

EBOLA VIRUS DISEASE

Democratic Republic of the Congo



External Situation Report 80



World Health
Organization

REGIONAL OFFICE FOR

Africa

EBOLA VIRUS DISEASE

Democratic Republic of the Congo External Situation Report 80



Date of issue: 18 February 2020
Data as reported by: 16 February 2020

1. Situation update



This week, the incidence of Ebola virus disease (EVD) cases continued to be low (Figure 1). From 10 to 16 February 2020, one new confirmed case was reported in Beni Health Zone, North Kivu Province in Democratic Republic of the Congo. The case was reported on 11 February 2020, and was listed and followed as a contact at the time of detection, with known epidemiological links. Early detection of cases reduces the probability of transmission of EVD in the community and significantly improves the clinical outcome for the patients.

In the past 21 days (27 January to 16 February), 10 new confirmed cases, including three community deaths, were reported from four of the 30 health areas in two active health zones in North Kivu Province (Figure 2, Table 1): Beni (90%; $n=9$) and Mabalako (10%; $n=1$). It has been more than 42 days since new cases were confirmed from Butembo Health Zone. In Mabalako Health Zone, there are no more contacts in their high risk period (days seven to 13 since last possible exposure).

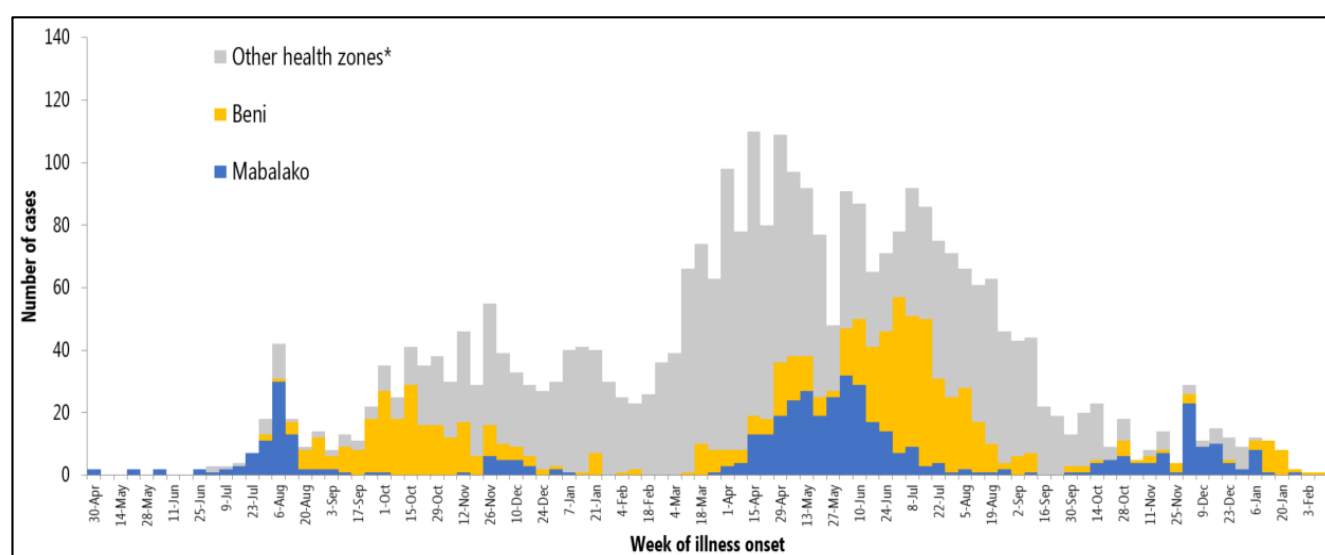
While we are cautiously optimistic about the overall trend and reduced geographic spread of the outbreak, the security situation in several EVD-affected health areas remain volatile, and the risk of spread within Democratic Republic of the Congo and neighbouring countries remains high. Given delays in isolation of some cases in recent weeks and continued reports of nosocomial transmission, we expect to see additional cases in the coming weeks. It is critical that response teams rapidly detect, investigate and follow-up all cases and their contacts.

As of 16 February 2020, a total of 3432 EVD cases, including 3309 confirmed and 123 probable cases have been reported, of which 2253 cases died (overall case fatality ratio 66%). Of the total confirmed and probable cases, 56% (1923) were female, 28% (968) were children aged less than 18 years, and 5% (172) were healthcare workers.

