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Ebola crisis update - 2 November 2015

3 November 2015

- [Liberia](#): After first being declared free of [Ebola](#)

	Date of info	Cases	Deaths
<i>Guinea</i>	<i>Week 43</i>	<i>3,806</i>	<i>2,535</i>
Liberia	Outbreak 1 over	10,666	4,806
	Outbreak 2 over	6	2
<i>Sierra Leone</i>	<i>Week 43</i>	<i>14,001</i>	<i>3,955</i>
Nigeria	Outbreak over	20	8
Senegal	Outbreak over	1	0
USA	Outbreak over	4	1
Spain	Outbreak over	1	0

Mali	Outbreak over	8	6
UK	Outbreak over	1	0
TOTAL		28,514	11,313

WHO Figures (<http://apps.who.int/ebola/current-situation/ebola-situation-report-28-october-2015>) from 28 October 2015

(/diseases/ebola) transmission on 9 May, six new cases were confirmed in Liberia at the end of June following the death of a 17-year-old boy. Liberia was again declared free of Ebola virus transmission on 3 September 2015, and has now entered a period of heightened surveillance.

- **Guinea:** Three new confirmed cases in the country in the week ending 25 October. All three new cases are from the same household in the sub-prefecture of Kaliah, Forecariah, and are registered high-risk contacts linked to a case from the same area last week. The country also reported three cases the previous week. There are currently 364 contacts under follow-up in Guinea (an increase from 246 the previous week), 141 of whom are high-risk. An additional 233 contacts identified during the past 42 days remain untraced. Therefore there remains a near-term risk of further cases among both registered and untraced contacts.
- **Sierra Leone:** The last case to receive treatment for Ebola in Sierra Leone was confirmed free of the virus after a second consecutive negative test on 25 September. The country will be declared free of EVD transmission on 7 November assuming that no further cases are reported and it will enter into a period of enhanced surveillance.

MSF Staff on ground (as of 1 November)

Total: 75 international and about 1,024 national

- **Guinea:** 26 international, 480 national
- **Sierra Leone:** 31 international, 275 national
- **Liberia:** 18 international, 269 national

Overview

- 1. The emergency is not over – the Ebola epidemic in West Africa continues in Guinea where three new cases were recorded last week.**
 - Though Ebola has faded from the news headlines, **the epidemic in West Africa continues to claim lives. Currently, the main challenge comes from a weak surveillance monitoring system which is fragmented across the region.** There were three confirmed new cases of Ebola in Guinea in the country in the week ending 25 October and 364 known contacts (141 high risk) are still being followed up across the country.
 - Getting to this stage has taken massive resources but getting to zero and staying there requires the most meticulous, difficult work of all - **we cannot lose focus now** and must guard against complacency until the outbreak is declared over across the region and the period of heightened vigilance is completed without incident.
- 2. A sustained and well-functioning surveillance and rapid response system is essential in order to get to and then maintain zero cases of Ebola across West Africa** and also to respond to cases of other diseases with epidemic potential including measles and cholera which have previously broken out in the region.
- 3. The Ebola outbreak has created a particularly vulnerable group in Ebola survivors and investments into their universal access to healthcare needs to be scaled up.**
 - **Ebola survivors face continuing health challenges, suffer from stigmatisation in their communities and need specific and tailored care.**

There are an estimated 15,000 Ebola survivors in West Africa, many of whom continue to face ongoing physical and mental health problems. The post-Ebola syndrome may include joint pain, chronic fatigue, hearing problems and eye problems. The eye conditions can potentially lead to blindness without prompt access to specialty care. In addition, survivors are at risk of stigmatisation in their communities.
 - **Investments into timely access to a comprehensive care package for Ebola survivors, including medical,**

psychosocial care and protection, need to be scaled up rapidly. Ebola survivors need access to a comprehensive care package, including medical, psychosocial care and protection against stigma.

- **A focus on potential sexual transmission may divert attention away from the need for a sustained and well-functioning surveillance and response system needed to get to and maintain zero cases.** Many unexpected cases of Ebola are blamed on sexual transmission from male survivors but when these cases of sexual transmission are actually investigated we see that they have usually been infected by the normal means: unsafe burials, care giving, etc. The majority of the male survivors are of a sexually active age and most of them were ill about a year ago at the peak of the epidemic, if sexual transmission of Ebola was as common as it is portrayed in the media, we would literally be seeing thousands of cases. Going forward, we should not assume that all cases of unexplained origin are due to sexual transmission, and we should not blame the victims. Years of experience in the treatment of STIs have shown that this is not an effective disease control strategy.
4. **Already weak public health systems have been seriously damaged by the epidemic and their recovery must be sufficiently funded and resourced** with more than 500 health workers dying of the virus across the chronically understaffed region and fear of infection and lack of infection control closing many health facilities across the region at least temporarily.
- **Donors and the Ministry of Health should work together to ensure that health sector recovery efforts result in timely access to free of charge, quality healthcare,** especially for vulnerable groups such as children under five, pregnant and lactating women and Ebola survivors.

