Questions and Answers on Ebola

The current Ebola outbreak is centered on three countries in West Africa: Liberia, Guinea, Sierra Leone, although there is the potential for further spread to neighboring African countries. Ebola does not pose a significant risk to the U.S. public. The CDC is surging resources by sending 50 more workers to the area to help bring the outbreak under control.

What is Ebola?
Ebola virus is the cause of a viral hemorrhagic fever disease. Symptoms include: fever, headache, joint and muscle aches, weakness, diarrhea, vomiting, stomach pain, lack of appetite, and abnormal bleeding. Symptoms may appear anywhere from 2 to 21 days after exposure to ebolavirus though 8-10 days is most common.

How is Ebola transmitted?
Ebola is transmitted through direct contact with the blood or bodily fluids of an infected symptomatic person or through exposure to objects (such as needles) that have been contaminated with infected secretions.

Can Ebola be transmitted through the air?
No. Ebola is not a respiratory disease like the flu, so it is not transmitted through the air.

Can I get Ebola from contaminated food or water?
No. Ebola is not a food-borne illness. It is not a water-borne illness.

Can I get Ebola from a person who is infected but doesn’t have any symptoms?
No. Individuals who are not symptomatic are not contagious. In order for the virus to be transmitted, an individual would have to have direct contact with an individual who is experiencing symptoms.

Q: Are there any cases of individuals contracting Ebola in the U.S.?
No.

What is being done to prevent ill passengers in West Africa from getting on a plane?
CDC is assisting with active screening and education efforts on the ground in West Africa to prevent sick travelers from getting on planes. In addition, airports in Liberia, Sierra Leone and Guinea are screening all outbound passengers for Ebola symptoms, including fever, and passengers are required to respond to a healthcare questionnaire. CDC is also surging support in the region by deploying 50 additional workers to help build capacity on the ground.

What is CDC doing in the U.S.?
On the remote possibility that an ill passenger enters the U.S., CDC has protocols in place to protect against further spread of disease. These include notification to CDC of ill passengers on a plane before arrival, investigation of ill travelers, and, if necessary, isolation. CDC has also provided guidance to airlines for managing ill passengers and crew and for disinfecting aircraft. CDC has issued a Health Alert Notice reminding U.S. healthcare workers of the importance of taking steps to prevent the
spread of this virus, how to test and isolate suspected patients and how they can protect themselves from infection.

**What about ill Americans with Ebola who are being brought to the U.S. for treatment? How is CDC protecting the American public?**

CDC has very well-established protocols in place to ensure the safe transport and care of patients with infectious diseases back to the United States. These procedures cover the entire process -- from patients leaving their bedside in a foreign country to their transport to an airport and boarding a non-commercial airplane equipped with a special transport isolation unit, to their arrival at a medical facility in the United States that is appropriately equipped and staffed to handle such cases. CDC’s role is to ensure that travel and hospitalization is done to minimize risk of spread of infection and to ensure that the American public is protected. Patients were evacuated in similar ways during SARS.

**What does the CDC’s Travel Alert Level 3 mean to U.S. travelers?**

On July 31, the CDC elevated their warning to U.S. citizens encouraging them to defer unnecessary travel to Guinea, Liberia, and Sierra Leone over concerns that travelers may not have access to health care facilities and personnel should they need them in country.

For more information please see [this statement](http://www.cdc.gov) from the Department of State.