



# USAFRICOM

## Operation United Assistance

### Medical Threat Briefing

# 25 September 2014

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# Agenda

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- Ebola Awareness/Prevention
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# Purpose

To provide medical threat information and countermeasures necessary to protect the health and safety of all personnel deploying in support of Operation UNITED ASSISTANCE.

# Current Situation

- ❑ The 2014 Ebola outbreak is the largest Ebola outbreak in history, and the first in West Africa. It has affected five countries in West Africa.
- ❑ The risk of Ebola virus transmission to U.S. Department of Defense personnel continues to be low.
- ❑ Personal protective measures (PPM) are important for preventing the spread of the Ebola virus.



# Ebola Awareness/Prevention

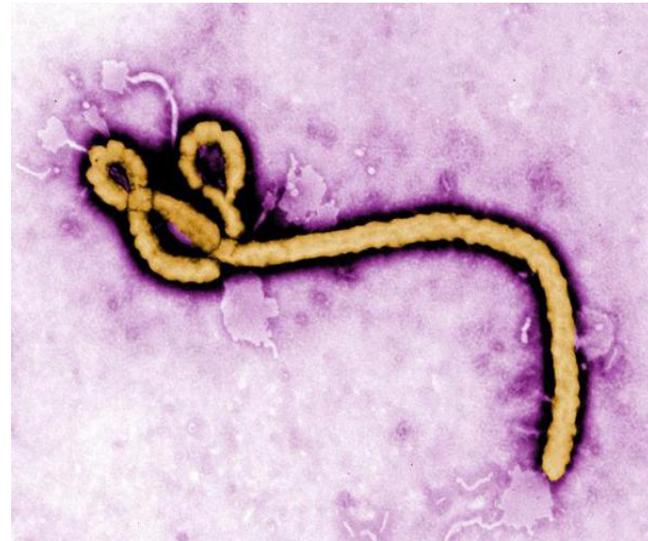
- ❑ Ebola Virus Disease (EVD) is a virus that causes hemorrhagic fever.
- ❑ The virus is spread through **direct contact** (through broken skin or mucous membranes) with the body fluids (blood, urine, feces, saliva, and other secretions) of a person who is sick with Ebola, or with objects like needles that have been contaminated with the virus, or infected animals.

## How do you get the Ebola virus?

Direct contact with:

- 1 Bodily fluids of a person who is sick with or has died from Ebola.** (blood, vomit, pee, poop, sweat, semen, spit, other fluids)
- 2 Objects contaminated with the virus** (needles, medical equipment)
- 3 Infected animals** (by contact with blood or fluids or infected meat)

Source: CDC



# Ebola Awareness/Prevention (cont.)

**When is someone able to spread the disease to others?**

**Ebola only spreads when people are sick.**

A patient must have symptoms to spread the disease to others.



**After 21 days,** if an exposed person does not develop symptoms, they will not become sick with Ebola.

MONTH						
S	M	T	W	T	F	S
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

Source: CDC

- Symptoms of Ebola typically include:
  - Fever (greater than 38.6°C or 101.5°F)
  - Severe headache
  - Muscle pain
  - Weakness
  - Diarrhea
  - Vomiting
  - Abdominal (stomach) pain
  - Lack of appetite
- Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola virus, although 8-10 days is most common.
- Ebola can only be spread to others after symptoms begin.

# Ebola Awareness/Prevention (cont.)

- ❑ The risk of Ebola transmission to U.S. personnel in the affected geographic area is currently **LOW**, even during an extensive outbreak in the local population.
  - Low risk exposure include persons who spent time in a healthcare facility where EVD patients are being treated.
  - Contact of the extent required for transmission is typically limited to health care professionals who care for Ebola patients without using appropriate PPE.
  - However, U.S. military medical personnel, who do NOT use appropriate PPE while caring for Ebola patients or samples are at significant risk of infection.
- ❑ Those at highest risk include:
  - Healthcare workers
  - Family and friends of patients with Ebola



# Ebola Awareness/Prevention (cont.)

❑ Personal Protective Measures (PPMs) are actions and behaviors to prevent exposure and are the first line of defense.

PPMs are as follows:

- Practice careful hygiene (frequent hand-washing, use hand-sanitizer).
- Avoid contact with any blood or 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 EVD.
- Avoid contact with bats and nonhuman primates or blood, fluids, and raw meat prepared from these animals.
- Whenever possible, avoid hospital and locations where EVD patients are being treated.

