PRESS RELEASE
DRC: ALIMA scales up response during “second wave” of Ebola outbreak

DAKAR/BENI, October 18, 2018 – Following a worrying spike in the number of reported Ebola cases in the Democratic Republic of Congo’s (DRC) North Kivu Province, compounded by a deteriorating security situation, ALIMA (The Alliance for International Medical Action) has scaled up its response within the treatment center in the city of Beni, which is now the epicenter of the outbreak.

“The situation is worrying, as we are hospitalizing a higher number of cases and the majority of these new cases are patients who were not previously registered as known contacts,” said Dr. Rouafi Oummani, ALIMA’s medical coordinator in Beni.

While in mid-September the outbreak appeared to be stabilizing, DRC’s Ministry of Health says the area is now experiencing a “second wave” of the Ebola outbreak. While previously, ALIMA teams admitted around three new confirmed patients per week, this figure is now up to 16. During the past two weeks, ALIMA admitted as many confirmed patients to the Ebola Treatment Center (ETC) in Beni, as in the previous previous 10 weeks.

The increase in cases is due in large part to reduced accessibility to communities and to a deteriorating security situation in the region, particularly in the city of Beni, which has suffered a number of attacks in the past three weeks.

To better respond to the increase in new admissions, our teams have added additional beds, bringing the capacity to 41 beds in Beni. Additionally, ALIMA has strengthened its community outreach actions, in partnership with the Ministry of Health’s Communication Commission.

“One of the biggest challenges that we are facing right now, in order to save lives and get patients the care they need, is the delayed admissions,” said Dr. Richard Kojan, President of ALIMA, who recently spent three weeks in Beni as a resuscitation specialist. “Among those who do come, a large number have very high viral loads.”

In Beni, on average, patients come to the ETC more than five days after the onset of their symptoms.

“We are asking people who have been in contact with people who are sick or who have symptoms related to the Ebola virus (fever, vomiting, etc.) to make themselves known as soon as possible to health workers,” said Dr. Ommani. “It is important to reinforce the message that early treatment is key to
saving lives during an Ebola outbreak. We have very promising compassionate treatments for patients and we can provide the needed care, free of charge, here at the treatment center.”

It is also essential that medical care remains accessible for the entire population in need of treatment not related to Ebola, such as malaria, chronic diseases and obstetric care.

"The Ebola virus disease is an emergency that needs an adequate response, but it should not make us forget the other medical and humanitarian needs that the populations of this region have been facing for several years," said Anthony Bonhommeau, ALIMA’s Head of Operational Development, who oversees the Ebola response.

ALIMA (The Alliance for International Medical Action) has been active in DRC since 2011. Our teams most recently responded to an outbreak of Ebola in Itipo, in the Equateur province, where we set up a 18-bed treatment center. More than 20 patients suspected of having Ebola received care.

In response to the ongoing outbreak in North Kivu province, ALIMA runs a 41-bed treatment center in Beni, where our teams have cared for 273 suspected cases, of which 62 have been confirmed, and 18 confirmed patients have been cured.

Thanks to ALIMA’s innovative CUBE, a biosecure emergency care unit for outbreaks of highly-infectious diseases, such as Ebola, family members of sick patients in Beni can remain in contact with their loved ones during treatment.

*This project in Beni is made possible thanks to generous funding from the World Health Organization (WHO).

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