

Ebola outbreak in the Congo

Barry Mason
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On February 19 the World Health Organisation (WHO) in Geneva confirmed that an outbreak of haemorrhagic fever in the Cuvette Ouest region of northwest Congo-Brazzaville, near its border with Gabon, was due to the Ebola virus.

The testing to determine the disease was carried out at the Centre International de Recherches Medicales in de Francville in Gabon. To date there have been over 70 cases, with about 60 deaths.

Ebola is one of the most highly infectious diseases and has a high mortality rate. Ebola is a filovirus, one of a group known as haemorrhagic fever viruses. After a short incubation period the patient will develop fever, chills, headache and other symptoms. These are followed by nausea, vomiting and diarrhoea. The most frightening symptom that develop after five to seven days is severe bleeding from multiple sites, such as the lungs and gastrointestinal tract.

Death usually comes as a result of the traumatic shock to the body's organs through the continual loss of blood. The disease is fatal in 50 to 90 percent of cases depending on the strain of virus involved. Ebola first emerged in two simultaneous outbreaks, one in the northeast of the Democratic Republic of Congo (DCR) and one in southern Sudan in 1976.

The virus appears to be endemic across the equatorial region of Africa, appearing in the DCR, Sudan, Central African Republic, Gabon, Nigeria, Ivory Coast, Liberia, Cameroon and Kenya. There have been around 1,000 deaths from the disease since its appearance.

The threat of an epidemic was first raised when the authorities tested the bodies of a group of gorillas that had died from suspected Ebola infection. Over 80 percent of the clan died from the disease. It is suspected that the disease spread to the human population by eating meat from the carcasses of animals caught or found in the forests. The disease is easily spread through contact with bodily fluids. The widespread

practice of the ritual washing of the bodies of the dead also helps to rapidly spread the disease amongst people in the affected area.

The human deaths have occurred in the villages of Kelle and Mbou, which lie 800 kilometres north of the capital, Brazzaville. The same area experienced an outbreak of the disease last year. Authorities found it difficult to obtain blood samples from local inhabitants, many of whom are Pygmies. It is suggested their reluctance to give blood is a result of mistreatment at the hands of Gabonese troops carrying out a similar role in 1996-97 when they came across the border attempting to control a previous Ebola outbreak.

The Congolese government has taken emergency measures to attempt to prevent the spread of the disease. They have initiated a public awareness campaign, setting up radio stations and distributing transistor radios to people. Schools in the affected area have been closed down. They have also sent in medical teams.

The same area experienced an Ebola outbreak in June 2002 and this worsened fears amongst the population, who are aware of its catastrophic results. The Congolese minister of Health and Population, Alain Moka, speaking last week, said, "The conditions are ripe for a rapid, large-scale spread of the disease, and we have the worst to fear.... The situation is far from being brought under control, because no one wants to be told that their family or village has been exposed to Ebola."

The World Health Organisation have a team of experts from their Global Outbreak Alert and Response Network working in the area. WHO Country Director Dr. Lamine Sarr warned of the desperate need for assistance to combat the outbreak. Gabon has now closed its border to try to isolate the infection.

Many people in the area cross the border to obtain food. The government has requested help from the

World Food Programme of the United Nations. The food situation in the area is already very difficult as a result of an influx of some 60,000 people trying to escape continuing fighting and unrest in the Pool area of Congo. The International Federation of Red Cross and Red Crescent Societies is also active in the area.

With no treatment for Ebola, the only course of action available is isolation of the patients and protection of the clinical personnel caring for them. This is extremely difficult to carry out in desperately poor countries such as Congo. The highly infectious Ebola is presently confined to countries of sub-Saharan Africa, which have no adequate health care infrastructure and many of which are wracked with ongoing civil conflicts.

In spite of the deadly nature of the disease and the fear it generates, there has been little serious research into its causes or cure. The American Centres for Disease Control explain that as well as there being no cure or vaccination programme, work still needs to be carried out to be able to diagnose the disease more quickly. Little is understood about how the virus is transmitted and how it specifically affects the bodies of those infected. It is still not known what the animal host is that serves as a reservoir of the disease, which would at least enable people to avoid it.



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