

Ebola Outbreak 2014

Guinea, Sierra Leone, Liberia

Generic Slides

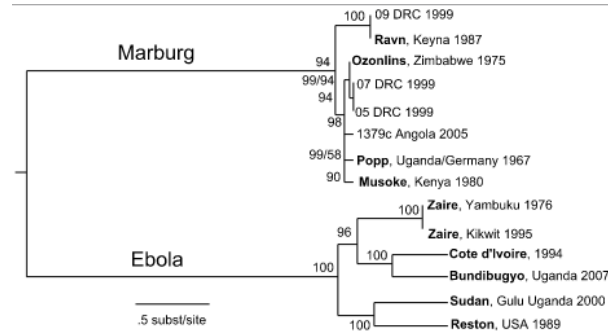
Sources :

- WHO AFRO
- MoH information at crisis committee in Guinea 1st April 2014
- CO sitreps
- HQ technical teams
- Conference call 3 level 2nd April 2014

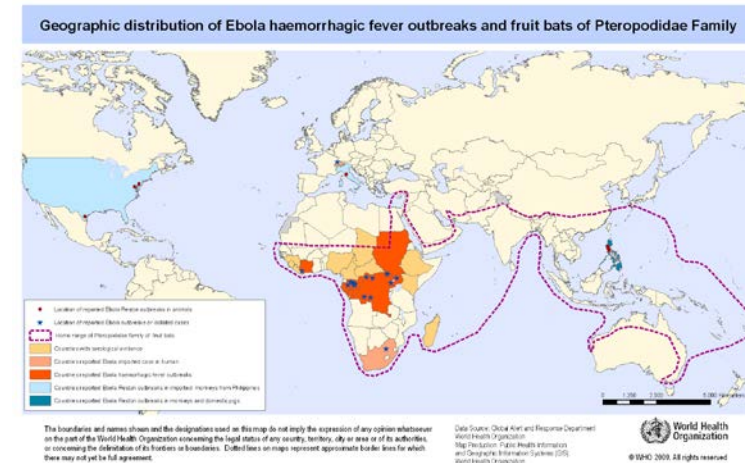


World Health
Organization

Ebolavirus



- Filoviridae family with five virus species:
 - Bundibugyo
 - Reston (REBOV)
 - Sudan (SEBOV)
 - Taï Forest or Cote d'Ivoire (CIEBOV)
 - **Zaire (ZEBOV)**
- Environmental reservoirs unknown
 - Non-human primates as intermediary host
 - Other mammals (bats, rodents) as intermediary host
- Transmission
 - Sporadic (introduction) cases due to forest activities
 - Human to human transmission via contact with fluids amplified in funerary ceremonies or in healthcare setting



Objectives of an Ebola Response

1. **Minimise mortality and morbidity:** Specific case management
2. **Prevent morbidity :**
 - Understand epidemiology and route of transmission
 - Halt transmission
 - Nosocomial (Infection control, training, PPE for health care workers)
 - Community level (case isolation, contact tracing, social mobilisation)
 - Practices at risk (safe burial, traditional practitioner, etc...)
3. **Prevent panic moves, which might challenge the response**
 - Awareness & Risk communication (public + health professionals)
 - Social mobilisation & anthropological approach
 - Mental health and psychosocial support to victims and families

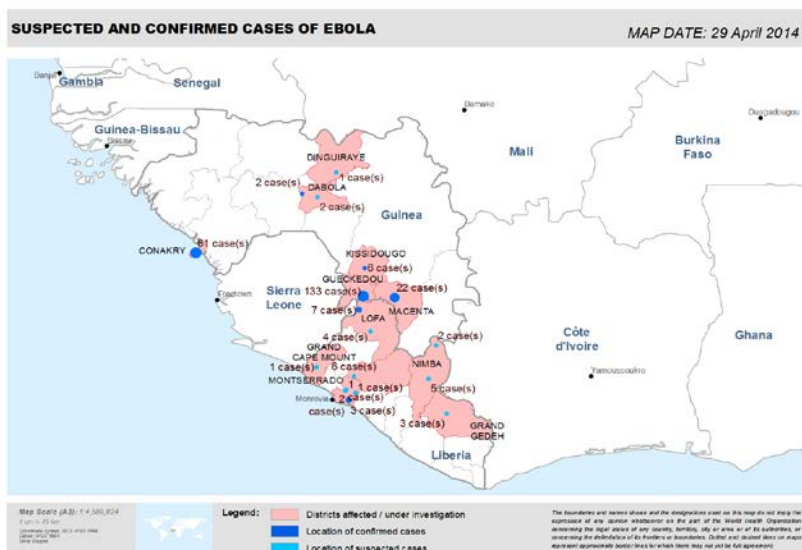
Ebola outbreak in West Africa



28 March
 2 April
 4 April
 7 April
 9 April
 11 April
 14 April
 15 April
 24 April
 28 April
 1 May

Outbreak update

- Ebola Virus Disease (EVD) detected for the first time in Guinea
- 3 countries affected + Rumours of suspected cases in Mali (2) & Gambia (2) under verification
- Grade 2 under the Emergency Risk Framework

