





# Public Health Emergency Operations Centre "COUSP-RDC"

Ebola Virus Disease Status Report/16th Outbreak							
SitRep MVE N° 40/MVE_16/2025							
Country/Province	DRC/Kasai						
Affected Health Zone	BULAPE						
Date of Report Date	15 15, 2025						
of Publication	16 16, 2025						

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53	11	34	4,3 %	90,6 %	18	37 240	32 143
Confirmed cases	s Probable cases	Confirmed deaths	Bed occupancy rate among experienced	Bed occupancy rate among suspects	Healed	Vaccine doses deployed	Vaccinated people

### I. HIGHLIGHTS

- No new cases have been confirmed to date.
- ☐ Escape of a suspected case in Mweka which forces the team to take samples at
- ☐ his home Sweeping in Dikolo and Bulape Com



# **NARRATIVE OF THE ALLEGED INDEX CASE (Background)**

On August 20, 2025, a 20-year-old pregnant woman was admitted to the obstetrics and gynaecology department of Bulape HGR, presenting with fever, bloody diarrhoea, haemorrhagic vomiting and severe anaemia. She died a few hours later in a multi-organ failure panel. In the days that followed, a laboratory technician and a nurse who had been in contact with the patient developed the same symptoms and also died. Between epidemiological weeks 34 and 36, thirteen cases were reported, including eight deaths, for a case fatality rate of 62%. The epidemic was officially declared following the confirmation of five positive cases by the INRB on September 4, 2025.

# II. CHRONOLOGY OF HIGHLIGHTS

20 août 2025 Détection du premier cas dans la ZS de BULAPE, décédé le même jour 27 août 2025
Détection du
troisième cas,
infirmière ayant
soigné le 1er cas
dans la ZS de
BULAPE, décédé le
1er septembre
2025

1er Septembre 2025 Amorce d'une réponse locale et demande d'assistance nationale, notification de la ZS au niveau national

04 septembre 2025 Confirmation de l'épidémie par le laboratoire INRB/Kinshasa 04 septembre 2025 Activation du COUSP en mode réponse, mise en place du SGI et élaboration du plan de réponse.

26 août 2025
Détection du
deuxième cas,
technicien de
laboratoire ayant
prélevé le 1er cas
dans la ZS de
BULAPE, décédé le
28 Aout 2025

30 août 2025 COUSP National alerté et passe immédiateme nt en mode alerte, notification à la tutelle.

03 septembre 2025 Déploiement de la première équipe d'intervention rapide (EIR) nationale et provinciale. o4 septembre 2025 Déclaration de l'épidémie par le Ministre

13 septembre 2025 Début de la vaccination contre Ebola a Bulape

#### III. UPDATE OF THE EPIDEMIOLOGICAL SITUATION

- No new confirmed cases have been reported as of 15/10/2025. □
- The date of the last notification of a confirmed case was 26 September 2025. Thus, we are the 19th day without notification of a confirmed case.
- Since the beginning of the epidemic, 64 cases (53 confirmed and 11 probable) including 45 deaths have been reported in the Bulape health zone, i.e. an overall case fatality rate of 70.3% (Table I).
- The case fatality rate among confirmed cases is 64.2% (34 deaths/53 confirmed cases).
- The number of health areas that have reported at least one confirmed or probable case of EVD since the beginning of the epidemic remains at 6 (28.6%) out of the 21 in the Bulape SZ (Table I; Figure 2).

# Table I: Distribution of confirmed and probable Ebola virus disease cases and deaths in Bulape Health Zone, as of 15 October 2025

Affected Health Area*	New confirmed case(s)		Cumulative	Date of notification of the last confirmed	Number of days without new cases reported			
		Confirmed	Confirmed deaths	Case fatality (%)	Likely	case		
Bambalaie	0	4	2	50,0%	0	20/09/2025	26	
Bulape	0	16	14	87,5%	8	26/09/2025	19	
Bulape com.	0	4	4	100,0%	1	20/09/2025	26	
Dikolo	0	25	14	56%	1	26/09/2025	19	
Ingongo	0	1	0	0,0%	0	13/09/2025	30	
Squirrel	0	3 0		3 0 0,0% 1		1	22/09/2025	22
Total	0	53	34	64,2%	11			

<sup>\*</sup>Cases and deaths are broken down by health area of detection and are subject to change.

