



May 2017; 4(2):1-3

Editorial by Dr Anirban Sukul MSc,PhD,BHMS,DIHom(Lond)



Ebola (known earlier as Ebola haemorrhagic fever) is a rare condition. This condition occurs when an individual is exposed to the Ebola virus. It affects humans and non-human primates (apes, monkeys etc.) and is found almost exclusively in African countries. It derives its name from the Ebola river where it was first identified (in the year 1976), in the Democratic Republic of Congo. Since then there have been intermittent reports of this condition throughout Africa (Nzara and South Sudan).

Ebola outbreak

The recent epidemic of the infection is the largest outbreak of the Ebola virus since its discovery in 1976. It was spread by air or land travellers to other African countries such as – Guinea, Sierra Leone, Liberia, Nigeria, and Senegal. Further, the infection has been brought in through travellers to non-African countries as well such as the USA and Mali. Further, a few African countries have the poor and inadequate infrastructure and healthcare systems which further compounds the issue of infection management. The 2014 Ebola outbreak was declared a Public Health Emergency of

International Concern under the International Health Regulations (2005) on 8th August 2014.

Ebola Virus

The Ebola virus is suspected to be an animal-borne virus, occurring in bats native to Africa. Thus far, the infection has been reported only in humans, bats and non-human primates. Firstly, the infection is transmitted from an animal to a human being. It is then spread from one human to another. Ebola virus is not transmitted through air, water or food. Usually, the immune system and multiple organs are infected, and the infection is accompanied by bleeding. Consequently, there is a drop in the levels of blood cells. Patients, who contract Ebola and survive, usually develop immunity from this condition for about 10 years.



The Ebola contamination

1. Direct infection
2. By contact with body fluids of an infected individual (either dead or alive).

Indexed in:



May 2017; 4(2):1-3

Body fluids include blood, urine, saliva, feces, vomit, semen, etc. Needles, syringes, clothes and bedding that have contacted these body fluids can also cause infection. High-risk individuals include caretakers, hospital and lab personnel as well as family members of the infected individual.

3. Infection from affected bats and primates.

Signs of Ebola

Early on, it is challenging to diagnose a person affected with Ebola virus because symptoms overlap with other conditions such as malaria and typhoid. It is sensible to report to public health authorities if a person is at a suspected risk of contracting the virus. Such individuals need to be kept in isolation. Blood samples can then be collected to detect the virus. However, the virus can be detected in the blood only 3 days after infection.

Symptoms

Preliminarily, the following symptoms can appear:

- High fever
- Headache
- Muscle and joint ache
- Throat pain
- Weakening of muscles
- Loss of appetite

The above symptoms are followed by diarrhoea, vomiting, compromised liver and kidney

function, stomach pain and rash. Internal bleeding then follows.

Preventive Measures

As is always the case, prevention is better than cure while treating Ebola. The Ebola epidemic is now under control in Africa; however, the following precautions may be used while travelling to these countries:

1. Through and regular hand washing with soap and water or alcohol-containing hand sanitizer.
2. Avoid contact with blood or body fluids of infected individuals.
3. Avoid clinics and hospitals where Ebola patients are being treated.
4. Ensuring fruits and vegetables are thoroughly washed and peeled before consumption.
5. Avoiding contact with persons suspected of displaying signs of Ebola infection.
6. Avoiding dead animals or meat
7. Upon return to your home country, it is best practice to undergo health monitoring for 21 days and promptly enlist medical attention if you develop symptoms of Ebola.
8. Avoiding bushmeat (meat of wild animals).

Health care workers also need to take certain preventive measures:

1. Ensure use of personal protective equipment (or PPE) while treating patients.

Indexed in:





May 2017; 4(2):1-3

2. Follow appropriate sterilization and infection protocols.
3. Ensure you separate Ebola patients from other patients in the clinic.
4. Avoid unguarded contact with dead bodies of Ebola patients.
5. Immediately report to health authorities if you have been exposed to any body fluids of Ebola patients.

It may be noted that even after recovery, the Ebola virus only leaves the semen of infected men over time. Therefore, sexual contact needs to be avoided.

What Homeopathy can do with Ebola

Medicines should be selected according to the symptoms of the affected patients. Possible remedies are Bryonia, Rhus tox, Hepar sulph, Pulsatilla, Ipecac, Phosphorus, Natrum mur.

Medicines should change during the course of the treatment as the symptoms going to be changed. Low potencies are recommended.

References:

1. <https://www.cdc.gov/vhf/ebola/>
2. <http://www.nhs.uk/conditions/ebola-virus/Pages/Ebola-virus.aspx>
3. <https://www.niaid.nih.gov/diseases-conditions/ebola-marburg>
4. <http://www.who.int/mediacentre/factsheets/fs103/en/>
5. <http://www.medinfi.com/blog/trending-topics-in-healthcare/2017/02/22/ebola-signs-symptoms-prevention/>

Indexed in:

