

EBOLA VIRUS DISEASE

Democratic Republic of the Congo



External Situation Report 92



World Health
Organization

REGIONAL OFFICE FOR
Africa

EBOLA VIRUS DISEASE



Democratic Republic of the Congo External Situation Report 92

Date of issue: 12 May 2020

Data as reported by: 10 May 2020

1. Situation update

Cases



3462

Deaths



2279

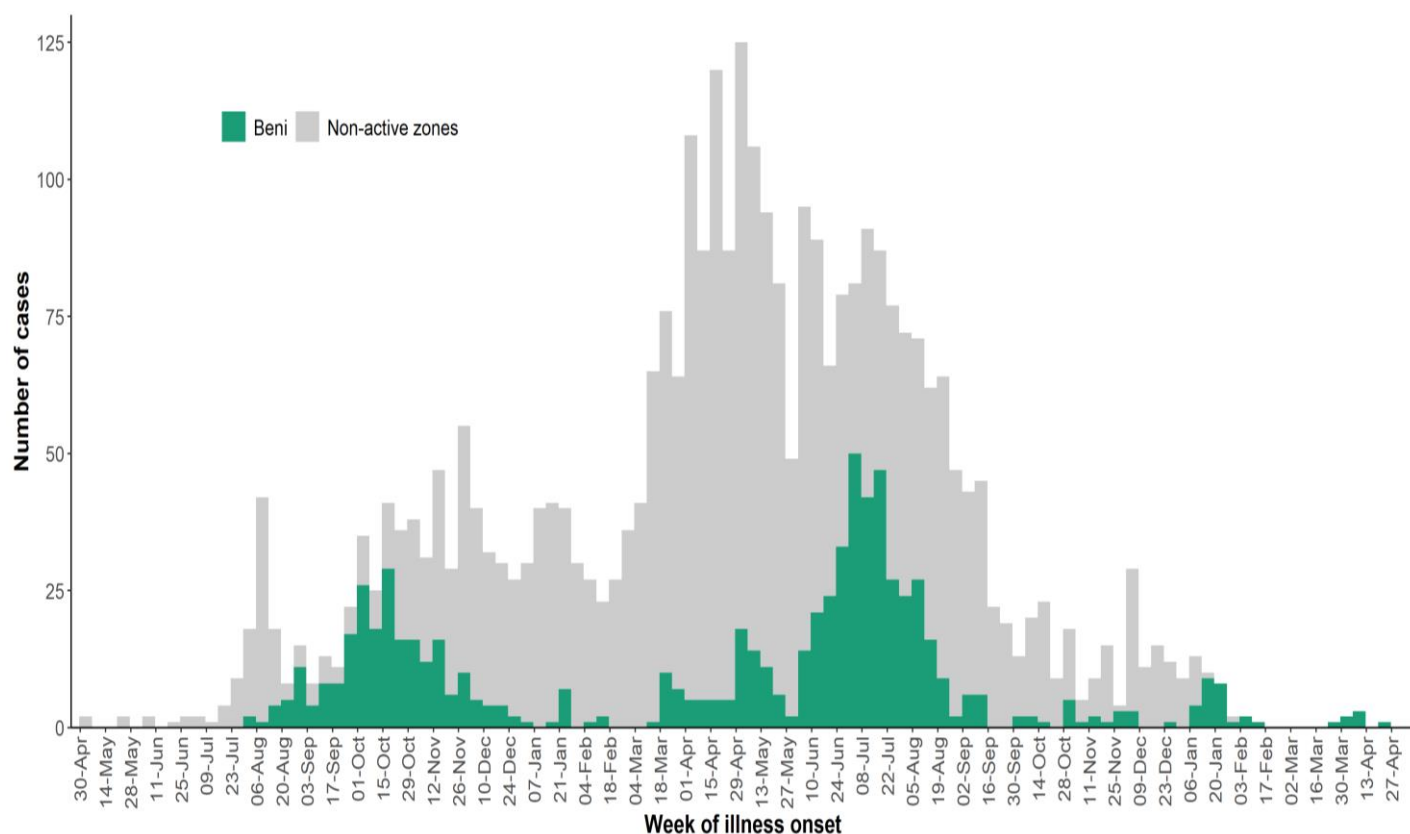
From 4 to 10 May 2020, there have been no new confirmed cases of Ebola virus disease (EVD) reported in Democratic Republic of the Congo. Since the resurgence of the outbreak on 10 April 2020, seven confirmed cases have been reported from Kasanga, Malepe and Kansulinzuli Health Areas in Beni Health Zone. Of these seven cases, one case is receiving care at an Ebola treatment centre (ETC); one confirmed case who was receiving care at an ETC recovered and was discharged after two consecutive negative tests; one confirmed case remains in the community; and four cases died, including two community deaths and two deaths in the ETC in Beni. Investigations into the possible source of infection of the cluster of cases reported since 10 April 2020 are ongoing. So far, no definitive source of infection has been identified.

