

**Received Date: August 21, 2025****Accepted Date: September 13, 2025****Published Date: October 01, 2025****Epizootic Ulcerative Syndrome in the Democratic Republic of Congo (2013–2025): Epidemiological Review, Risk Factors, and Implications for Aquatic Animal Health**

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**Abstract**

Epizootic Ulcerative Syndrome (EUS), caused by *Aphanomyces invadans*, is an emerging aquatic fungal disease responsible for high mortalities among freshwater fish. In the Democratic Republic of Congo (DRC), the first confirmed cases were reported in 2013 in farmed *Clarias* species from Kasangulu (Kongo Central Province). This study synthesizes national data from 2013 to 2025, mapping confirmed outbreaks and identifying key risk factors such as floods,

seasonal fish movements, and migratory birds. Findings emphasize the urgent need to strengthen diagnostic capacity, establish structured epidemiological surveillance, and enhance awareness among fish farmers and veterinary authorities to prevent further disease spread.

**Keywords:** Epizootic Ulcerative Syndrome; *Aphanomyces invadans*; Democratic Republic of Congo; Aquatic Animal Health; Surveillance; Fish Diseases

## 1. Introduction

Fishing and aquaculture play a crucial role in food security and livelihoods globally. In sub-Saharan Africa, fish account for about 22% of total animal protein intake, reaching up to 50% in vulnerable communities where alternative sources of animal protein are scarce [1,3]. Fish provide high-quality protein and essential micronutrients at a relatively low cost [2].

The expansion of aquaculture has been accompanied by the emergence and spread of infectious diseases of viral, bacterial, parasitic, and fungal origin—some of which have zoonotic potential [4]. Among these, Epizootic Ulcerative Syndrome (EUS), caused by the oomycete *Aphanomyces invadans*, is recognized as one of the most devastating diseases affecting global aquaculture [5]. The infection produces severe dermal ulcers and massive mortalities, rendering fish unsuitable for consumption and causing significant economic losses [14,20]. The disease is listed by the World Organisation for Animal Health (WOAH) as notifiable due to its epidemic potential [6,15].

First described in Japan in 1971 [7], EUS rapidly spread to Asia, Oceania, Africa, and the Middle East, sparing only Central and South America. Since its emergence, more than 160 fish species across 54 families have been identified as susceptible to *A. invadans* [10]. Economic losses are significant, with annual estimates of USD 0.7 million in Australia, USD 100 million over a decade in Thailand (1983–1993), USD 4.8 million in Bangladesh, USD 0.3 million in Pakistan, and USD 0.235 million in Indonesia [14,20].

In Central Africa—particularly within the Congo River Basin—several EUS outbreaks have been reported, indicating progressive spread through interconnected water systems [14]. However, unlike developed countries with structured surveillance, the DRC lacks a coordinated epidemiological monitoring system despite abundant freshwater resources. This study therefore aims to document and synthesize all available data on confirmed and suspected EUS cases, identify key risk factors, and propose context-adapted preventive and control strategies to support national aquatic health policy and food security.

## 2. Methodology

### 2.1 Study Design

A descriptive retrospective and prospective study was conducted covering the period from 2013 to April 2025. Data sources included national surveillance systems, field investigation reports, laboratory records from the Central Veterinary Laboratory (CVL), and provincial notifications.

### 2.2 Case Definition

Suspected case: Fish with ulcerative lesions compatible with EUS as described in WOAH and FAO manuals [6,12]. Confirmed case: Detection of *Aphanomyces invadans* via histopathology, PCR, or accredited expert analysis [5,11].

### 2.3 Variables Collected

Variables included fish species affected, health status, outbreak location, clinical signs, laboratory confirmation method, period of occurrence, and control measures.

