

# EBOLA VIRUS DISEASE



Democratic Republic of the Congo

External Situation Report 98



World Health Organization

REGIONAL OFFICE FOR Africa

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## External Situation Report 98

Date of issue: 23 June 2020

Data as reported by: 21 June 2020

### Situation update

Cases

3470

Deaths

2280

In Ituri, North Kivu and South Kivu provinces of the Democratic Republic of the Congo, no new confirmed cases of EVD have been reported since 27 April 2020.

As part of ongoing epidemiological data confirmation exercise, seven historic probable cases were validated by the Ministry of Health in the past week with onset dates reported between March 2019 and November 2019. Six of these seven probable cases were reported in North Kivu province across three different health zones; three in Kalunguta, two in Manguredijipa and one in Mabalako. The seventh probable case was reported in Ituri province in the Mambasa health zone. The ages of these seven probable cases ranged from 1.5 months to 60 years.

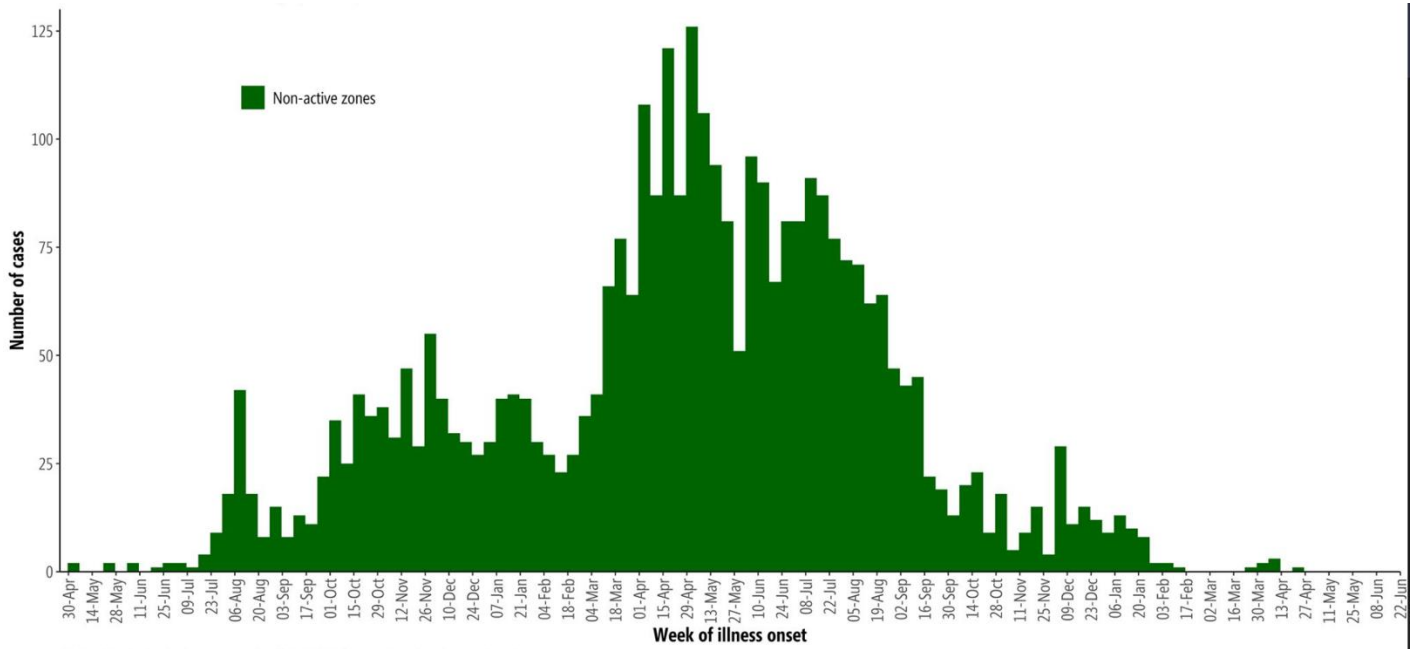
From 14 to 21 June 2020, an average of 2871 alerts were reported and investigated each day. Of these, an average of 331 alerts were validated as suspected cases each day, requiring specialized care and laboratory testing to rule out EVD. In the past week, a high level of reported alerts has been sustained throughout active sub-coordinations. Timely testing of suspected cases continues to be provided from eight laboratories. From 15 to 21 June 2020, 3332 samples were tested, including 2665 blood samples from alive, suspected cases; 323 swabs from community deaths; and 344 from re-tested patients. None of them tested positive. The number of samples tested by the laboratories increased by 4% compared to the previous week.

As of 21 June 2020, a total of 3470 EVD cases, including 3317 confirmed and 153 probable cases have been reported, of which 2287 cases died (overall case fatality ratio 66%), and 1171 have recovered. 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.

