

EBOLA VIRUS DISEASE

Democratic Republic of the Congo

External Situation Report 86



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Date of issue: 31 March 2020
Data as reported by: 29 March 2020

1. Situation update

Cases	Deaths
 3453	 2273

There have been no new cases of Ebola virus disease (EVD) reported since 17 February 2020. The last individual confirmed to have Ebola was discharged from an Ebola Treatment Centre on 3 March after recovering and testing negative for the virus twice. On 9 March, the last contacts finished their follow-up period. These developments are significant milestones in this outbreak. However, there is still a high risk of re-emergence of EVD, and it is critical to maintain response activities to rapidly detect and respond to any new cases, and to continue ongoing support and health monitoring operations for EVD survivors – as outlined in the [WHO recommended criteria for declaring the end of the EVD outbreak](#).

There is ongoing surveillance, pathogen detection, and clinical management activities in previously affected areas, including alert validation, rapid diagnosis of suspected cases, and building partnerships with community members to strengthen investigation of potential EVD deaths in communities. Insecurity remains a challenge in continuing response activities, which could delay the detection of potential flare-ups.

From 23 to 29 March 2020, 31 265 alerts were reported and investigated. Of these, 2223 alerts were validated as suspected cases, requiring specialized care and laboratory testing to rule-out EVD. On average, people stay in these facilities for three days while waiting for EVD to be definitively ruled out (i.e. after two negative polymerase chain reaction tests 48 hours apart), while care is provided for their illness under isolation precautions. Timely testing of suspected cases continues to be provided across 11 laboratories. From 23 to 29 March 2020, 2376 samples were tested including: 1322 blood samples from alive, suspected cases; 365 swabs from community deaths; and 689 samples from re-tested patients. Overall, laboratory activities decreased by 14% compared to the prior week.

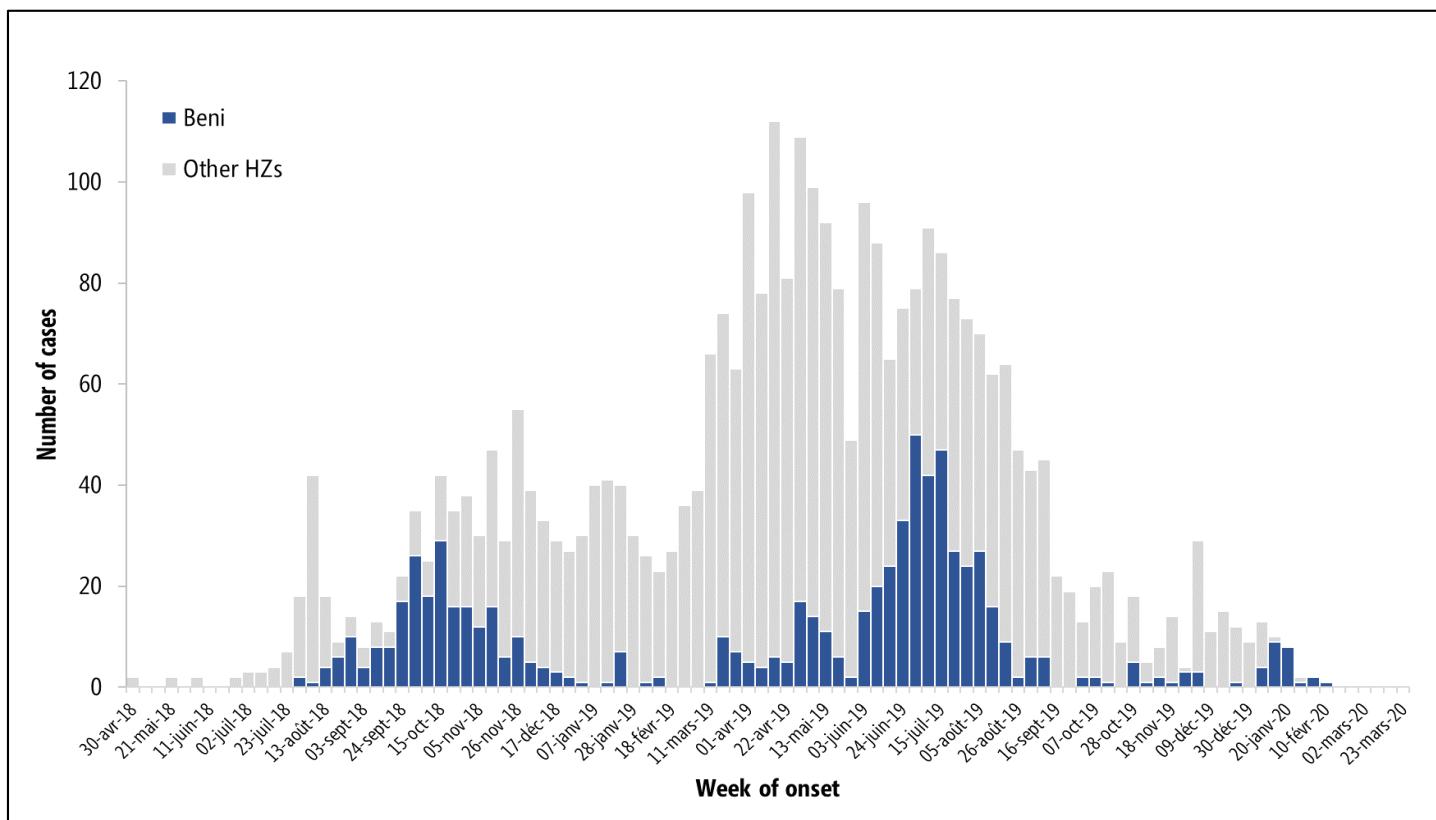
Alert rates steadily climbed since the beginning of the outbreak response as active and passive case finding systems were strengthened and adapted to suit the local context, reaching additional health zones involved in the evolution of the outbreak. Alert rates have begun to decline, as expected, as the incidence of confirmed cases decreased and disease surveillance activities gradually transitioned toward routine operations. In the current stage of the outbreak, it remains important to maintain appropriate levels of surveillance through the end of outbreak declaration to rapidly detect relapse, reintroduction or new emergence events, implement effective control measures if necessary and avoid a potential resurgence of the outbreak.

