



Ebola Virus Disease (EVD)

Information for Healthcare facilities

The recent outbreak of Ebola in Western Africa has raised concerns about how to properly address the risks. The recommendations in this document are targeted at Healthcare facilities, but much of the information is helpful for non-Healthcare facilities in understanding how to address the risks of Ebola Virus Disease (EVD). Recent outbreaks in Western Africa have received significant media attention, raising legitimate concerns about how a Healthcare facility should deal with Ebola, should a patient with Ebola require treatment in their facility.

Diagnosis

Early onset symptoms of Ebola are difficult to differentiate from a number of other diseases, so only qualified physicians should make a diagnosis of EVD. Typical symptoms include:

- Sudden onset fever (>101°F/>38.3°C)
- Intense weakness
- Muscle pain
- Headache and sore throat

Symptoms typically appear 8-10 days after exposure, but can appear 2-21 days after exposure. If the patient has recently travelled to West Africa, contact with others traveling in the region, or contact with a person known to have EVD, and presents the symptoms above, they should be isolated and evaluated for potential EVD by a doctor.

Additional symptoms appearing later in the disease include:

- Diarrhea
- Vomiting
- Stomach pain
- Lack of appetite
- Rash
- Red eyes
- Cough
- Chest pain
- Difficulty breathing or swallowing
- Bleeding inside and outside the body

Origins

The Ebola virus is an enveloped virus that is part of the Filoviridae family of viruses, and causes Ebola Virus Disease (EVD). First appearing in 1976, outbreaks thus far have occurred only in Africa. The manner in which the virus appears is not firmly established. However, best evidence to date suggests that the virus lives in fruit bats. Contact with an infected animal (a bite or contact with bodily secretions or organs) causes the initial transmission from animals to people, which creates the potential for human to human transmission, which can result in an outbreak.

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Contact with infected blood or body fluids that results in subsequent contact with broken skin or mucous membranes is believed to cause human to human transmission. Treat all blood and body fluids as potentially infectious and decontaminate appropriately.

Transmission

EVD is not believed to be transmitted by air, water, or cooked food. Consumption of raw milk, raw meat, or raw organs of an infected animal is believed to be a potential source of infection for people. All food (especially meat) should be thoroughly cooked to prevent any risk of transmission.

Previous EVD outbreaks have spread to the family and friends and Healthcare workers of the infected people. Transmission is believed to occur through close contact with infection secretions while caring for a sick person or handling of the body after death, causing similar exposure to infected bodily fluids. Human to human transmission is believed to occur through:

- Contact with blood or secretions of an infected person (direct contact) either while an infected person is alive, or after death.
- Exposure to contaminated needles, bandages, clothing, or other infected objects (indirect contact) in the environment.

Per CDC/WHO guidance, Healthcare workers are advised to follow:

Standard Precautions

- Hand hygiene following the WHO 5 moments and after PPE removal
- Environmental surface and patient care equipment cleaning and disinfection
- Treat all blood and body fluids as potentially infectious and decontaminate
- Isolation of infected patients
- Safe injection practices
- Safe handling of patient fabrics
- Respiratory hygiene/cough etiquette

Contact Precautions

- Fluid resistant gown and gloves
- Hand hygiene before donning and after removal of protective equipment

Droplet Precautions

- Mask and eye protection (goggles)
- Hand hygiene before donning and after removal of protective equipment

Contagiousness

While an infected person must have symptoms of EVD to be contagious, people who recover from EVD can still transmit the Ebola virus for an unknown period of time through body fluids after symptoms have stopped. Persons are considered infectious as long as their blood or body fluids contains the virus, which can be up to 8 weeks based on limited evidence from past outbreaks.

Additional Recommendations

In addition to the recommendations listed above, Diversey Care recommends the following for Healthcare facilities.

- Be prepared. Know what to do in advance. Provide training for staff as needed.
- Have ongoing surveillance to quickly identify patients that need further diagnosis.
- Minimize direct contact with persons known or suspected to have EVD.
- Avoid touching the face, mouth, eyes, and nose while around a patient with EVD.
- Perform frequent hand hygiene throughout the shift. Consider the WHO 5 moments as a minimum guidance on frequency of hand hygiene.
- When cleaning surfaces and equipment or decontaminating a blood or body fluid spill, avoid spraying or splashing, which could spread pathogens.
- Stock additional supplies of personal protective equipment (PPE), disinfectants, hand hygiene products, facial tissue, toilet tissue, trash bags, and cleaning cloths and tools.
- Prepare communications for staff and visitors in the event they are needed.
- Evaluate whether enhanced cleaning procedures are required. Diversey Care cleaning procedures include detailing what surfaces and equipment are to be cleaned, the order to clean objects in a given room, when to perform hand hygiene, when glove use is required and when to change gloves, the cleaners and disinfectants to be used, any cleaning tools, and the frequency of cleaning/disinfection.
- Compliance monitoring of cleaning procedures, hand hygiene guidelines, and PPE usage are also recommended to ensure that established policies are being followed.

Please contact your Diversey Care representative with any questions.

Guidelines are available from the CDC and WHO to aid in better understanding of the disease and its prevention. These references were used in the preparation of this document.

www.cdc.gov/vhf/ebola/
www.who.int/csr/disease/ebola/en/