



Frequently Asked Questions About Ebola

Do we expect more Ebola cases in the United States?

Possibly. As the outbreak in West Africa grows, the likelihood that infected, asymptomatic international travelers will be diagnosed with Ebola in the U.S. increases as well. It is critical that all health care providers, and especially those working in urgent care clinics and emergency rooms, be ON ALERT for potential Ebola suspects. Every single international traveler presenting to a healthcare center must be screened for a travel history to West Africa within the past 21 days.

What is the status of the Ebola outbreak in West Africa?

This is the largest Ebola outbreak in the history of the world and it continues to escalate on a weekly basis. Predictions of numbers of future cases are worrisome. There countries involved in the outbreak are Senegal, Liberia, Sierra Leone, Guinea, and Nigeria.

Were public health experts surprised by the diagnosis of Ebola in the United States?

No. Given the growing outbreak in West Africa and the number of international travelers to the United States, this was not unexpected. The incubation period for Ebola is 21 days, so routine screening protocols established at airports in West Africa for travelers leaving Ebola-endemic regions will not detect individuals who have been infected but are still asymptomatic.

Is Ebola now being spread from person to person in the United States?

No, and this is unlikely in the future. The strong infrastructure of public health and the health care system in the U.S. would quickly stop transmission of Ebola, just as it stops transmission of many other communicable diseases. One of the core functions of public health in the U.S. is to isolate or quarantine potentially infectious persons and this strategic approach is currently being used in Texas. Underdeveloped countries with weaker public health infrastructure are more vulnerable to the spread of communicable diseases such as Ebola, as they lack the resources and strategic plans to immediately and aggressively contain the virus. We are absolutely confident that Ebola will not gain a stronghold in the U.S.

If health officials are so confident that Ebola won't be a problem in the United States why is it such a problem in West Africa?

Many victims aren't receiving care until they're very sick. Hospitals there aren't as good at keeping health workers protected from illness. And there's a cultural tradition where loved ones touch the body of a dead family member, putting the family at risk of infection.

If I recently visited West Africa and I feel ill, do I have Ebola?

If you recently visited one of these countries and had contact with someone infected with Ebola, you should visit your doctor and discuss your travel history. If you visited one of these countries, but you did not have contact with anyone infected with Ebola, you should take your temperature twice a day. If you get a fever or other symptoms within 21 days of your return to the US, visit your doctor and discuss your travel history.

How is Ebola spread?

The virus is spread person-to-person through direct contact with bodily fluids including blood, urine, sweat, and semen. The incubation period ranges from 2-21 days. Patients transmit the virus while febrile and through later stages of the disease. The virus is not believed to be shed during the incubation period (prior to symptoms developing). It is not believed to be spread by the airborne route, with the exception of aerosol-generating medical procedures.

Is there a specific treatment for Ebola?

No. Treatment is supportive care.

Is there a vaccine against Ebola?

No.