Handover of the coordination of the response activities to the Provincial Health Division of North Kivu Province, which started on 1 June 2020, is ongoing.

For information about the EVD outbreak in Équateur Province see the [WHO Regional Office for Africa Weekly Bulletins on Outbreaks and Other Emergencies](#).

**Figure 1: Health zone of reported Ebola virus disease cases by week of illness onset, as of 21 June 2020**



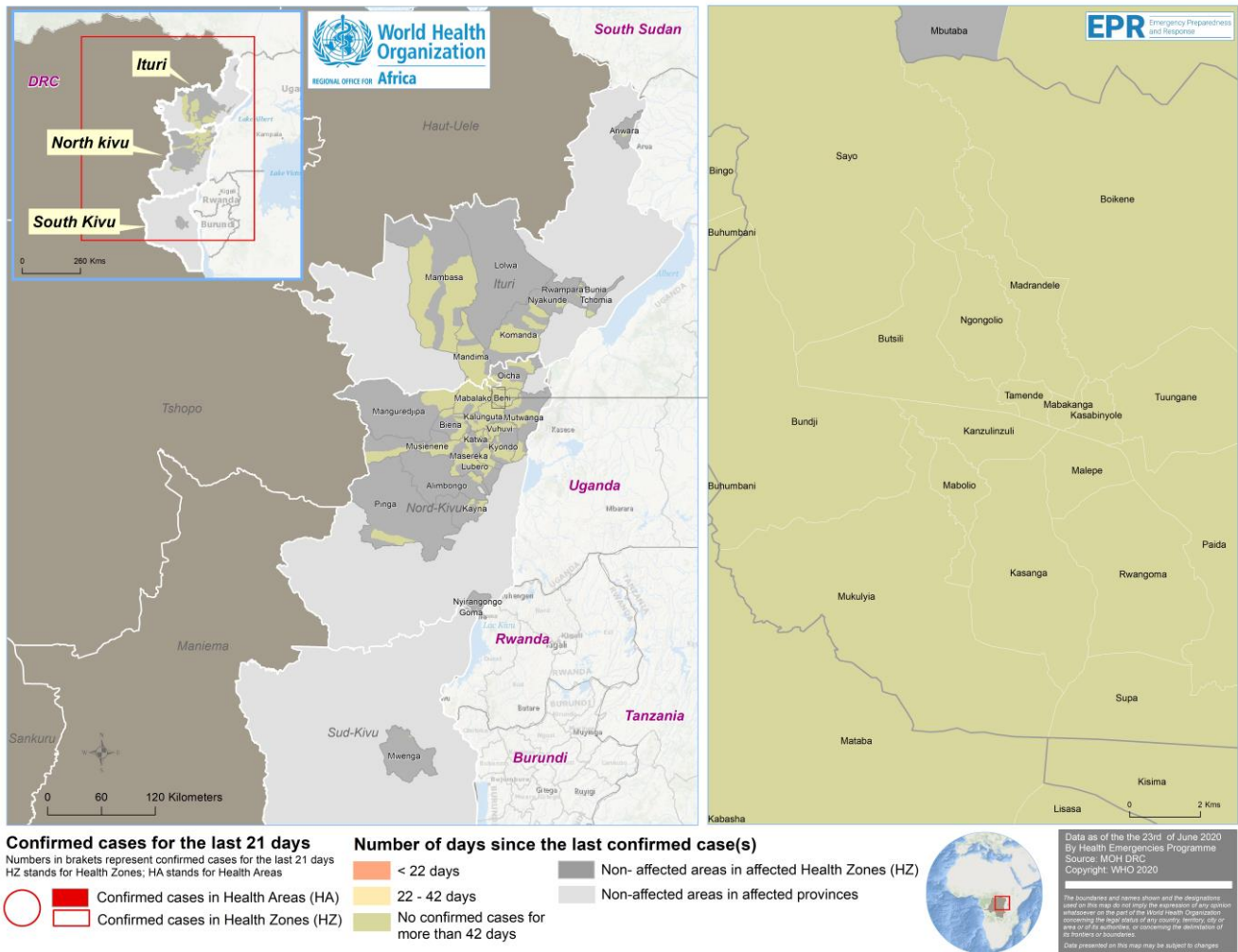
*\*Excludes n=71/3470 cases for whom onset dates not reported. Data in recent weeks are subject to delays in case confirmation and reporting, as well as ongoing data cleaning.*

**Table 1: Ebola virus disease cases by classification and health zones in North Kivu, South Kivu, and Ituri provinces, Democratic Republic of the Congo, as of as of 21 June 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	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	26	224	71	97
	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	20	483	334	354
	Manguredjipa	0/10	0	18	5	23	12	17
	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	6	88	27	33
	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	
<b>Total</b>		0/471	0	3317	153	3470	2134	2287

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

**Figure 3: Geographical distribution of confirmed and probable Ebola virus disease cases by health area, North Kivu and Ituri provinces, Democratic Republic of the Congo, 21 June 2020**



## 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

- From 15 to 21 June 2020, 3332 samples were tested, including 2665 blood samples from alive, suspected cases; 323 swabs from community deaths; and 344 from re-tested patients. None of them tested positive. The number of samples tested by the laboratories increased by 4% compared to the previous week.
- Over 250 000 contacts of cases reported in Ituri, North Kivu and South Kivu provinces were registered during this outbreak.