# Ebola Awareness/Prevention (cont.)

**Reference:** GENADMIN, AFRICOM GUIDANCE IN LIGHT OF WEST AFRICA EBOLA OUTBREAK NUMBER TWO, DTG: 150850Z Aug 14

- ❑ Personal Protective Equipment (PPE) refers to items or garments that protect the wearer's body from injury or infection.
- ❑ Non-medical PPE includes access to impermeable gloves (e.g., rubber or latex) and eye protection (e.g., goggles, eyeglasses/sunglasses). Note: wash hands with soap and water after removing PPE (hand sanitizer may be used if soap and water are unavailable).
- ❑ Medical PPE (e.g., face shields, masks, impermeable gloves, impermeable apron, breathing apparatus, etc.) for medical related activities should be in accordance with established medical operating procedures for the situation and tasking.

# Ebola Awareness/Prevention (cont.)

- ❑ If you exhibit any of the symptoms of Ebola (fever greater than 38.6°C or 101.5°F; severe headache; muscle pain; weakness; diarrhea; vomiting; abdominal (stomach) pain; lack of appetite, seek immediate medical attention.
- ❑ Ebola virus disease can be fatal. There are no specific medications for treatment of Ebola. Treatment is limited to supportive care.
- ❑ Avoid any contact with a person exhibiting symptoms consistent with EVD.

# Malaria Awareness/Prevention

- ❑ Malaria = A serious and sometimes fatal disease caused by a parasite called Plasmodium and is transmitted to people by mosquitoes. Malaria is a preventable disease.
- ❑ High rates of malaria in Liberia, Guinea, and Sierra Leone.
- ❑ The World Health Organization (WHO) report (World malaria report 2013) documented an estimate of 207 million cases of malaria and an estimated 627,000 malaria related deaths in 2012.



# Malaria Awareness/Prevention (cont.)

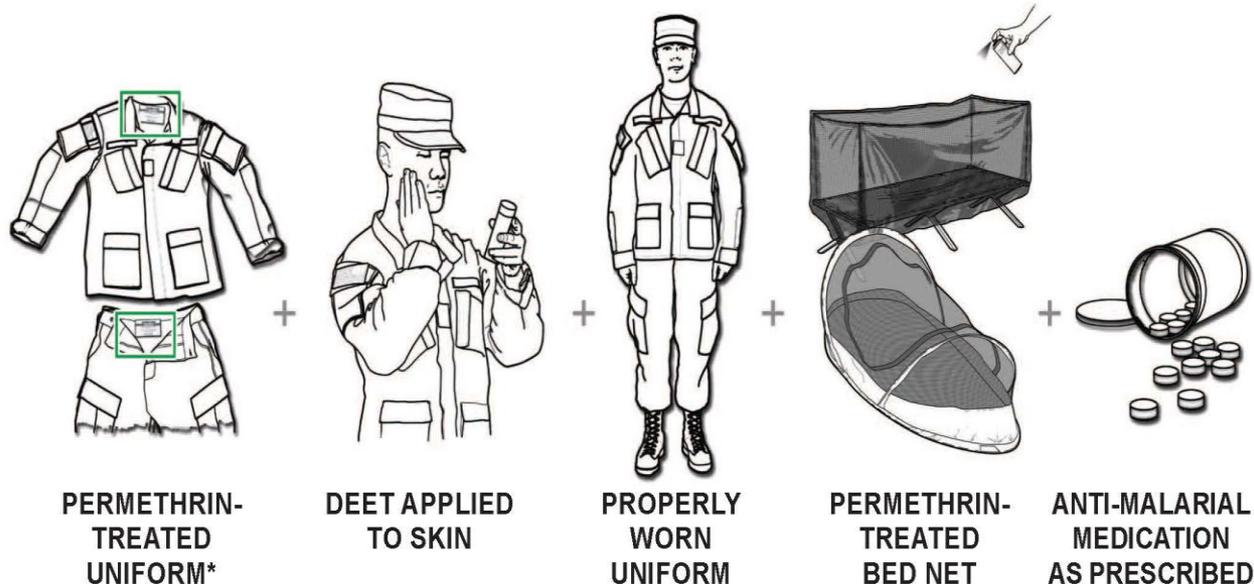
- ❑ Use exposure countermeasures.
- ❑ Proper wear of uniform – pants tucked into boots, sleeves down, undershirt tucked into pants.
- ❑ Apply insect repellent lotion (33% DEET – for adults) to exposed skin.
- ❑ Pre-treat uniforms/clothing before exposure: permethrin (aerosol spray, 0.5%) or Individual Dynamic Absorption (IDA) kit, 40% permethrin.
- ❑ Sleep under an Insecticide-Treated Net (ITN).
- ❑ Remove sources of standing water.
- ❑ Preventive treatment with anti-malarial medication (chemoprophylaxis) is effective if you take a full course of the drug = taking the drug each day and for the full duration it is required. Skipping a dose will decrease the medication's effectiveness. Inform your health care team if this occurs or if you are unable to tolerate the medication or experience intolerable side effects.



