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Observatory

The New Marburg Virus Pandemic – a Report that Recycles Pandemic Conspiracy Frameworks and Narratives

Coffee Beans

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In mid-July 2022, the news that the World Health Organization **(WHO) had announced a new pandemic caused by the Marburg virus was** spreading through Facebook, Telegram, WhatsApp and Facebook Messenger.

However, this was reusing information from a video posted by an unknown man on YouTube on 8 September 2021. He refers to Dr Tedros of the WHO, meaning WHO Director-General Tedros Adhanom Ghebreyesus. As early as 10 September 2021, the WHO had already labelled this information as fake news, claiming that the WHO Director-General did not describe the Marburg virus, which was then emerging in Guinea, as a new pandemic.

This report was a mixture of a number of unsubstantiated claims based on speculation or veiled hints. Furthermore, social media users shared an out-of-context media briefing where the Director-General of the WHO, Dr. Tedros Adhanom Ghebreyesus, spoke about a case of the deadly Marburg virus in Guinea, West Africa (August 2021).

So what is the reality backed by scientific evidence?

The virus was first detected in Germany in 1967. In the German town of Marburg an der Lahnse, 25 laboratory workers became infected by monkeys imported from Uganda to a primatology research centre. Six more people, including doctors and a pathologist, were infected through contact with infected persons. Seven patients died. Since then, there have been several local epidemics in Africa, mainly in Congo, Uganda and Angola, with high mortality rates. For this reason, Marburg virus has been classified, along with Ebola virus, as a Category A biological agent for military or terrorist use.

The first known case of imported infection from Africa to Europe involves a 41-year-old Dutch tourist who visited the Forrest Maramagambo volcanic cave in Queen Elizabeth National Park in the Equatorial region of Uganda in 2008. The cave is home to a giant colony of Egyptian fruit bats (Rousettus aegyptiacus), one of the known carriers of the virus. The woman has come into direct contact with these “flying mammals”. On the fourth day after her return home, she developed fever and chills. She died seven days later of liver failure and severe bleeding. The WHO immediately issued a worldwide warning not to travel to this destination.

The last confirmed case to date was identified in Guinea in August 2021. A twenty-six-year-old farmer died of the infection. Subsequently, a second fifty-one-year-old infected man died in the same hospital. Both suffered from fever, malaise, and bleeding from the nose, mouth and eyes capillaries. Laboratory tests confirmed Marburg virus infection in both patients. The source of infection remained unknown in both cases, and no link between them was found. The two farmers were working in different locations, although both were close to the tropical forest. 198 of their contacts were identified and kept in home isolation for 21 days, under constant medical supervision. No one else became ill.

Following these events, the WHO has not declared a pandemic situation in Guinea, as claimed by unsubstantiated information on social media. In addition to the appropriate anti-epidemic measures, such as limiting community contact, isolating patients, immediately deploying personal pro-

tective equipment, reducing human-bat contact, banning the consumption of raw meat, and banning tourists from entering mines and caves in the area, the WHO stressed the need to build and maintain trust between health workers and organisations and the affected community.

As for the virus itself, the Marburg virus is transmitted by direct contact with contaminated objects and animals, through minor abrasions or open wounds in the skin. Mucous membranes are also a gateway. The origin of the virus is unknown, but it has been found in Angola and Uganda. The natural reservoir is some species of fruit bats and bats, but the virus does not cause them any health complications. There is currently no antiviral treatment or vaccine. Only early professional help increases the chances of survival, as the mortality rate is 87%.

The disinformation concerning the spread of the Marburg virus, like the Ebola virus, are very dangerous given that these viruses are potential components of biological weapons.

It is therefore necessary to explain the principles of the spread of these highly dangerous diseases to the public in a clear manner, so that the anti-epidemic measures that would be declared in an emergency would be properly understood.

The Marburg virus epidemic in Germany was a warning not only to Europe. The crisis triggered the introduction of new strict control measures for the transport of experimental animals, both at the point of capture (especially Africa) and during transport. Quarantine regulations at the point of delivery became a matter of course, as well as the requirement to use personal protective equipment (e.g. gloves, respirators) and disinfection measures for all people involved in the handling of animals. In the current situation, where it is unclear what lies ahead in Europe (especially in regard to the relationship with the Russian Federation), fake news needs to be given increased attention and a qualified response.

CZECH RECOVERY PLAN

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