

Following the roadmap structure¹, country reports fall into two categories: those with widespread and intense transmission (Guinea, Liberia, and Sierra Leone); and those with an initial case or cases, or with localized transmission (Nigeria, Senegal). An overview of the situation in the Democratic Republic of the Congo, where a separate, unrelated outbreak of Ebola virus disease (EVD) is occurring, is also provided (see Annex 1).

1. COUNTRIES WITH WIDESPREAD AND INTENSE TRANSMISSION

5843 (probable, confirmed and suspected; see Annex 2) cases and 2803 deaths have been reported in the current outbreak of EVD as at 20 September 2014 by the Ministry of Health of Guinea, as at 17 September 2014 by the Ministry of Health of Liberia, and as at 19 September 2014 by the Ministry of Health of Sierra Leone (table 1).

Table 1: Cases of Ebola virus disease in Guinea, Liberia, and Sierra Leone

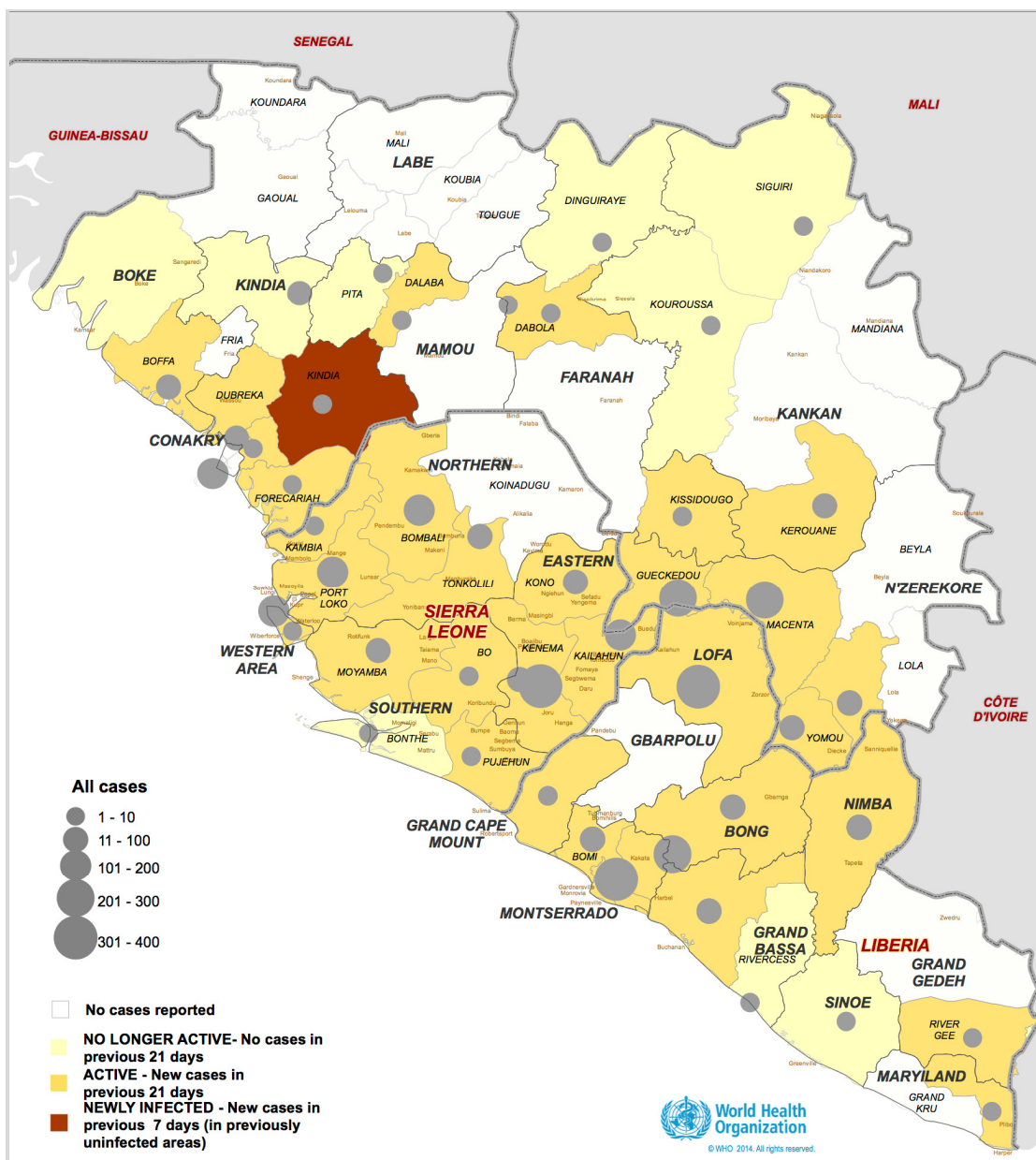
Country	Case definition	Cases	Deaths
Guinea	Confirmed	818	465
	Probable	162	162
	Suspected	28	5
	All	1008	632
Liberia	Confirmed	863	670
	Probable	1342	544
	Suspected	817	364
	All	3022	1578
Sierra Leone	Confirmed	1640	545
	Probable	37	37
	Suspected	136	11
	All	1813	593
Total		5843	2803

Data are based on official information reported by Ministries of Health up to the end of 20 September 2014 for Guinea, 17 September for Liberia, and 19 September for Sierra Leone. These numbers are subject to change due to on-going reclassification, retrospective investigation and availability of laboratory results.