**Table 1. Temporal and spatial distribution of EUS outbreaks in the DRC (2013–2025)**

| Period of occurrence | Province      | Location / Water body      | Fish species            | Status                     |
|----------------------|---------------|----------------------------|-------------------------|----------------------------|
| Apr–May 2013         | Kongo Central | Kasangulu / Pond           | Clarias spp.            | Confirmed (histopathology) |
| Dec 2015             | Bas-Uélé      | Buta / Streams and rivers  | Catfish and others      | Non-confirmed              |
| Dec 2015             | Haut-Uélé     | Aketi / Streams and rivers | Catfish and others      | Non-confirmed              |
| Dec 2015             | Nord-Ubangi   | Gbadolite / Ubangi River   | Catfish and others      | Non-confirmed              |
| Sept 2015            | Tshopo        | Ubundu                     | Catfish and others      | Non-confirmed              |
| Sept 2015            | Ituri         | Ituri River                | Catfish and others      | Non-confirmed              |
| Mar 2015             | Gemena        | —                          | Catfish and others      | Non-confirmed              |
| Mar 2016             | Tshopo        | Kisangani / Congo River    | Catfish and others      | Non-confirmed              |
| Mar 2016             | Haut-Lomami   | Kabongo / River            | Tilapia spp. and others | Non-confirmed              |
| Mar 2016             | Haut-Lomami   | Kamina / River and ponds   | Tilapia spp. and others | Non-confirmed              |
| Mar 2016             | Haut-Lomami   | Bukama / Congo River       | Tilapia spp. and others | Non-confirmed              |
| Mar 2016             | Haut-Lomami   | Malemba-Nkulu /            | Tilapia spp. and others | Non-confirmed              |

|                   |               |                                                 |                                          |                                  |
|-------------------|---------------|-------------------------------------------------|------------------------------------------|----------------------------------|
|                   |               | Rivers and ponds                                |                                          |                                  |
| Jun 2016          | Maniema       | Mpangi–Kayuyu / Barrage ponds and Mabibi stream | Tilapia spp. and others                  | Confirmed (clinical observation) |
| Jun 2016          | Lualaba       | Sandoa / River                                  | Tilapia spp. and others                  | Non-confirmed                    |
| Jul 2016–Mar 2017 | Tshuapa       | Ikela, Lofome, Botayi, Sengele / Rivers         | Various                                  | Non-confirmed                    |
| Mar 2017          | Kinshasa      | N'sele / Congo River (Maluku)                   | Wild fish with and without scales        | Non-confirmed                    |
| Jul 2022          | Kinshasa      | Kimpoko / Ponds                                 | Tilapia spp.                             | Non-confirmed                    |
| Jun 2022          | South Kivu    | Uvira / Streams near Lake Tanganyika            | Clarias spp., <i>Heterobranchus</i> spp. | Confirmed (clinical observation) |
| Jan 2022          | Kongo Central | Kisantu                                         | Clarias spp.                             | Non-confirmed                    |
| Sept 2019         | Kinshasa      | Mont Ngafula                                    | Clarias spp.                             | Non-confirmed                    |

## 2.4 Data Analysis

Data were cleaned in Excel and analyzed using Epi Info™ 7 software. Results were presented as frequencies, temporal trends, and spatial distribution maps. Seasonality and species susceptibility were also assessed.

## 3. Results and Discussion

### 3.1 Seasonality of Outbreaks

Outbreaks were concentrated during rainy seasons, with strong correlation to hydrological patterns [14,20].

**Table 2. Seasonality of EUS outbreaks by province**

| Province      | Rainy season                        | Dry season               | Period of outbreak |
|---------------|-------------------------------------|--------------------------|--------------------|
| Kongo Central | Oct–May                             | Jun–Sept                 | Apr–May 2013       |
| Bas-Uélé      | Apr–Nov                             | Dec–Mar                  | Dec 2015           |
| Haut-Uélé     | Mar/Apr–Nov                         | Dec–Feb                  | Dec 2015           |
| North Ubangi  | Apr–Nov                             | Dec–Mar                  | Dec 2015           |
| Tshopo        | Year-round (peaks Mar–May, Sep–Nov) | Troughs Jan–Feb, Jun–Jul | Sept 2015          |
| Ituri         | Year-round (peaks Mar–May, Sep–Nov) | Mild trough Dec–Feb      | Sept 2015          |
| Gemena        | Apr–Nov                             | Dec–Mar                  | Mar 2015           |
| Haut-Lomami   | Oct–Apr/May                         | May–Sept                 | Mar 2016           |

|          |                                            |                            |                |
|----------|--------------------------------------------|----------------------------|----------------|
| Maniema  | Almost year-round (peaks Mar–May, Sep–Nov) | Short dry Jan–Feb, Jun–Aug | Jun 2016       |
| Tshuapa  | Year-round (peaks Mar–May, Sep–Nov)        | Troughs Jan–Feb, Jun–Aug   | Jul & Mar      |
| Kinshasa | Oct–May                                    | Jun–Sept                   | Mar, Jul, Sept |
| Lualaba  | Oct–Apr/May                                | May–Sept                   | Jun 2016       |

### 3.2 Confirmed vs. Unconfirmed Cases

Only three outbreaks were confirmed by laboratory methods. Others were based on clinical signs alone [5,9].

