

Outbreak Brief #6: Ebola virus disease (EVD)

Date of Issue: 31 March 2021

30 cases, 15 deaths, and 15 recoveries

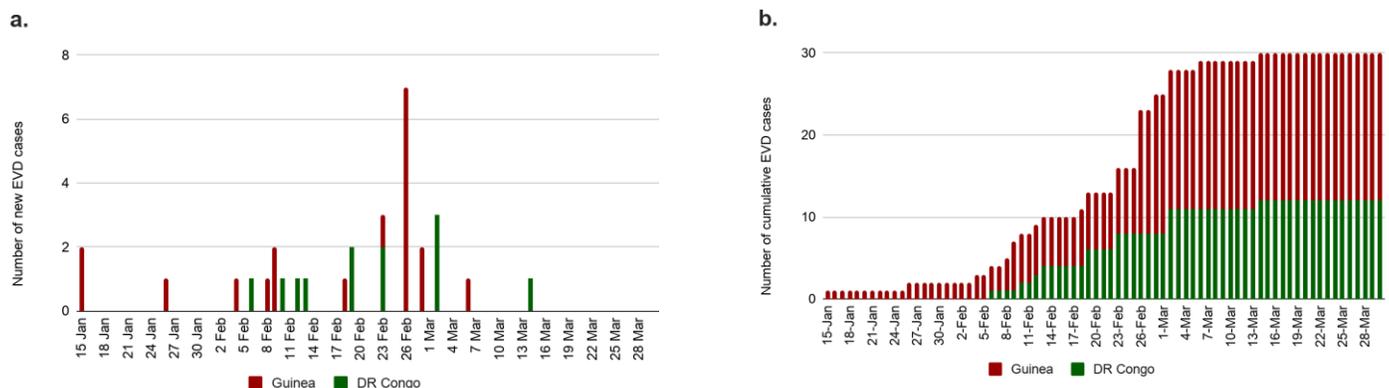
Data sources: African Union Member States

Outbreak Update: Since the last brief (24 March 2021), no new cases or deaths have been reported. However, one new recovery of Ebola virus disease (EVD) has been reported from Guinea. Cumulatively, 30 EVD cases, 15 deaths (**CFR: 50%**), and 15 recoveries have been reported from DR Congo (12 cases; 6 deaths; 6 recoveries) and Guinea (18; 9; 9) - see Table 1 for the subnational breakdown. Seven healthcare workers are amongst the confirmed cases: DR Congo (2) and Guinea (5).

It has been 22 and 19 days since the last confirmed cases were reported from DR Congo and Guinea, respectively. There are no active cases in both Member States. The last EVD patients were discharged on 22 and 25 March 2021 in DRC and Guinea, respectively. Provided that no new confirmed cases are reported, the outbreaks will be declared over in 37 days for Guinea and 36 days for DRC.

Genomic sequencing of EVD positive samples in Guinea show that this new outbreak is the result of a resurgence of the strain responsible for the 2014-2016 West African outbreak. Sequencing was performed at the Centre de Recherche et de Formation en Infectiologie de Guinée (CERFIG).

Figure 1: New (a) and cumulative (b) cases reported by day in DR Congo and Guinea, 15 January - 30 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 Organization¹ and European

Centres for Disease Prevention and Control² 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 30 March 2021³

Location	Number of cases (new)*	Number of deaths (new)	Number of recoveries (new)	Number of contacts ⁴ (% monitored)	Total number vaccinated ⁵
DR Congo	12 (0)	6 (0)	6 (0)	45 (76%)⁶	1,835
North Kivu province	12 (0)	6 (0)	6 (0)	45 (76%)	1,835
Biena HZ	6 (0)	4 (0)	--	45 (76%)	1,119
Butembo HZ	3 (0)	1 (0)	--	0	291
Katwa HZ	2 (0)	1 (0)	--	0	360
Musienene HZ	1 (0)	0	--	0	65
Guinea	18 (0)	9 (0)	9 (1)	0	4,565
Conakry region	1	0	1 (0)	--	--
Nzérékoré region	17 (0)	9 (0)	7 (1)	0	--
Total	30 (0)	15 (0)	15 (1)	45 (76%)	6,400

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 These are contacts that were previously lost to follow up.

Africa CDC Response Activities

- To strengthen cross-border surveillance in the Western region, Africa CDC shipped infrared thermometers to Sierra Leone and Guinea and thermal-scanners to Guinea.
- 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 health care 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](#)