As of 31 March 2020, a total of 3453 EVD cases were reported from 29 health zones (Table 1), including 3310 confirmed and 143 probable cases, of which 2273 cases died (overall case fatality ratio 66%). Of the total confirmed and probable cases, 56% (1935) were female, 28% (979) were children aged less than 18 years, and 5% (171) were healthcare workers.



WHO has not received funding for the Ebola response in the Democratic Republic of the Congo since December 2019. An urgent injection of US\$ 20 million is required to ensure that response teams have the capacity to maintain the appropriate level of operations through to the beginning of May 2020, and are able to rapidly respond to any flare-ups. If no new resources are received, WHO risks running out of funds for the Ebola response before the end of the outbreak. For more information see this recent statement: <https://www.who.int/news-room/detail/06-03-2020-end-in-sight-but-flare-ups-likely-in-the-ebola-outbreak-in-the-democratic-republic-of-the-congo>

Figure 1: Health zone of reported Ebola virus disease cases by week of illness onset, as of 29 March 2020



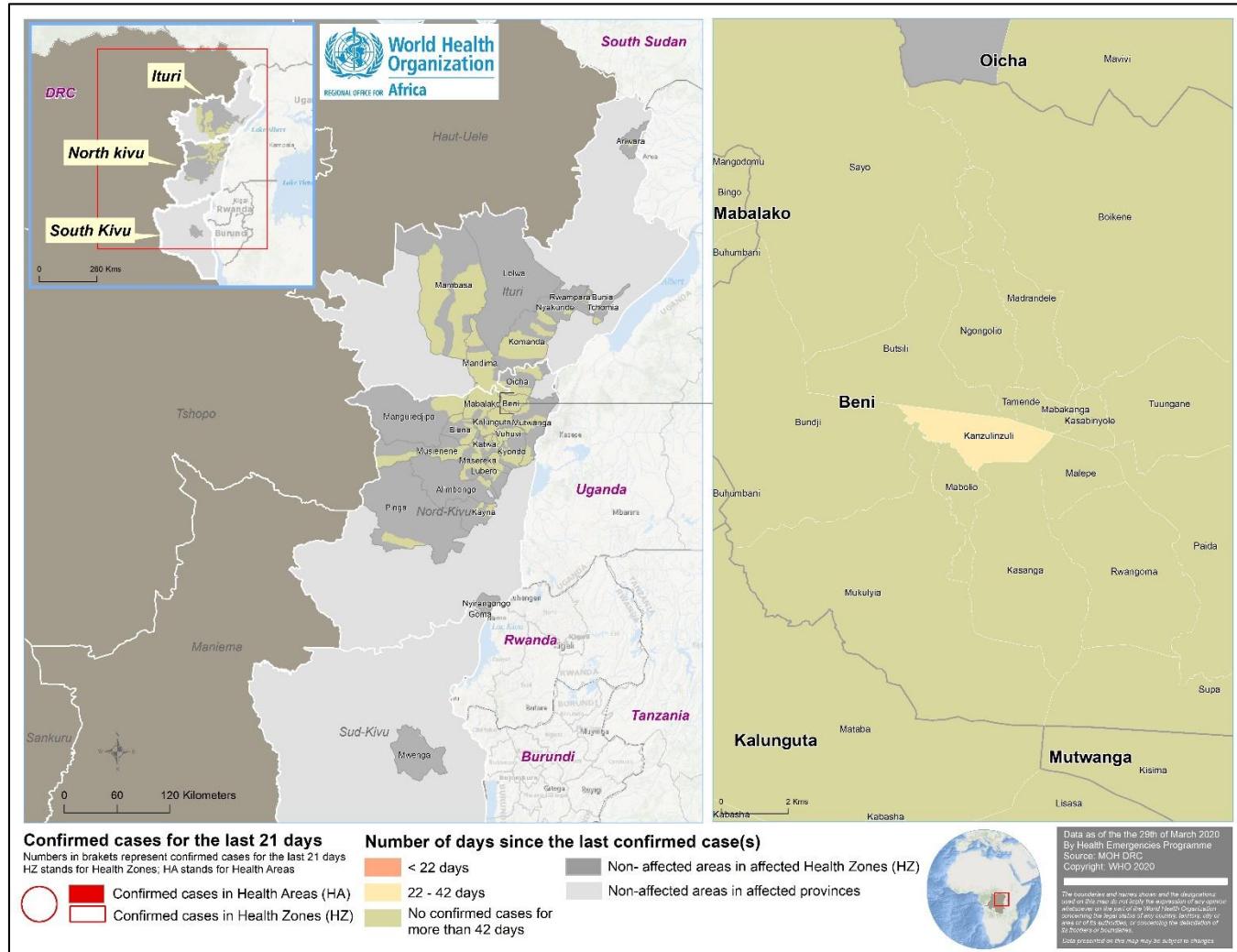
*Excludes n=149/3444 cases for whom onset dates not reported. Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning. Non-active health zones indicate health zone that have not reported cases in the last 21 days – see Table 1 for details.

Table 1: Ebola virus disease cases by classification and health zones in North Kivu and Ituri provinces, Democratic Republic of the Congo, as of 29 March 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	0/18	0	721	9	730	465	474