### Vaccines

- The summary of rVSV-ZEBOV-GP vaccination data shows that between 8 August 2018 and 20 May 2020, 305 841 people were identified as eligible for vaccination; 99.4% (n=303 905) of them were vaccinated.
- In addition, vaccination activities using Ad26-ZEBOV/MVA-BN-FILO were carried out in the health areas of Majengo and Kahembe, Karisimbi Health Zone in North Kivu Province. Between 14 October 2019 and 10 April 2020, 20 339 people received the first dose of this vaccine, and 9 560 of them received the second dose.

### Case management

- Ebola treatment centres (ETCs), transit centres (TCs) and decentralized transit centres continue to operate across outbreak affected areas, providing timely care and diagnoses for suspected EVD cases.
- As of 20 June 2020, there were 81 patients awaiting test results were admitted in the ten operational ETCs and TCs that are reporting their activities.

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

- There were no reports of EVD nosocomial infections in the past week.
- From 15 to 21 June, 54 healthcare facilities (HCF) in the Beni, Butembo, Bunia and Goma sub-coordinations were evaluated with an average IPC score of 70%; disaggregated as follows:
  - HCF with IPC score of <50% = 9 (17%)
  - HCF with IPC score of 50 - 79% = 35 (65%)
  - HCF with IPC score of ≥80% = 10 (19%)

- In terms of follow-up / support activities:
  - 564 out of 622 HCF were supported (formative supervision)
  - 89 HCF out of 450 with IPC / WASH
  - 55 out of 55 HCW (doctor, nurses and nursing assistants) have been trained in IPC/WASH
  - 728/816 HCW benefited from briefings on the various themes of IPC/ WASH (all categories combined)
- At the coordination level, the IPC team is detailing the 90-day plan. The team is also supporting the development and execution at strategic levels of the skills transfer plan related to the IPC activities to the Ministry of Health.

## Points of Entry (PoE)

- This week, 89 872 screenings were performed at the 50 active PoEs/Point of Control (PoCs), bringing the total number of screenings to over 181 million. Nine new alerts were notified, of which one alert was deceased. Three of these alerts were subsequently validated and none confirmed with EVD. Samples were taken from the deceased individual and a safe and dignified burial was performed. The total number of EVD cases identified at PoEs and PoCs remains at 30.
- The International Organization for Migration (IOM) will continue supporting routine activities at 25 PoE/PoCs in the province. In addition, a total of 1169 community members living around PoEs/PoCs were sensitized on EVD risks and health control measures through door-to door community engagement.

## Risk communication, social mobilization and community engagement

- As of 20 June 2020, there were 11 educational talks and 20 individual interviews conducted with patients, community leaders and members of community action groups in the Beni Health Zone on raising alerts, the importance of early attendance at transit centres, disease surveillance and prevention of EVD. This led to the escalation of 64 alerts and the isolation and testing of three suspected cases.

## Preparedness and Operational Readiness

Operational readiness in the Democratic Republic of the Congo:

- Readiness actions are being implemented in 42 non-affected health zones in North Kivu, South Kivu and Ituri provinces and in the non-affected provinces of Tshopo and Maniema.
- National Contingency Plans (NCP) for EVD Preparedness Phases have been finalized in all Priority 1 countries.
- Capacities developed under EVD Preparedness in the Priority 1 countries have transitioned as much as possible to the COVID-19 response particularly laboratory testing, IPC and rapid response teams.

### Priority 1 countries

There have been over 2400 alerts investigated from all countries that were conducting preparedness activities in the region and EVD was systematically ruled out in all except in Uganda. Four confirmed EVD cases have been imported from Democratic Republic of the Congo to Uganda since June 2019, with no transmission or secondary cases in Uganda. Uganda was successful in stopping the spread of EVD and preventing outbreaks by investing roughly US\$ 18 million in EVD preparedness efforts. A total of 14 600 health workers have been vaccinated in the four Priority 1 countries (Burundi, Rwanda, South Sudan and Uganda).

All Priority 1 countries are finalizing updated national contingency plans for 2020. In **Burundi** it is envisioned that national EVD Preparedness capacities transitioned to COVID can be re-focused to EVD in the event of an EVD outbreak.

