

Ebola virus disease (EVD)

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Key facts

- Ebola virus disease (EVD or Ebola) is a rare but severe and often fatal illness in humans.
- The average Ebola case fatality rate is around 50%, and this has varied from 25–90% in past outbreaks, depending on circumstances and the response.
- Ebola first appeared in 1976 in 2 simultaneous outbreaks in South Sudan, and the Democratic Republic of Congo. The latter occurred in a village near the Ebola River, from which the disease takes its name.
- The origin of the virus is unknown, but current evidence suggests that fruit bats (Pteropodidae) may be a host.

Transmission: Direct contact

Ebola is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals such as fruit bats, chimpanzees, gorillas, monkeys, forest antelope or porcupines found ill or dead or in the rainforest. This may happen by:

- Touching or eating animals that are infected (monkeys, apes, bats)
- This is especially true if bushmeat is not well cooked
- Touching the waste (faeces/poop) from infected fruit bats
- Through direct contact with tissue, blood, other body fluids, and excretions from an infected animal.

Ebola then spreads through human-to-human transmission through the following ways:

- Contact with the blood, faeces/poop, vomit, spit, sweat, tears, breast milk or semen from a person sick with Ebola
 - Contact can be with objects that have been contaminated with the body fluids from a person who is sick with Ebola (for example, bedding, clothes or needles)
- When handling the body of someone who has died from Ebola
- Coming into contact with semen (for example, through sex) from someone who has recovered from Ebola (Ebola can be spread through semen for up to 12 months after recovery)
- Pregnant women who get acute Ebola and recover from the disease may still carry the virus in breastmilk, or in pregnancy related fluids and tissues.



Most vulnerable to severe consequences

- Every person in the community is vulnerable to Ebola (** it is a very deadly disease than can kill many half to almost all people who get infected can die **)
- Pregnant and breastfeeding women

Most vulnerable to contracting the disease

- Family and relatives of people who are sick (or who have died) from Ebola
- Health workers, volunteers, and people who handle dead bodies

Symptoms

At the beginning there may be:

- Sudden fever
- Tiredness
- Muscle pain
- Headache
- Sore throat

Followed by:

- Vomiting
- Diarrhoea
- Rash

Bleeding - under the skin or from the nose and gums (inside mouth), coughing blood or having bloody faeces (sometimes)

Marburg and Ebola viruses which are both members of the same virus family, have similar clinical signs, and have the capacity to cause outbreaks with high fatality rates

What can you do to prevent and control an epidemic?



Monitoring the community and identifying sick people

• Identify and ensure that sick people immediately isolate

Treatment and management

- Immediately refer suspected cases to treatment centres
 - Provide safe transport for suspected cases
- Support contact tracing and follow-up of contacts
- Provide psychosocial support to the sick person, their families, and communities
- Conduct safe and dignified funeral and burial practices

Sanitation and waste management

- Dispose safely of waste that might be contaminated (by burning or burying)
- Disinfect homes and personal belongings of people who are sick or have died
 - Avoid disinfection in spaces where those who are sick or have died have not been present. Disinfection in such places can create stigma unnecessarily, is not an effective prevention method, and is an inappropriate use of resources.
- Promote disinfection of reusable supplies
- Solid waste management
 - Encourage the community to clear away rubbish and garbage

Personal protection and hygiene

- Promote handwashing with soap, chlorine solution or hand sanitizer
- Practise and promote social distancing
- Use personal protective equipment (gloves, masks, clothing) when in contact with potential cases
- Avoid touching sick or dead fruit bats, monkeys, apes and other bush meat
- Avoid contact with the faeces and other waste products of bushmeat

Food hygiene and safety

Cooking bushmeat or animal products (blood and meat) thoroughly

Social mobilization and health promotion

• Find out the specific advice being given by health and other relevant authorities



- Promote the use of condoms for at least 12 months after a diagnosis of Ebola
- Promote safe and dignified burials
- Promote the safe disposal (burning or burying) of contaminated materials
- Promote social distancing
- Model following this advice and inform community members of current health practice advice
- Offer support and encouragement to follow the advice
 - o Try to gain understanding about if and why health practice advice is not being followed
 - With the guidance of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices
- Involve the community in managing rumours and misinformation

Immunization

• Support vaccination campaigns where available

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
 - How many people have fallen sick with Ebola? Where?
 - How many people have died? Where? When?
 - Where are the local health facilities and services? (include traditional healers)
- Record the following information on the back of the map:
 - When did people start to fall sick with Ebola?
 - How many people live in the affected community?
 - What are the community's habits, practices and beliefs about caring for sick people? Consider any differences in roles and responsibilities between women and men.
 - What are the community's burial traditions, funeral procedures and practices? Who traditionally prepares bodies for burials? Consider any differences in roles and responsibilities between women and men.
 - Do people in the community know about Ebola?
 - Do people know the main signs of Ebola?
 - Do they know what to do if someone becomes sick (for example phone number to call, actions to take)?
 - Do people know how to protect themselves from Ebola?
 - Is a social mobilization or health promotion programme in place?
 - Are people in the community socially distancing? Why? Why not?
 - Which sources do people use/trust the most for information?
 - Are there rumours or misinformation about Ebola? What are the rumours?
 - Are health workers, volunteers or people who have survived Ebola stigmatized, left out, threatened or harassed?



• What are the main effects on them and their lives?

Other resources

Additional References

Ebola Virus Disease - WOAH - World Organisation for Animal Health

WHO – World Health Organization; Ebola Virus Disease; 2023

WHO - World Health Organization; Ebola Virus Disease, Question and Answer; 2019

WOAH - World Organization for Animal Health; Ebola Virus Disease, 2024