As of 15/10/2025, the Bulape SZ has a total of 53 confirmed cases of EVD, including 34 deaths, i.e. a case fatality rate of 64.2%. The AS of Bulape Com. records the highest fatality rate with 100%, followed by Bulape (87.5%). Dikolo remains the most affected SM in terms of cases (25), with a fatality rate of 56%. No area has reported a new confirmed case for several days, ranging from 19 to 30 days without notification. There are also 11 probable cases, mostly reported in Bulape's SMA.

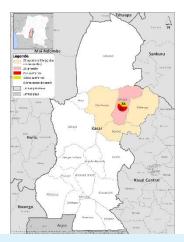


Fig 1. Geographical distribution of health zones affected by EVD and those at risk in Kasai province, as of 15 October 2025

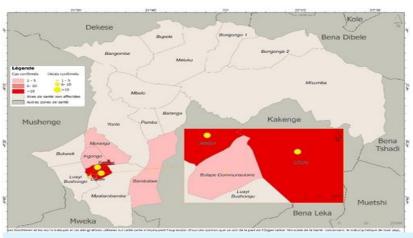


Fig 2. Geographical distribution of confirmed cases and deaths by Health Areas in the Bulape SZ as of 15 October 2025

The Bulape SZ remains the only SZ with confirmed cases and strains. Out of all the SZs that have reported **suspected cases**, **the Bulape**Communautaire and Dikolo health areas are the most deadly. To this affected, the areas to health both in terms of Bulape of the and number of Dikolo of are the most affected confirmed cases, and deaths both in day, the fatality rate is at 64.2% recorded.

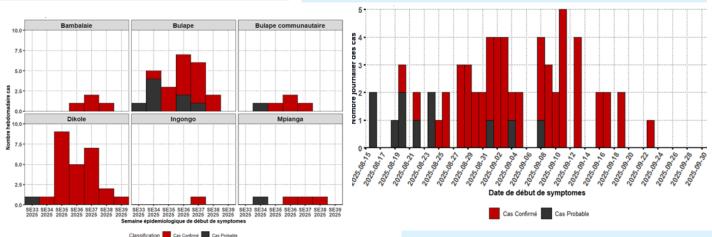


Fig 2. Geographical distribution of confirmed and probable cases by Health Areas in the Bulape SZ as of 15 October 2025

Considering the AS health areas of **Bulape** BULAPE **Communautaire** and DIKOLO as the main and most important outbreaks of the **Dikolo** epidemic are in the most affected ZS, Bulape, at the most significant number of reported cases. However, from SE37 to SE38, an upward trend in confirmed cases is observed in Bulape SA

Fig 4. Daily evolution of confirmed and probable cases in 15 15, 2025.

#### The Bulape Community and

On **Dikolo** the period are the most affected, August 27 to the 13 times September, in terms of the analysis of the daily number of confirmed cases highlights the occurrence of deaths recorded. of three clusters of confirmed cases. Thereafter, as of September 15; Notifications are becoming sporadic, reflecting a gradual decrease in community transmission.

Table 2. Distribution of alerts received, investigated and validated by health area, as of October 15, 2025

INDICATORS	09/10/2025	10/10/2025	11/10/2025	12/10/2025	13/10/2025	14/10/2025	15/10/2025
Report alerts	10	6	6	23	0	3	1
New alerts reported today	6	41	29	57	73	94	55
Total alerts of the day	16	47	35	80	73	97	56
Alerts investigated of the day	10	33	23	80	70	97	56
Today's validated alerts	6	16	12	24	16	29	5
Suspects Sampled	5	8	8	17	13	20	5
Transferred to the ETC	5	4	8	17	13	20	5

