



October 10, 2014

Important Information on EVD for BC Physicians

With the recent reports of Ebola virus disease (EVD) in a nurse in Spain who cared for an Ebola case and a fatal case in a traveller to Dallas, Texas, the Office of the Provincial Health Officer is sending this update to BC physicians to explain what the province is doing to prepare.

Ebola virus disease

Ebola virus disease is a severe disease that causes hemorrhagic fever in humans and animals. Diseases that cause viral hemorrhagic fevers, such as Ebola, are often fatal as they affect the body's vascular system and can lead to significant internal bleeding and organ failure. Information on Ebola virus disease, including symptoms, prevention and treatment, is available at the [BC Centre for Disease Control](#) and the [Public Health Agency of Canada](#). The Ebola virus does not spread easily from person to person. It is spread through direct contact with infected bodily fluids, particularly blood, vomitus and feces. It is not spread through casual contact and there has been no human-to-human spread through respiratory droplets. An infected individual is contagious only once symptoms appear. Other illnesses are much more prevalent in this region and should also be considered (e.g. malaria). Ill patients require intensive supportive care and early treatment appears to improve survival significantly.

The current outbreak of EVD is in West Africa: specifically in Liberia, Guinea and Sierra Leone. While there have been introductions of cases from these countries into Senegal and Nigeria, both of these countries have had no new cases in over 21 days. For detailed information on the situation in Africa refer to the [World Health Organization](#) updates.

There have not been any cases of Ebola in Canada and the risk to people in BC remains very low. There are now airport screening measures in place in all the affected countries. In addition, measures have been implemented in airports in Canada to screen people who have travelled to the affected countries and travellers have been provided general information on what to do if they develop symptoms. It is possible that a traveler may present to a physician's office or to the emergency department with fever and other symptoms of EVD within the 21-day incubation period.

Provincial protocol

A protocol has been established in BC for all physicians **to immediately notify the local medical officer of health (MHO) if they suspect EVD in any patient.** If the patient is in a hospital, the hospital infection control/medical microbiologist should also be immediately contacted. While a risk assessment is being discussed with the MHO, the patient should be placed in a single room with the door closed or in an isolation room if available. Physicians must not send a patient suspected of having EVD to a community laboratory. The BC Ambulance Service is prepared to transport patients to emergency departments. If the patient is able to travel by private vehicle, the emergency department must be notified ahead of time.

In both the US and Spanish cases, the patient was sent home early on in the course of illness. If someone has a travel history to an affected country within 21 days and has a fever and other EVD symptoms, they must not be sent home. Physicians must contact the MHO and complete a detailed risk assessment for EVD first.

The BCCDC public health laboratory now has the capacity to conduct preliminary tests on patients for EVD. Any request for EVD laboratory testing must come through the regional/facility microbiologist to the BCCDC Public Health laboratory medical microbiologist on call (604-661-7033).

National and provincial guidance documents related to infection control, laboratory work-up, clinical guidance, public health management and notifications are posted on the [BC Ministry of Health](#) website. National documents can also be found on the [Public Health Agency of Canada](#) website.

The Office of the Provincial Health Officer, the BCCDC and regional health authorities will continue to collaborate within BC and both nationally and internationally as the EVD situation evolves. It is expected to take many more months before the situation in West Africa is controlled. Until that happens, the risk of importation of a case of EVD into BC remains a possibility, although remote. Physicians are encouraged to remain vigilant and connect with their health authority leads and their local MHOs if they have any concerns.

Sincerely,



Dr. Perry Kendall
Provincial Health Officer



Dr. Bonnie Henry
Deputy Provincial Health Officer