On 12 February 2020, WHO Director-General Dr Tedros Adhanom Ghebreyesus reconvened the Emergency Committee for EVD under the International Health Regulations to review the status of the outbreak. It was the view of the Committee that this event still constitutes a public health emergency of international concern (PHEIC). Further details can be found in the Emergency Committee [Statement](#). WHO revised the risk assessment for this event from Very High down to High at the national and regional levels, while the risk level was maintained as Low at the global level. This assessment acknowledged improvements in case incidence and other epidemiological indicators, and the strengthened local and regional capacities.

On 10 February 2020, WHO published new [guidelines](#) for healthcare providers regarding the management of pregnant and breastfeeding women in the context of EVD. The document reviews existing evidence and provides recommendations on the care continuum for women exposed to, diagnosed with, or recovered from EVD, and will enable healthcare providers, emergency response teams and health policy makers to improve prevention and treatment measures in an Ebola outbreak. The news release of this guideline can be found [here](#).

Figure 1: Health zone of reported Ebola virus disease cases by week of illness onset, as of 16 February 2020



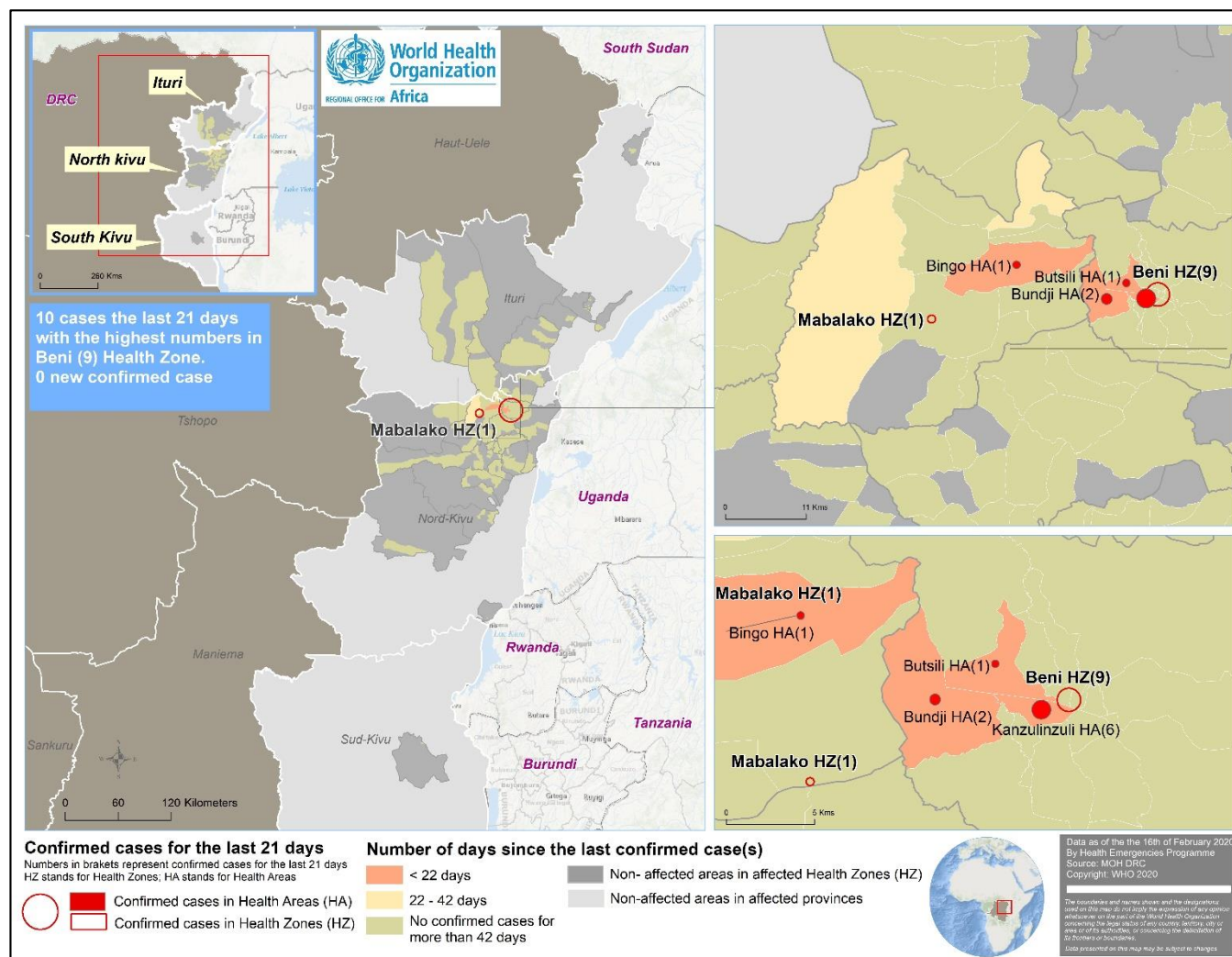
*3432 confirmed and probable cases, reported as of 16 February 2020. Excludes n=163 cases for whom onset dates not reported. Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning. Non-active health zones indicate health zones that have not reported cases in the last 21 days.

