with 301 585 people vaccinated with the rVSV-ZEBOV-GP Ebola vaccine as of 14 March 2020, and 20 339 vaccinated with the Ad26.ZEBOV/MVA-BN-Filo vaccine in two health areas near Goma since its introduction on 14 November 2019. Infection prevention and control (IPC) detection, evaluation, monitoring and supervision is important to reduce exposure to possible nosocomial infection and EVD cases.

The government and the Ministry of Health (MOH), and other national authorities in the DRC, the WHO and partners, are implementing outbreak control interventions together with teams in the surrounding provinces, who are taking measures to ensure that they are response-ready. The WHO still advises against any restriction of travel to, and trade with the DRC, although

port screening is conducted. Furthermore, the WHO continues to closely monitor and, if necessary, verify travel and trade measures in relation to this event. Travellers should seek medical advice before travel and should practice good hygiene.

As of 25 March 2020, there are no EVD cases reported in South Africa associated with the current outbreak in the DRC. In addition, there are no suspected cases of EVD in South Africa at present. Surveillance amongst returned travellers is ongoing.

**Article source:** WHO; <u>www.who.int</u>; WHO-AFRO, Division of Public Health Surveillance and Response, NICD-NHLS; <u>outbreak@nicd.ac.za</u>

## **SEASONAL DISEASES**

## Malaria notification data, February 2020

For the month of February 2020, 781 malaria cases were notified through the National Notifiable Medical Conditions Surveillance System (NMCSS), a decrease of 22% compared to February 2019. Of the 781 notified cases, 131 cases were excluded from further analysis due to missing data or being identified as a duplicate report. The majority of the 650 remaining cases were reported in non-endemic districts (56%, 364/650), with districts in Gauteng Province (57%, 207/364) once again accounting for most of this burden. Males (61%, 389/640), predominately between the ages of 20 and 40 years, were the most affected by malaria in both the endemic and non-endemic districts. Of the 68 notified cases of malaria in children under the age of five, 58% (40/68) came from non-endemic districts, mainly within the Gauteng Province. Microscopic examination of blood smears remains the main method of diagnosis (87%, 564/650) for cases captured by the NMCSS. Intravenous (IV) quinine as opposed to the recommended IV artesunate was used to treat 22% (22/99) of the severe

malaria patients, primarily at health facilities located within non-endemic districts (91%, 20/22). During this reporting period, a marked decrease in the importation of malaria from neighbouring Mozambique was noted, while Gauteng Province reported a number of malaria cases imported from South Africa's endemic districts.

**Important:** Note that these data do not reflect the country's total burden of malaria disease, as most malaria-endemic districts are currently using alternative malaria case recording systems, such as the District Health Information System 2 (DHIS2).

**Article source:** Centre for Emerging Zoonotic and Parasitic Diseases and the Notifiable Medical Conditions Surveillance System, NICD-NHLS; johnf@nicd.ac.za