



ASEAN BIOLOGICAL THREATS SURVEILLANCE CENTRE

DISEASE ALERT



September 26, 2025 | Issue No. 53

First alert : September 8, 2025

Third alert : September 26, 2025 | **Ebola Outbreak in the Democratic Republic of the Congo (DRC)**

Sub-Locations Affected

Kasai Province (Boulapé, Mwaka, Mushenge and Dekese); **Kwilu Province** (Kikwit)

Event Description

On September 11, 2025, the Kasai provincial government in the Democratic Republic of the Congo (DRC) announced a lockdown of Bulape City as part of strengthened containment measures in response to the resurgence of Ebola virus disease (EVD). On the same day, the Africa Centres for Disease Control and Prevention (CDC) confirmed the country's 16th EVD outbreak, which has spread across four health zones in Kasai Province.

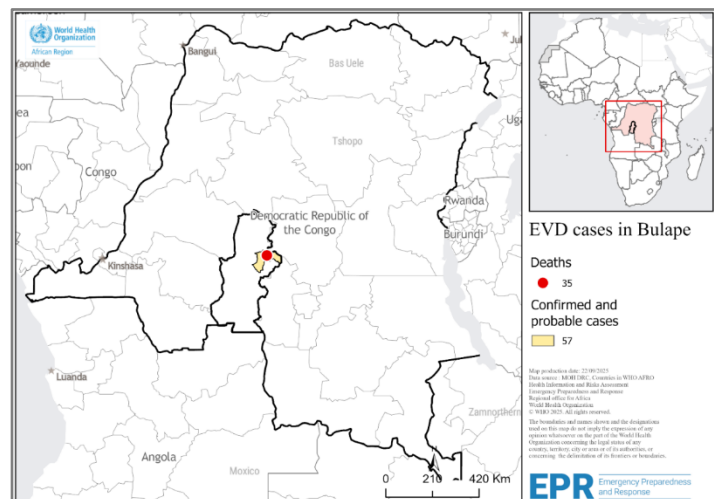


Figure 1. Map of location affected as of September 23, 2025
(source: <https://iris.who.int/items/d13a9737-797b-4eb2-af11-66f079bb5935>)

Epidemiological Information

- As of September 21, 2025, a total of 57 cases of EVD (47 confirmed and 10 probable), including 35 deaths (25 confirmed and 10 probable) have been reported from Bulape Health Zone, Kasai Province, representing an overall case fatality rate (CFR) = 61.4%. Five confirmed cases have been identified among health workers. Of the 1,093 contacts enrolled, 759 have completed the 21-day follow-up, and 613 have received vaccination.

- As of September 14, 2025, a total of 54 Ebola virus disease (EVD) cases had been reported, including 35 confirmed, with 27 deaths (16 among confirmed cases). The overall case fatality ratio (CFR) is 50%, while the CFR among confirmed cases is 45.7%.
- On September 4, 2025, the Minister of Public Health, Hygiene, and Social Security of the DRC announced the resurgence of Ebola virus disease (Zaire strain) in the Bulape Health Zone, Kasai Province. A total of 28 suspected cases, including 15 deaths (CFR=54%), had been reported, among them four deaths of healthcare workers from Bulape, Bulape Com, and Dikolo areas of Bulape Health Zone, as well as Mweka Health Zone.
- On August 20, 2025, the first known index case was reported in Kasai Province, involving a pregnant woman admitted to Bulape General Reference Hospital with high fever, bloody diarrhea, hemorrhage, and extreme weakness. She died on August 25, 2025, from multiple organ failure.

Response Measures

- Authorities are implementing several public health measures, including:
 - Activating crisis committees at local and provincial levels;
 - Conducting risk communication and active surveillance;
 - Isolating all cases and applying Infection Prevention and Control (IPC) measures;
 - Administering intravenous medications to all patients;
 - Continuing contact isolation, tracing, and investigations.
- In response to the outbreak, the WHO is supporting the national authorities through:
 - Conducting risk assessment and investigation;
 - Providing operational, financial and technical assistance to the Ministry of Health to enable a rapid response;
 - Supplying essential items, including Personal Protective Equipment (PPE), medical supplies, and infrastructure support; and
 - Preparing 2,000 doses of the approved Ervebo vaccine in Kinshasa, to be shipped shortly to the affected area for vaccination of contacts of confirmed or suspected cases, as well as frontline and healthcare workers. So far, 68 frontline healthcare workers have been vaccinated
- Médecins Sans Frontières (MSF), with the DRC Ministry of Health and WHO, set up an Ebola treatment center in Bulape General Referral Hospital on September 9 and is reinforcing triage, infection control, and healthcare worker training.
- The WHO assessed the public health risk as high nationally, moderate in the African Region, and low globally. It is also supporting 10 priority neighbouring countries with readiness assessments and contingency planning.

- Africa CDC highlighted that funeral attendance may have amplified transmission, as several suspected cases involved individuals who died before the outbreak was recognized. Attendees from other health zones may have been exposed through unsafe burial practices. The spread across four health districts has heightened the risk of cross-border transmission, particularly to Angola.

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