

EBOLA VIRUS DISEASE

Democratic Republic of the Congo



External Situation Report 85



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Date of issue: 24 March 2020

Data as reported by: 22 March 2020

1. Situation update

Cases	3453
Deaths	2273

No new cases of Ebola virus disease (EVD) have been reported since 17 February 2020. The last person confirmed to have Ebola was discharged from an Ebola Treatment Centre on 3 March 2020 after recovering and testing negative for the virus twice. The last 46 contacts finished their follow-up period on 9 March 2020. These developments are significant milestones in this outbreak. There is, however, 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](#).

Extensive surveillance, pathogen detection, and clinical management activities in previously affected areas continue, including alert validation, rapid diagnosis of suspected cases, and building of partnerships with community members to strengthen investigation of potential community EVD deaths. Last week, nine historical probable cases were validated, whose dates of symptom onset were between October 2018 to July 2019, bringing the cumulative number of probable cases to 143. Further historical probable cases are expected to be validated as investigations into past cases continue.

Insecurity remains a challenge, hindering ongoing surveillance activities in some areas, which could delay the detection of potential reintroduction events.

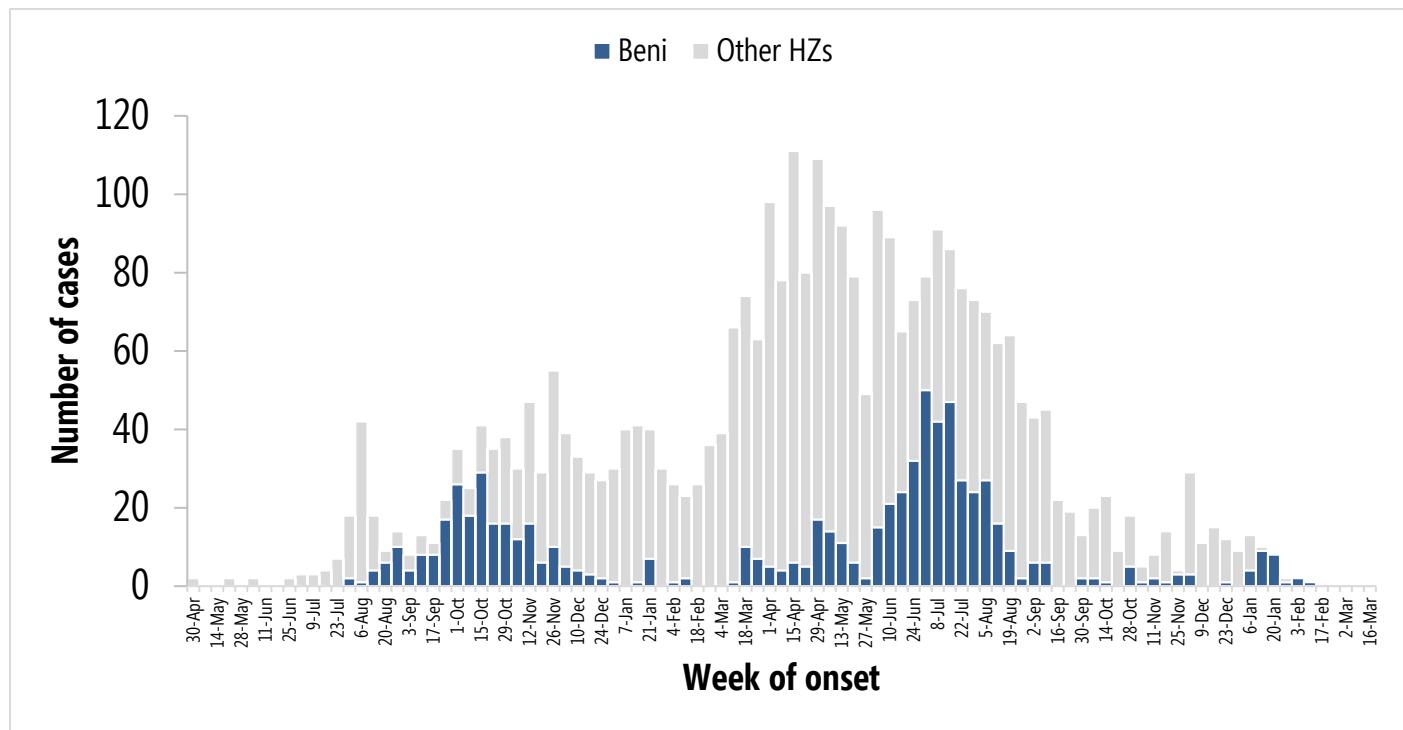
From 16 to 22 March 2020, 31 984 alerts were reported and investigated. Of these, 2 555 alerts were validated as suspected cases, requiring specialized care and laboratory testing to rule-out EVD. On average, people stay in these facilities for three days while waiting for EVD to be definitively ruled 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 16 to 22 March 2020, 2 747 samples were tested including: 1 479 blood samples from alive, suspected cases; 374 swabs from community deaths; and 894 samples from re-tested patients. Overall, laboratory activity was conducted at similar levels as compared to the prior week.

Since the beginning of the outbreak, alert rates steadily climbed 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. As expected, alert rates have begun to decline in some areas as the incidence of confirmed cases decreased and disease surveillance activities gradually transitioned toward routine operations. However, it remains important to maintain appropriate levels of surveillance through the end of outbreak declaration to rapidly detect relapse, reintroduction or new emergence events, thereby providing an opportunity to implement effective control measures and avoid a potential resurgence of the outbreak.

