



Public Health Advisory

09/24/2025

Ebola Outbreak Caused by Zaire Ebolavirus (EBOV) in the Democratic Republic of Congo

SITUATIONAL AWARENESS SUMMARY

Situation: On September 18, 2025, the Centers for Disease Control and Prevention (CDC) issued a [health advisory regarding an outbreak of Ebola virus disease \(EVD\), \(Zaire strain\) in the Kasai Province, Democratic Republic of Congo \(DRC\)](#).

- As of September 19, there are 51 confirmed or probable cases and 33 deaths. CDC notes these case counts may change frequently.
- In prior reporting (September 18), CDC documented 37 confirmed cases and 19 deaths, including 4 healthcare workers.
- On September 21, the World Health Organization update reports 57 cases (47 confirmed, 10 probable) and 35 deaths (25 confirmed, 10 probable) and 5 confirmed cases among healthcare workers.
- There are currently no suspected, probable, or confirmed EVD cases reported outside of the DRC.
- Currently, the risk of Ebolavirus in the United States is low.
- DRC has deployed from its stockpile 2,000 doses of the Ervebo (VSV-EBOV) vaccine to the outbreak region (Bulape and Mwaka Health Zones of the Kasai Province).
- SNHD issues this advisory to equip clinicians with the knowledge to safely identify, test for, and manage EVD cases.
- EVD assessment facilities should conduct annual drills that simulate realistic scenarios. These exercises should review EVD response plans, inventory and adequacy of PPE, and staff training. As a reminder, the nearest designated Special Pathogen Treatment Center for comprehensive EVD care is Cedars-Sinai Medical Center in Los Angeles, California. CDC has also issued a [Travel Health Notice](#) for persons traveling to DRC.

Early Consideration of EVD

Prompt recognition is critical to ensure timely care, diagnosis, and prevention of transmission. SNHD strongly urges all healthcare providers to:

- 1) **Consider EVD in patients with compatible symptoms AND an appropriate exposure history:**
 - a) Symptoms occur 2 to 21 days after contact with the virus:
 - i) Initial dry symptoms: Fever, myalgias, arthralgias, severe headaches, weakness, sore throat
 - ii) Wet symptoms occur 4-5 days later: loss of appetite, nausea, abdominal pain, vomiting, diarrhea, unexplained bleeding
 - iii) Other symptoms may include chest pain, shortness of breath, red eyes, confusion, rash, seizures
 - b) Exposure within 21 days:
 - i) Direct contact with a suspected or known case of EVD (alive or dead), or any objects contaminated with body fluids
 - ii) Visited an area with an active EVD outbreak and had contact with an ill or deceased person, attended a funeral, visited a healthcare facility or laboratory, had contact with cave-dwelling bats or non-human primates, or spent time in a mine or cave
- 2) **Implement Infection Control Measures to Prevent Transmission:**
 - a) **Immediately isolate and hospitalize patients who have both an exposure risk AND symptoms.**
 - b) [Appropriate Personal Protective Equipment \(PPE\) for EVD](#) should be used.
- 3) **Test for all appropriate differential diagnoses:**
 - a) EVD can present with concurrent infections
 - b) Travel to and from DRC should not be reason to defer routine laboratory testing for other potential causes
 - c) If tested <72 hours from symptom onset, testing for EVD should be repeated once the patient is ≥ 72 hours after symptom onset
- 4) **If EVD is suspected, report immediately:** to SNHD's Disease Surveillance and Control via Phone (702) 759-1300.

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Health Alert: conveys the highest level of importance; warrants immediate action or attention

Health Advisory: provides important information for a specific incident or situation; may not require immediate action

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action

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