



International Medical Corps staff travel to Bulape, epicenter of the Ebola outbreak.

On September 4, Ministry of Health officials in the Democratic Republic of the Congo (DRC) officially declared an outbreak of Ebola virus disease (EVD) in the isolated Kasai province in the southwest of the country. Tests of three samples from suspected cases performed at the National Institute of Biomedical Research in the capital, Kinshasa, determined that the cases were the Zaire strain of EVD. Ebola Zaire is a highly contagious hemorrhagic-fever virus that halts the body's blood-clotting system, causing blood to leak from small vessels all over a patient's body, causing internal bleeding, inflammation, bleeding and loss of fluid. If untreated, the body goes into shock from fluid loss. Though multiple treatments and a vaccine have been used to manage recent outbreaks, risk for transmission prior to vaccination remains high and the treatments available are still new.

There are significant challenges to responding to this Ebola outbreak, and the affected health zones in Kasai are extremely isolated. With very little air travel available to the province, the journey from Kinshasa to Kasai can take multiple days via road. UNHAS and the World Health Organization are exploring options to introduce air travel in Bulape to facilitate response. While Kasai is typically a stable province, there is chronic food insecurity due to poverty and geographic isolation, leading to cases of severe acute malnutrition. The health system is weak and underfunded, leaving many community members to seek medical attention from traditional healers. These issues are exacerbated by inter-ethnic conflict leading to occasional population displacement, as well as large-scale issues caused by extreme weather.

Existing response to the EVD outbreak is limited and coordination is critical. Médecins Sans Frontières (MSF) has set up an Ebola Treatment Center out of the Bulape General Hospital, though the 18-bed facility is already at capacity, and suspected and confirmed cases are being treated in the same space. The DRC's National Emergency Medical Team has deployed two medical doctors and four nurses to the affected health zone but need remains high. The outbreak poses a strain on an already weakened healthcare system. Blood banks and supplies are critically lacking. Community members can no longer access hospital services since the hospital is now a "red zone" where the risk of EVD transmission is high, and the two blood banks that provided lifesaving transfusions are no longer functional.

FAST FACTS

- On September 4, the DRC Ministry of Health officially declared an outbreak of Ebola virus disease (EVD) in the Bulape and Mweka health zones in Kasai province.
- According to the World Health Organization (WHO), as of September 15 there are 81 suspected cases and 28 deaths, including four nurses. However, data reporting has been challenging, with conflicting statistics reports being circulated by various health authorities.
- Kasai is extremely isolated, sometimes requiring multiple days of driving from Kinshasa to Tshikapa, the provincial capital, during the rainy season. Very few air routes reach the province, though an airstrip in Bulape is being established.
- Significant gaps exist in the response to EVD, including adequate case management capacity, blood supplies, IPC/WASH support, and more.

OUR RESPONSE

- International Medical Corps has been responding in the DRC since 1999, and currently has offices in Goma and Kinshasa.
- Our Rapid Response Team (RRT) has deployed to Kasai, with staff on the ground assessing and planning our response.
- Through our US government-funded LEARN project, we are preparing to conduct training covering topics including case management and IPC.
- Procurement of medical supplies, including personal protective equipment, has begun and will be used both as training materials and in response to EVD.
- International Medical Corps will lead working groups on case management at the national and provincial level.

Community members in Bulape, where confirmed cases have been identified and deaths have occurred, are demonstrating acceptance and understanding of the disease, though there is some resistance in Mweka, where there have been only suspected cases so far. Reports of community members fleeing the health zones have raised fears that the disease could travel to other provinces in DRC or even cross the border into Angola.

International Medical Corps Response

International Medical Corps first began operations in the DRC in 1999 and has extensive experience with EVD, both in and outside of the DRC. With significant experience responding to outbreaks of EVD during the West Africa outbreak in 2014–2016 and throughout the outbreaks in DRC between 2018 and 2022, as well as the contribution to research that the organization has made which has informed treatment protocols, our team is mobilizing rapidly to respond to this critical outbreak in Kasai.

International Medical Corps has deployed the first wave of our rapid response team (RRT) to Kasai and will lead working groups on surveillance at the provincial level, aligning our efforts with critical pillars needed to contain the spread and save lives—including providing trained medical staff; specialists in infection prevention and control (IPC), and water, sanitation and hygiene (WASH); case management leads; specialists in risk communication and community engagement (RCCE); and supply-chain management staff.

International Medical Corps is coordinating directly with national health authorities, including the Ministry of Health (MoH), the National Institute of Biomedical Research, and national and international partners. Our RRT is working to strengthen national capacity while supporting existing health interventions, including case management, IPC, WASH and RCCE. Our teams are leading working groups on case management at the national and provincial level. Through our US government-funded LEARN project, we are scheduling training for national organizations and health actors, to cover EVD response topics including case management and IPC/WASH. The team is preparing broader training for MoH staff and local actors to help qualified health personnel at the health facility level, as well as strengthen referral and surveillance efforts at the community level.

Support is needed to ensure that International Medical Corps can quickly respond to this Ebola outbreak in Kasai province during this time-sensitive period, with the threat of disease spread is highest. Immediate procurement of appropriate supplies—including personal protective equipment, IPC equipment and WASH supplies—is especially important, as is the ability to support key personnel in the field as they respond to the outbreak and conduct training.