

# MEDICAL HEALTH OFFICERS **ALERT** FOR PHYSICIANS

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## Health Alert: Ebola disease outbreak in the Democratic Republic of Congo

There is a recent outbreak of Ebola Virus Disease (EVD) in the Democratic Republic of Congo (DRC). As of May 20, 2018, a total of 51 cases of haemorrhagic fever have been reported in the region, including 28 confirmed, 21 probable and 2 suspect cases. **There have been no cases of EVD in Canada and the risk to most travelers is considered very low.**

## Action and Advice

Should an individual with a recent history of travel to the Democratic Republic of Congo present to a health care provider and Ebola is considered to be in the differential diagnosis, we recommend the following course of action:

- Place the patient in isolation with enhanced droplet contact precautions  
<http://insidenet.interiorhealth.ca/Clinical/CDunit/Ebola%20Documents/IH-EOC-EVD-086%20Enhanced%20Droplet%20Contact%20Precautions%20Sign.pdf>
- Contact the on-call Medical Health Officer (1-866-457-5648) and the on-call Medical Microbiologist through the KGH/RIH switchboard
- The Medical Health Officer will convene an immediate teleconference between the health care provider(s), the Provincial Health Officer, the IH Medical Microbiologist and the BCCDC Medical Microbiologist, and provide an immediate risk assessment as well as guidance about how the patient should be managed

## Background on EVD

Ebola virus disease is a severe disease that causes haemorrhagic fever in humans and animals. Diseases that cause haemorrhagic fevers, such as Ebola, are often fatal as they affect the vascular system which can lead to significant internal bleeding and organ failure.

The Ebola virus can spread through:

- Contact with infected animals
- Contact with blood, body fluids or tissues of infected persons
- Contact with medical equipment, such as needles, contaminated with infected body fluids

**NOTE:** Airborne transmission has not been documented as a mechanism of person-to-person spread.

The incubation period of EVD varies from 2 to 21 days - there is no risk of transmission during the incubation period. Cases are not considered to be infectious before the onset of symptoms, however, communicability increases with each stage of illness. The case remains communicable as long as blood and body fluids contain the virus. This includes the post-mortem period.

Clinical symptoms of Ebola present as a severe acute viral illness consisting of sudden onset of fever, malaise, myalgia, severe headache, conjunctival infection, pharyngitis, vomiting, diarrhea that can be bloody, and impaired kidney and liver function. Diagnosis can be difficult, especially if only a single case is involved.

Often a maculopapular or petechial rash may be present that may progress to purpura. Bleeding from gums, nose, injection sites and gastrointestinal tract occurs in about 50% of patients. Dehydration and significant wasting occur as the disease progresses.

In severe cases, the haemorrhagic diathesis may be accompanied by leucopenia; thrombocytopenia; hepatic, renal and central nervous system involvement; or shock with multi-organ dysfunction.

### **Suggested Resources**

Information on the global situation:

<http://www.who.int/csr/don/archive/disease/ebola/en/>

<https://www.promedmail.org/post/5812835>

National and provincial guidance documents:

<https://www2.gov.bc.ca/gov/content/health/about-bc-s-health-care-system/office-of-the-provincial-health-officer/current-health-topics/ebola>

<http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-professionals-professionnels-eng.php>

Background on Ebola:

<http://www.bccdc.ca/health-info/diseases-conditions/ebola>

<http://www.phac-aspc.gc.ca/id-mi/vhf-fvh/ebola-eng.php>