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California Health Advisory Update

Ongoing Ebola Outbreak in the Democratic Republic of Congo: Screening for International Travel in Persons with Possible Infectious Disease Remains a Best Practice

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The California Department of Public Health (CDPH), in collaboration with the U.S. Centers for Disease Control and Prevention (CDC), has been closely monitoring the Ebola Virus Disease (EVD) outbreak in the Democratic Republic of Congo (DRC). On August 1, 2018, an outbreak of EVD was declared in the North Kivu Province of the DRC. As of July 15, 2019, there have been 2,512 confirmed and probable EVD cases, and 1,676 deaths per the DRC Ministry of Health. Outbreak response remains hindered by armed conflict in the region. The outbreak is ongoing with cases now in two large cities in the DRC, including Goma, a city of two million on the border with Rwanda. There have been cases exported to Uganda, but no local transmission has occurred: the outbreak there is currently contained.

On July 17, 2019, the World Health Organization (WHO) declared a Public Health Emergency of International Concern (PHEIC) for EVD in the DRC, signifying that the outbreak is considered an extraordinary event constituting a public health risk to other States, with the potential for international spread of disease, and requires a coordinated international response. For all countries, WHO has recommended to not close borders or impose travel or trade restrictions, and specifically, that entry screening at airports or other ports of entry outside the region is unnecessary.

The CDC continues to recommend that state and local public health review their EVD response plans, including communication plans with local health care providers. Currently, the CDC does not have an active surveillance program for returning travelers but continues to recommend self-monitoring for possible EVD symptoms in persons returning from the outbreak area. Additionally, the CDC has implemented processes with non-governmental agencies that are working in the DRC to have monitoring programs for their workers. These agencies have been notifying CDPH when workers return to California. In these cases, CDPH has worked in collaboration with local health departments to obtain contact information, assess risk, and ensure self-monitoring for symptoms.

The risk for importation of Ebola virus into California remains very low but is not zero. Moreover, returning California residents and travelers from all over the world regularly

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introduce infectious diseases into the state. CDPH regularly receives reports of malaria, dengue, hepatitis A, measles, enteric illness, and a variety of other illnesses among persons with a history of international travel. Therefore, CDPH continues to remind healthcare providers in hospitals, emergency departments, and clinics to have protocols in place to ask patients with signs or symptoms of acute and possibly infectious illness about recent international travel.

CDPH continues to recommend the following:

For Local Health Departments (LHD):

- Immediately notify CDPH of any patients suspected of having EVD or other highly infectious illnesses due to special pathogens. Additional LHD guidance may be found in [CDPH Guidance for Suspect Ebola Virus Disease](https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/CDPHSuspectEbolaGuidance.pdf) (<https://www.cdph.ca.gov/Programs/CID/DCDC/CDPH%20Document%20Library/CDPHSuspectEbolaGuidance.pdf>), which includes recommendations for advanced planning.
- If a LHD becomes aware of a returning traveler from the affected region of the DRC, including persons who provided healthcare to EVD patients, interview the traveler and perform a risk assessment. CDPH is available to help with the risk assessment. Additional guidance from CDC is available on the [CDC Assessing Viral Hemorrhagic Fever Risk in a Returning Traveler webpage](https://www.cdc.gov/vhf/abroad/assessing-vhf-returning-traveler.html) (<https://www.cdc.gov/vhf/abroad/assessing-vhf-returning-traveler.html>). LHDs should notify the CDPH of all returning travelers from the affected regions.
- In the unlikely event of a returning traveler with a potential unprotected exposure, implement active monitoring and notify CDPH immediately to discuss whether other restrictions or assessments may be warranted. CDPH will assist with determination of need for laboratory testing and further clinical assessment at an Ebola Assessment or Treatment hospital.

For healthcare providers and facilities:

- Be prepared to identify, isolate, and notify the LHD regarding suspected EVD and other highly communicable infectious diseases.
- Healthcare and Emergency Medical System providers should routinely ask patients with signs or symptoms of acute and possibly infectious illness about recent travel. Travel history can inform necessary infection control measures if there is suspicion for an infectious disease, including EVD.
- If there is suspicion of EVD in a patient based on travel history and clinical presentation, take EVD specific precautions, including:
 - Immediately isolate the patient in a private room with in-room bathroom or covered bedside commode.
 - Rapidly notify the LHD, if not already done.

- Minimize the number of healthcare providers that contact the patient and limit their contact with the patient to providing essential patient care; rigorously document all healthcare provider contact with the patient.
- Additional guidance may be found on the [CDPH Ebola Information for Health Professionals webpage](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/EbolaHealthProfessionals.aspx#) (https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/EbolaHealthProfessionals.aspx#) and the [CDC Infection Prevention and Control Recommendations webpage](https://www.cdc.gov/vhf/ebola/clinicians/evd/infection-control.html) (https://www.cdc.gov/vhf/ebola/clinicians/evd/infection-control.html).

For travelers coming to California from areas with active Ebola virus transmission:

- Self-monitor for fever and other symptoms of EVD, which include severe headache, muscle pain, weakness, fatigue, diarrhea, vomiting, stomach pain, and unexplained bleeding during the 21 days after leaving an EVD affected area.
- Seek medical care immediately if you develop symptoms of EVD.
- Before going to the doctor's office, emergency room, or other clinical setting, contact the doctor or healthcare provider and inform them about the recent traveler and symptoms. This will help healthcare providers prepare their facility and protect other people.
- If you have questions about EVD symptoms or self-monitoring, contact your LHD.

For more information on EVD:

[CDPH EVD webpage:](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/EbolaVirusDisease.aspx)

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For more information on the current outbreak, please refer to the following:

[WHO EVD website:](https://www.who.int/ebola/en/) <https://www.who.int/ebola/en/>

[CDC EVD outbreaks webpage:](https://www.cdc.gov/vhf/ebola/outbreaks/index-2018.html) <https://www.cdc.gov/vhf/ebola/outbreaks/index-2018.html>