommendations for the Member States

1. Member States should continue to enhance their cross-border surveillance efforts to:
   a. map population movements to identify all potential crossing points where there is risk of disease spread,
   b. set-up screening posts and conduct health screenings for travelers with signs of EVD (e.g. fever, rash, vomiting, diarrhoea, and hemorrhage)
   c. implement public health measures at border crossing points including temperature monitoring, and infection prevention and control measures, and
   d. share health information for EVD at borders
2. Member States should continue to perform contact tracing and follow up of all probable and confirmed cases.
3. Member states should enhance infection prevention and control measures in healthcare settings, health care workers protection and practice safe and dignified burial.
4. All Member States should notify and routinely share data regarding confirmed EVD cases, deaths, recoveries, tests conducted and healthcare workers infected with WHO and Africa CDC to continually inform these and other updates. Notify Africa CDC by emailing: AfricaCDCEBS@africa-union.org.
5. Member States should continue to provide information to the general public about seeking immediate medical care for those who develop symptoms similar to EVD.
6. Member States should work urgently with partners to improve their preparedness for detecting and managing imported cases, including the mapping of health facilities and active surveillance with zero reporting.
7. At-risk countries should put in place approvals for investigational medicines and vaccines as an immediate priority for preparedness.

Resources for more information

- Africa CDC updates: https://africacdc.org/
- Ebola virus infection - Prevention | BMJ Best Practice US
- US CDC - Ebola Virus Disease and WHO - Ebola virus disease overview
- WHO - Implementation and management of contact tracing for Ebola virus disease
- WHO - Surveillance strategy during Phase 3 of the Ebola response
- WHO - EVD Infection prevention and control