

## Ebola Virus Disease Outbreak

### Background

The 2014 Ebola Virus Disease (EVD) outbreak was first detected in a rural area of Guinea in March and now is affecting regions of Liberia, Sierra Leone and Nigeria. Thousands of suspected and confirmed cases of EVD have been reported from the affected region; many cases have been fatal. Local disease control efforts have been hindered by austere healthcare settings, misinformation, traditional practices, and people who do not seek medical care due to distrust.

The US Centers for Disease Control and Prevention (CDC) recommends avoiding non-essential travel to Guinea, Liberia, and Sierra Leone.



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### What is Ebola Virus Disease?

EVD, formerly known as Ebola Hemorrhagic Fever, first appeared in 1976 in two simultaneous outbreaks in Sudan and the Democratic Republic of Congo. EVD is caused by a filovirus. No licensed vaccine or specific treatment for EVD is currently available. Patients who sought care soon after symptoms started have survived with only supportive care, such as balancing the patient's fluids and electrolytes and treating for any complicating infections.

### Transmission

EVD entered the human population from direct contact with infected animals. It then spreads from person to person by direct contact with blood, secretions, organs or other bodily fluids (such as sweat, vomit, etc.) of infected people. Only people who have symptoms of EVD, or have died from EVD, can transmit the virus. EVD is not spread through the air or by casual contact.

### Signs and Symptoms

EVD is an illness that can start 2 to 21 days after exposure, but typically within 8-10 days. Symptoms include sudden onset of fever, with weakness, joint and muscle pain, headache and sore throat. Vomiting, diarrhea, and stomach pain follows. In some cases, a rash, red eyes, and bleeding may occur. Risk of infection is highest in the later stages of the disease. **People are not contagious until they show symptoms.**

### Diagnostic Testing

Blood tests can confirm Ebola virus infections.

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### Exposure Risk

Healthcare workers, laboratory personnel, and family members of an EVD patient are at higher risk for exposure. Practicing standard infection control precautions, including hand washing and wear of personal protective equipment (PPE), will prevent exposure.

### Prevention and Control

- Practice careful hygiene. Avoid contact with blood and body fluids.
- Do not handle items that may have come in contact with an infected person's blood or body fluids.
- Avoid funeral or burial rituals that require handling the body of someone who has died from Ebola.
- Avoid contact with wild mammals, especially bats and primates. Avoid bushmeat.
- Pay attention to your health after you return from an affected region. Seek medical care immediately if you develop fever, headache, achiness, sore throat, diarrhea, vomiting, stomach pain, rash, or red eyes.
- Follow CDC guidance regarding travel in or around West Africa.

### More Information:

**USAPHC: Ebola Virus Disease (EVD)**  
<http://phc.amedd.army.mil/topics/discond/diseases/Pages/EbolaVirusDisease.aspx>

**CDC: Ebola Hemorrhagic Fever**  
<http://www.cdc.gov/vhf/ebola/index.html>

**WHO: Ebola virus disease**  
<http://www.who.int/csr/disease/ebola/en/>