CDC'S ONGOING WORK TO CONTAIN EBOLA IN WEST AFRICA

FLARE-UPS OF EBOLA SINCE THE CONTROL OF THE INITIAL OUTBREAK

Ongoing vigilance, people and resources are essential to contain Ebola in West Africa. Seven documented clusters have occurred following control of the

epidemic. Recent outbreaks appear to be related to viral persistence in survivors.*

Rapid and coordinated efforts controlled all 7 flare-ups. CDC maintains a team of

75 staff in the countries affected by the epidemic to build public health capacity

and detect and respond to Ebola, and prevent another epidemic.



- 1 case
- 192 contacts
- CDC investigation concluded that the flare-up was likely due to sexual transmission

LIBERIA JUNE 2015

- 7 cases
- 126 contacts
- CDC staff supported complex contact tracing efforts in the community, among health care workers and motorcycle drivers
- SIERRA LEONE AUGUST 2015
 - 6 cases
 - 840 contacts
 - Sexual transmission suspected
 - CDC trained staff at >20 health care centers to implement infection prevention and control
- SIERRA LEONE SEPTEMBER 2015
 - 1 case
 - 780 contacts
 - CDC-led teams conducted extensive active case search in surrounding villages
- .IBERIA **NOVEMBER 2015**
 - 3 cases
 - 165 contacts
 - CDC led use of rapid diagnostic tests to increase rates of postmortem testing for Ebola in the outbreak area



- 2 cases
- >150 contacts
- CDC supported the response across 5 districts, including one where community resistance was a serious challenge
- SIERRA LEONE





* Growing information suggests Ebola virus can persist in some survivors for more than 18 months.



GUINEA & LIBERIA

MARCH 2016

- 13 cases
- •>1200 contacts
- Sexual transmission suspected
- CDC staff supported emergency response coordination at 5 command centers and 50 health care facilities, deployment of rapid tests, and vaccination of 1750 people at-risk



U.S. Department of Health and Human Services Centers for Disease Control and Prevention