



PUBLIC HEALTH ADVISORY FOLLOWING THE ANNOUNCEMENT OF THE SUDAN STRAIN OF THE EBOLA VIRUS DISEASE OUTBREAK IN UGANDA

On 30th January 2025 the Ministry of Health in Uganda confirmed an outbreak of the Ebola virus disease (EVD) caused by the Sudan specie, in Wakiso, Mukono and Mbale city in Mbale district. Only one case has so far been reported, and one death (confirmed by post-mortem). Forty-four (44) contacts are being followed up. We will continue to monitor the regional and global situations. It is pertinent to note that Uganda has experience in responding to Ebola Disease outbreaks, and necessary action has been initiated.

There are no cases of Ebola virus disease in Nigeria. However, the Nigeria Centre for Disease Control and Prevention (NCDC), in collaboration with relevant Ministries, Departments, Agencies, and Partners through the National Emerging Viral Hemorrhagic Diseases (EVHD) Technical Working Group, continues to monitor disease occurrence and has initiated measures to strengthen our preparedness in the country. These include the update of our EVD emergency contingency plan, heightened surveillance especially at the points of entry, and optimizing diagnostic capacity for EVD testing in designated laboratories in cities with international airports of entry and the National Reference Laboratory. In addition, all Lassa Fever testing laboratories can be activated to scale up testing if the need arises.

ABOUT EBOLA VIRUS DISEASE

Ebola virus disease (EVD), formerly known as Ebola Hemorrhagic Fever, is a severe, often deadly disease caused by the Ebola virus, with a fatality rate of 25-90%. There are 5 distinct species of the virus: **Bundibugyo**, **Zaire** (the most fatal of all the five strains, and responsible for the most EVD outbreaks including the 2014-2016 outbreak in West Africa), **Reston**, **Tai Forest**, and the **Sudan** (responsible for the outbreak in Uganda).

TRANSMISSION

The infection is transmitted from animals to humans, with human-to-human transmission occurring through direct contact with the body fluids (blood, saliva, vomit, urine, feces, sweat, breast milk and semen of an infected person), contaminated objects, or infected animals such as **fruit bats**, chimpanzees, gorillas, monkeys, porcupines and forest antelope. The virus can also be transmitted through contact with wildlife and **unsafe burial practices**. The incubation period, i.e. from exposure to the development of signs and symptoms ranges from 2-21 days. During an outbreak, those at risk of infection are health workers, family members and others in close contact with sick people and deceased patients.

SYMPTOMS

The initial symptoms of EVD include:

- Sudden onset of **high fever**, accompanied by other nonspecific signs and symptoms such as **headache, body aches, muscle pain and weakness**, vomiting and diarrhea.
- **Jaundice** (yellowing of the eye)

The following may occur after the onset of the above symptoms:

- And in severe cases, **uncontrolled bleeding from orifices, dysfunction and / or failure of several body organs** such as the **kidneys, liver**, central nervous system involvement, progressing to shock and death.

In fatal cases, death often occurs between 8 and 9 days of the onset of symptoms.

RISK ASSESSMENT

The Ebola virus is in the same class as the Marburg virus and are both classified as Viral hemorrhagic Fevers (VHF). Based on the dynamic risk assessment conducted in response to the recent Marburg outbreak in Rwanda, the risk of EVD is also classified as **MODERATE**. A **moderate risk** classification indicates that EVD, without mitigation, is likely to occur in Nigeria, with potential for significant public health consequences. So, we need to take the necessary precautions.

NCDC'S ADVICE TO NIGERIANS

There are vaccines and therapeutics available for some strains of the Ebola virus. The approved vaccine for the Zaire species (EBV) is not currently available in the country but can be obtained from the WHO Afro and does not protect against the Sudan virus. However, early recognition, isolation of patients, and initiation of supportive treatment, implementing infection and control measures in health facilities and homes, tracing and monitoring of contacts, and safe burial practices, significantly reduce morbidity and the probability of death.

Nigerians are therefore urged to adhere strictly to the following preventive measures:

- Practice good hand hygiene - **Wash your hands regularly** with soap under running water or **use hand sanitizers** when soap and water are not readily available.
- Avoid physical contact with anyone who has symptoms of an infection with an unknown diagnosis.
- Avoid the consumption of bush meat, particularly bats and non-human primates, which are known reservoirs of the Ebola virus. And if you have to, ensure that such is properly prepared and cooked before consumption.
- Avoid **direct contact** with the blood, saliva, vomit, urine, and other bodily fluids of suspected or confirmed EVD cases.
- If you or someone you know (with a travel history to any country with Ebola cases) experiences symptoms of EVD enumerated above, call **6232** or your **State Ministry of Health hotline** IMMEDIATELY for guidance.

ADVICE TO HEALTHCARE WORKERS

Our Healthcare workers are advised to maintain a high index of suspicion for EVD in their encounter with their patients. In the management of a suspected or confirmed case of EVD:

- Ensure strict **isolation** of the patient.

- Adhere strictly to **infection prevention and control (IPC) measures**, including the use of appropriate **personal protective equipment (PPE)** like face masks, hand gloves, appropriate gowns etc.
- Report suspected cases immediately to the NCDC or State Ministry of Health for appropriate response and management.

TRAVEL ADVICE

Though the WHO advises against any restrictions to travel and /or trade to Uganda, the NCDC advises Nigerian citizens and residents to **AVOID ALL BUT ESSENTIAL TRAVEL** to countries with confirmed cases of the Ebola Virus Disease. Persons already in Nigeria but with recent travel history to or transit through countries with Ebola cases in the last **21 days** who experience symptoms such as fever, muscle pain, sore throat, diarrhoea, weakness, vomiting, stomach pain, or unexplained bleeding or bruising should adhere to the following guidelines:

- Promptly call **6232** or State Ministry of Health hotlines for assessment and testing.
- Shelter-in-place to avoid further spread through shared transport systems (public or private) until health authorities reach out.
- Await dedicated responders for assessment and possible transport to a designated treatment center if required.

On our part, we will continue to strengthen surveillance across the country, including our borders and airports especially for travelers from affected areas; alerting our health workers to heighten their level of suspicion for suspected cases; enhancing our laboratory capacities for quick testing of suspected cases; as well coordination with the WHO and the African Regional Health Authorities to monitor developments and share critical information.

As you are aware, we continue to manage several other disease outbreaks, like Lassa fever, Meningitis, Diphtheria, Mpox, Measles and Anthrax, ravaging our communities. We will continue to provide periodic updates on these.

CONTACT

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Signed:

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