Ebola Virus Disease in West Africa - Update

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WHO/AFRO
### Previous Ebola outbreaks in the African Region

<table>
<thead>
<tr>
<th>Year</th>
<th>Country</th>
</tr>
</thead>
<tbody>
<tr>
<td>1976</td>
<td>Sudan</td>
</tr>
<tr>
<td></td>
<td>DRC</td>
</tr>
<tr>
<td>1977</td>
<td>DRC</td>
</tr>
<tr>
<td>1979</td>
<td>Sudan</td>
</tr>
<tr>
<td>1994</td>
<td>Gabon</td>
</tr>
<tr>
<td></td>
<td>Cote d’Ivoire</td>
</tr>
<tr>
<td>1995</td>
<td>Liberia</td>
</tr>
<tr>
<td></td>
<td>DRC</td>
</tr>
<tr>
<td>1996</td>
<td>Gabon</td>
</tr>
<tr>
<td></td>
<td>South Africa</td>
</tr>
<tr>
<td>2000-2001</td>
<td>Uganda</td>
</tr>
<tr>
<td>2001-2002</td>
<td>Gabon</td>
</tr>
</tbody>
</table>

First Ebola outbreak

#### Deaths 1976 - 2012

- **2389** Cases
- **1570** Deaths

Cases and deaths

- **1 dot = 1 event**
- **1 - 49**
- **50 - 99**
- **100 - 425**

- Ebola Zaire
- Ebola Sudan
- Ebola Ivory coast
- Ebola Bundibugyo

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**World Health Organization Africa**
Ebola Virus Disease epidemic: Current situation

The EVD has affected over 28000 persons including over 11000 deaths in the three most affected countries.

1049 cases including 535 deaths were reported among health care workers as of 20 September 2015.

Six West African countries (Guinea, Liberia, Mali, Nigeria, Senegal and Sierra Leone).

The Ebola has significantly reduced: Liberia has been declared free of Ebola for the 3rd time; Guinea has reported only 2 new cases in the week ending on 20 September and Sierra Leone did not report any case in the same week.
Ebola Virus Disease epidemic: Current situation

The current epidemic is the first major EVD epidemic reported in West Africa and it is the first time the epidemic has spread to capital cities. It is also the largest, most severe and most complex Ebola epidemic ever.

The EVD epidemic has had a devastating impact on families, livelihoods, security and socio-economic development in the severely affected countries.

To date, there is no authorized vaccines against EVD.
Ebola trend and Response as of week 38 (20.09)

- 23 March: WHO deployed multi-disciplinary international experts
- Mobile lab deployed through EDPLN
- 21 March 2014: Laboratory confirmation
- 13 March: WHO was notified of an unknown disease in Guinea
- 23 March: WHO declared outbreak of Ebola
- 31 March: Liberia declared outbreak of Ebola

- 26 May: Sierra Leone declared outbreak of Ebola
- 23 July: Nigeria declared outbreak of Ebola
- June 2014: Accra ministerial meeting
- SCBOCC established

- 8 August: EVD declared PHE
- 19 September: UNMEER established

- 23 August: Senegal declared outbreak of Ebola
- 20 October: Nigeria declared end of Ebola outbreak
- 23 October: Mali declared outbreak of Ebola

- 18 January: Mali declared end of Ebola outbreak
- 03 September: Liberia declared end of Ebola outbreak
Updated map

Geographic distribution of cases of Ebola Virus Disease in West Africa, commutative cases as of 27 September 2015; and cases reported in the past 7 and 21 days.

<table>
<thead>
<tr>
<th>Countries</th>
<th>Cumulative number</th>
<th>Health Care Workers</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Cases</td>
<td>Deaths</td>
</tr>
<tr>
<td>Guinea</td>
<td>3805</td>
<td>2533</td>
</tr>
<tr>
<td>Liberia*</td>
<td>10672</td>
<td>4808</td>
</tr>
<tr>
<td>Sierra Leone</td>
<td>13911</td>
<td>3955</td>
</tr>
<tr>
<td>Mali*</td>
<td>8</td>
<td>6</td>
</tr>
<tr>
<td>Nigeria*</td>
<td>20</td>
<td>8</td>
</tr>
<tr>
<td>Senegal*</td>
<td>1</td>
<td>0</td>
</tr>
<tr>
<td>Total</td>
<td>28417</td>
<td>11310</td>
</tr>
</tbody>
</table>
West Africa

Data as of:
- Guinea: 03/10/2015
- Liberia: 27/09/2015
- Sierra Leone: 03/10/2015
995 Experts are currently deployed by WHO for Ebola preparedness and response in West Africa.

