

# **Ebola Disease**

**April 2025**

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## 預防埃博拉(伊波拉)病

### Guard against Ebola disease

#### 埃博拉(伊波拉)病 Ebola disease

埃博拉(伊波拉)病是一種嚴重的急性病毒性疾病，其平均死亡率約為50%。患者可能出現發熱、疲勞、肌肉疼痛、頭痛、嘔吐、腹瀉、皮膚、腎臟和肝臟功能受損，在某些情況下更會出現內出血和外出血。

Ebola disease (EBOD) is a severe acute viral illness, with average case fatality rate of around 50%. Patients may have sudden onset of fever, intense weakness, muscle pain, headache and sore throat. This is followed by vomiting, diarrhoea, rash, impaired kidney and liver function, and in some cases, both internal and external bleeding.

#### 傳播途徑 Mode of transmission

病毒透過密切接觸受感染動物的血液、分泌物、器官或其他體液傳染人類。人體的血液和分泌物中只要含有此病毒，就可傳播疾病。

The virus is introduced into the human population through close contact with the blood, secretions, organs or other body fluids of infected animals. People are infectious as long as their blood and secretions contain the virus.

#### 治理和預防方法 Management and Prevention

本港目前沒有已註冊預防埃博拉(伊波拉)病的疫苗，及早補充水分及針對特定症狀的支持性療法可改善生存率。

There is currently no registered vaccine for EBOD in Hong Kong. Early supportive care with rehydration and symptomatic treatment improve survival.

要預防感染，必須注意以下數點：

To prevent infection, it is important to observe the following:



● 保持良好的手衞生  
Observe good hand hygiene



● 在開口、鼻或眼之前應先以清潔液或酒精洗手液清潔雙手  
Use liquid soap or alcohol-based handrub to clean your hands before touching the mouth, nose or eyes



● 妥善處理和覆蓋傷口  
Wound should be properly disinfected and covered



● 避免與發燒人士或病人有密切接觸，並避免接觸他們的血液、體液或可能受污染的物品  
Avoid close contact with feverish or ill persons, and avoid contact with patients' blood and body fluids, and objects contaminated with blood or body fluids of patients



● 食物須徹底煮熟才可進食  
Cook food thoroughly before consumption



衛生防護中心  
www.chp.gov.hk

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2833 0111



# Ebola disease (EBOD)

- Formerly known as Ebola haemorrhagic fever
- Causative agent: Ebola virus which belongs to the family *Filoviridae*.
- First appeared in 1976 in South Sudan and the Democratic Republic of Congo. The disease has appeared sporadically since then

# Ebola disease (EBOD)

- Confirmed cases of Ebola have been reported mainly in sub-Saharan Africa including the Democratic Republic of the Congo, Gabon, South Sudan, Cote D'Ivoire, Uganda, and Congo
- The Ebola outbreak which occurred in West Africa from March 2014 to January 2016 was the largest outbreak since 1976
- On and off Ebola outbreaks of various scales have been reported in the Democratic Republic of the Congo from 2017 to 2022. An Ebola outbreak was reported in Guinea in 2021. Ebola outbreaks caused by Sudan virus occurred in Uganda from September 2022 to January 2023, and from January to April 2025.

# Ebola disease (EBOD)

- Incubation period: ranges from 2 to 21 days
- Clinical features:
  - Sudden onset of fever, intense weakness, muscle pain, headache and sore throat
  - Vomiting, diarrhoea, rash, impaired kidney and liver function
  - In some cases, internal and external bleeding
- Case fatality rate in human is around 50% (varied from 25% to 90% in previous outbreaks)



# Mode of transmission

- The virus is introduced into the human population through close contact with the blood, secretions, organs or other body fluids of infected animals
- Some fruit bats are considered to be the natural host of the virus
- It then spreads in the community through human-to-human transmission, with infection resulting from:
  - Direct contact (through broken skin or mucous membranes) with the blood, secretions, organs or other body fluids of infected people
  - Indirect contact with environments contaminated with such fluids

# Mode of transmission

- People are infectious as long as their blood and secretions contain the virus
- Burial ceremonies in which mourners have direct contact with the body of the deceased person can also play a role in the transmission of EBOD
- Healthcare workers in affected countries have frequently been infected through close contact with patients suffering from EBOD when infection control measures are not strictly practised

# Mode of transmission

- Samples from patients are biohazardous and testing should be conducted under appropriate biological containment conditions
- Although rare, sexual transmission of EBOD has been reported



# Management

- Early supportive care with rehydration and symptomatic treatment improve survival
- Patients must be managed in isolation facilities to prevent the spread of the infection
- Patients are frequently dehydrated and require oral or intravenous rehydration

# Local situation

- Viral haemorrhagic fever, including EBOD, has been a statutorily notifiable infectious disease since July 2008
- No cases have been recorded in human or animals in Hong Kong so far.
- In case of notification of suspected cases, the CHP will immediately commence epidemiology investigation and follow-up

# Local situation

- Upon notification of suspected cases, CHP will:
  - Refer patients to the Infectious Disease Centre of the Hospital Authority for isolation, diagnosis and treatment; and
  - Collect specimens for laboratory testing and confirmation
- Upon laboratory confirmation, CHP will:
  - Trace close contacts, including corresponding flight passengers and attendants;
  - Put close contacts under medical surveillance and isolation; and
  - Send symptomatic close contacts for isolation and testing

# Prevention

- There is currently no registered vaccine for EBOD in Hong Kong
- Healthcare workers should put on appropriate personal protective equipment and adopt strict infection control measures when caring for suspected patients
- To prevent the infection, travellers who go to affected areas must observe the following:
  - Observe good personal and environmental hygiene
  - Avoid close contact with feverish or ill persons, and avoid contact with patients' blood and body fluids, and objects contaminated with blood or body fluids of patients
  - Avoid contact with animals
  - Cook food thoroughly before consumption



## Maintain good personal hygiene

- **Perform hand hygiene frequently.** Wash hands with liquid soap and water, and rub for at least 20 seconds. Then rinse with water and dry with a disposable paper towel or hand dryer, especially:
  - Before and after touching the mouth, nose or eyes
  - Before eating
  - After using the toilet
  - After touching public installations such as handrails or door knobs
  - When hands are contaminated by respiratory secretion after coughing or sneezing



# Hand hygiene

1. Wet hands under running water
  2. Apply liquid soap and rub hands together to make a soapy lather
  3. Away from the running water, rub hands according to the 7 steps of hand hygiene technique for at least **20 seconds** (**Palms, Back of hands, Finger webs, Back of fingers, Thumbs, Finger Tips, Wrists**). Do not rinse off the soap while rubbing
  4. Rinse hands thoroughly under running water
  5. Dry hands thoroughly with either a clean cotton towel or a paper towel
  6. The cleaned hands **should not touch the water tap** directly again. For example: using **a paper towel** to wrap the faucet before turn it off
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- If hand washing facilities are not available, or when hands are not visibly soiled, hand hygiene with 70 to 80% alcohol-based handrub is an effective alternative





# Travel advice

- Avoid unnecessary travel to affected areas
- Travellers returning from affected areas should observe closely their health condition
- Travellers should **seek medical advice promptly** if they become ill within 21 days after returning from affected areas and inform the doctor of recent **travel history**

# For more information about Ebola disease

- Please visit the Centre for Health Protection website  
<http://www.chp.gov.hk/en/features/34199.html>
- Please visit the website of Travel Health Service of the Department of Health for more information on travel health news  
<https://www.travelhealth.gov.hk/eindex.html>



# Thank you