Ebola Virus Questions & Answers

The District of Columbia Department of Health (DC DOH) has been working closely with other public health organizations and the Centers for Disease Control and Prevention (CDC) the beginning of the current Ebola outbreak more than six months ago. The outbreak is currently centered on the countries of Liberia, Guinea and Sierra Leone all located in West Africa. While there is potential for this outbreak to spread to neighboring African countries, Ebola does not pose a significant risk to the U.S. public at this time. The U.S. is currently assisting affected regions in many ways, including sending workers to West Africa to assist efforts to control the outbreak.

What is Ebola?

The Ebola virus causes viral hemorrhagic fever disease. Symptoms of infection include: fever, muscle and joint aches, headache, weakness, diarrhea, vomiting, stomach pain, lack of appetite, and abnormal bleeding. Symptoms may appear anywhere from 2 to 21 days after exposure to the Ebola virus, though developing symptoms 8 – 10 days exposure is most common.

How is Ebola transmitted?

Transmission occurs through direct contact with blood or bodily fluids of an infected symptomatic person or through exposure to objects (such as needles) that have been in contact with an infected individuals bodily fluids/secretions.

Can Ebola be transmitted through the air?

No.

Can I get Ebola from contaminated food or water?

No.

Can I get Ebola from a person who is infected but doesn’t have any symptoms?

No. Individuals without symptoms are not contagious. Transmission occurs through direct contact with an infected individual.
Q: Are there any cases of individuals contracting Ebola in the U.S.?

No.

What is being done to prevent ill passengers in West Africa from getting on a plane?

U.S. public health efforts are assisting with the education of local officials and active screening efforts currently taking place in West Africa to prevent sick individuals from boarding planes. Airports in areas currently affected by the outbreak (Liberia, Sierra Leone and Guinea) are screening all outbound passengers for Ebola symptoms. In this effort, travelers are screened for fever and required to complete a healthcare questionnaire designed to detect potentially sick individuals. U.S. public health workers are also deployed to the affected region to assist in these efforts.

What are U.S. Public Health Organizations doing in the U.S.?

The possibility of an infected traveler entering the U.S. is remote. Nonetheless, the DC DOH and the CDC are working together to minimize the risk of Ebola spread. The DC DOH has met with CDC officials to reinforce existing protocols that are in place to protect against further spread of disease. These include international airlines notifying CDC officials of suspected ill passengers observed on their planes prior to the plane’s arrival. Notifications result in further evaluations and investigations by CDC officials of ill travelers and their contacts, and, if necessary, isolation of the sick travelers. CDC has also provided guidance to airlines for managing ill passengers and crew and for disinfecting aircraft. The DC DOH has been in contact with local health care providers to provide guidance and remind U.S. healthcare workers of the importance of taking steps to prevent the spread of this virus, how to test and isolate suspected patients and how they can protect themselves from infection.

What about ill Americans with Ebola who are being brought to the U.S. for treatment? How are public health officials protecting the American public?

The CDC has very well-established protocols in place to ensure the safe transport and care of patients with infectious diseases back to the United States. These procedures cover the entire process – from patients leaving their bedside in a foreign country to their transport to an airport and boarding a non-commercial airplane equipped with a special transport isolation unit, to their arrival at a medical facility in the United States that is appropriately equipped and staffed to handle such cases. CDC’s role is to ensure that travel and hospitalization is done to minimize risk of spread of infection and to ensure that the American public is protected. Patients were evacuated in similar ways during SARS.

What does the CDC’s Travel Alert Level 3 mean to U.S. travelers?

On July 31, the CDC elevated their warning to U.S. citizens encouraging them to defer unnecessary travel to Guinea, Liberia, and Sierra Leone over concerns that travelers may not have access to health care facilities and personnel should they need them in country.

Additional information on Ebola can be found at the following:

- Contact the DC Department of Health Department of Epidemiology, Disease Surveillance & Investigation at 202-442-8141