As of 10 May, 86 contacts are under surveillance, of which 41 (48%) are high risk contacts who had direct contact with body fluids of the last confirmed case. Contacts from the previous six cases reported in April 2020 have exited their follow-up period. Of these 86 contacts, 71 (83%) have been vaccinated. There are 10 high risk contacts who are currently voluntarily isolating in a dedicated site where essential goods and health services are provided to them.

From 4 to 10 May 2020, an average of 2497 alerts were reported and investigated per day. Of these, an average of 316 alerts were validated as suspected cases each day, requiring specialized care and laboratory testing to rule-out EVD. In the past three weeks, the alert rate has improved notably in Beni and Butembo sub-coordinations. Timely testing of suspected cases continues to be provided from eight laboratories. From 4 to 10 May 2020, 2494 samples were tested including 1843 blood samples from alive, suspected cases; 318 swabs from community deaths; and 333 samples from re-tested patients. Overall, laboratory activities increased by 18% compared to the previous week.

As of 10 May 2020, a total of 3462 EVD cases, including 3317 confirmed and 145 probable cases have been reported, of which 2279 cases died (overall case fatality ratio 66%). Of the total confirmed and probable cases, 57% ($n=1970$) were female, 29% ($n=1002$) were children aged less than 18 years, and 5% ($n=171$) were healthcare workers. As of 10 May 2020, 1170 cases have recovered from EVD.

Figure 1: Health zone of reported Ebola virus disease cases by week of illness onset, as of 10 May 2020



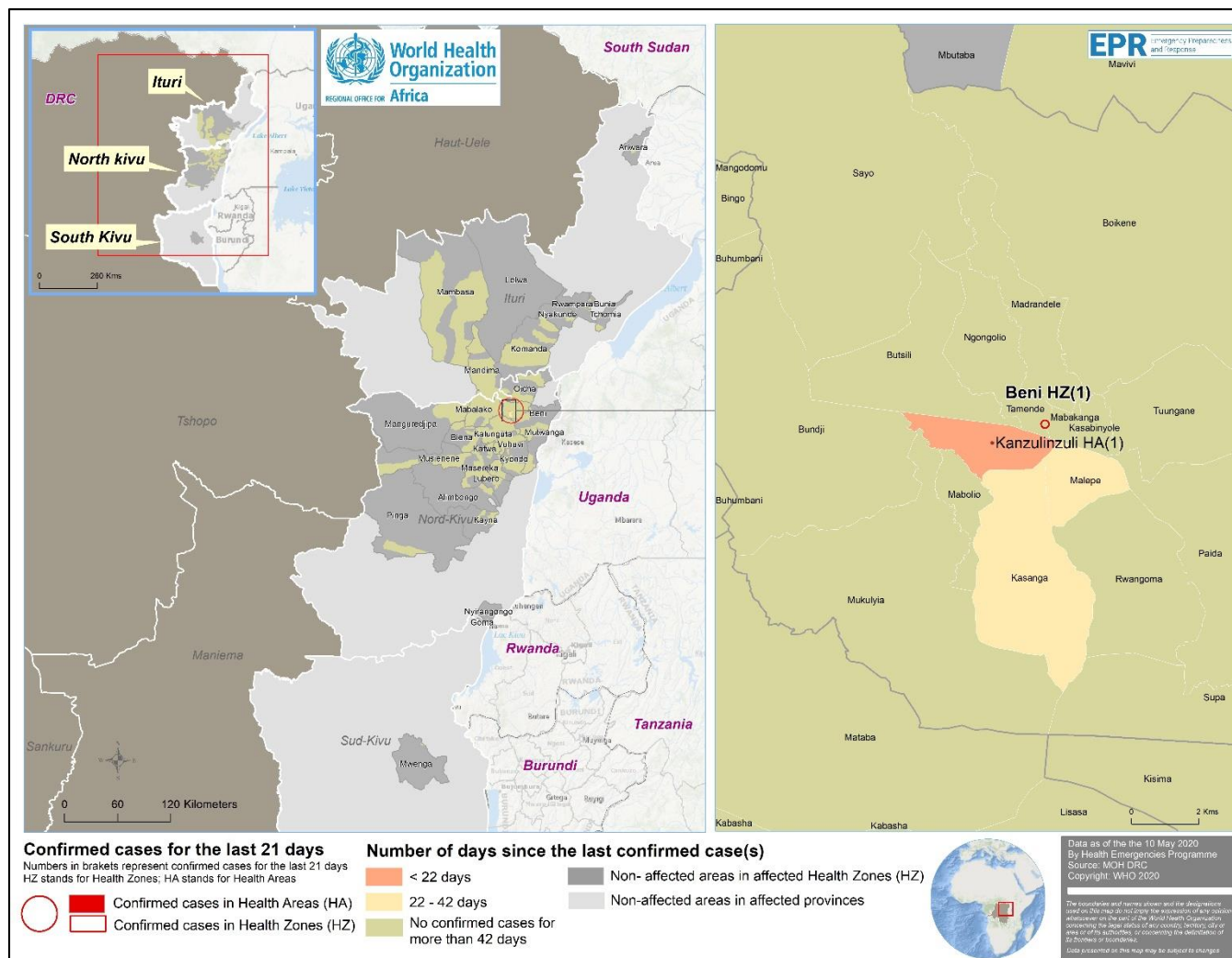
**Excludes n=88/3461 cases for whom onset dates not reported. Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning.*

