



MEMORANDUM

To: Public Safety Subcommittee
From: Zuzzette Bricker, Office of Emergency Management Program Manager
Date: June 11, 2018
Subject: May 2018 Office of Emergency Management Report

Mission: The Office of Emergency Management is responsible for minimizing the impact of natural and man-made disasters by establishing readiness through city-wide prevention, preparedness, response, recovery and mitigation.

Current Preparedness Level: SEMS is the system required by Government Code §8607 (a) for managing response to multi-agency and multi-jurisdiction emergencies in California. SEMS provides for a multiple level emergency response organization and is intended to structure and facilitate the flow of emergency information and resources within and between the organizational levels.

PUBLIC HEALTH ADVISORY

The following is a Public health advisory which provides an update on the **Ebola Virus Disease (EVD)** outbreak in the Democratic Republic of Congo and contains related resource links and recommendations for local healthcare providers and anyone traveling in to the affected areas.

Situation Update

On May 8, 2018, the Ministry of Public Health (MOPH) of Democratic Republic of the Congo (DRC) declared an Ebola Virus Disease (EVD) Outbreak in the Bikoro Health Zone, Equateur Province, in Northwest DRC. The declaration was made after lab confirmation of two cases by Institut National de Recherche Biomedicale in Kinshasa, DRC. The current outbreak is in a remote, forested area of DRC, which makes it difficult to access the region.

Most of the cases in this outbreak have been reported in a remote rural area. However, four cases have been identified in Mbandaka, the provincial capital with a population of over 1 million people. The introduction of Ebola into an urban setting increases the risk of more widespread disease locally and exportation to other areas. The Ministry of Health (MOH) of the DRC, with support from the World Health Organization (WHO), is actively responding to the outbreak. In addition, a vaccine to prevent EVD is being deployed in the region.

Ebola Virus Disease

EVD is a rare but severe disease with a high mortality; recovery depends on good supportive care. The signs and symptoms of EVD include fever, severe headache, bleeding or bruising. Symptoms may appear anywhere from 2-21 days after contact with the virus. However, patients with other illnesses (e.g., influenza, malaria, typhoid fever) may present with similar symptoms. Ebola virus is spread by direct contact with body fluids. Spread in health care settings does occur and can be prevented with prompt identification of patients with relevant exposure history and signs or symptoms compatible with EVD, and meticulous implementation of infection control procedures.

Clinical criteria include fever >38.6 degrees Celsius or 101.5 degrees Fahrenheit, and additional symptoms such as severe headache, muscle pain, vomiting, diarrhea, abdominal pain, or unexplained hemorrhage, and epidemiologic risk factors within the past 21 days before the onset of symptoms. Risk factors include contact with blood or other body fluids or human remains of a patient known to have or suspected to have EVD; residence in or travel to an area where EVD transmission is active (currently defined as Democratic Republic of Congo); or direct handling of bats, rodents, or primates from disease-endemic areas.

Recommendations for Health Care Providers

- Healthcare and Emergency Medical System (EMS) providers should ask patients with acute, possibly infectious illness about recent travel. This information is very important for identifying possible causes of illness. International travel history should include all countries. Many infectious diseases (e.g., Zika, malaria, dengue) are more common in developing countries. However, some diseases that are rare in the U.S. (e.g., measles) are more common in Europe and other industrialized countries.
- Healthcare providers and facilities should routinely implement appropriate infection control procedures in all settings. If there is suspicion of EVD in a patient based on travel history and clinical presentation, EVD specific precautions should be taken.
- Healthcare providers who assess a patient who has traveled to the DRC and has symptoms of EVD should immediately isolate the patient in a private room with an in-room bathroom or covered bedside commode, and rapidly notify their local health department.

Reporting Suspect EVD Cases

Immediately report any person suspected of having Ebola Virus Disease to Disease Control. Business hours: (951) 358-5107. After Hours: (951) 782-2974 (ask for the Public Health Duty Officer).

For more information on EVD, please refer to the following:

- WHO: <http://www.who.int/ebola/situation-reports/drc-2018/en/>
- CDC: <https://www.cdc.gov/vhf/ebola/index.html>
<https://www.cdc.gov/vhf/ebola/clinicians/index.html>

Travel Recommendations/ Information

Centers for Disease Control and Prevention (CDC):

<https://wwwnc.cdc.gov/travel/destinations/traveler/none/democratic-republic-of-congo>

Updated as of May 28, 2018
Map of Ebola-Affected Health Zones in the
Democratic Republic of the Congo (DRC)



Advisory provided by the Riverside County Public Health Disease Control Branch
Kim Saruwatari, MPH, Director
Cameron Kaiser, MD, MPH, Public Health Officer
Tel. (951) 358-5107
Fax. (951) 358-5102