

Ebola Virus: Questions and Answers

Information about the Disease and How our Community Responds to Public Health Threats

What is Ebola?

Ebola, previously known as Ebola hemorrhagic fever, is a severe, often fatal disease in humans and nonhuman primates (such as monkeys, gorillas, and chimpanzees). Ebola is a rare and deadly disease caused by infection with a virus of the family Filoviridae, genus Ebolavirus.

Ebola is found in several West African countries. The first Ebola species was discovered in 1976 near the Ebola River in what is now the Democratic Republic of the Congo. Since then, outbreaks have appeared sporadically in Africa.

How is Ebola spread?

The virus can be transmitted through direct contact with the blood or secretions of an infected person, or exposure to objects (such as needles) that have been contaminated with infected secretions. It is not spread through the air, water, or food. Exposure to Ebola can occur in health care settings where hospital staff is not wearing appropriate protective equipment, such as masks, gowns, and gloves.

What are the symptoms and signs?

Symptoms are non-specific and may include fever, rash, joint and muscle aches, diarrhea, vomiting, stomach pain, lack of appetite, rash, sore throat, cough. More serious presentations include chest pain, difficulty swallowing, difficulty breathing and bleeding inside and outside of the body. Symptoms may appear anywhere from 2 to 21 days after exposure to Ebola though 8-10 days is most common.

Where does Ebola come from?

The natural reservoir of Ebola virus has not yet been proven, but scientists believe the first patient becomes infected through contact with an infected animal.

What are the risks for Ebola here in Pima County?

Pima County has a low occurrence of international travelers from affected regions in West Africa. A person must be symptomatic in order to spread or transmit the disease and they must have direct contact with an infected, symptomatic person's body fluids. Even with the case that has occurred in Texas, the risk to our community remains very low.

What are healthcare professionals doing to prepare?

We practice infection control and conduct disease investigations everyday – no matter what the illness is or where it comes from. We diligently work with our healthcare and public health partners to be prepared for public health threats and have protocols in place at every level to protect the health and safety of the public.

Contact investigations are something done all the time in our community for diseases like tuberculosis, whooping cough, and sexually transmitted infections. A contact investigation is the process used to identify anyone who may have been exposed if someone becomes ill in our community. Local first response, healthcare, and public health agencies are paying very close attention to this situation, in constant contact with one another, and monitoring our healthcare system very closely for anything suspicious.

The CDC has been preparing for the possibility of cases in the U.S. and have provided state health, first response, county health, and hospital organizations with guidance and tools to deal with a case in our community.

What happens if someone is diagnosed with Ebola?

If there is reason to believe a person has Ebola, the patient is isolated in a hospital setting and public health professionals notified. Samples from the patient can then be collected and tested by a specialized lab to confirm infection.

What is the treatment for Ebola?

Standard treatment for Ebola is limited to supportive therapy: providing treatment for symptoms and treating them for any complicating infections.

Where can I get more information about Ebola in the U.S.?

The Centers for Disease Control (CDC) Ebola webpage is being constantly updated with new information as it becomes available. Follow the link or type in <http://www.cdc.gov/vhf/ebola/>

