



WHO press conference : Update on WHO Ebola operations in the Democratic Republic of the Congo (DRC)

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Story

Efforts to eradicate the deadly Ebola epidemic in eastern Democratic Republic of the Congo (DRC) are proving successful but “now we have to kill the virus”, the UN health agency WHO said on Thursday (10 Oct).

In an update to journalists in Geneva, the medic leading the World Health Organization’s campaign against the highly contagious virus said that while he could not say that it was beaten, it had been largely driven away from towns into rural areas.

“It is impossible to say outbreak is over, it’s not,” said Dr Michael Ryan, Executive Director, WHO’s Health Emergencies Programme. “It is impossible to predict where the outbreak is going to go next. But I would stand over the fact that we have significantly contained the virus in a much smaller geographic area; now we have to kill the virus.”

In the 14 months since the latest outbreak was declared in DRC – where the virus is endemic – more than 2,100 people have died, including over 160 health workers.

More than 1,000 individuals have also survived the disease and returned home, WHO reported last week.

Crediting cooperation with the DRC authorities as one of the factors responsible for WHO’s relatively

upbeat assessment, Dr Ryan explained that the virus has been pushed back into some of the same remote areas where it was first detected in August last year.

He added that their inaccessibility – some communities can only be reached after a five-hour motorbike ride – and the fact that dozens of armed groups operate there, were the main complicating factors.

“Under the leadership of the Government and with our partners, I believe we have really squeezed the virus into a much smaller geographic area as possible,” he said. “Essentially a triangle between Mambasa, Komanda, Beni, Mandima, which is a shared space between North Kivu and Ituri.”

Communities also trusted increasingly highly skilled and hardworking frontline healthworkers, the WHO medic insisted.

This meant that potentially infected carriers were now seeking more timely, professional treatment in greater numbers than before, rather than going to up to four alternative health-providers and increasing the risk of spreading the contagion.

The case fatality within the Ebola Treatment Units is less than a third,” he said. “So while the overall fatality of the outbreak remains at two-thirds or 67 per cent, mortality within the Ebola Treatment Units has dropped significantly.”

Asked about the latest information from Tanzania, where the authorities have denied that the disease had surfaced suspected cases tested negative for the virus, Dr Ryan said that WHO remained committed to providing technical assistance.

“The Government as you’ve seen on many occasions has reiterated the reports that there is no Ebola in Tanzania and that testing was negative,” he said. “Our concerns around that purely to do with the depth of the investigation and the sharing of information with us, so that we could make a full and complete risk assessment. So we continue to work, offer support to them. Obviously, a number of weeks since there was a report