In **Rwanda**, WHO has maintained EVD Preparedness and co-ordination capacity at national and district level as much as possible within the limits of available resources.

In **South Sudan**, the budget and workplan for the final phase NCP for EVD preparedness was approved by MoH. Ongoing EVD co-ordination meetings include the Strategic Advisory Group, National Task-force, Technical Working Groups, and State Task Forces meetings. IOM continues with EVD prevention and preparedness activities in the five PoEs in Morobo County, Yei County, Nimule Payam, Juba County and Wau County. During this Epi week 25; 4160 inbound travellers were screened bringing the cumulative number of travellers screened to 2 300 631. There was no traveller who underwent secondary screening during this reporting week. IOM held the official handover ceremony for Yei Airstrip PoE representing the official scaling down and closure of IOM managed EVD screening sites. [The IOM South Sudan EVD weekly report \(week 24\) is available here.](#)

In **Uganda**, WHO has maintained EVD Preparedness and co-ordination capacity at national and district level within the limits of available resources, and there has been no change to the NCP. From 15 to 31 May, District Task Force meetings were held in Kasese and Bundibugyo districts in the Rwenzori Region and in all districts in the West Nile Region. Daily district task force meetings are held in Hoima district. The Deputy Resident District Commissioners chaired the DTF meeting in Kasese and surveillance teams to remain vigilant.

### Priority 2 countries

Angola, Central African Republic, Congo, Tanzania and Zambia have not reported any cases of EVD related to this Democratic Republic of the Congo outbreak to date. However, financial support for implementing emergency preparedness activities in Angola, Central African Republic, Republic of Congo and Zambia remains insufficient to allow them to reach optimal International Health Regulations (IHR) core compliance. Tanzania has continued to implement regular coordination meetings to update partners and strategies for EVD preparedness as well as activities in the technical pillars.

## Operational partnerships

- ➔ Under the overall leadership of the Government of the Democratic Republic of the Congo and in support of the Ministry of Health, WHO is supporting public health operations and regional preparedness as outlined in the Strategic Response Plan. WHO is working intensively with wide-ranging, multisectoral and multidisciplinary national, regional and global partners and stakeholders for EVD response, research and preparedness.
- ➔ Various international organizations and UN agencies, specialized agencies and non-governmental organizations are involved in response and preparedness activities; the organizations and their specific contributions have been previously reported.
- ➔ WHO continues to engage the Global Outbreak Alert and Response Network (GOARN), Emerging and Dangerous Pathogens Laboratory Network (EDPLN), Emerging Disease Clinical Assessment and Response Network (EDCARN), and the Emergency Medical Team (EMT) initiative – as well as regional operational partners and collaboration centres in Africa – to deploy experts and multidisciplinary teams for the response, and to support intensive preparedness and readiness activities in neighbouring and at-risk countries.
- ➔ WHO encourages wider coverage of partner operations via this report. If you would like to see the activities of your agency or organization appears in the report, please send an email to [goarn@who.int](mailto:goarn@who.int).



- ➔ WHO advises against any restriction of travel to, and trade with, the Democratic Republic of the Congo in relation to EVD based on the currently available information. Any requirements for certificates of Ebola vaccination are not a reasonable basis for restricting movement across borders or the issuance of visas for travellers to/from the affected countries. WHO continues to closely monitor and, if necessary, verify travel and trade measures in relation to this event. Currently, no country has implemented travel measures that significantly interfere with international traffic to and from the Democratic Republic of the Congo due to this EVD outbreak. Travellers should seek medical advice before travel and should practice good hygiene. Further information is available in the WHO recommendations for international traffic related to the Ebola Virus Disease outbreak in the Democratic Republic of the Congo.
- ➔ In order to monitor the travel and trade situation around this event, a dashboard, Ebola outbreak in the Democratic Republic of the Congo: Travel and trade health measures, has been established. The dashboard can also be accessed from Strategic Partnership for International Health Regulations (2005) and Health Security (SPH) page under 'Resources' tab, and then click on 'IHR Travel and Trade Measures' tab. The dashboard shows all countries where WHO is aware that travel and trade measures have been implemented, and the type of measure, and will be updated as and when any measure is confirmed to be in place.

### 3. Conclusion

Tuesday 23 June 2020 marks 41 days with no new cases of EVD since the Ministry of Health began its 42-day countdown to the declaration of the end of the EVD outbreak in Ituri, North Kivu and South Kivu. Maintaining a robust surveillance system in order to detect, isolate, test and treat new suspected cases as early as possible will remain crucial for this response even after the declaration of the end of the outbreak, as will be coordination, among partners, authorities and communities and EVD survivor advocacy .