

Advice for healthcare workers, including humanitarian aid workers, returning to or coming to Ireland following travel from an area affected by the Ebola Virus Disease (EVD) outbreak

What is Ebola virus disease (EVD)?

Ebola is a severe, infectious, often-fatal disease in humans and nonhuman primates (monkeys, gorillas, and chimpanzees) caused by infection with Ebola virus. Ebola virus does not transmit through the air as influenza does. There is currently an extensive, ongoing outbreak of Ebola virus disease in **Guinea, Liberia, Sierra Leone and Nigeria**.

How is it spread?

The natural reservoir of the virus is unknown and it is not always clear how the virus first appears in humans. Usually the first person gets infected through contact with an infected animal.

Ebola Virus Disease is transmitted by:

- Direct exposure to the blood or body fluids, of a dead or living infected person or animal
- Injury from needles and other sharp implements contaminated by the blood of a dead or living infected person or animal
- Direct exposure through broken skin or mucous membranes (e.g. in the mouth, under eyelids) to environments/items that have become contaminated with an Ebola patient's infectious fluids such as soiled clothing, bed linen, or used needles.
- Contact with body fluids includes unprotected sexual contact with an Ebola case up to three months after they have recovered.

What is the Incubation Period?

The incubation period (the interval between being in contact with an infected person and developing symptoms of disease) varies between 2-21 days.

What are the signs and symptoms of EVD?

Early signs and symptoms of EVD are

- Fever
- Joint and muscle aches
- Headache
- Sore throat

These may then be followed by:

- Nausea and vomiting
- Progressive weakness
- Stomach pain
- Diarrhoea
- Skin rash
- Red eyes, hiccups and bleeding from body orifices may also be seen

Can Ebola virus survive in the environment?

Ebola viruses can survive in liquid or dried material for a number of days. However Ebola is inactivated by soap, machine washing at higher temperatures, heating for 60 minutes at 60°C or boiling for 5 minutes, household bleach and most disinfectants.

NB: Freezing or refrigeration will **not** inactivate Ebola virus.

What activities are not dangerous?

If you have been in an affected country, it is important to bear in mind that Ebola is **not** transmitted by:

- Casual contact in public places with people who do not appear to be sick
- Handling money
- Handling groceries
- Swimming in a swimming pool
- Mosquitoes **do not transmit** the Ebola virus.

Do healthcare and aid workers returning from an Ebola Virus Disease (EVD) affected area pose a risk to patients, other staff or others in general?

Only people who are displaying symptoms of EVD pose any risk of infection. If someone has come from an EVD affected area and they are asymptomatic, they do not pose a risk to others. If the person had known contact with an EVD patient or the remains of someone who died of EVD, they should monitor themselves as set out in this information sheet. There is no quarantine for EVD contacts.

Should returning healthcare and aid workers from EVD affected areas be monitored?

The following humanitarian aid workers and healthcare workers returning from working to contain the outbreak (whether in a healthcare facility or other capacity) **should phone their local Department of Public Health on their return** (see contact details below).

- People who had **casual contact** with an Ebola case (in the same room, in the patient's house, on airplane) but did not have any direct contact with the patient or his/her body fluids.
- People who had direct contact with an Ebola patient or his/her body fluid **while wearing appropriate personal protective equipment (PPE)**.
- People who had **unprotected direct contact** (i.e. without wearing PPE).with skin or mucous membranes of an Ebola patient or to potentially infectious blood or body fluid

Other healthcare workers and aid workers who had **no contact** with EVD patients or articles potentially contaminated by them do not need to phone Departments of Public Health.

Contact details for the Departments of Public Health are as follows:

| HSE area | Phone Number (Office hours) |
|------------|-----------------------------|
| East | 01 635 2145 |
| Midlands | 057 935 9891 |
| Midwest | 061 483 338 |
| North East | 046 907 6412 |
| North West | 071 985 2900 |
| South East | 056 778 4142 |
| South | 021 492 7601 |
| West | 091 775 200 |

The type of monitoring required depends on the type of contact that the healthcare or aid worker has had with EVD when in the affected countries. See the table below for a summary of actions and advice.

Table 1: Monitoring required based on the type of contact that the healthcare or humanitarian worker has had with EVD while in the affected countries

| Contact Risk Category | Description | Actions/Advice |
|---------------------------|---|--|
| No Risk Exposure | People who have had casual contact only, such as sharing a room, same airplane, or visited home without direct contact with the patient or body fluids. | No further action is needed as they are not at risk. However, they can call their local Department of Public Health if they have any concerns or are worried. If they become ill within 21 days of return, they should contact their doctor for assessment and let him/her know of their recent travel history |
| Low Risk Exposure | People who had: <ul style="list-style-type: none"> • Direct (close) contact with the patient such as living with the patient, skin to skin contact (e.g. hugging, shaking hands) • Routine medical/nursing care, transport of patient, or handling of clinical/laboratory specimens - while using appropriate precautions and PPE. | Contact local Public Health Department by phone. The local Department of Public Health will advise the following: <ol style="list-style-type: none"> 1. The contact self-monitors for fever and other symptoms compatible with EVD for 21 days following last contact with the patient/fomite. 2. Report to local Public Health Department using specific number provided, if temperature rises > 38^oC. There is no need for Low Risk individuals to remain off work or restrict travel. |
| High Risk Exposure | People who have had: Unprotected exposure of skin or mucous membrane (e.g. mucosal exposure to splashes, needlestick injury) to potentially infectious blood or body fluids, including unprotected handling of clinical/laboratory specimens, or at autopsy, resuscitation <ul style="list-style-type: none"> ○ Kissed or had sexual intercourse with the patient ○ Direct contact with the patient's blood, urine or secretions. | Contact local Public Health Department by phone. The local Department of Public Health will advise the following: <ol style="list-style-type: none"> 1. The contact looks out for symptoms, and records his/her own temperature twice daily for 21 days following last contact with the patient/fomite and is required to report to his/her local Public Health Department at an agreed time every day (by phone), with further evaluation as necessary. 2. There is no need for High Risk Contacts to remain off work or restrict travel in Ireland unless they suffer a rise in temperature above 38^oC when they will require immediate medical assessment as a suspected EVD case. |

Can healthcare and aid workers returning from an EVD affected area return to work?

There is no need for contacts to remain off work unless they suffer a rise in temperature above 38^oC when they will require immediate evaluation as a suspected EVD case.

Further information on Ebola Virus Disease is available on the HPSC website, www.hpsc.ie

[Information for healthcare professionals](#)

[Information for the public](#)