# Malaria Awareness/Prevention (cont.)

## DoD INSECT REPELLENT SYSTEM

- ❑ Protect against other vector-borne diseases.
- ❑ Use the DoD Insect Repellent System.



\*FACTORY-TREATED UNIFORMS WILL HAVE "INSECT REPELLENT APPAREL" ON THE LABEL. IF NOT FACTORY TREATED, FIELD TREAT THE UNIFORM WITH PERMETHRIN.

*Use ALL elements for maximum protection!*

# Other Medical Threats

## Food-borne and Water-borne Diseases

### COUNTERMEASURES

- Wash hands with soap and water before eating and after using the toilet.
- Consume food, water, ice only from US-approved sources when available.
- Avoid eating local foods. Even one-time consumption may cause severe illness.

# Other Medical Threats (cont.)

## Hazardous Plants COUNTERMEASURES

- Do not touch or eat unfamiliar plants.
- Wash promptly after exposure.
- Wash clothing after contact.



THORNY PLANTS



POISONOUS FRUIT



POISON IVY



TOXIC PLANT RESINS  
AND DERMATITIS

# Other Medical Threats (cont.)

## Venomous Animals

### COUNTERMEASURES

- Assume ALL snakes are poisonous.
- Do not touch!
- Shake out clothes, shoes, bedding before use.
- Look before you reach.
- Do not walk barefoot.
- Bring appropriate medication if allergic to bites/stings.

# Other Medical Threats (cont.)

## **Follow USAFRICOM General Order 1: Do not keep mascots or pets when deployed**

- Do not feed or handle wild or stray animals.
- Do not tolerate the presence of rodents.
- Immediately report any animal bites/scratches to your nearest medical professional.

# Other Medical Threats (cont.)

## Environmental Considerations

- Manage waste properly.
- Prevent oil and fuel spills.
- Clean vehicles at proper locations.
- Respect cultural and historical property.
- Protect natural resources and the terrain.

# Preparation for Deployment

- Complete Personnel Readiness Processing as directed by your Command.
- Complete Pre-Deployment Health Assessment: DD Form 2975.
- Prepare clothing and gear.
- Obtain prescribed medications for the duration of the deployment.
- Anti-malarial medications.
  - Take as directed by your health care provider.
  - Do not stop taking the medication just because you returned home and do not feel sick.

# Medical Readiness Requirements

**Reference:** Automated Message Handling System (AMHS) GENADMIN, Force Health Protection Requirements and Medical Guidance for Entry to the U.S. Africa Command (AFRICOM) Theater Version 1, DTG: 112243Z Sep 14.

## **REQUIRED VACCINATIONS:**

- - HEPATITIS A (SERIES COMPLETE OR FIRST DOSE AT LEAST 14 DAYS PRIOR TO TRAVEL)
- - HEPATITIS B (SERIES COMPLETE OR FIRST DOSE AT LEAST 14 DAYS PRIOR TO TRAVEL)
- - TETANUS-DIPHTHERIA (EVERY 10 YRS; ONE TIME ADULT BOOSTER OF TDAP IF NOT PREVIOUSLY RECEIVED)
- - MEASLES, MUMPS, RUBELLA (SINGLE ADULT BOOSTER IS REQUIRED)
- - POLIOVIRUS (SERIES COMPLETE PLUS SINGLE ADULT BOOSTER IS REQUIRED)
- - SEASONAL INFLUENZA (CURRENT ANNUAL VACCINE)
- - VARICELLA (DOCUMENTED IMMUNITY OR VACCINATION)
- - TYPHOID (INJECTABLE EVERY 2 YRS; ORAL EVERY 5 YRS)
- - MENINGOCOCCAL (EVERY 5 YRS)
- YELLOW FEVER (EVERY 10 YRS; LAST DOSE MUST BE AT LEAST 10 DAYS PRIOR TO ARRIVAL TO AFRICA); ALL PERSONNEL MUST HAVE IN POSSESSION A CURRENT
- - RABIES /PNEUMOCOCCAL (IF HIGH RISK AND AS NEEDED FOR OCCUPATIONAL EXPOSURE)

**CAC-ENABLED WEBSITE:** <https://www.intelink.gov/ncmi/index.php> (Note: No Chloroquine)

# Summary

- ❑ Be aware of the medical threats.
- ❑ Be vigilant; practice personal hygiene and personal protective measures at all times.
- ❑ Be medically ready; ensure all immunizations are up-to-date.
- ❑ Contact your medical staff for additional information.

# Points of Contact

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