

## Annexes on surveillance and epidemiology

### Annex 3a. Standard case definition of viral hemorrhagic fever for routine surveillance

These case definitions are taken from the Technical Guidelines for Integrated Disease Surveillance and Response (IDS) in the African Region, available at the following web address:

<http://www.afro.who.int/en/clusters-a-programmes/dpc/integrated-disease-surveillance/features/2775-technical-guidelines-for-integrated-disease-surveillance-and-response-in-the-african-region.html>

#### **Suspected Ebola or Marburg cases for routine surveillance:**

Illness with onset of fever and no response to treatment for usual causes of fever in the area, and at least one of the following signs: bloody diarrhoea, bleeding from gums, bleeding into skin (purpura), bleeding into eyes and urine.

#### **Confirmed Ebola or Marburg cases for routine surveillance:**

A suspected case with laboratory confirmation (positive IgM antibody, positive PCR, or viral isolation).

**Note:** During an outbreak, these case definitions may be changed to correspond to the local event.

### Annex 3b. Standard case definition of viral haemorrhagic fever for community-based surveillance

This definition of “alert cases” of Ebola or Marburg virus disease has been developed for use by the community or community-based volunteers. It may be used for community-based surveillance during the pre-epidemic phase and during the outbreak.

#### **Alert case:**

Illness with onset of fever and no response to treatment of usual causes of fever in the area,  
OR at least one of the following signs: bleeding, bloody diarrhoea, bleeding into urine  
OR any sudden death.

#### **Instructions:**

If an alert case (living or dead) is identified:  
Report the case of a surveillance team or to the closest health centre

**Annex 3c. Examples of Marburg or Ebola virus disease case definitions that may be used during the outbreak**

(a) Case definition to be used by mobile teams or health stations and health centres

**SUSPECTED CASE:**

Any person, alive or dead, suffering or having suffered from a sudden onset of high fever and having had contact with:

- a suspected, probable, or confirmed Ebola or Marburg case;
- a dead or sick animal (for Ebola)
- a mine (for Marburg)

**OR:** any person with sudden onset of high fever and at least three of the following symptoms:

- headaches
- anorexia / loss of appetite
- lethargy
- aching muscles or joints
- breathing difficulties
- vomiting
- diarrhoea
- stomach pain
- difficulty swallowing
- hiccup

**OR:** any person with inexplicable bleeding

**OR:** any sudden, inexplicable death.

Instructions when a suspected case has been identified:

- Report the case to the surveillance team
- After obtaining express consent, collect a sample
- Fill in a case notification form
- Create a list of contacts of the suspected case

If the subject is alive, explain to the patient and his/her family the need to go to hospital to receive adequate medical care. After having obtained the consent of the patient or his/her family, arrange for the hospital transfer. If the subject has passed away, explain to the family the need for conducting a safe burial. After obtaining consent, coordinate funeral arrangements with the burial team.

(b) Case definition for exclusive use by hospitals and surveillance teams

**PROBABLE CASE:**

Any suspected case evaluated by a clinician

**OR:** Any deceased suspected case (where it has not been possible to collect specimens for laboratory confirmation) that has an epidemiological link with a confirmed case.

**Note:** If laboratory specimens are collected from the patient during the illness, the suspected and probable categories should be reclassified as “laboratory-confirmed” cases or “non-cases” once laboratory results are received.

**LABORATORY-CONFIRMED CASES:**

Any suspected or probable cases with a positive laboratory result. Laboratory-confirmed cases must test positive for the virus antigen, either by detection of virus RNA by reverse transcriptase-polymerase chain reaction (RT-PCR), or by detection of IgM antibodies directed against Marburg or Ebola.

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### **NON-CASE:**

Any suspected or probable case with a negative laboratory result. Non-cases are those which showed no specific antibodies, RNA, or specific detectable antigens.