

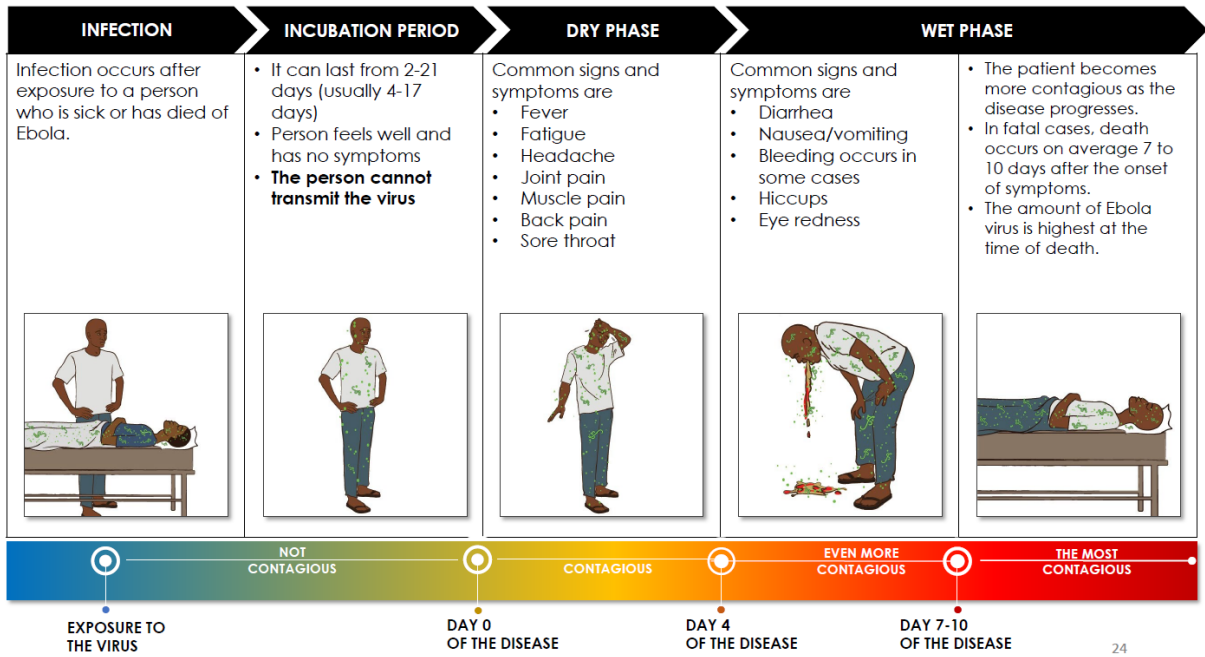
10/19/2022

* NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.

Update on Outbreak of Ebola Virus Disease (Sudan Ebolavirus) in Uganda

Actions Requested:

- **Be aware** of the ongoing outbreak of Ebola Virus Disease (EVD, Sudan ebolavirus) in Uganda which began in September 2022
- **Counsel patients traveling to Uganda** on the risks of Ebola Virus Disease and Centers for Disease Control and Prevention (CDC) recommended actions to prevent transmission. CDC Ebola guidance for travelers can be found here: <https://wwwnc.cdc.gov/travel/notices/alert/ebola-in-uganda>
- **Review the signs and symptoms of Ebola Virus Disease and obtain a thorough travel history** for all patients with compatible symptoms for the 21 days preceding illness



Adapted from Update on 2022 Ebola Outbreak in Uganda (CDC)

- **Consider EVD in patients with compatible signs and symptoms AND possible EVD exposure within 21 days prior to sign or symptom onset. Ebola virus is spread through direct contact with:**
 - Blood or body fluids (urine, saliva, sweat, feces, vomit, breast milk, amniotic fluid, and semen)

10/19/2022

- Objects (clothes, bedding, needles, and medical equipment) contaminated with body fluids from a person who is sick with or has died from EVD
- Semen from a man who recovered from EVD (through oral, vaginal or anal sex). There is no evidence the virus can be spread through sex or other contact with vaginal fluids from a woman who has recovered from EVD.
- Infected fruit bats or nonhuman primates
- **Place suspect EVD patients in a private room (with the door closed) and immediately notify Thurston County Public Health and Social Services of all suspected cases of Ebola Virus Disease by calling 360-867-2500 Monday-Friday 8am-5pm or after hours by calling 1-800-986-9050.**
- Collect blood samples from patient suspected of EVD. Virus is usually detectable by RT-PCR from 3-10 days after symptom onset.
 - Collect whole blood with EDTA in plastic containers
 - For adults, collect minimum 4mL
 - For pediatric patients, collect minimum 1mL
 - Do not separate or remove serum or plasma from primary collection container
 - Call Thurston County Public Health at 360-867-2500 Monday- Friday 8am-5pm or after hours at 1-800-986-9050 for testing approval
 - Route specimens to WA Public Health Laboratories
- Treatment with aggressive supportive care can improve patient chance of survival. Currently there are no FDA-approved vaccines or therapeutics for Sudan ebolavirus.
 - Maintain hydration through oral or intravenous fluids
 - Use medication to support blood pressure, reduce vomiting and diarrhea, and to manage fever and pain
 - Treatment of secondary infections and pre-existing conditions
- Review healthcare facility infection prevention and control protocols to identify and manage patients with possible EVD
 - Document a thorough travel history for all patients to identify diseases like EVD that need specific infection control precautions and/or treatment
 - Evaluate patients who have consistent signs and symptoms AND risk factors for EVD