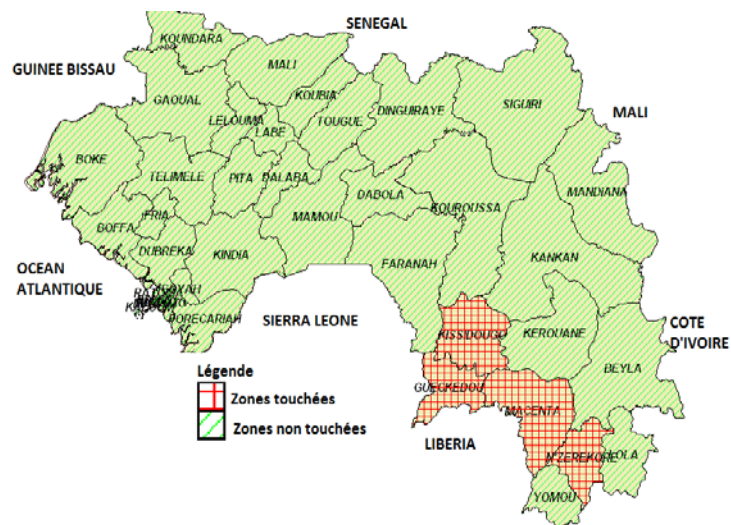


Country	Cases	Deaths	CFR
Guinea	update	update	update
Liberia	update	update	update
Sierra Leone	0	0	0
Total	?	?	?

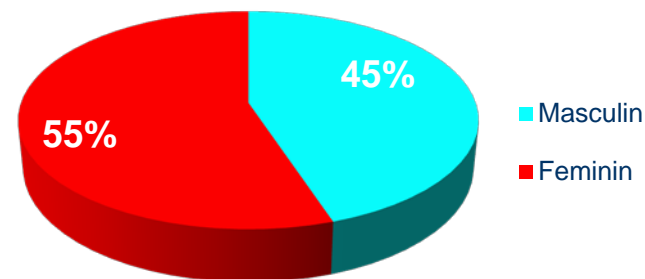
Source : Conference call 2nd April 2014

35 Ebola PCR laboratory confirmed cases, among the 127 cases which had been reported up to 1st April 2014,

Guinea update



Gender distribution of confirmed, suspected and probable , 30 April 2014



Location	Cases			Deaths		N° contacts
	Total Suspected	N° Confirmed	% Confirmed	Total Death	CFR	
Conakry	12	11	92%	4	33%	71
Guékédou	79	18	23%	57	72%	195
Macenta	23	6	26%	14	61%	52
Kissidougou	9	0	0%	5	56%	77
Dabola	3	0	0%	2	67%	0
Dinguiraye	1	0	0%	1	100%	0
TOTAL	127	35	28%	83	65%	375

Source : Presentation at the Epidemic Management Committee on 1st April 2014

Operations in numbers (30 April)

Deployments in:

- Infection prevention and control
- Case management
- Risk communication and social mobilization
- Laboratory
- Logistics
- Communication and media
- Leadership and coordination
- Anthropology
- Data management
- Surveillance
- Administration and finance
- Resource mobilization

129 = Total GOARN and WHO Deployments

26 = Total technical guidelines reviewed and disseminated

50 cubic meters of PPE and communications equipment

2.5 Million USD raised

Deployed to:

- 75 Guinea, Conakry
- 30 Guinea, Gueckedou
- 15 Monrovia, Liberia
- 5 Lofa, Liberia
- 1 Margibi, Liberia
- 2 Montserrado, Liberia
- 3 Freetown, Sierra Leone
- 4 Brazzaville, Congo

Advice to countries to date

- WHO does not recommend that any travel or trade restrictions be applied to Guinea based on the current information available for this event
 - Clinicians managing returning travelers from visiting these areas with compatible symptoms are advised to take into consideration the possibility of EVD
 - WHO encourages countries to strengthen surveillance, including surveillance for illness compatible with EVD
 - Coordination
 - In line with IHR(2005): Information sharing on suspected cases with WHO and where possible with neighbouring countries
 - Activation of the Epidemic Management Committee when suspected cases are reported
- ➔ Emergency committees were already activated in the three countries