Operational highlights

MSF's Ebola response started in March 2014 and had included activities in the three most affected countries of Guinea, Liberia, and Sierra Leone as well as Nigeria, Mali and DRC. MSF currently employs around 75 international and around 269 national (or locally hired) staff in Guinea, Liberia and Sierra Leone.

Since the beginning of the epidemic:

- 10,287 patients admitted to MSF Ebola management centres
- 5,225 patients confirmed with Ebola
- 2,475 patients recovered from Ebola in our centres

Highlights per country

Guinea

There were three new confirmed cases in the country in the week ending 25 October. All three new cases are from the same household in the sub-prefecture of Kaliah, Forecariah, and are registered high-risk contacts linked to a case from the same area last week.

The country also reported three cases the previous week. There are currently 364 contacts under follow-up in Guinea (an increase from 246 the previous week), 141 of who are high-risk. An additional 233 contacts identified during the past 42 days remain untraced.

Conakry: Nongo ETC

A three-month-old baby. Admission of a pregnant woman. Nongo is the only centre ready to treat pregnant woman.

Forecariah

Three new cases were detected in the prefecture. Both of cases were high-risk contact of the last community death.

Liberia

After first being declared Ebola free 9 May, a 17-year-old boy died on 29 June, resulting in five further cases of the virus. The outbreak was declared over again on 3 September and the country is now observing a period of heightened vigilance.

With the national health system decimated by the outbreak – and near to 200 Liberian healthcare workers having died from Ebola according to official statistics - MSF is focusing activities on supporting the recovery of health facilities, hoping to encourage Liberian people to feel confident they can go to hospital once again and have their healthcare needs looked after.

Monrovia

In Monrovia, MSF is running a 74-bed pediatric hospital, including a neonatal intensive care unit, aiming to contribute to restoring the provision of secondary healthcare in the aftermath of the Ebola outbreak. In September, 374 children were cared for at the hospital. Twenty-five percent of the cases admitted in the Emergency Room suffered from malaria.



MSF also runs a clinic for Ebola survivors in the premises of the hospital. Former patients have to face stigma and discrimination while accessing care, as well as social and economic problems (loss of work, loss of housing, etc.). MSF provides general outpatient consultations, and addresses mental health needs to a group of more than 500 identified former Ebola patients, which are estimated to be one-third of all survivors in Liberia. Common complaints are joint pains and ophthalmic issues, for which MSF guarantees referral to external specialists.

Sierra Leone

With Ebola unseen in Sierra Leone for many weeks, and the outbreak hopefully to be declared over on 7 November, MSF is focusing activities in Sierra Leone on survivor health care and surveillance in Western Area (Freetown) and Tonkolili (Magburaka). There are also plans to begin non-Ebola health activities in several districts of the country.

Bo

The so-called “core” ETC in Bo was closed on 15 October after several months with no positive cases recorded in the district or indeed the entire southern part of the country.

Magburaka

MSF is running a survivor health clinic in Magburaka town as well as a mobile clinic in the surrounding villages in Tonkolili and Bombali districts. At the end of September the team was supporting a cohort of 171 survivors with medical and mental health activities.

Freetown – Hastings (replacement Kissy)

MSF was running an Ebola Maternity Centre in Hastings, with specific obstetric services for Ebola positive pregnant women in need of tailored care. Over the last months the centre also accepted patients other than pregnant women who presented with symptoms of Ebola. The centre will close once the outbreak is declared over.

Freetown - Surveillance and contact tracing

MSF works in coordination with the District Ebola Response Committee (DERC) to identify and respond to suspect cases of Ebola in Freetown. Despite the fact that Ebola has not been seen for many weeks, isolating and testing those who meet admission criteria remains an important element of the response.

Read more

[Video: A Month in Focus, August 2015 \(/article/video-month-focus-august-2015\)](#)



[Ebola crisis update - 17 July 2015 \(/article/ebola-crisis-update-17-july-2015\)](#)



[Ebola: Attention, World: The fight isn't over \(/article/ebola-attention-\)](#)



[More about Ebola \(/article/more-about-ebola\)](#)



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