Ebola virus disease (EVD) in Democratic Republic of the Congo: un update

Sources:


Outbreak update

The Ministry of Health (MoH), WHO and partners have continued to face challenges in the containment and control of the Ebola virus disease (EVD) outbreak in the Democratic Republic of the Congo. The number of reported cases increased during recent weeks.

During the last 21 days (2 January – 22 January 2019), 102 new cases have been reported from 13 health zones, including: Katwa (62), Butembo (12), Oicha (6), Kayina (5), Beni (2), Manguredjipa (3), Kyondo (3), Kalungata (2), Komanda (1), Musienene (2), Biena (2), Mabalako (1), and Vuhovi (1). The current outbreak hotspots of Butembo and Katwa encompass an urban area with a population of approximately one million people.

Ten percent (14/148) of these cases comprised of healthcare workers, and among those with available information, 42% (45/107) reported having attended a funeral in the weeks prior to illness onset. Collectively, these figures suggest that the observed increase in Katwa is being driven by a combination of both healthcare facility and community-based transmissions.

As the risk of national and regional spread is very high, it is important for neighboring provinces and countries to enhance surveillance and preparedness activities.

Currently, no country has implemented travel measures that significantly interfere with international traffic to and from the Democratic Republic of the Congo.

Monoclonal antibodies for the treatment of EVD.

A monoclonal antibody treatment for the disease, is safe and well-tolerated in adults, according to the results from the first human trial of the drug published in The Lancet on January 25. Derived from the blood of a person who survived an Ebola infection in 1995, mAB114 is an antibody that in earlier studies provided full protection against Ebola in animals, including non-human primates.

A randomized controlled trial that began in November 2018 is going on in the DRC comparing mortality rates among recipients of ZMapp, mAB114, and the antiviral drug remdesivir.

Antonino Di Caro, Nicola Petrosillo, Eskild Petersen

ESCMID Emerging Infection Taskforce (EITaF)