04 March 2017

Media statement by the Minister of Health Dr Aaron Motsoaledi regarding the update on the Listeriosis outbreak in South Africa

Good morning ladies and gentlemen.

Let me take this opportunity to thank you for joining us this morning.

Firstly, let me introduce the team that is here. We have Dr Juno Thomas, Head of the Centre for Enteric Diseases from the National Institute for Communicable Diseases (NICD); Mme Precious Matsoso (Director-General of Health) and her team; Mr Lionel October (Director General for the Department of Trade and Industry (DTI) and his team; Dr Rufaro Chatora (Country Representative from the World Health Organization (WHO)); the Acting from the Department of Agriculture, Forestry and Fisheries (DAFF) DG Mr Ramasodi and his team; the team from the National Consumer Commission (NCC); as well as the representative from the National Regulator for Compulsory Specifications (NRCS).

At the last media briefing held on 08 January 2018, I reported that a total of 727 laboratory-confirmed cases of listeriosis had occurred since 01 January 2017. Of these 727 cases, there was final outcome data for 134 patients. This means that 134 actual patients were traced to their health facilities, i.e as to what eventually happened to them. Unfortunately, 61 of them had died.

I had then promised that we would have a media briefing every month. However, we could not have a media briefing in February because the NICD asked for a bit of more time to finalise certain laboratory tests. We are now ready because those test results they have been waiting for were finalised. That is why we have called you here to brief you.

The situation now is as follows:

As of 02 March 2018, a total of laboratory-confirmed cases have risen to 948, still counting from January 2017. Of these 948, a total 659 patients have been traced and 180 of them have unfortunately died. This constitutes 27% case fatality rate.

In our constant search for the source of the outbreak and the treatment of people who are affected, a team from the NICD has interviewed 109 ill people to obtain details about foods they had eaten in the month before falling ill. Ninety three (85%) people reported eating ready-to-eat (RTE) processed meat products, of which polony was the most common followed by viennas/sausages and then other ‘cold meats’.
On Friday 12th January, nine children under the age of 5 years presented to Chris Hani Baragwanath Hospital with febrile gastro-enteritis. The paediatrician suspected foodborne disease, including listeriosis, as a possible cause. The environmental health practitioners (EHPs) were informed and on the same day visited the crèche, and obtained samples from two unrelated polony brands (manufactured by Enterprise and Rainbow Chicken Limited (RCL) respectively) and submitted these to the laboratory for testing.

*Listeria monocytogenes* was isolated from stool collected from one of the ill children, and from both of the polony specimens collected from the crèche. These isolates were sent to the NICD Centre for Enteric Diseases, and underwent whole genome sequencing and genomic analysis. The ST6 sequence type was confirmed on all three isolates on Saturday 27th January. Remember that in the last press conference I informed you that from clinical isolates obtained from patients (patient blood), 9 sequence types of *Listeria monocytogenes* were isolated and 91% were of sequence type 6 (ST6). We had then concluded that this outbreak is driven by ST6.

I wish to further remind you that we had then taken a decision to visit all food-processing sites, food-packaging sites, as well as food production sites where possible.

Following the lead from the tests performed on these children from Soweto and the food they had ingested, the EHPs (Environmental Health Practitioners), together with the NICD and DAFF representatives, accompanied by 3 technical advisors from the World Health Organisation in Geneva, visited a food-production site in Polokwane and conducted an extensive food product and environmental sampling.

*Listeria monocytogenes* was isolated from over 30% of the environmental samples collected from this site, which happens to be the *Enterprise* factory in Polokwane.

To conclude the investigation, whole genome sequencing analysis was performed from this Enterprise factory and the results became available midnight or last night. The outbreak strain, ST6, was confirmed in at least 16 environmental samples collected from this *Enterprise* facility.

**THE CONCLUSION FROM THIS IS THAT THE SOURCE OF THE PRESENT OUTBREAK CAN BE CONFIRMED TO BE THE ENTERPRISE FOOD-PRODUCTION FACILITY IN POLOKWANE**

Additionally, preliminary results show that several ready-to-eat processed meat products from the Enterprise facility located in Germiston contain *L. monocytogenes*, but the sequence type is not known as yet.

Investigation of the RCL Wolwehoek production facility is also underway. Polony products have tested positive for *L. monocytogenes*, but the sequence types of the isolates are NOT ST6. However, such contamination of ready-to-eat processed meat products constitutes a health risk. Also, over 10% of environmental samples collected by EHPs at this facility have tested positive for *L. monocytogenes*. The sequence types of these isolates are not known as yet.

With the information at our disposal, we have decided on the following course of action:

1. The National Consumer Commission (NCC) has in terms of Section 60(2) of the Consumer Protection Act this morning issued the manufacturers concerned with safety recall notices.
Section 60(2) of the Consumer Protection Act states that:

If the NCC has reasonable grounds to believe that any goods may be unsafe, or that there is a potential risk to the public from the continued use of or exposure to the goods, and the producer or importer of those goods has not taken any steps required by an applicable code contemplated in subsection the Commission, by written notice, may require that producer to—

(a) conduct an investigation contemplated in subsection (1); or

(b) carry out a recall programme on any terms required by the Commission.

The NCC will prepare a recall strategy in conjunction with the manufacturers and make further announcements to the public in due course.

The safety recall will affect the manufacturers’ entire distribution networks, both domestic and international.

2. Compliance notices will be issued to facilities in terms of the National Health Act.

Environmental Health Practitioners appointed in terms of section 80(1) of the Act and duly registered as such in terms of section 83(5) of the National Health Amendment Act, 2013 (Act No. 12 of 2013) should upon finding that there are in terms of section 83 (1) and (2), existing conditions which:

(a) constitutes a violation of the right contained in section 24(a) of the Constitution;

(b) constitutes pollution detrimental to health;

(c) is likely to cause a health nuisance; or

(d) constitutes a health nuisance,

3. In terms of registration for exports by the Department of Agriculture, Forestry and Fisheries (DAFF), the respective processing or manufacturing establishments namely RCL Foods with an export registration number ZA32 and Enterprise Foods with an export registration number ZA 33 have been temporarily suspected till further notice.

4. We advise members of the public to avoid all processed meat products that are sold as ready-to-eat. While we know that polony is definitely implicated, there is a risk of cross-contamination of other ready-to-eat processed meat products, either at production, distribution or retail. This is because Listeria on the exterior casing (packaging) of polony can be transferred to other products it comes into contact with, including viennas, russians, frankfurters, other sausages, and other ‘cold meat’ products that are typically not cooked before eating.

Just a reminder that people at high risk for listeriosis include:
• pregnant women

• neonates (first 28 days of life)

• very young infants

• elderly persons >65 years of age, and

• anyone with a weakened immune system (due to HIV infection, cancer, diabetes, kidney disease, liver disease, people with transplants and those on immunosuppressive therapy such as oral corticosteroids, chemotherapy, or anti-TNF therapy for auto-immune disease).

The recall of these products does not mean that members of the public must now relax and stop the 5 food-safety rules which we have recited many times have to be abandoned, i.e washing your hands before handling food or when coming back from the bathroom; making sure that food is well cooked; isolating raw food from cooked food; making sure that food is at an appropriate temperature; and washing non-cooked food with clean running water; as well as using only pasteurised or boiled milk products.

It means that the general status of hygiene of the population must still be a matter of priority to society as a whole, and must remain like that forever.

I thank you

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