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All County Directors for Health

Thro'

The Chief Executive Officer
Council of Governors
NAIROBI

RE: ADVISORY TO THE COUNTIES FOLLOWING CONFIRMATION OF MARBURG VIRUS DISEASE (MVD) IN JINKA, SOUTHERN ETHIOPIA.

Epidemiological Situation

Ethiopia's Ministry of Health has confirmed an outbreak of Marburg virus disease in Jinka, the South Ethiopia Region, the first of its kind in the country, following laboratory testing of samples from a cluster of suspected cases of viral haemorrhagic fever.

Genetic analysis by the Ethiopia Public Health Institute revealed that the virus is of the same strain as the one that has been reported in previous outbreaks in other countries in East Africa. A total of nine cases has been reported in the outbreak that has affected Jinka town in the South Ethiopia Region.

Marburg virus, is in the same family of viruses that cause Ebola virus disease. It is a severe and often fatal illness caused by the Marburg virus. The disease is transmitted to humans from fruit bats and spreads among people through direct contact with bodily fluids of infected individuals or contaminated materials.

Initial symptoms include high fever, severe headache, muscle aches and fatigue. Many patients develop severe bleeding within a week of onset. Although several promising candidate medical countermeasures are currently undergoing clinical trials, there is no licensed therapeutic or vaccine for effective management or prevention of Marburg virus disease. However, early access to supportive treatment and care – rehydration with oral or intravenous fluids – and treatment of specific symptoms, improve survival.

In the African region, previous outbreaks and sporadic cases have been reported in Angola, the Democratic Republic of the Congo, Ghana, Kenya, Equatorial Guinea, Rwanda, South Africa, Tanzania and Uganda.

Kenya shares significant travel, trade, and migration links with Ethiopia through international airports, and land border points, making the risk of importation into the country a public health concern. Given the high case fatality rate associated with MVD counties are urged to strengthen the following measures to safeguard the health of Kenya's members of the public.

Recommended immediate public health preparedness measures

1. Enhanced Surveillance

Counties should sensitize health workers on standard case definition for VHFs and should strengthen monitoring at points of entry (PoEs), health facilities, and communities to rapidly detect and report suspected cases (See the attached working case definition for MVD). Surveillance activities should include; screening of travelers at PoEs, active case finding, and prompt reporting through the IDSR/EBS platforms.

2. Case Management Preparedness

Counties should identify and designate isolation facilities, ensure they are functional, and train healthcare workers on MVD recognition, triage, supportive management, and referral procedures. Clear referral pathways should be established for safe transfer of cases to treatment units.

3. Infection Prevention and Control (IPC)

Strict IPC protocols should be enforced in all health facilities, including proper and consistent use of PPE, hand hygiene, safe waste management, and environmental disinfection. Counties must stock and pre-position PPEs, disinfectants, and body bags to protect health workers and prevent hospital-based transmission.

4. Laboratory Readiness

Counties should prepare staff to safely collect, package, and transport specimens from suspected cases under strict biosafety protocols. Coordination with the National Public Health Laboratories (NPHL) should be ensured for rapid confirmation and timely case management.

5. Risk Communication and Community Engagement (RCCE)

Clear and accurate messages on MVD symptoms, prevention, and early reporting should be disseminated through CHPs, Local leaders, radio, and other trusted channels. Counties should address misinformation, promote safe burial practices, and encourage immediate reporting of unusual deaths or illnesses.

6. Coordination and Multi-Sectoral Response

County Public Health Emergency Operations Centres (PHEOCs) should be activated to alert mode to oversee MVD preparedness and response measures in close collaboration with the National PHEOC and engagement of partners such as immigration, security, and local administration. This are essential for a coordinated, whole-of-government response.

Personal and Community Measures for MVD Prevention

The following measures can protect individuals and communities from the spread of Marburg Virus Disease:

1. Avoid Contact with Infectious Fluids

Individuals and communities should avoid direct contact with blood, vomit, urine, feaces, and other body fluids of suspected or confirmed MVD cases. Anyone who develops symptoms such as fever, vomiting, diarrhea, or unexplained bleeding should be isolated immediately and referred to the nearest health facility. Caregivers and family members should minimize direct handling of the sick and seek professional medical assistance.

2. Practice Regular Hand Hygiene

Handwashing with soap and clean running water should be done frequently, particularly after contact with sick individuals, caregiving activities, or handling potentially contaminated items. Public spaces such as schools, markets, places of worship, and transport areas should provide handwashing stations to encourage hygienic practices.

3. Observe Safe Burial Practices

Funerals and burials are high-risk events for MVD transmission. Traditional practices such as washing, touching, or kissing the body of the deceased should be avoided. Only trained personnel wearing appropriate protective equipment should handle the body. Communities should report all deaths promptly to local health authorities so that safe and dignified burials can be conducted without exposing family or community members to infection.

4. Avoid Bushmeat and Practice Safe Food Handling

Community members should avoid handling or consuming bush meat, including bats, monkeys, and other wild animals, which are known reservoirs of VHF viruses including Marburg virus. All food should be prepared and cooked thoroughly. Any contact with sick or dead wild animals should be avoided, and unusual animal deaths should be reported to veterinary or public health authorities.

The Kenya National Public Health Institute urges all counties to remain vigilant and strengthen preparedness and response measures to prevent the introduction and spread of MVD to Kenya.

You are advised to circulate this advisory to all the Health Care workers including Points of Entry staff and community members within your respective counties.

Dr. Kamene Kimenye, 'ndc' (K)
Ag. DIRECTOR GENERAL

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MARBURG VIRUS DISEASE (MVD) WORKING CASE DEFINITION

SUSPECTED CASE OF MVD

Any person (alive or dead) with one or more of the following symptoms:
Acute onset of fever, vomiting, diarrhoea, abdominal pain, headache, sore throat, measles-like rash, red eyes, unexplained bleeding from anybody opening: **AND**
History of travel to the Federal Republic of Ethiopia or contact* with somebody who had the above symptoms within the last 3 weeks

*Contact includes touching

- Infected animals – hunting/skinning, preparing, cooking or eating.
- Body fluids of an infected person, such as saliva, urine, faeces or semen
- Items contaminated with body fluids of an infected person, such as clothes or bedding

COMMUNITY LAY CASE DEFINITION:

Any person with sudden onset of hotness of the body, diarrhea, vomiting or bleeding from body openings or any sudden death with a history of bleeding and a History of travel to the Federal Republic of Ethiopia