



REPUBLIC OF NAMIBIA

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MEDIA RELEASE

**NOTIFICATION OF CONFIRMED MARBURG VIRAL DISEASE IN
TANZANIA**

For

Immediate release

Background

On 21 March 2023, the Ministry of Health and Social Services (MoHSS) learned about an outbreak of Marburg Viral Disease in Kagera Region situated in the north western part of the United Republic of Tanzania. The outbreak has been ongoing since 16 March 2023 and as of 22 March 2023, The United Republic of Tanzania reported a total of eight (8) confirmed cases with five (5) deaths, including one (1) health worker, translating to a 63% case fatality rate.

Marburg Viral Disease is similar to Ebola Viral Disease in that they both cause hemorrhagic fevers. The reservoir for Marburg Virus is a type of fruit bat that resides in tropical forests and caves mainly in Africa. The virus infects non-human primates and humans when they get in contact with the fruit bats that carry the virus. Marburg Viral Disease was initially detected in 1967 after simultaneous outbreaks in Marburg, from which the disease takes its name, and Frankfurt in Germany; and Belgrade (former Yugoslavia) through the exposure of imported monkeys from East Africa. Thereafter, sporadic outbreaks have been reported with the most recent ongoing outbreak in Guinea reported at the beginning of 2023, and Ghana in 2022 (2/3 deaths). In addition, in 2005 there was a large outbreak in the northern part of Angola where 329 out of 374 confirmed cases, died of Marburg Viral Disease.

All official correspondence must be addressed to the Executive Director.



Namibia has not detected any case of Marburg Viral Disease to date. However, due to increased activity related to international travel and trade, population displacement and migration, the country remains at risk of importation of Marburg Viral Disease. Therefore we have to be vigilant and on high alert, particularly at our main border crossings and in our public and private facilities.

Marburg Viral Disease is known to cause severe symptoms that result in bleeding from all body openings and thus its classified as a hemorrhagic fever, with a fatality ratio of up to 88%. The causative organism belongs to the same family of viruses that causes the Ebola Viral Disease. The virus is transmitted to people from fruit bats and spreads among humans through direct contact with the bodily fluids of infected people, surfaces, and materials.

Illness caused by the Marburg Viral Disease begins abruptly, with high fever, severe headache, abdominal pain, vomiting, diarrhea and dehydration. Many patients develop hemorrhage symptoms in the skin, conjunctiva, nasal, gum, gastrointestinal tract.

Transmission

The virus is transmitted to humans from its reservoir, the fruit bats, or through infected non-human primates. Human to human transmission occurs through direct contact with the body fluids of infected persons, surfaces, and materials. Burial ceremonies where mourners have direct contact with the body of the deceased can play a significant role in the transmission of Marburg virus. It's been reported that transmission can occur through unprotected sex with individuals recovery from infection with Marburg Virus up to seven weeks after clinical recovery.

Risk factors

Common risk factors for acquiring Marburg Viral Disease are:

- Healthcare workers and other employees working in healthcare settings exposed to patients with Marburg Virus Disease
- Employees and other people handling imported infected animals such as non-human primates originating from countries or areas where Marburg virus vectors are present.
- People living in close contact with an infected person or persons
- People handling the dead body of an infected person

Signs and Symptoms

The incubation period (interval from infection to onset of symptoms) varies from 2 to 21 days. Illness caused by the Marburg Virus Disease (MVD) begins abruptly, with high fever, severe headache, and severe malaise. Many patients develop severe hemorrhagic symptoms within 5-6 days after onset of symptoms. The virus is transmitted to people from fruit bats and spreads among humans through direct contact with the bodily fluids of infected people, surfaces, and materials

Diagnosis

Initially, it can be difficult to clinically distinguish MVD from other infectious diseases such as malaria, typhoid fever, shigellosis, meningitis however, bleeding from body orifices should raise a high index of suspicion of a viral hemorrhagic disease. Confirmation that symptoms are due to Marburg virus infection is made using laboratory tests.

Treatment and Management

In addition to supportive care – rehydration with oral or intravenous fluids – and treatment of specific symptoms, there are candidate vaccines and therapeutics that can be used for the clinical management of MVD.

Public health Measures

Taking cognizance of the risk of importation of infected cases in the country through the border crossing. MoHSS will implement the following preparedness and readiness activities:

- Strengthening of health screening for all incoming travelers at international airports and at main ground crossings;
- Strengthening the adherence to Infection Prevention and Control Standard Operating Procedures in public and private health facilities;
- Training of healthcare providers on case detection and management of Marburg Viral Disease;
- Activation of disease surveillance and laboratory systems for prompt detection and containment in event of the outbreak;
- Community Education and activation of Emergency Operations Call Center.

The public is urged to remain calm while the MoHSS is activating the preparedness and

response activities. For further inquiries, kindly contact the nearest health facility or the following number: hotline 0800100100 or 0811413190 or Ministry of Health and Social Services, Public Relations Officer at +26461-203 2054 or email public.relations@mhss.gov.na

Issued by:



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