NA: not applicable; N/A: not available The average daily alert reported over the last 7 days (from 09/10/2025 to 15/10/2025) is

58. Among the alerts of the day, two AEFIs were reported.

Table 3. Summary of the situation of contact tracing as of 15 October 2025

			Daily mor	ate	SD.			Rea	ason fo	or not s	een				
Health Area	Report du 14/10/2025	New contacts from 15/10/2025	Contact to follow today	Contacts vus	Releases 21 days	Became suspect	Follow-up rate	Total non vus	Simple Absence	Lost to follow-up (≥ 72 hours)	Never seen before	Refusal	Moved	Reco did not pass	All that remains is to be followed the next day
Bambalayi	0	0	0	0	0	0	0,0%	0	0	0	0	0	0	0	0
Bulape	123	0	123	123	0	0	100%	0	0	0	0	0	Or	0	123
Bulape Com	31	0	31	31	0	0	100%	0	0	0	0	0	0	0	31
Dikolo	24	0	24	24	24	0	100%	0	0	0	0	0	3	0	0
Ingongo	0	0	0	0	0	0	0,0%	0	0	0	0	0	0	0	0
Squirrel	18	0	18	0	18	0	100%	0	0	0	0	0	0	0	0
Total	178	0	178	178	24	0	100%	0	0	0	0	0	0	0	154

For a set of 178 contacts to be followed, 178 contacts were seen, i.e. a 100% follow-up proportion. 24 contacts were removed from follow-up.

### IV. RESPONSE ACTIONS

### COORDINATION

Holding of the coordination meeting.

# **EPIDEMIOLOGICAL SURVEILLANCE**

- Distribution of Surveillance Pillar actors (ACoDD, WHO and MSPHPS) in all 15 SAs of the Continuous Bulape SA.
- Continuation and closure of the IT and TL briefing on EVD surveillance and
- SBC. Cleaning of the linear list of cases (confirmed and probable) with SI.
- Deployment of a multidisciplinary team to Kananga village (AS Bambalaie) for alert verification and other surveillance activities.
- Continuation of routine activities (escalation, active tracing, investigations and contact tracing).

#### Points on Surveillance at Points of Entry and Control Points (PoE/PoC)

For the day of October 1, 2025, a total of 4,971 travelers were recorded in the 5 operational PoCs (4 in Bulape and 1 in Luebo). All (100%) were screened and washed their hands. No alerts were reported during the day.

#### **LABORATORY**

- For the day 15/10/2025, 34 samples were received (18 new suspected cases and 16 resamples). A sample of re-sampling came back positive.
- Of all the samples tested since inception, 53 were diagnosed positive for EVD.

Table 4. Summary of the situation of samples received and analyzed at the laboratory on October 15, 2025

Indicators	Data
Samples received (total)	
New suspected cases	18
Withdrawals	16
Samples analyzed	11
Samples analysed	16(1 positive)
Test re	sults
Currently being analyzed	7
Confirmed cases of the day	0
Non-case of the day	11
Total confirmed cases	53

# **HOLISTIC CARE (MEDICAL, NUTRITIONAL & PSYCHOSOCIAL)**

Table 4. Situation of patients hospitalized in Ebola treatment centers (ETCs), transit centers (CTs) or similar as of October 15, 2025

CI/CT/CTE		Sus	pected cas	es		Confirme	Healed		
	Number of beds	New admission	Total cases at the end of the day	Occupancy rate (%)	Number of beds	Number of cases	Occupancy rate (%)	Healed of the day	Cumulative healed
CTE HGR Bulape	16	7	20	125%	23	1	4,3%	0	18
CT Bambalayi	8	3	5	62,5%	5	0	0%	0	0
CT Ingongo	5	2	2	40%	0	0	0%	0	0
CT Mweka	3	0	2	66,6%	0	0	0%	0	0
Total	32	12	29	90,6%	23	1	4,3%	0	18

