

# THE THREAT OF EBOLA: ON WHO DECLARING CONGO'S EBOLA OUTBREAK AS A PUBLIC HEALTH EMERGENCY

Relevant for: Developmental Issues | Topic: Health & Sanitation and related issues

After holding itself back on three occasions, the World Health Organization has declared the [Ebola virus disease outbreak in the Democratic Republic of the Congo](#) a Public Health Emergency of International Concern. The outbreak in Congo, officially declared on August 1, 2018, has killed nearly 1,700 people and made more than 2,500 people ill. While cases in other areas are reducing, Beni is the new hotspot. The announcement of the health emergency comes amid renewed concerns that the virus could spread to other countries. A single imported case of Ebola in Goma, a city in Congo with two million people and with an international airport bordering Rwanda, served as a trigger to finally declare a global emergency. Surprisingly, the spread to neighbouring Uganda last month did not seem to change the way the WHO assessed the situation. Even when a handful of Ebola cases were confirmed in Uganda, all the infected people had travelled from Congo and there had been no local transmission or spread within Uganda — one of the criteria used by the WHO to assess if an outbreak is a global emergency. This is the fifth time that the WHO has declared a global emergency. The earlier occasions were in February 2016 for Zika outbreaks in the Americas, August 2014 for Ebola outbreaks in western Africa, the spread of polio in May 2014, and the H1N1 pandemic in April 2009. Declaring an event as a global emergency is meant to stop the spread of the pathogen to other countries and to ensure a coordinated international response.

## Anatomy of an outbreak

There have been several challenges in interrupting the virus transmission cycle and containing the spread — reluctance in the community, attacks on health workers, delays in case-detection and isolation, and challenges in contact-tracing. But compared with the situation during 2014-2016, the availability of a candidate vaccine has greatly helped. Though the vaccine has not been licensed in any country, the ring vaccination strategy where people who come into contact with infected people, as well as the contacts of those contacts are immunised, has helped. Of the nearly 94,000 people at risk who were vaccinated till March 25, 2019, only 71 got infected compared with 880 unvaccinated who got infected. The vaccine had 97.5% efficacy; a majority of those who got infected despite being vaccinated were high-risk contacts. Owing to vaccine shortage, the WHO's expert group on immunisation has recommended reducing the individual dose to meet the demand. What is equally important is for the G7 countries to fulfil their promise to the WHO to contain the spread. The agency received only less than half of the \$100 million that was requested to tackle the crisis. The global emergency now declared may probably bring in the funding.

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