WEDNESDAY, 14 MARCH, 2018

MINISTERIAL STATEMENT

LISTERIOSIS OUTBREAK IN SOUTH AFRICA AND UPDATE ON CHOLERA OUTBREAK IN ZAMBIA

The Minister of Health (Dr Chilufya)

Madam Speaker, I thank you for this opportunity to update the House and the nation on the measures taken to avoid the importation of listeria bacteria from the ongoing outbreak in South Africa. This is not only a response to the point of order raised by the hon. Member of Parliament for Monze Central, but also a statement to address the concerns of the general public on this important issue of public health importance and provide a brief update on the cholera situation in the country.

Madam Speaker, I will begin with the *listeriosis* outbreak in South Africa

Madam Speaker, I wish to inform the House that there is an ongoing food borne outbreak of listeriosis in South Africa with the first case reported on 1st January, 2017. A report on 8th March, 2018, indicated a cumulative total of 967 cases that have been laboratory confirmed with 183 deaths in the outbreak in South Africa. To date, no cases of listeriosis has been recorded in Zambia

Symptoms and Risk Groups

Madam Speaker, listeriosis commonly presenting as food poisoning is caused by a bacteria known as *listeria monocytogenes*. Generally, symptoms will include fever, muscle aches and sometimes nausea or diarrhoea. In severe cases, the bacteria may spread to the blood stream and nervous system with symptoms such as headaches, stiff neck, confusion, loss of balance and convulsions. It may be fatal.

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Madam Speaker, the groups that are at highest risk include pregnant women, newborns, the elderly especially those over sixty-five years of age and the immune compromised adults. Infected pregnant women may experience a mild flu like illness and in more serious cases it may cause miscarriages, still births, premature delivery or a life threatening infection to the newborn.

Sources of Infection

Madam Speaker, the common sources of infection include dairy products, meats from infected animals, including poultry, and vegetables. The outbreak in South Africa has been linked to polony, russian sausages, viennas, cold meats, ham, meet spreads, corned meat, salami and most refrigerated uncooked foods.

Madam Speaker, 85 per cent of the patients interviewed in South Africa reported having eaten ready to eat processed meat products of which polony was the most common followed by viennas, sausages and other cold meats.

Measures Put in Place by Government

Madam Speaker, the Ministry of Health, through the Zambia National Public Health Institute, is actively instituting the following measures:

- (a) surveillance and disease intelligence;
- (b) emergency preparedness and response; and
- (c) communication of findings for timely action and policy interventions.

Through this approach, any disease of significance is noted and mitigated in a timely manner.

Madam Speaker, in terms of communicating concerns to the public, on 5th March, 2018, the President of the Republic of Zambia, Mr Edgar Chagwa Lungu, directed me to ensure that we

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mount a multi-sectoral response to the threat and directed that the public be informed accordingly. My ministry issued a press statement on the same day and in that media briefing we updated the general public on the outbreak of listeriosis in South Africa and the measures taken by the Government.

Madam Speaker, a team of experts led and coordinated by the Zambia National Public Health Institute has been constituted to urgently address the concerns of the country because Zambia imports a lot of food products listed as risky from South Africa. Using the provisions of the Public Health Act Cap 295 and the Food and Drugs Act Cap 303, an immediate ban on imports of risky foods including processed meats, dairy products, vegetables and fruits from South Africa has been instituted. Further, in order to ensure compliance to the regulatory health requirements, the following activities are being undertaken:

- (a) existing stocks of the named risk foods are being removed from the shelves and stored for disposal;
- (b) health inspectors are conducting inspections to ensure compliance with the ban;
- (c) the points of entry are being instructed to seize all suspected risky products.

Further, Madam Speaker, all managers of major chain stores have been engaged and directed to cooperate with health inspectors in the removal and disposal of the risk products from their shelves and stores and they have been very cooperative. Active Food Safety Surveillance has been enforced across the country and the University of Zambia, School of Veterinary Medicine, has been tasked to examine the seized risk products.

Madam Speaker, all levels of healthcare have been put on high alert to report any suspected case of this disease. Further, the University Teaching Hospital Microbiology Laboratory has been tasked to examine human samples from suspected cases. Further, the National Codex Alimentations Committee has been tasked to conduct a scientific risk assessment on risk products to ascertain the risk in the country.