- A total of 29 suspected cases were hospitalized at the end of the day, with an overall occupancy rate of 90.6%. The ETC of HGR Bulape is the most solicited, with 20 suspected cases, exceeding its capacity (125% bed occupancy rate). Only one confirmed case is hospitalized, i.e. 4.3% occupancy rate for confirmed cases.
- No patient has been declared cured to date Since the beginning of the epidemic, 18 people have been declared cured and discharged from the ETC and the specific treatment (Mab114/Ebanga) has been

	Pillar Highlights	
	psychoeducational support on EVD and psychological support and cognitive-behavioral psychotherapy sessions of 6 households of deceased in the neighborhoods of 3 health areas (Bulape, Dikolo and Bulape-Com) Continuation briefing of 28 TPS (13 women & 15 men) on psychological support for	
	CONTINUITY OF SERVICES	
7 7 1	Paediatric (7 children), nutritional (1 child) and gynaecological (6 women) consultations Finalisation of the distribution plan for inputs and medicines at the HGR Bulape, Ingongo, Mpianga, Bambalaie, Bulape communautaire and Dikolo Paediatric (28 children), nutritional (4 children) and gynaecological (5 women) consultations Transfusion of 3 children. The daily stock is 2 bags (The requisition of blood products is in progress).	
II	NFECTION PREVENTION AND CONTROL (IPC/WASH)	
7 7	Trovidion of a EBC kita to the ECCINER toann of Micorientoe alter training for the realization of the activity	
VA	ACCINATION	
	Continuation of geographical vaccination.	

7	Advocacy of the Chief of the Bambalaie group and village chiefs for their commitment to sensitizing the
	community on preventive measures against EVD as well as the use of
7	Participation in the joint meeting initiated by the PEC on the follow-up of Ebola recoveries Sensitization
7	on the adoption of EVD preventive measures in schools (inst luse luebue, EP BAMUSANGA
	Sensitization around vaccination sites; Support to the ICH pillar for the provision of WASH kits to EVD
7	survivors; Posting of communication materials at the PoC and in public places;
1	
7	

	Sensitization of pregnant women after distribution of the Childbirth Kits. Through these activities, 1030 of whom 650 women were touched by the message.
L	OGISTICS
	Supply of the various pillars with essential inputs.  Holding of the logistics pillar meeting in person and online, with the participation of 3 partners (UNICEF, IMC and Red Cross)— 07 people present.  Logistical support to the various pillars in locomotion (surveillance, CREC, PCI,) Support for the deployment of experts to Mweka.  Followed by the electrification of the new base camp and the two coordination tents. Support for the dispatching of foams and buckets to experts in support of the response. Contact MSF regarding the disengagement at the Mpiaga ETC.  Sharing information with World Vision for the temporary shutdown of certain handwashing devices, pending their full adjustment.
A	MAP
┪	2050 people, including 815 girls and women, have been reached by community sensitization on the MGP of SEAs, on the referral circuit and assistance to victims; in the villages of Tshikapa, Kalamba and Ndambo.
	Participation in the popular forum organized jointly with the CREC. Sensitization of the 30 U-Reports (including 4 girls) on PSEA. Distribution of posters and pamphlets to raise awareness about the PSEA. 10 religious leaders and 10 teachers from the 4 schools of the village of Ndambo As bambalaie were sensitized. Community awareness on PSEAH measures, including reporting mechanisms: 407 young people (175 girls) took part.
R	ESEARCH
	· · · · · · · · · · · · · · · · · · ·
SA	AFETY AND SECURITY
7	Daily safety monitoring

# **IV. DEFIS ET GAPS**

- Poor road condition to reach the various villages of the affected SA.
- Insufficient resources for a holistic response.

# **V. RECOMMENDATIONS**

- Continue in-depth investigations to determine the source of the outbreak.
- ☐ Intensify geographical vaccination activities in villages in low-coverage SAs Continue to vaccinate
- ☐ contacts and visit camps by following up on contacts who are still active





IPC/WASH activities: Provision of 200 individual kits to pregnant women in 3 SAs: AS DIKOLO, BULAPE & BULAPE COM.



# FOR ANY FURTHER INFORMATION, PLEASE CONTACT

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