As of 21 March 2020, a total of 3 453 EVD cases were reported from 29 health zones (**Table 1**), including 3 310 confirmed and 143 probable cases, of which 2 273 cases died (overall case fatality ratio=66%). Of the total confirmed and probable cases, 56% (1931) were female, 28% (975) 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 22 March 2020



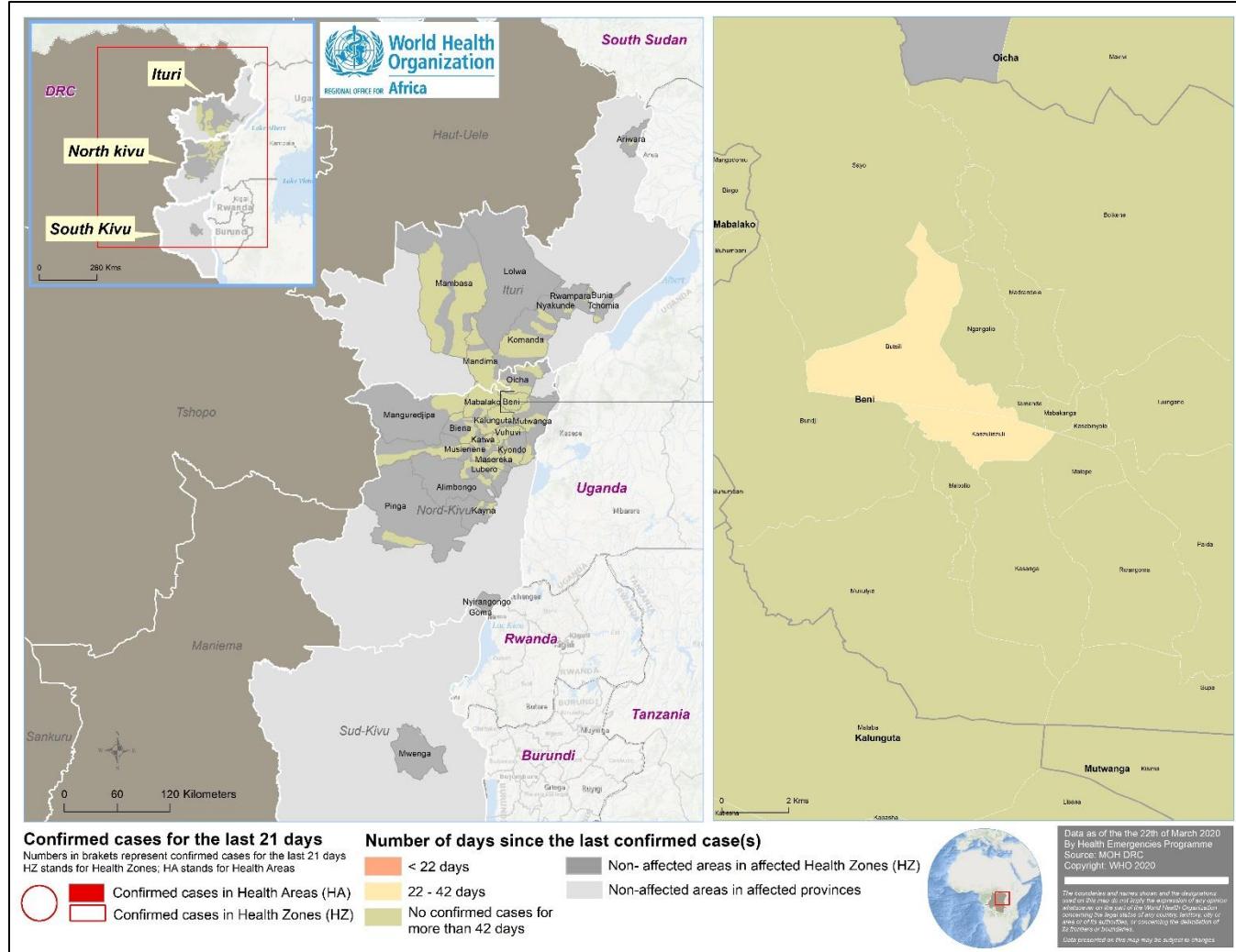
*Excludes n=148/3444 cases for whom onset dates not reported. Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning. Non-active health zones indicate health zone that have not reported cases in the last 21 days – see Table 1 for details.

Table 1: Ebola virus disease cases by classification and health zones in North Kivu and Ituri provinces, Democratic Republic of the Congo, as of 22 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, 22 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 17 March 2020. All contacts of confirmed cases completed follow-up.
- ⌚ As of March 17, an average of 4704 alerts were reported per day over the past seven days, of which 4650 (99%) were investigated within 24 hours of reporting.
- ⌚ Testing of suspected cases continues to be provided across 11 operational laboratories. From 16 to 22 March, 2747 samples were tested.

Vaccines

- ⌚ As of 16 March 2020, 301 785 people were vaccinated with the rVSV-ZEBOV-GP Ebola vaccine.
- ⌚ Vaccination with the Ad26.ZEBOV/MVA-BN-Filo vaccine continued in two health areas near Goma, with 20 339 people vaccinated since its introduction on 14 November 2019, as of 29 February 2020.

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_24748

