

Ethiopian Protocol on Ebola Outbreak in West Africa

For September 2014

Ebola virus disease (EVD) is a severe disease caused by one of the Ebola virus strains (Zaire, Sudan, Bundibugyo, or Tai Forest virus). EVD is often fatal illness, with a case fatality rate of up to 90% with no prophylaxis, vaccine or treatment available. The first Ebola virus was discovered in 1976 near the Ebola River in what is now the Democratic Republic of the Congo.

Ebola spreads through direct contact through broken skin or unprotected mucous membranes with a sick person's blood or body fluids. It also spread through contact with contaminated objects or infected animals, for example, through processing of bush meat. The incubation period, from exposure to when signs or symptoms appear, ranges from 2 to 21 days, with an average of 8 to 10 days.

The current EVD outbreak began in Guinea in December 2013. This outbreak now involves transmission in Guinea, Liberia, Sierra Leone, Nigeria as well as an imported a case in Senegal. A separate outbreak of Ebola is also going on in DRC.

The current outbreak is the largest EVD outbreak ever recorded surpassing recorded cumulative figures in the past 40 years since the history of the outbreak.

Ebola virus disease outbreaks can devastate families and communities, but the infection can be controlled through the proper case detection, the use of recommended infection prevention measures at health care settings, gatherings and at home.

Ethiopia has not reported any Ebola cases so far.

As early detection and containment of suspected cases is the key to prevent introduction of the disease into currently unaffected countries, Ethiopia started the implementation of the following activities to prevent the introduction as well as to prepare for proper management of cases in case the diseases introduced. All the activities being taken by Ethiopia is based on WHO recommendations.

1. Ethiopia did not stop flights to West Africa and did not ban travel from and to affected countries. Ethiopian Airlines operational on daily basis to Nigeria, DRC, Senegal and other unaffected countries like Ghana, Mali, Togo etc.
2. Screening of travelers is being implemented at the country of origin and in Addis Ababa. Therefore all passengers travelling on any carrier from the above countries will be screened for temperature using infrared thermometers at Bole International Airport, Addis Ababa.
3. Passengers who have high temperature (38°C) will further be seen by a trained Doctor at the airport for the risk of Ebola exposure based on the standard (WHO and CDC) Ebola case definition. If no risk the person is allowed to go. If low risk the person will be allowed to go but with advise and continuous follow up by health team. If the person is