Figure 1 shows the location of cases throughout the countries with widespread and intense transmission. The cumulative numbers of cases of EVD in each area are shown (grey circles). In Guinea, one confirmed case of EVD was reported in Kindia district; the first time an EVD case has been reported from the area.

¹ The Ebola Response Roadmap is available at: <http://www.who.int/csr/resources/publications/ebola/response-roadmap/en/>.

Figure 1: Distribution of Ebola virus disease cases in countries with intense transmission



Data are based on official information reported by Ministries of Health up to the end of 20 September 2014 for Guinea, 17 September for Liberia, and 19 September for Sierra Leone. In Guinea, the district of Kindia has reported its first confirmed case. The boundaries and names shown and the designations used on this map do not imply the expression of any opinion whatsoever on the part of the World Health Organization concerning the legal status of any country, territory, city or area or of its authorities, or concerning the delimitation of its frontiers or boundaries. Dotted and dashed lines on maps represent approximate border lines for which there may not yet be full agreement.

Exposure of health-care workers (HCWs) to EVD continues to be an alarming feature of this outbreak. As of 22 September 2014, 348 HCWs are known to have developed EVD (67 in Guinea, 174 in Liberia, 11 in Nigeria, and 96 in Sierra Leone). 186 HCWs have died as a result of EVD infection (35 in Guinea, 85 in Liberia, 5 in Nigeria, and 61 in Sierra Leone).

2. COUNTRIES WITH AN INITIAL CASE OR CASES, OR WITH LOCALIZED TRANSMISSION

Two countries, Nigeria and Senegal, have now reported a case or cases imported from a country with widespread and intense transmission. In Nigeria, there have been 20 cases and eight deaths. In Senegal, there has been one case, but as yet there have been no deaths or further suspected cases attributable to Ebola (table 2).

Contact tracing and follow-up is ongoing. In Nigeria, 696 contacts have now completed 21-day follow-up (348 contacts in Lagos, 348 contacts in Port Harcourt). Of the three contacts who are still being monitored in Lagos, all were seen on 20 September. Of the 175 contacts who are still being monitored in Port Harcourt, 165 (94%) were seen on 20 September.

In Senegal, all contacts have now completed 21-day follow-up, with no further cases of EVD reported.

Table 2: Cases of Ebola virus disease in Nigeria and Senegal

Country	Case definition	Cases	Deaths
Nigeria	Confirmed	19	7
	Probable	1	1
	Suspected	0	0
	All	20	8
Senegal	Confirmed	1	0
	Probable	0	0
	Suspected	0	0
	All	1	0
Total		21	8

Data reported are based on official information reported by Ministries of Health. These numbers are subject to change due to on-going reclassification, retrospective investigation and availability of laboratory results.

There are several points to be considered when interpreting epidemiological data for the EVD outbreak. Many of the deaths attributed to EVD in this outbreak occurred in people who were suspected, but not confirmed, to have died from the disease. EVD cases are only confirmed when a sample tests positive in the laboratory. If samples taken from a body test negative for EVD, that person is no longer counted among EVD deaths and the figures are adjusted accordingly. However, because laboratory services and treatment centres are currently overwhelmed in several countries, the numbers of probable and suspected cases, together with those confirmed, may be a more accurate reflection of case numbers. Work is also on going to resolve discrepancies between different sources of data, which may lead to a revision of the numbers of cases and deaths in the future.

ANNEX 1. EBOLA OUTBREAK IN THE DEMOCRATIC REPUBLIC OF THE CONGO

As at 18 September 2014, there have been 68 cases (28 confirmed, 26 probable, 14 suspected) of Ebola virus disease (EVD) reported in the Democratic Republic of the Congo, including eight among health-care workers (HCWs). In total, 41 deaths have been reported, including eight among HCWs.

432 contacts have now completed 21-day follow-up. Of 488 contacts currently being monitored, 468 (96%) were seen on 18 September, the last date for which data has been reported. This outbreak is unrelated to that affecting Guinea, Liberia, Nigeria, Senegal and Sierra Leone.

ANNEX 2. CRITERIA USED TO CLASSIFY EBOLA CASES

Ebola cases are classified as suspected, probable, or confirmed depending on whether they meet certain criteria (table 3).

Table 3: Ebola case-classification criteria

Classification	Criteria
Suspected	Any person, alive or dead, who has (or had) sudden onset of high fever and had contact with a suspected, probable or confirmed Ebola case, or a dead or sick animal OR any person with sudden onset of high fever and at least three of the following symptoms: headache, vomiting, anorexia/ loss of appetite, diarrhoea, lethargy, stomach pain, aching muscles or joints, difficulty swallowing, breathing difficulties, or hiccup; or any person with unexplained bleeding OR any sudden, unexplained death.
Probable	Any suspected case evaluated by a clinician OR any person who died from 'suspected' Ebola and had an epidemiological link to a confirmed case but was not tested and did not have laboratory confirmation of the disease.
Confirmed	A probable or suspected case is classified as confirmed when a sample from that person tests positive for Ebola virus in the laboratory.