

Basic Information about Ebola

Ebola is a major topic in the news, with a lot of fear and misinformation generated. Here is some basic information to help clarify things.

EBOLA IS LESS CONTAGIOUS THAN THE FLU

- It's very infectious but not very contagious – a small amount will infect someone, but it's not easy to transmit to another person. You must have direct contact with body fluids of someone infected with Ebola, or their corpses, to catch the disease.
- The CDC has recommendations for PPE (personal protective equipment) for healthcare workers caring for ebola patients. *If you are not in direct contact with ebola patients no special precautions are needed*

IF YOU SEE SOMEONE WITH FLU-LIKE SYMPTOMS, THEY PROBABLY HAVE THE FLU – NOT EBOLA

- Symptoms of Ebola are like the flu plus diarrhea (weakness, fever, aches, diarrhea, vomiting and stomach pain)
- It's flu season. Flu is very contagious because it's airborne. Ebola is not. If you see someone coughing or sneezing – think of the flu or a cold, not Ebola.

LOCATIONS ARE SCREENING FOR FEVER, NOT EBOLA

- Some airports are scanning people for fever as a sign of illness. This is non-specific as many diseases cause fever. There is no rapid test for Ebola being performed. Anyone flagged for fever likely has the flu or another infection, not Ebola.

AFRICAN-LEVEL OUTBREAKS ARE UNLIKELY IN THE US

- Many Africans don't believe Ebola is real, and think that if you see a doctor or go to a hospital they will give you something to kill you
- West Africa often lacks basic medical care like rehydration and electrolyte replacement, and families hide sick patients in their homes – leading to death from dehydration
- Families touch and kiss the corpses of Ebola victims during funerals, spreading the disease further

IN OTHER WORDS...

To start with on Ebola, it is important to understand that it is less infectious than other diseases like influenza. With the flu, a person may transmit it prior to infection. With Ebola, a person must actually be exhibiting symptoms. It is NOT spread through the air or water. To be infected, a person must come into contact with the bodily fluid of a sick person or an object like a needle that has been contaminated with the body fluid and then transmit it to a mucous membrane (eyes, nose, mouth) or open wound. With enterovirus EV-D68, it is primarily a disease of infants and children. There are quite a few enteroviruses around – this one is not new, but has had more cases than normal. The CDC is expecting this one to taper off late Fall.

When you are in any laboratory, you should always use standard cautions. The most important continues to be handwashing. If you are in a place where you can be exposed to any germs, soap and water on the hands is the best way to go. The rule goes that you should wash them as long as it takes to sing “Happy Birthday” twice. Of course, you get far less odd looks if you sing it to yourself rather than out loud. Alcohol gels are helpful, but not as good as a good hand washing.

When you are in a place with clinical samples, you should not be eating, drinking, smoking, or chewing gum. If you see a friend in a lab coat or gloves, do not go over to hug them or shake their hand. Don’t put your bag on a counter with clinical samples, lean on a bench with samples, pick up clinical devices, put things in your mouth like a pen, or wear open-toed shoes.

If you ever think you are exposed to anything, let the person in the lab know.

Asking questions is always encouraged.

Above all, if you see a biohazard sign, it is best to stay away.

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