

Ebola Virus Disease (EVD)

Fact sheet

Ebola virus disease (formerly known as Ebola haemorrhagic fever) is a severe, often fatal illness, with a case fatality rate of up to 90%. It is one of the world's most virulent diseases. The infection is transmitted by direct contact with the blood, body fluids and tissues of infected animals or people.

What is Ebola Virus Disease?

Ebola Virus Disease (EVD) is a serious and often fatal disease caused by a virus. There are several strains of the Ebola virus.

There have been more than two dozen outbreaks of EVD in humans across Central, East, and West Africa since the virus was first identified in 1976. All people travelling to Africa should check the <u>Smart Traveller website</u> for current outbreaks.

Fruit bats are considered to be the natural host of Ebola viruses, with occasional outbreaks amongst other species such as chimpanzees, gorillas, monkeys and forest antelope.

While there is evidence of one strain of Ebola virus being present in animal populations in some parts of Asia, there have been limited reports of human illness outside of Africa, all of which have been linked to a source or outbreak in a known Ebola risk area.

There is no evidence that the Ebola virus is present in Australian bats or other animals in Australia. There have been no cases of EVD identified in Australia.

What are the symptoms of Ebola Virus Disease?

Ebola virus causes severe illness, with symptoms including:

- · sudden onset of fever
- muscle and joint aches
- weakness
- headache
- vomiting
- diarrhoea
- rash

malfunction of liver and kidneys.

Some cases present with profuse internal and external bleeding and progress to multi-organ failure.

Between 50 and 90% of cases of EVD will die.

How is Ebola Virus Disease spread?

EVD is introduced into the human population through close contact with the blood, secretions, organs, or other bodily fluids of infected animals (e.g. through the hunting or preparation of "bush meat").

EVD then spreads from person to person via:

- contact with the urine, saliva, sweat, faeces, vomit, breast milk, amniotic fluid, and semen of infected people
- contact with environments contaminated with such fluid, for example, healthcare settings.

Transmission through sexual contact may occur up to seven weeks after clinical recovery.

Airborne transmission is not known to occur.

Traditional burial ceremonies conducted in affected areas of Africa are a known high-risk activity for transmission.

Who is at risk of Ebola Virus Disease?

People who are living in or travelling to affected areas of Africa may be at risk of infection. The risk of infection is extremely low unless there has been direct contact with the bodily fluids of an infected person or animal (alive or dead).

People who care for relatives with EVD and healthcare workers, particularly those in resource poor settings with inadequate infection control, are at high risk of EVD.

How is Ebola Virus Disease prevented?

Good hygiene and infection control around EVD cases is the most effective way to prevent spread of disease.

Hunting and contact with "bush meat" in affected areas should be avoided.

There are two Ebola virus vaccines which have been licensed for use but are in limited supply and available only in restricted circumstances at present.

What should I do if I become unwell after travel in areas affected by Ebola Virus Disease?

Call your doctor or the emergency department immediately if you have returned from a country affected by EVD within the last 21 days and develop a fever, vomiting, diarrhoea and other symptoms.

It is important that you tell the doctor or hospital emergency department your symptoms and which countries you have visited. The doctor will advise you on what you need to do.

When you arrive at the doctor's clinic or emergency department you may be separated from others to prevent further spread of infection.

If you become sick while travelling in areas affected by EVD, or come in contact with someone with EVD, contact a doctor immediately. You should not wait until you arrive back in Australia to seek medical assistance.

How is Ebola Virus Disease diagnosed?

EVD is diagnosed by a blood test. Urine and/or a swab from throat or nose may also be collected. Testing for EVD is done in a public health laboratory with special biosafety facilities.

How is Ebola Virus Disease treated?

EVD can be treated with antiviral medicines given at an early stage in the disease, along with intensive medical care. Seeking health assistance as soon as symptoms develop is crucial.

What is the public health response for Ebola Virus Disease?

In the event of an EVD case in Australia, there are established procedures to prevent the spread of EVD. These include:

- Doctors and laboratories are required to notify state/territory health departments of any suspected cases.
- Isolation of suspected cases from other people.
- Identification of people who have been in contact with the case by Public Health authorities so that
 these people are provided with information about the risk of infection and monitored for any signs or
 symptoms of the disease.
- Special safety guidelines including wearing protective equipment to prevent spread of Ebola virus to health care workers managing cases and laboratory staff handling specimens.

Public health unit staff will investigate all cases to find out how the infection occurred, identify other people at risk of infection, implement control measures and provide other advice.

More information

- World Health Organization (WHO) EVD updates
- Australian Department of Health EVD information
- Centers for Disease Control and Prevention (USA)
- Australian Government Smartraveller

For further information please call your local Public Health Unit on 1300 066 055.

If you have symptoms of EVD and you are concerned, speak to your doctor right away, or in an emergency call 000. For health advice you can call also health direct on 1800 022 222 for free 24-hour health advice.