2014

Working video script

[EBOLA VIRUS DISEASE OUTBREAK SCRIPT]

Version 1

Ebola Virus Disease, or EVD, is a preventable but often fatal viral infection. As of August 2014 a large EVD outbreak was centered in four countries in West Africa: Liberia, Guinea, Sierra Leone, and Nigeria. This outbreak is the largest Ebola outbreak in history and the first in West Africa. EVD poses no substantial risk to the US general population and as of September, 2014 there have been no Ebola cases acquired or transmitted outside of Africa. A few US health care workers have contracted EVD while treating patients in West Africa. The United States Centers for Disease Control and Prevention, or CDC, is working with other U.S. government agencies, the World Health Organization, and other domestic and foreign partners in an international response to the outbreak. CDC has activated its Emergency Operations Center to help coordinate technical assistance and control activities with partners. Several teams of public health experts have been deployed to the West African region and there are plans to send additional public health experts to the affected countries to expand current response activities.

But disease control efforts there have been hindered by austere healthcare settings, poor

living conditions, misinformation, and local cultural norms along with avoidance of healthcare due to mistrust.

Ebola Virus Disease is caused by infection with Ebolavirus, which was first discovered in 1976 in what is now the Democratic Republic of the Congo. Since then, outbreaks have appeared sporadically.

The natural reservoir host of ebolaviruses remains unknown. However, on the basis of available evidence and the nature of similar viruses, researchers believe that the virus is zoonotic or animal-borne, with bats being the most likely reservoir. Yet researchers can only make an educated guess that the first patient became infected through contact with an infected animal. Because the natural reservoir of ebolaviruses has not yet been proven, the manner in which the virus first appears in a human at the start of an outbreak is still unknown. Following the initial human infection from an infected bat, or other wild animal, human-to human transmission occurs and becomes a predominant feature of the Ebola Virus outbreak.

When EVD does occur in humans it is spread by direct contact with a sick person's blood or body

fluids, or through objects, such as needles that have been contaminated with infected body fluids, or though contact with infected animals. In Africa, given how poor the countries suffering outbreaks tend to be, infection in a health care setting is prominent because of a lack of personal protective equipment and the reuse and improper sterilization of syringes, needles, or other medical equipment contaminated with these fluids. Also in Africa, other common means of acquiring the virus include preparing the bodies of the dead for funerals or participating in burial rituals that involve handling the body.

EVD is preventable, but often fatal to those who become infected. Healthcare workers and family and friends in close contact with Ebola patients are at the highest risk of getting sick because they may come in contact with infected blood or body fluids like vomit or diarrhea. During outbreaks, EVD can spread quickly within healthcare settings where hospital staff is not wearing appropriate protective equipment, such as masks, gowns, and gloves. Proper cleaning and disposal of instruments, such as needles and syringes, is also important. If instruments are not disposable, they must be sterilized before

being used again. Without adequate sterilization of the instruments, virus transmission can continue and amplify an outbreak.

Only people with EVD symptoms, or people who have died from EVD can transmit the disease. Diagnosing EVD in an individual who has been infected for only a few days is difficult because the early symptoms, such as fever, headache and sore throat, are not specific to EVD and are often seen in patients with more commonly occurring diseases, such as malaria or even influenza. However, if a person shows early symptoms and there is reason to believe that EVD should be considered, the patient should be isolated and public health professionals notified. The patient can then be tested to confirm infection. EVD symptoms include fever, weakness, joint and muscle pain, headache and a sore throat, followed by vomiting, diarrhea, and stomach pain. In some cases, rashes, red eyes, and bleeding may occur.

Transmission does not occur through water, food or by air, but only by coming into contact with infected bodily fluids and contaminated objects.

There is no FDA-approved vaccine or specific treatment for EVD. Therefore, it is important to take steps to prevent Ebola.

There are actions you can take to protect yourself. If you must travel to an area with known Ebola cases, make sure to practice careful hygiene. Wash your hands with soap and water at every opportunity. 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 bats and nonhuman primates or blood, fluids, and raw meat prepared from these animals. Avoid hospitals where Ebola patients are being treated. If you're traveling to an affected area to provide healthcare to Ebola patients, you should receive special training in standard, contact and droplet infection control precautions and in the use of appropriate personal protective equipment. After your return, monitor your health for 21 days and seek medical care immediately if you develop fever or any other symptoms of Ebola.

Tell the healthcare provider about your recent travel and your symptoms before you go in for treatment. Advance notice will help healthcare providers care for you and protect other people in the medical facility. Some 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.

The situation in Africa is rapidly changing and misinformation is abundant on social media and the internet. For accurate and reliable information about EVD contact the US Army Public Health Command, the US Army Medical Research Institute of Infectious Diseases, the Centers for Disease Control and Prevention, or the World Health Organization. There are actions you can take to protect yourself if you are traveling to an area where Ebola transmission is occurring. In addition to Ebola-specific precautions, be sure you are adequately protected from more common diseases in the region, such as malaria. See a qualified health care provider to ensure you're fully prepared for all potential disease threats. Be informed, be prepared, and stay healthy.