	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	653	24	677	471	495
	Kayna	0/21	0	28	1	29	8	9
	Kyondo	0/22	0	25	6	31	15	21
	Lubero	0/19	0	31	2	33	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	10	357	166	176
	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		0/471	0	3310	143	3453	2130	2273

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, 29 March 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

- A total of 249 395 contacts have been registered to date. None were under surveillance as of 29 March 2020. All contacts of confirmed cases completed follow-up.
- From 23 to 29 March 2020, 31 265 alerts were reported, of which 30 850 (99%) were investigated within 24 hours of reporting. Of these alerts, 2223 were validated as suspected cases.
- Testing of suspected cases continues to be provided across 11 operational laboratories. From 23 to 29 March, 2376 samples were tested.

Vaccines

- As of 25 March 2020, 196 people had received the second dose of the vaccine produced by Johnson & Johnson (Ad. SEBOV/MVA-BN-Filo) in Kahembe and Majengo health areas, Karsimbi Health Zone, bringing the cumulative total of people receiving this vaccine to 6 274 since 8 January 2020.

Case management

- Ebola treatment centres (ETCs), transit centres (TCs), and decentralized transit centres continue to provide medical care and support to patients. There are currently 11 ETCs, 10 TCs, and 1 decentralized TC.

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_24728

