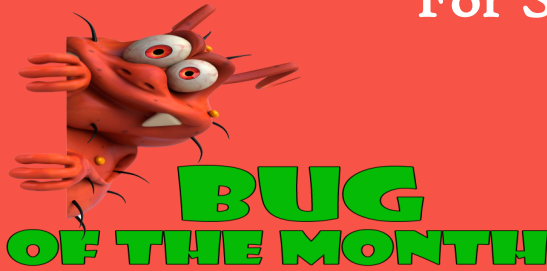


## For Staff /Patient Education



# EBOLA VIRUS

May 2014

### What is it?

- Ebola virus disease (formerly known as Ebola haemorrhagic fever) is a severe, often fatal illness, with a death rate of up to 90%. The illness affects humans and nonhuman primates (monkeys, gorillas, and chimpanzees).
- It first appeared in 1976 in two simultaneous outbreaks, one in a village near the Ebola River in the Democratic Republic of Congo, and the other in a remote area of Sudan.
- The origin of the virus is unknown but fruit bats (Pteropodidae) are considered the likely host of the Ebola virus, based on available evidence.
- Ebola is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals. In Africa, infection has occurred through the handling of infected chimpanzees, gorillas, fruit bats, monkeys, forest antelope and porcupines found ill or dead or in the rainforest. It is important to reduce contact with high-risk animals (i.e. fruit bats, monkeys or apes) including not picking up dead animals found lying in the forest or handling their raw meat.

### How is it spread?

- Infection occurs from direct contact (through broken skin or mucous membranes) with the blood, or other bodily fluids or secretions (stool, urine, saliva, semen) of infected people.
- Infection can also occur if broken skin or mucous membranes of a healthy person come into contact with environments that have become contaminated with an Ebola patient's infectious fluids such as soiled clothing, bed linen, or used needles.

### Where is it found?

- The natural reservoir host of ebola viruses remains unknown. However, on the basis of available evidence and the nature of similar viruses, researchers believe that the virus is zoonotic (animal-borne) with bats being the most likely reservoir. Four of the five subtypes occur in an animal host native to Africa.

### Prevention & Control:

- Immediately place any suspected patient into an isolation room. Until the disease process is defined, an airborne infection isolation (All) room is recommended. Patients with respiratory symptoms should wear a simple mask.
- Add eye protection, double gloves, leg and shoe coverings and impermeable gowns, according to hemorrhagic fever specific barrier precautions. Notify MOH immediately if Ebola is suspected.
- Adopt strict contact precautions and pay particular attention to safe removal of PPE. Use of a simple mask and face shield is appropriate although providers may opt for N95 mask until the pathogen is confirmed.
- Minimize the number of caregivers and invasive procedures to decrease exposure opportunities.
- Assure special precautions for handling laboratory samples and for personnel performing testing (including notification of lab personnel, special labeling, handling, and containers, etc.)
- Note that **once Ebola is confirmed**, infection control precautions move to **strict contact precautions and private room, but not respiratory isolation rooms**. See the current online CDC "Prevention" guidance for Ebola <http://www.cdc.gov/vhf/ebola/prevention/index.html> for further information on PPE, disinfection / sterilization of equipment and spaces, and isolation procedures.



#### For more information contact:

*Candolb@alj.com*  
Ms. Candolb, BSc, BSN  
Infection Control Practitioner  
Email: candolb@alj.com

Sources: <http://www.who.int/csr/disease/ebola/en/>



Abdul Latif Jameel Hospital  
Infection Prevention and  
Control Department



LBC