

Ebola Update: 28 October 2014

- The government of Australia has announced new immigration controls intended to protect public health, which include: no longer approving visa applications from the West Africa Ebola-affected countries; mandatory three week quarantine process prior to travel to Australia of holders of permanent Australia visas; and additional screening and follow-up checks upon arrival in Australia. The announcement has been met with surprise from the Australian Medical Association, which views the risk of the disease entering Australia through a migrant from the region as very low. The Immigration Minister, Scott Morrison, also announced Australia is suspending its humanitarian program.
- The CDC has issued a new system for categorizing risk using four levels: high risk, some risk, low (but not zero) risk and no identifiable risk. For each risk level there are details on exposure, clinical criteria and public health actions. The table can be viewed in full [here](#). In the US, the state government has primary responsibility for public health enforcement, but typically look to the CDC and National Institutes of Health for baseline recommendations and guidance. The recent policies and subsequent modifications by governors of Illinois, New Jersey and New York have underscored the differences that may emerge between US federal and state governments when attempting to address the threat of infectious diseases.
- The US Army has placed several asymptomatic members returning from the medical support mission in Liberia into quarantine at their base in Italy, including the former commanding general. None of the members reportedly had any contact with Ebola patients. This reflects differences of opinion even within the US federal government and may further cause erosion of public confidence on the risk of transmission. The US Army's actions with the returning soldiers is counter to existing Department of Defense policies. The current DOD policy on monitoring returning troops says, "as long as individuals remain asymptomatic, they may return to work and routine daily activities with family members."
- The New England Journal of Medicine (NEJM) has written a forceful editorial criticizing the recent public health policies issued by governors of Illinois, New Jersey and New York. The editorial suggests the governors are taking the wrong approach and that the potential threat posed by asymptomatic travelers returning from West Africa is misunderstood. NEJM indicates that the sensitive blood polymerase-chain-reaction (PCR) test for Ebola is often negative on the day when fever or other symptoms appear and only becomes reliable 2 to 3 days after symptoms appear. Those infected may not be contagious during this period because the levels of the virus in their blood are still very low. NEJM indicate this is supported by the fact that the family members of US patient Thomas Eric Duncan cared for him and lived in close proximity to him during the first several days of his symptoms and did not contract Ebola. To date all confirmed cases of transmission outside Africa have been to healthcare workers caring for hospitalized Ebola patients.

Clinics and Facilities Status in Affected Areas

Healix is in direct communication with those medical facilities that are still operating in the impacted regions. Please contact Healix directly for further information on the readiness of medical facilities in these areas.

Country Travel Advice Status

Sierra Leone: Warning Level 3 - Healix Recommend "Avoid Non-Essential Travel"
 Guinea: Warning Level 3 - Healix Recommend "Avoid Non-Essential Travel"
 Liberia: Warning Level 3 - Healix Recommend "Avoid Non-Essential Travel"
 DRC: Alert Level 2 - Healix Recommend "Practice Enhanced Precautions"
 Nigeria: Alert Level 1 - Healix Recommend "Practice Usual Precautions"

Other African Nations Unaffected by Ebola

Healix recommend that travelers take usual precautions with vaccinations and travel arrangements but should be familiar with [Ebola Precautions if Traveling to Africa](#).

Ebola Infection Table by Country (based on WHO and CDC reporting, updated as of 25 October):

Country	Suspected and Confirmed Case Count	Suspected and Confirmed Deaths	Laboratory Confirmed Case Count
Sierra Leone	3896	1281	3389
Liberia	4665	2705	965
Guinea	1553	926	1312
Nigeria	20	8	19
Spain	1	0	1
United States	4	1	4
Senegal	1	0	1
Spain*	2	2	2
United States*	5	0	5
Saudi Arabia*	0	1	0
Germany*	3	2	3
United Kingdom*	1	0	1
France*	1	0	1
Norway*	1	0	1
Mali*	1	1	1
DRC**	68	49	38
Total	10,222	4,976	5,743

*Persons repatriated to these countries from affected countries

**The Democratic Republic of Congo (DRC) outbreak is unrelated to the epidemic in West Africa