10/19/2022

- Identify patients with fever and other signs and symptoms of infection that might warrant isolation pending further medical evaluation
- Post contact information for infection control personnel and the local public health jurisdiction in highly visible locations for rapid reporting of EVD
- Ensure recommended PPE is worn when evaluating and caring for a person under investigation for EVD. Centers for Disease Control and Prevention PPE guidance for EVD can be found here: [Personal Protective Equipment \(PPE\) | Public Health Planners | Ebola \(Ebola Virus Disease\) | CDC](#)

Adapted with gratitude from Seattle King County Public Health
<https://kingcounty.gov/depts/health/communicable-diseases/health-care-providers/advisories/2022/11-oct.aspx>

Background:

On September 20, 2022, the Ministry of Health of Uganda officially declared an outbreak of EVD due to Sudan virus (species Sudan ebolavirus) in Mubende District, Central Uganda. The first confirmed case of EVD was a 25-year-old man who lived in Mubende District and quickly identified as a suspect case of viral hemorrhagic fever (VHF) and isolated in the Mubende Regional Referral Hospital. Blood collected from this patient tested positive for Sudan virus by real-time reverse transcription polymerase chain reaction (rRT-PCR) on September 19, 2022, at the Uganda Virus Research Institute (UVRI). The patient died the same day, and a supervised burial was performed by trained staff wearing proper personal protective equipment (PPE). Further investigation into this case revealed a cluster of unexplained deaths occurring in the community during the previous month. As of October 6, 2022, a total of 44 confirmed cases, 10 confirmed deaths, and 20 probable deaths of EVD have been identified in Uganda. This is the fifth outbreak of EVD caused by Sudan virus in Uganda since 2000. The current outbreak is in the same area as Uganda's most recent EVD outbreak caused by Sudan virus, which occurred in 2012. During the 2012 outbreak, limited secondary transmission was reported, and the outbreak was effectively contained.

As of October 19, 2022, no suspected, probable, or confirmed EVD cases related to this outbreak have yet been reported in the United States. The purpose of this Communicable Disease Update is to raise awareness of this outbreak. Healthcare providers should be alert for and evaluate any patients suspected of having EVD, particularly among people who have recently traveled to affected areas in Uganda.



10/19/2022

Resources:

- [HAN: Outbreak of Ebola virus disease \(*Sudan ebolavirus*\) in Central Uganda September 2022 Uganda | Ebola \(Ebola Virus Disease\) | CDC](#)
- [For Clinicians | Ebola \(Ebola Virus Disease\) | CDC](#)
- [Screening Patients | For Clinicians | Ebola Virus Disease | CDC](#)
- [Personal Protective Equipment \(PPE\) | Public Health Planners | Ebola \(Ebola Virus Disease\) | CDC](#)
- [Laboratory Testing | Ebola \(Ebola Virus Disease\) | CDC](#)
- [Signs and Symptoms | Ebola Hemorrhagic Fever | CDC](#)
- [Transmission | Ebola Hemorrhagic Fever | CDC](#)
- [Infection Prevention and Control Recommendations for Hospitalized Patients Under Investigation \(PUIs\) for Ebola Virus Disease \(EVD\) in U.S. Hospitals | Ebola Virus Disease | Clinicians | Ebola \(Ebola Virus Disease\) | CDC.](#)
- [Interim Guidance for U.S. Hospital Preparedness for Patients Under Investigation \(PUIs\) or with Confirmed Ebola Virus Disease](#)
- [Interim Guidance for Environmental Infection Control in Hospitals for Ebola Virus Procedures for Safe Handling and Management of Ebola-Associated Waste](#)

THANK YOU FOR REPORTING

TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting non-immediately reportable conditions (24 hours a day)	Phone: 360-786-5470 Fax: 360-867-2601 Fax: 833-418-1916
Day time immediately reportable conditions – Call detailed information to the 24-hour Notifiable Condition Reporting Line at 360-786-5470. Messages are picked up hourly. If a call back can't wait call 360-867-2500 and ask staff to locate a Communicable Disease staff.	Phone: 360-786-5470
After hours immediately and 24-hour reportable conditions or a public health emergency	Call 1-800-986-9050
No one is available with Thurston County Public Health and condition is immediately notifiable	1-877-539-4344

Communicable Disease Updates are posted online at: <http://bit.ly/CDUpdatePHSS>