Table 1: Ebola virus disease cases by classification and health zones in North Kivu and Ituri provinces, Democratic Republic of the Congo, as of 10 May 2020

Province	Health Zone	Health areas reporting at least one case in previous 21 days / total number of health areas	Confirmed cases in the last 21 days	Cumulative cases by classification			Cumulative deaths	
				Confirmed cases	Probable cases	Total cases	Deaths among confirmed cases	Total deaths
South Kivu	Mwenga	0/18	0	6	0	6	3	3
North Kivu	Alimbongo	0/20	0	5	1	6	2	3
	Beni	1/18	1	728	9	737	469	478
	Biena	0/16	0	19	2	21	12	14
	Butembo	0/15	0	295	7	302	353	360
	Goma	0/10	0	1	0	1	1	1
	Kalunguta	0/18	0	198	23	221	71	94
	Katwa	0/18	0	652	24	676	471	495
	Kayna	0/21	0	28	1	29	8	9
	Kyondo	0/22	0	25	6	31	15	21
	Lubero	0/19	0	32	2	34	4	6
	Mabalako	0/12	0	463	18	481	334	352
	Manguredjipa	0/10	0	18	3	21	12	15
	Masereka	0/16	0	50	6	56	17	23
	Musienene	0/20	0	85	1	86	33	34
	Mutwanga	0/19	0	32	0	32	12	12
	Nyiragongo	0/10	0	3	0	3	1	1
	Oicha	0/26	0	65	0	65	30	30
	Pinga	0/18	0	1	0	1	0	0
	Vuhovi	0/12	0	103	14	117	37	51
Ituri	Ariwara	0/21	0	1	0	1	1	1
	Bunia	0/20	0	4	0	4	4	4
	Komanda	0/15	0	56	10	66	44	54
	Lolwa	0/8	0	6	0	6	1	1
	Mambasa	0/17	0	82	5	87	27	32
	Mandima	0/15	0	347	12	359	166	178
	Nyakunde	0/12	0	2	0	2	1	1
	Rwampara	0/13	0	8	1	9	3	4
	Tchomia	0/12	0	2	0	2	2	2
Total		1/471	1	3317	145	3462	2134	2279

Note: Attributions of cases notified in recent days to a health zone are subjected to changes upon in-depth investigations

Figure 2: Geographical distribution of confirmed and probable Ebola virus disease cases by health area, North Kivu and Ituri provinces, Democratic Republic of the Congo, 10 May 2020



**Data are subject to delays in case confirmation and reporting, as well as ongoing data cleaning and reclassification – trends during recent weeks should be interpreted cautiously.*

2. Actions to date

The Government and the Ministry of Health (MOH) and other national authorities in the Democratic Republic of the Congo, WHO, and partners are implementing outbreak control interventions together with teams in the surrounding provinces, who are taking measures to ensure that they are response-ready.

An overview of key activities is summarized below:

Surveillance and Laboratory

- ➔ Timely testing of suspected cases continues to be provided from eight operational laboratories. From 4 to 10 May 2020, 2494 samples were tested including 1843 blood samples from alive, suspected cases; 318 swabs from community deaths; and 333 samples from re-tested patients. Overall, laboratory activities increased by 18% compared to the previous week.
- ➔ Over 250 000 contacts have been registered since the beginning of the outbreak.
- ➔ No new contacts were registered on 10 May 2020 and 86 contacts are currently being followed, of which 41 are high-risk contacts.

Vaccines

- ➔ Since the resurgence of the outbreak in Beni, a total of 1334 people have been vaccinated, of which 1289 were in Beni and 45 in Karisimbi as of 10 May 2020. The total number of people now vaccinated with the rVSV-ZEBOC-GP vaccine is 303 110 since the start of the outbreak in August 2018.
- ➔ WHO anticipates potential longer-term challenges with the vaccine pipeline due to limited flight ability as a result of the COVID-19 pandemic.

Case management

预览已结束，完整报告链接和二维码如下：

https://www.yunbaogao.cn/report/index/report?reportId=5_24618