**Table 3. Confirmed and unconfirmed EUS cases in the DRC (2013–2025)**

| Year | Locality                                         | Fish species affected                                                | Status (Confirmed/Unconfirmed)   |
|------|--------------------------------------------------|----------------------------------------------------------------------|----------------------------------|
| 2013 | Kasangulu (Kongo Central, ponds)                 | Clarias sp.                                                          | Confirmed (histopathology)       |
| 2016 | Mpangi (Maniema, river & Congo River)            | Clarias sp., <i>Tilapia</i> sp.                                      | Confirmed (clinical observation) |
| 2018 | Bas-Uélé (rivers & streams)                      | Various species                                                      | Not confirmed                    |
| 2019 | Haut-Uélé (rivers & streams)                     | Various species                                                      | Not confirmed                    |
| 2021 | South Ubangi (rivers & streams)                  | Various species                                                      | Not confirmed                    |
| 2022 | Uvira (South Kivu, streams near Lake Tanganyika) | Clarias sp., <i>Heterobranchus</i> sp., <i>Oreochromis niloticus</i> | Confirmed (clinical observation) |

### 3.3 Clinical Manifestations



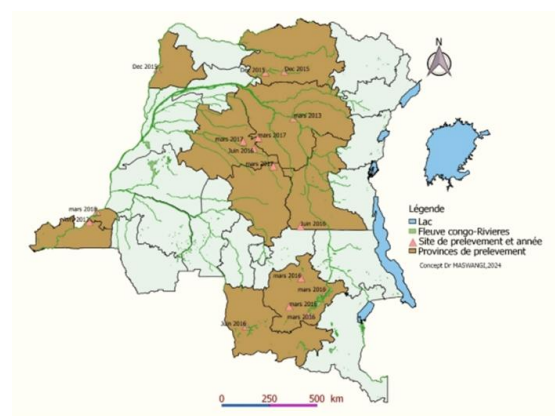
**Figure 1.** Clinical signs of EUS in fish: ulcerative lesions on flanks and head, hemorrhagic patches, necrosis [9,11].

### 3.4 Risk Factors and Spread

Seasonal flooding and water stagnation create favorable conditions for *A. invadans* proliferation [14,17]. Migratory birds may contribute to pathogen dissemination [23,26]. Lack of structured surveillance and diagnostic capacity remains a major limitation.

### 3.5 Regional Comparison

Patterns observed in the DRC mirror those in Nigeria, Zambia, and Botswana, where interconnected water systems facilitate pathogen spread [14,22].



**Figure 2.** Map of confirmed and suspected EUS outbreaks in the DRC (2013–2025), produced in QGIS.

## 4. Conclusion

EUS is now endemic in the DRC, with outbreaks linked to seasonal hydrology and limited diagnostic capacity. The disease threatens aquaculture development and food security. A national response is urgently needed.

## 5. Recommendations

- Establish a national aquatic disease surveillance system
- Strengthen laboratory capacity for histopathology and PCR
- Promote best aquaculture practices and biosafety
- Foster regional collaboration to prevent transboundary spread
- Conduct socio-economic impact assessments

## 6. Author Contributions

P.M.M. conceived and designed the study, coordinated data collection, and wrote the first draft of the manuscript.

D.Y.N. and T.B.M. contributed to data analysis, field investigations, and the preparation of figures and tables.

T.T.A., M.T.S., and P.M. participated in laboratory confirmation and data verification.

T.M.C.G. and M.M.K.L. provided technical guidance and critical revision of the manuscript. M.A.B. and M.J. contributed to scientific validation, data interpretation, and final manuscript review. All authors read and approved the final version of the manuscript and agree to be accountable for all aspects of the work.

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## 8. Conflicts of Interest and Funding Statement

### Conflicts of Interest

The authors declare that they have no known competing financial interests or personal relationships that could have appeared to influence the work reported in this paper.

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