Outbreak Brief #6: Ebola virus disease (EVD) in the Democratic Republic of Congo

Date of Issue: 19 November 2021

11 cases, 9 deaths, and 2 recovery

Data sources: DRC Ministry of Health

Outbreak Update: Since the last brief (12 November 2021), no new confirmed cases or deaths have been reported from Beni health zone, Democratic Republic of Congo (DRC). It has been 19 days since the last case was confirmed.

Cumulatively, 11 cases (8 confirmed, 3 probable), nine (6; 3) deaths (case fatality ratio: 82%) and two (2) recoveries have been reported. Cases are distributed across three (3) health areas: Butsili (9 cases, 7 deaths, 2 recoveries), Kanzulinkuli\(^1\) (1, 1, 0) and Bundji (1, 1, 0). Of note, four (50%) of the confirmed cases are children under 5 years. Currently six (6) suspected cases are hospitalized and isolated at the Ebola treatment center and isolation centers in Beni health zone. The last confirmed case was reported on 30 October 2021.

Figure 1: New confirmed Ebola virus disease cases reported by day in DR Congo between 30 September - 19 November 2021.

\(^1\)One case previously reported from the Ngalinga health area was changed to the Kanzulinzuli health area by the MoH.
No updates have been made to the existing geographic scope (geoscope) and risk level for the EVD event reported in DRC. The Africa CDC will continue to monitor the situation and update this assessment as needed. The World Health Organization\(^2\) has also issued a risk assessment for this event.

**New DR Congo Response Activities**
- Community surveillance and active case search is ongoing.
  - 227 contacts have been identified in eight health areas
  - 210 (92.5%) contacts are being monitored
- 608 persons were vaccinated in Butsili, Ngongolio, Paida and Mabakanga health areas, including 71 frontline health workers.
- 14 points of entry have been activated for EVD screening among travelers.
- 44,094 persons in 14,531 households have received EVD sensitization.
- 843 samples have been collected and analyzed.
- 57 service providers from 15 health facilities were evaluated and trained on compliance of infection prevention and control compliance.

**New Africa CDC Response Activities**
- Five Africa CDC staff have been assigned to support the response in Beni.
- Africa CDC is mobilizing local experts to support surveillance, laboratory and infection prevention and control activities.
- Africa CDC is supporting the purchase of GeneXpert machines and cartridges to enhance laboratory capacity.
- Africa CDC is recruiting rapid responders to support the surveillance activities for the EVD and Meningitis outbreaks.

**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
   d. Share health information for EVD at borders.
2. Where feasible, neighbouring Member States should integrate EVD surveillance into the existing COVID-19 surveillance strategies at community and health facility levels.

3. Member States should perform contact tracing and follow up of all probable and confirmed EVD cases.

4. Member states should enhance infection prevention and control measures in health care settings, health care workers protection and practice safe and dignified burial.

5. 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.

6. Member States should continue to provide information to the general public about seeking immediate medical care for those who develop symptoms similar to EVD.

7. 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.

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