

Outbreak Brief #2: Ebola virus disease (EVD) in the Democratic Republic of Congo

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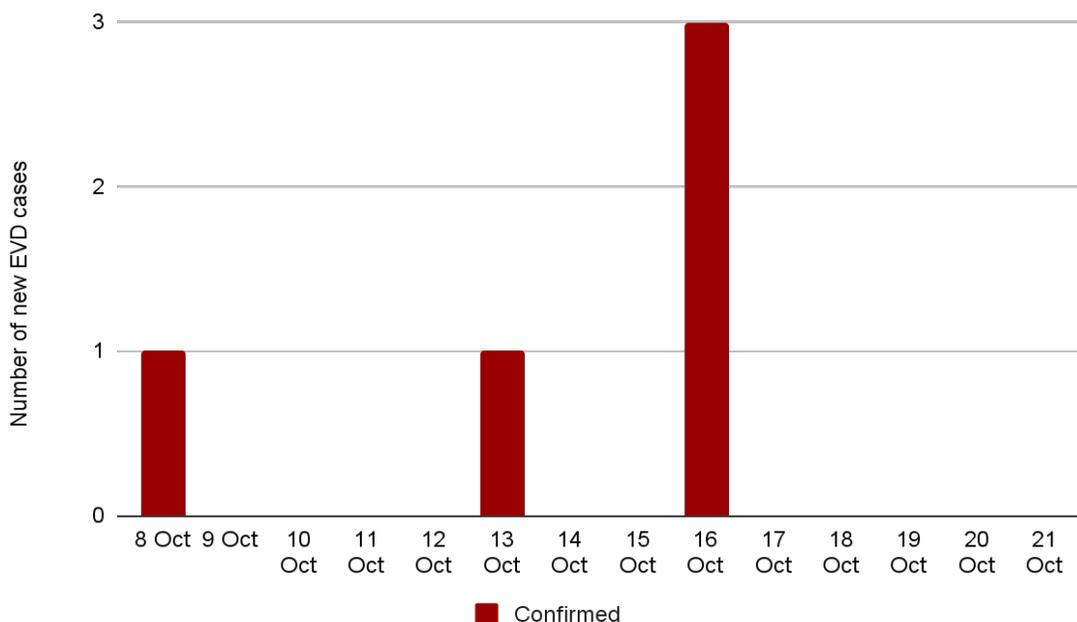
5 confirmed cases¹, 3 deaths, and 0 recoveries

Data sources: DRC Ministry of Health

Outbreak Update: Since last brief (15 October 2021), three new confirmed cases and one new confirmed death of Ebola virus disease (EVD) have been reported from the Democratic Republic of Congo (DRC). This is a 150% increase in the new confirmed cases being reported compared to the last outbreak brief. Cumulatively, five confirmed cases and three confirmed deaths (case fatality ratio: 60%) have been reported from Butsili health area, Beni health zone, DRC. The last confirmed case was reported on 16 October 2021.

This follows a cluster of three deaths (two female children and their father) who were neighbours of the index case. The deaths of these individuals occurred on 14, 19 and 29 September after developing symptoms consistent with EVD; none were tested for EVD.

Figure 1: New confirmed Ebola virus disease cases reported by day in DR Congo between 08 - 21 October 2021.



¹ Africa CDC initially reported three suspected cases as probable cases; however, those suspected cases are no longer included in the cumulative case count for this week's brief.

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 event reported for DRC. Africa CDC will continue to monitor the situation and update this assessment as needed. The World Health Organization² has also issued a risk assessment for this

event.

New DR Congo Response Activities

- The development of the EVD response plan is ongoing
- 489 contacts have been identified from 17 health areas in Beni health zone; 83% are being monitored.
- A total of 148 contacts have been vaccinated in Butsili and Mabakanga health areas.
- Eight points of entries have been reactivated for EVD screening.
- Rehabilitation of the Ebola Treatment Center in Beni is underway.

New Africa CDC Response Activities

- Africa CDC deployed two staff from headquarters to provide technical assistance.
- The Africa CDC team is engaged with the Ministry of Health and the National Institute of Biomedical Research (INRB) to address key gaps in EVD and meningitis outbreak response.
- Africa CDC is allocating 21 local rapid responders for both the EVD and meningitis response efforts
- Africa CDC deployed a laboratory expert to Beni for GeneXpert maintenance and EVD diagnostic support.

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. 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.

² https://www.who.int/emergencies/disease-outbreak-news/item/ebola-virus-disease-democratic-republic-of-the-congo_1

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.
8. 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](#)