



Department of Health
 Bureau of Quarantine
International Health Surveillance Division
 Quarantine Services and International Health Surveillance System (QSIHSS)

Health Information Update

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 Event Updates: **25 July 2018**



International Health Surveillance Division (IHS)

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Event Updated	Country	Hazard	Disease	Event Description	IHR Assessment
2018-07-25	Democratic Republic of the Congo (the)	Infectious	Ebola Virus Disease	<p>On 24 July 2018, the Minister of Health of the Democratic Republic of the Congo and WHO Director-General declared the end of the EVD outbreak in Équateur Province.</p> <p>On 12 June 2018, the last surviving confirmed EVD case was discharged from an Ebola treatment centre (ETC), following two negative tests on serial laboratory specimens. Since then, a period of 42 days (two maximum incubation periods) has elapsed with ongoing intensive surveillance, without any new confirmed cases being detected.</p> <p>WHO commends the country and partners in the response against the outbreak while urging them to extend this success to combatting other diseases in the Democratic Republic of the Congo.</p> <p>The Ministry of Health and other national authorities, WHO and partners have made significant progress in containing the EVD outbreak. Priorities during this response included strengthening the multi-sectoral coordination of the response; enhanced surveillance, including active case finding, case investigation, contact tracing and surveillance at Points of Entry (PoE); strengthening diagnostic capabilities; case management; infection prevention and control in health facilities and communities, including safe and dignified burials; risk communication, social mobilization and community engagement; psychosocial care; immunization of risk groups and research response; and operational support and logistics.</p> <ul style="list-style-type: none"> As of 23 July, WHO has deployed a total of 360 technical experts in various critical functions of the 	Public Health Risk

				<p>Incident Management System (IMS) to support response to the EVD outbreak, including 21 experts from the Global Outbreak Alert and Response Network (GOARN) partner institutions.</p> <ul style="list-style-type: none"> • From 21 May through 26 June 2018, a total of 3 481 people were vaccinated in Iboko, Wangata, Bikoro, Ingende, and Kinshasa. Those identified for vaccination were front-line health professionals, people who were potentially exposed to confirmed EVD cases (contacts), and contacts of these contacts. • WHO is supporting the Ministry of Health to establish a one year programme for care to Ebola survivors. • WHO continues to support neighbouring countries to systematically assess and take action on Ebola preparedness, and to develop national contingency response plans. A regional readiness and preparedness plan has been developed and published. This is the first time that such a comprehensive approach to IHR travel and cross-border health measures has been implemented by MoH, WHO and partners during an outbreak, including exit screening at international and domestic ports and airports. <p>From 3 through 5 July 2018, the Ministry of Health, with support from WHO and partners, conducted a strategic operations review to assess the current epidemiological situation, evaluate progress against the EVD Strategic Response Plan, engage in initial lesson learning, and prioritize key activities and resources for continued vigilance in affected areas through to the end of the outbreak. A key product of the operations review was the development of a government-led Consolidation and</p>	
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				<p>Stabilization Plan (August – October 2018) for the transition of deployed EVD resources to strengthen emergency response capacity in currently affected and other high-risk areas to:</p> <ul style="list-style-type: none"> • Maintain and strengthen surveillance capacity to rapidly detect and respond to potential new cases of EVD, including in neighbouring provinces and countries; • Strengthen infection prevention and control, as well as Water, Sanitation, and Health (WASH), in targeted health facilities; • Maintain minimum standards for case management; • Maintain local laboratory capacity for confirmation of new potential cases and management of care to survivors; • Provide health services and psychosocial care for survivors and their families; • Strengthen community engagement to improve knowledge of and response to Ebola and epidemic-prone diseases in targeted health zones; • Contribute to food security in health zones affected by EVD. • Leverage resources and knowledge from the first two phases of the response to facilitate the development of a National Health Security and Resilience Plan. <p><i>The latest WHO assessment concluded that the current EVD outbreak has been contained, considering that 42 days (two maximum incubation periods) have elapsed since the date of the second negative test of the last case confirmed case on 12 June 2018.</i></p> <p>Under the Consolidation and Stabilisation Strategic Plan adopted by the Ministry for Health, enhanced surveillance, a program for long-term</p>
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				<p>Ebola survivor care and other response mechanisms, remain in place following the end of the outbreak declaration to maintain increased vigilance and contribute to strengthening and resilience of the health system. WHO considers the public health risk associated with the recent EVD outbreak to be low at national, regional and global levels. EVD is, however, endemic in the Democratic Republic of the Congo, may reemerge at any time.</p> <p>WHO advises the following risk reduction measures as an effective way to reduce Ebola virus disease transmission in humans:</p> <ul style="list-style-type: none"> • Reducing the risk of wildlife-to-human transmission from contact with infected fruit bats or monkeys/apes and the consumption of their raw meat. Animals should be handled with gloves and other appropriate protective clothing. Animal products (blood and meat) should be thoroughly cooked before consumption. • Reducing the risk of human-to-human transmission from direct or close contact with people with Ebola symptoms, particularly with their bodily fluids. Gloves and appropriate personal protective equipment should be worn when taking care of ill patients at home. Regular hand washing is required after visiting patients in hospital, as well as after taking care of patients at home. • Reducing the risk of possible sexual transmission, based on further analysis of ongoing research and consideration by the WHO Advisory Group on the Ebola Virus Disease Response, WHO recommends that male survivors of EVD practice safe sex and hygiene for 12 months from onset of symptoms or until their semen tests negative twice 	
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				<p>for Ebola virus. Contact with body fluids should be avoided and washing with soap and water is recommended. WHO does not recommend isolation of male or female convalescent patients whose blood has been tested negative for Ebola virus.</p> <p><i>As per the advice of the International Health Regulations (IHR) Emergency Committee (EC), which was convened by the WHO Director-General on 18 May 2018, WHO continues to advise against any restriction of travel and trade to the Democratic Republic of the Congo based on the currently available information. WHO continues to monitor travel and trade measures in relation to this outbreak, and currently there are no restrictions to international traffic in place.</i></p>	
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* A **public health risk** is something that is (or is likely to be) hazardous to human **health** or could contribute to a disease or an infectious condition in humans.