

EBOLA: MUSEVENI CALLS FOR CALM

By John Museenzi
and John Masaba

President Yoweri Museveni has called for calm after Uganda registered a second imported Ebola Bundibugyo virus disease case linked to the outbreak in eastern DR Congo that has so far claimed 88 people.

The President on May 16, met Uganda's national epidemics taskforce at Nakasero State Lodge following confirmation of Ebola involving Congolese nationals, who crossed into Uganda seeking specialised treatment. "This evening, I met the task force on epidemics in Nakasero. We discussed the Ebola situation in the region, and we will communicate the way forward. There is no cause for alarm," Museveni said in a statement posted on his official X account.

The reassurance came as the Ministry of Health confirmed that Uganda had recorded two imported Ebola cases,



Front row: Museveni (four-left), Aceng (second-left), Ministry of Health Permanent Secretary Dr Diana Atwine (second-left) and tourism ministry permanent secretary Doreen Katusilime (third-left), together with other officials after a meeting of Uganda's National Epidemics Task force at Nakasero State Lodge on Saturday

both linked to the outbreak currently spreading across eastern DR Congo.

According to the health ministry, the first patient, a 59-year-old Congolese man, was admitted to Kibuli Muslim Hospital in Kampala on May

11, with fever, abdominal pain, respiratory distress, nausea, and later developed bleeding symptoms before dying on May 14.

Laboratory tests conducted at the Central Emergency Surveillance and Response

Support Laboratory in Wandegaya later confirmed Ebola Bundibugyo Virus Disease.

The second patient had initially been admitted at Nakasero Hospital before being transferred to Mulago National Referral Hospital's Ebola isolation unit for specialised treatment and monitoring.

A health ministry official said the two confirmed patients are Congolese nationals who travelled to Uganda for advanced medical care.

103 IDENTIFIED FOR QUARANTINE

As part of containment measures, the health ministry said at least 103 contacts linked to the confirmed cases have so far been identified and measures are in place to place them under quarantine and daily monitoring for 21 days.

The health ministry explained that surveillance teams are retracing the movements of the infected individuals to establish all possible exposure points and prevent further spread.

It also reassured the public that the risk of widespread exposure remains low because the patients reportedly travelled using private means rather than public transport.

EMERGENCY RESPONSE

Uganda has since heightened Ebola surveillance at border points, hospitals and high-risk districts, especially in western Uganda where movement between the two countries is frequent.

Rapid response teams, surveillance officers, laboratory personnel and screening teams have been deployed across strategic entry points and

About Ebola

Ebola is a severe highly infectious viral disease spread through direct contact with infected body fluids or contaminated materials. It can be fatal if not detected and treated early. Symptoms include sudden fever, body weakness, vomiting, diarrhoea and unexplained bleeding.

Uganda has experienced several Ebola outbreaks over the past two decades, with the deadliest occurring in the year 2000 when the Ebola Sudan strain killed more than 220 people mainly in Gulu, Masindi and Mbarara districts.

The country has also previously recorded outbreaks of the Bundibugyo strain, including the 2007 outbreak in Bundibugyo district that killed 37 people. More recently, Uganda battled another Ebola Sudan strain that broke out between September 2022 and January 2023, infecting at least 164 people and claimed 77 lives.

health facilities as authorities attempt to stop any possible local spread.

Health minister Dr Jane Ruth Aceng said Uganda's disease detection and emergency response systems remain strong due to experience gained from previous Ebola outbreaks.

"We have built up a very

strong system of identification, detection and response to these outbreaks. That makes it possible for us to respond in real time," Aceng said.

She explained that Village Health Teams and community health extension workers across the country have already been trained to detect and electronically report unusual illnesses directly to emergency operation centres.

The ministry has also urged the public to remain vigilant, maintain proper hand hygiene, avoid direct contact with symptomatic individuals, and immediately report suspected cases.

INTERNATIONAL EMERGENCY

The escalating outbreak has now triggered global concern after the World Health Organisation (WHO) declared the Ebola situation in Uganda and DR Congo a Public Health Emergency of International Concern, the second-highest level of global health alert under international regulations.

WHO Director-General Dr Tedros Adhanom Ghebreyesus said the outbreak poses a high regional risk because of cross-border population movement, insecurity in affected areas, as well as gaps in surveillance and contact tracing.

According to WHO figures released yesterday, the outbreak has so far recorded eight laboratory-confirmed cases, more 400 suspected cases and at least 80 suspected deaths in Ituri Province in eastern DR Congo.

PILGRIMS STOPPED AT BORDER

Uganda's containment measures also affected religious travellers after authorities temporarily stopped 77 Catholic pilgrims from DR Congo at the Mpondwe border in Kasese district for screening and surveillance.

The pilgrims, who were travelling on foot to Uganda Martyrs Shrine Namugongo for this year's Martyrs Day celebrations due on June 3, were by Saturday being temporarily hosted at St Michael Church-Kabuyiri near the border as health officials conducted screening procedures.

The faithful had travelled from the Catholic Diocese of Butembo-Beni in eastern DR Congo and are among thousands expected to participate in the annual Martyrs Day celebrations.



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