Table 1: Ebola virus disease cases by classification and health zones in North Kivu and Ituri provinces, Democratic Republic of the Congo, as of 16 February 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	0	5	2	2
	Beni	3/18	9	720	9	729	465	474
	Biena	0/16	0	19	2	21	12	14
	Butembo	0/15	0	295	6	301	353	359
	Goma	0/10	0	1	0	1	1	1
	Kalunguta	0/18	0	198	19	217	71	90
	Katwa	0/18	0	653	23	676	471	494
	Kayna	0/21	0	28	0	28	8	8
	Kyondo	0/22	0	25	4	29	15	19
	Lubero	0/19	0	31	2	33	4	6
	Mabalako	1/12	1	463	18	481	334	352
	Manguredjipa	0/10	0	18	0	18	12	12
	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	3	85	27	30
	Mandima	0/15	0	347	6	353	166	172
	Nyakunde	0/12	0	2	0	2	1	1
	Rwampara	0/13	0	8	0	8	3	3
	Tchomia	0/12	0	2	0	2	2	2
Total		4/471	10	3309	123	3432	2130	2253

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, 16 February 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

- ➔ Over 249 000 contacts have been registered to date and 1662 were under surveillance as of 16 February 2020. On average, 91% of contacts were followed daily in the last seven days in health zones with continued operations.
- ➔ An average of 5186 alerts were reported per day over the past seven days, of which 5142 (99%) were investigated within 24 hours of reporting.

Vaccines

- ➔ As of 16 February 2020, 295 673 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 12 233 people vaccinated since its introduction on 14 November 2019, as of 7 February 2020.

Case management

- ➔ As of 15 February 2020, there are eight Ebola treatment centres (ETCs) reporting bed occupancy and 13 Ebola transit centres reporting bed occupancy in the provinces of North Kivu, South Kivu and Ituri.

Infection prevention and control (IPC) and Water, Sanitation and Hygiene (WASH)

- ➔ The possible exposure for the only case reported in the last seven days from Beni subcoordination was not considered as possible nosocomial infection (no healthcare workers were infected).
- ➔ All IPC activities related to the case were performed within 24 hours of detection, including evaluation, decontamination of households, IPC kit donations, IPC briefing, monitoring and supportive supervision for facilities around the case.

- A total of 100 health facilities were assessed with the IPC scorecard: the mean score was 77% in 14 health zones. Sterilization and isolation capacity remain the lowest scoring indicators.
- Recent insecurity in Mabalako led to the movement of internally displaced people to Beni and Biakato, and to the closure of a number of major health facilities, including the General Reference Hospital of Mabalako.
- The training of IPC focal points and hygiene committees on the MoH standardized “IPC toolkit” for health facilities has ended, reaching a total of 1680 health care workers.
- The IPC team in Goma provided support to the Amani Festival, a music event, including hand hygiene screening for 65 682 individuals.

Points of Entry (PoE)

- From 10 to 16 February 2020, 2 941 449 screenings were performed, bringing the cumulative number of screenings to over 152 million since the beginning of the outbreak. There were 323 alerts notified this week, of which 107 (33%) were validated as suspect cases following investigation; none were subsequently confirmed with EVD following laboratory testing. The cumulative number of EVD positive cases identified at PoEs and Points of Control (PoCs) therefore remains at 30.
- The average number of PoEs and PoCs reporting daily screening was 102 out of 109 points this week. No EVD contacts were intercepted at PoEs and PoCs this week.
- Four out of eight PoCs in and around Mangina suspended their activities as a result of insecurity; the affected PoCs are Kyanzaba, Makeke, Bella and Makeke Detour. Activities in these affected PoCs have not resumed.
- On 10 February 2020, joint supervision visits were conducted to PoEs and PoCs in and around Goma: PoEs OPRP, Grande Barriere, Petite Barriere, and Goma International Airport. During the visit, visual observation was re-emphasized as a key activity in traveller screening.
- On 11 and 14 February 2020, two training sessions were conducted on monitoring population movement by using data collected at PoE/PoCs in Beni and Mangina, respectively. Fifteen people participated in these trainings.

Safe and Dignified Burials (SDB)

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_24800

