



Information for humanitarian aid healthcare workers: Ebola virus disease

Interim guidance for humanitarian workers, particularly those involved in healthcare of Ebola patients

Ebola virus is introduced into the human population through close contact with the blood, secretions, organs or other bodily fluids of infected animals. Once a person comes into contact with an animal that has Ebola and is infected by the virus, it can spread from human to human. Infection occurs from direct contact (through broken skin or mucous membranes) with the blood, or other bodily fluids or secretions (stool, urine, saliva, semen) of infected people. Semen can contain virus for seven weeks after apparent recovery from the illness.

Infection can also occur if broken skin or mucous membranes of a healthy person come into contact with environments that have become contaminated with an Ebola patient's infectious fluids such as soiled clothing, bed linen, or used needles.

Anyone who has close contact with a person infected with the virus, or someone who handles samples from patients is at risk. This includes hospital staff, family members and laboratory workers, all of whom are at risk if they do not use proper barrier nursing techniques. These precautions include wearing protective gowns, gloves, and masks, in addition to wearing eye protection (eg eye glasses) or a face shield.

Infection generally does not occur through routine, social contact (such as shaking hands) with asymptomatic individuals. The likelihood of contracting any viral hemorrhagic fever (VHF), including Ebola, is considered very low unless there has been direct contact with the blood or body fluids (eg saliva, urine) of symptomatic infected persons or animals, or objects that have been contaminated with body fluids. The cause of fever in persons who have travelled in areas where VHF is present is more likely to be a common infectious disease, but such persons should be evaluated by a health-care provider to be sure.

Recommendations

If you travel to an area affected by a VHF outbreak, the following precautions are recommended:

Before you leave

- assemble a travel health kit containing basic first aid and medical supplies. Be sure to include a thermometer, household disinfectant, alcohol-based hand rubs for hand hygiene. Be aware that these help

protect against bacteria such as those that cause vomiting & diarrhoea but are not recommended as protection from Ebola.

- a personal supply of surgical masks and disposable gloves may also be useful, but you should ensure that your organisation is going to provide you with all the relevant protective equipment for you to safely carry out your duties.
- seek information about the current Ebola virus situation. This includes obtaining and remaining aware of up-to-date, reliable information on the specific areas affected, as these may change over time. For information, see links below.
- be sure you are up to date with all your immunisations, and see your health-care provider at least 4-6 weeks before travel to get any additional immunisations, medications (such as malaria prophylaxis), or information you may need. <http://www.nathnac.org/>
- check your travel insurance plan or get additional insurance that covers medical evacuation in the event of illness. Check your Organisation's policies.
- identify in-country health-care resources in advance of your trip

While you are in an area where Ebola virus disease has been reported:

Maintain the **basic precautions** that would apply in all humanitarian situations. This includes:

- avoiding contact with ill or dead animals (especially primates and bats) as well as consumption of "bushmeat" (wild animals, including primates, sold in local markets for consumption as food)
- adhering to safe sex practices including the use of barrier contraception

If you are involved in medical care you should maintain the **general principles of infection control**, including:

- sterilisation and proper disposal of needles and equipment
- proper disposal of body fluids, tissues and patient excretions
- careful and frequent handwashing using soap and water (or waterless alcohol-based hand rubs when soap is not available).
- wearing gloves

In addition, you must observe **barrier techniques** when in close contact with persons suspected or known to have Ebola virus infection. Follow the WHO's "Interim Infection Control Recommendations for Care of Patients with Suspected or Confirmed Filovirus (Ebola, Marburg) Haemorrhagic Fever"

http://www.who.int/csr/bioriskreduction/interim_recommendations_filovirus.pdf

This document includes direct patient care, laboratory activities, post mortem examinations, movement and burial of human remains, cleaning and waste disposal.

Vital barrier techniques include wearing protective gowns, gloves, masks and eye protection or face shields, and the careful removal of these after use.

If you think you have Ebola virus infection or symptoms compatible with Ebola virus disease whilst in the affected area:

If you develop fever or other symptoms such as chills, muscle aches, nausea, vomiting, or rash:

- visit a health-care provider immediately and inform them that you may have had contact with Ebola virus disease. There may be a legal duty to report this, but your Organisation should be aware of this requirement.
- when travelling to a health-care provider, limit your contact with others. All other travel should be avoided
- remember that other potential causes of the illness (such as malaria) should not be overlooked

After your return

Persons returning from an affected area who have had a potential exposure to Ebola virus disease but who are well should monitor their health for 21 days since the last exposure. As long as they remain well, they can return to work during this period. Organisations should make arrangements to manage this process and notify Public Health England of returning healthcare workers. Any person who becomes ill, even if only a fever, should be told to report to the local Health Protection Team (which can be identified using the [postcode lookup](#) here) who will arrange for a rapid assessment by an Infectious Diseases physician and testing as appropriate.

Additional Information

For more information about health recommendations for travel to Africa, see: <http://www.nathnac.org/>

For more information about Ebola virus disease, see: <http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/Ebola/>

For information about other viral hemorrhagic fevers see: <http://www.hpa.org.uk/Topics/InfectiousDiseases/InfectionsAZ/ViralHaemorrhagicFever/>

For health-care workers working with VHF patients in African healthcare settings, see WHO's "Interim Infection Control Recommendations for Care of Patients with Suspected or Confirmed Filovirus (Ebola, Marburg) Haemorrhagic Fever" http://www.who.int/csr/bioriskreduction/interim_recommendations_filovirus.pdf

First published: July 2014

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