

2014-15 EBOLA VIRUS DISEASE (EVD) OUTBREAK MONTHLY SUMMARY FOR BC HEALTH PROFESSIONALS

For June 18 to July 15, 2015

OVERVIEW

There has been an ongoing epidemic of Ebola Virus Disease (EVD) in West Africa since March 2014. Since the end of May 2015, a total of 20 to 30 EVD cases have been reported weekly in Guinea and Sierra Leone. As of July 15, 2015, most cases were being reported from the capitals of these countries. The proportion of cases due to unknown sources of infection has declined; however, deaths in the community continue to be reported, underscoring the challenges associated with contact tracing. Six confirmed cases have been reported in Liberia since June 29, 51 days after the country was declared EVD-free on May 9.

EVD CASES (as of July 12, 2015)¹

Overall: 27 678 cases, 11 276 deaths

COUNTRIES WITH WIDESPREAD AND INTENSE TRANSMISSION (West Africa)^a

Country	Cases ^b				
	Total ¹ (confirmed, probable, suspect)	Week to 21 June ²	Week to 28 June ³	Week to 5 July ¹	Week to 12 July ¹
Liberia (to 9 May, 2015)	10 666	-	-	-	-
Liberia ^c	7	-	-	3	3
Sierra Leone	12 965	8	8	9	14
Guinea	3 674	12	12	18	13

^a For more details, including most recent epidemic curves, please see the WHO Situation Report – 12 July at:

<http://apps.who.int/ebola/en/current-situation/ebola-situation-report>; numbers are subject to change as data become available.

^b Total includes confirmed, probable and suspected cases; weekly counts include confirmed cases only.

^c According to the WHO, new cases of EVD in Liberia reported on June 29, 2015 or later are considered a different outbreak from the one declared over on May 9, 2015.¹

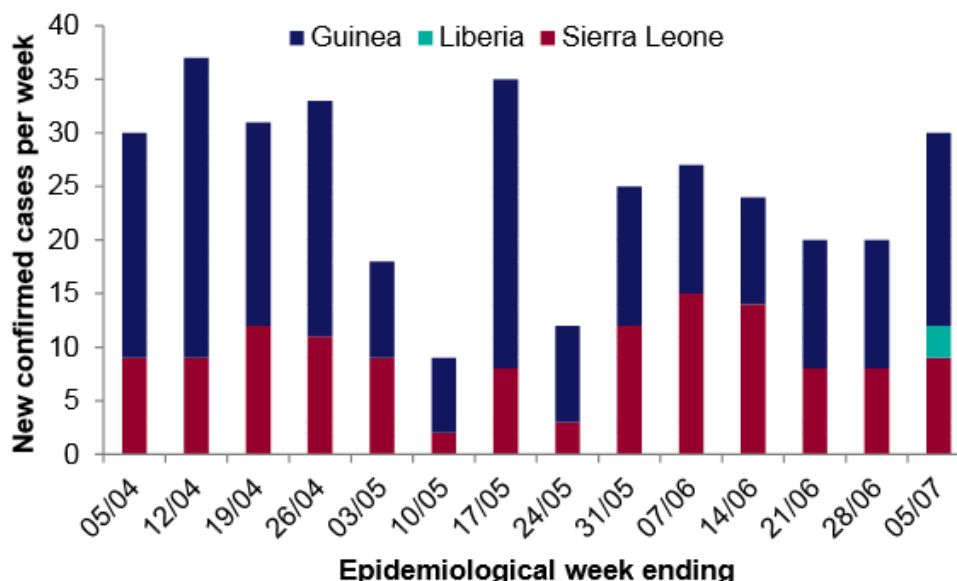


Figure 1. Number of new confirmed cases reported per week (05 April to 05 July 2015) in affected countries in West Africa⁴

INTERNATIONAL CONTROL ACTIVITIES AND FINDINGS

- [On June 29, 2015, post-mortem testing confirmed an EVD case in Liberia](#), 51 days after the country was declared EVD-free (May 9, 2015). The case was a 17 year old male who became ill on June 21, 2015, was managed as malaria, and subsequently died on June 28, 2015. As of July 12, 2015, 5 contacts associated with this case have been confirmed as EVD-positive. The source of infection remains under investigation; however, preliminary evidence from genomic sequencing suggests that the most likely origin of transmission is a re-emergence of the virus from a survivor within Liberia, rather than an importation from Guinea or Sierra Leone.^{1,5} As of July 10, 149 contacts have been identified and were being closely monitored.⁵
- An EVD-positive healthcare worker returning from Sierra Leone to Italy on May 7, 2015 tested negative for a second time on June 9, 2015; all 19 contacts have completed their 21-day monitoring period and none developed symptoms. Italy will be declared EVD-free after 42 days have elapsed since the last patient tested negative.
- A [6th meeting of the International Health Regulations \(IHR\) Emergency Committee regarding the Ebola Outbreak](#) convened on July 2, 2015 and advised that the EVD outbreak continues to constitute a public health emergency of international concern and temporary recommendation should be extended. Recommendations were also issued for the countries most affected, cross-border collaborations as well as travel recommendations for all countries
- Based on a review of the WHO's response to the Ebola conducted by a panel comprised of independent experts reviewed the, [Ebola Interim Assessment Panel report was released](#) outlining recommendations for the International Health Regulations, WHO's health emergency response capacity, and WHO's role and cooperation with the wider health and humanitarian systems. WHO issued a [statement](#) in response to these recommendations on July 7, 2015.

BRITISH COLUMBIA AND CANADIAN RESPONSE

- The Provincial Ebola Preparedness Task Force continues to meet to address clinical and public health issues, as well as manage communications. Guidelines have been developed in-line with provincial and national recommendations to inform emergency preparedness activities. Approved policies and guidelines are currently available on the [Provincial Health Officer's Ebola Web-Site](#).
- BC is conducting surveillance of EVD cases and contacts, including returning travellers. There have been no EVD cases in BC. On July 15, 2015, there were 10 EVD contacts under public health monitoring. Overall, between August 1, 2014 and July 15, 2015, there have been 97 EVD contacts reported in BC. Three of these developed symptoms; all tested negative for Ebola.

GUIDANCE AND OTHER RESOURCES

National guidance including case definitions, care report form, and public health, clinical care and infection control guidelines:

<http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-professionals-professionnels-eng.php>

Public Health Agency of Canada travel notices: <http://www.phac-aspc.gc.ca/tmp-pmv/notices-avis/index-eng.php>

BCCDC Ebola webpage: <http://www.bccdc.ca/dis-cond/a-z/e/Ebola/default.htm>

BC Provincial Health Office: <http://www.health.gov.bc.ca/pho/physician-resources-ebola.html>

BC HealthLink: <http://www.healthlinkbc.ca/healthfeatures/ebola-virus-disease.html>

REFERENCES

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4. Public Health England. (2015, July 10). Ebola Epidemiological Update No. 43: 10 July 2015. Retrieved from: <https://www.gov.uk/government/publications/ebola-virus-disease-epidemiological-update>
5. World Health Organization. (2015, July 10). Ebola situation assessment Liberia update: New information from genetic sequencing. Retrieved from: <http://www.who.int/mediacentre/news/ebola/10-july-2015-liberia/en/>