572 (more than 50%) of these experts currently in the field have been deployed by the WHO Regional office for Africa.

Since the beginning of the epidemic, WHO regional office for Africa has deployed more than 1250 experts.
How to get to zero? (1)

- Sustained community engagement and other measures to prevent resistance linked to social, cultural and traditional beliefs and practices which hampered the earlier outbreak response

- Continue infection control and other measures to minimize risk of infection of HWs, also a big challenge in the initial EVD response

- Deployment of skilled national and international EVD experts

*Infection of HW attributable to: environment, frequent exposure (many cases), level of protection (quality, heat e.t.c)
How to get to zero? (2)

Build resilient, strong and sustainable health care system (IPC, logistics, IHR, basic infrastructure, )

Strengthen Community surveillance and cross border collaboration, especially in the risk areas
Vaccine and drugs pipeline and trials: passive immunization (convalescent serum) and regulatory issues
ZMapp, other mAbs, Convalescent Plasma & Whole Blood

- ZMapp Trial ongoing - No new cases
- Chinese mAb – yet to enter clinical Trials
- Convalescence blood trials underway
- None of these trials likely to provide decisive efficacy data.
There is a robust pipeline (4 main vaccines) which resulted from an unprecedented accelerated international effort.

Multiple phase 1-3 trials completed/ongoing/planned in ebola affected and non-affected countries.

Preliminary data show good safety and immunogenicity profile.

Efficacy being tested in Liberia, Sierra Leone, Guinea (ability to assess it influenced by number of cases).

Global coordination/information sharing/norms and standards/convening role of WHO.

National Commitment, Multi-stakeholder collaboration, Public-Private partnership, Funding and Public Good made it possible.
TRAVEL TO AND FROM EBOLA-AFFECTED COUNTRIES IS LOW-RISK HERE IS WHAT YOU NEED TO KNOW

WHILE TRAVELLING

If you develop a fever and Ebola symptoms yourself promptly inform airline personnel.

fever, weakness, muscle pain, headache, and sore throat; followed by vomiting, diarrhoea, bleeding.

Alert airline personnel about a fellow traveller who has Ebola symptoms:

AT AIRPORTS AND AT YOUR DESTINATION

DO NOT touch the body of a person who has died from Ebola.

Use alcohol rub throughout the day. When hands are visibly dirty use soap and water.

Seek prompt medical attention if you have Ebola symptoms.

Avoid direct physical contact with anyone who is displaying the symptoms of Ebola.
LES VOYAGES À DESTINATION OU EN PROVENANCE DES PAYS TOUCHÉS PAR EBOLA PRÉSENTENT UN RISQUE FAIBLE\n
**PENDANT LE VOYAGE**

Si vous-même avez de la fièvre et présentez ces symptômes, informez-en immédiatement le personnel de la compagnie aérienne.

**À l’aéroport et à votre destination**

Évitez le contact physique direct avec quiconque présente des symptômes de maladie à virus Ebola.

NE TOUCHEZ PAS le corps d’une personne décédée de la maladie à virus Ebola.

Utilisez une solution hydroalcoolique tout au long de la journée. Lorsque vos mains sont visiblement sales, lavez-les à l’eau et au savon.

Si vous présentez des symptômes d’Ebola, consultez immédiatement un médecin.

*Alertez le personnel de la compagnie aérienne si un autre voyageur présente des symptômes de maladie à virus Ebola.*

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*Organisation mondiale de la Santé*
Conclusion

- Vigilance and increased disease surveillance by all Member States
- Community engagement is key for preventing future outbreaks and minimize its spread
- Infection prevention and control and safety of healthcare workers should be given the highest priority by Governments
- Government Commitment for re-building/strengthening health systems
- Massive response from international and regional partners very much appreciated
Thank You
Merci
Obrigado