

Ebola: Frequently Asked Questions

Updated October 14, 2014

- There is an Ebola outbreak in the West African countries of Guinea, Liberia and Sierra Leone.
- There have been no cases of Ebola in Kansas.

What is Ebola?

- Ebola is a serious, often deadly disease, mostly found in Africa, caused by a virus that can occur in humans and some animals.
- Symptoms of Ebola usually appear 8-10 days after coming into contact with body fluids of someone infected with Ebola who is showing symptoms, but can appear up to 21 days after exposure.
- Symptoms include:
 - Fever
 - Headache
 - Joint and muscle aches
 - Weakness
 - Diarrhea
 - Vomiting
 - Stomach Pain
 - Lack of appetite
 - Abnormal bleeding

How do people get Ebola?

- Ebola is spread by direct contact with bodily fluids (blood, vomit, urine, sweat, breast milk) of someone who is infected with Ebola and is showing symptoms or someone who has recently died of Ebola.
- Ebola can only be spread from one person to another when the person infected with Ebola is showing symptoms.
- Ebola is not spread through water, air or food.
- Ebola is not spread through casual contact.

Who can spread Ebola to others?

- For a person to spread Ebola to others, they must have:
 1. Been in areas within the last 21 days where Ebola disease is occurring, **AND**
 2. Been in contact with the blood or body fluids (blood, vomit, urine, sweat, breast milk) of a person with Ebola who is showing symptoms or a person who has recently died from Ebola, **AND**
 3. Developed Ebola symptoms.

What would Kansas do if there was a case of Ebola?

- Healthcare workers in Kansas are on alert to identify people who have traveled to the West African countries where the Ebola outbreak is occurring and who are showing symptoms of Ebola.
- All hospitals in Kansas are equipped with the standardized and effective infection control measures required to control and contain Ebola.
- A hospital would isolate the patient in a single room, with a private bathroom. The door to the room would be closed at all times and visitors would be limited to healthcare workers.
- Healthcare workers providing care would protect themselves with protective equipment (gloves, gowns, masks and other equipment).
- All disposable medical equipment would be packaged and disposed of following hazardous waste practices. Non-porous durable medical equipment can be cleaned and disinfected with a U.S. EPA-registered hospital disinfectant.

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- Infectious disease investigations would occur to identify people who have come in contact with the Ebola patient or their bodily fluids while they were showing symptoms. People identified would be monitored for a fever.

Is it safe to travel overseas?

- Yes, it is safe to travel overseas.
- If you are planning on traveling outside the United States, check the CDC's Travelers' Health website for updates on travel notices: <http://wwwnc.cdc.gov/travel/notices/>.

Should I avoid contact with someone who has recently traveled to West Africa?

- No, you do not need to avoid casual contact with someone who has recently traveled to a country where an Ebola outbreak is occurring.
- Ebola is spread through direct contact with bodily fluids (blood, vomit, urine, sweat, breast milk) of someone showing symptoms of Ebola.
- A person who recently traveled to West Africa and has symptoms of Ebola should contact their healthcare provider and tell them about their travel history. Healthcare providers will evaluate their risk for Ebola as well as other more common infections of West Africa such as malaria and typhoid.

How is Ebola treated?

- There is no specific medication that cures Ebola and no vaccine to prevent it.
- Treatment of an Ebola patient is supportive, meaning providing fluids, maintaining blood pressure, and providing blood transfusions as needed.

Where can I get more information about Ebola?

- Information about Ebola virus disease can be found on the Centers for Disease Control and Prevention website: www.cdc.gov/vhf/ebola