 Ebola – what should Ship’s Masters be doing?

 **Background**

The current Ebola Virus Disease (EVD or ‘Ebola’) outbreak is believed to have begun in Guinea in December 2013. This outbreak now involves community transmission in Guinea, Liberia and Sierra Leone. Nigeria and Senegal have both now been declared free from Ebola.

On 8 August 2014, WHO declared the Ebola outbreak in West Africa a Public Health Emergency of International Concern (PHEIC) in accordance with the International Health Regulations 2005.

**Symptoms**

Symptoms of Ebola include fever, weakness, muscle pain, headache and sore throat. This is followed by vomiting, diarrhoea, rash, and in some cases, bleeding (external and internal). It is important to note that a person who is infected is only able to spread the virus to others after the infected person has started to have symptoms. A person usually has no symptoms for two to 21 days (the "incubation period").

**Risks**

Unlike infections such as influenza and tuberculosis, Ebola is **not** spread by breathing air (and the airborne particles it contains) from an infected person. Transmission requires direct contact with blood, secretions, organs or other body fluids of infected living or dead persons or animals, all unlikely exposures for seafarers, passengers and others on board ships in the normal course of their activities. Infections currently being reported in Liberia, Guinea and Sierra Leone are taking place in the community when family members or friends take care of someone who is ill or when funeral preparation and burial ceremonies do not follow strict infection prevention and control measures. Transmission can also occur in clinics and other health care settings, when health care workers, patients, and other persons have unprotected contact with a person who is infected. The risk of getting infected on a ship is small as sick persons usually feel so unwell that they cannot travel and, in any event, infection requires direct contact with the body fluids of the infected person. The risk of becoming infected with Ebola during a visit to the affected countries and developing the disease after returning is very low, even if the visit includes travel to areas in which cases have been reported.

**Precautionary measures**

In the event that a seafarer, passenger, or other person has stayed in the areas where EVD cases have recently been reported, he or she should seek medical attention at the first sign of illness (fever, headache, achiness, sore throat, diarrhoea, vomiting, stomach pain, rash, red eyes, and in some cases, bleeding). Early treatment can improve prognosis.

Any person with an illness consistent with Ebola, or any person who has had contact with, or is confirmed as having contracted Ebola, should not be allowed to join a ship or travel internationally unless that travel is part of an appropriate medical evacuation. In any event, all persons are advised to avoid such contacts and routinely practice careful hygiene, like thorough hand-washing.

International cooperation is necessary to support action to contain the virus and thus stop transmission to other countries and mitigate the effects in those affected. Affected countries are requested to conduct exit screening of all persons at international airports, seaports and major land crossings, for unexplained febrile illness consistent with potential Ebola infection. Non-affected countries need to strengthen the capacity to detect and immediately contain new cases, while avoiding measures that will create unnecessary interference with international travel or trade.

\* **Any person who has had direct contact with a person suffering from Ebola must not be allowed to join a ship.\***

**\*The risk to shipping is considered low, but awareness and preparedness will help to prevent spread of the disease.\***

**Ships Masters should:**

* Ensure that they are aware of the current situation regarding the disease, it’s spread and the methods of control;
* Raise awareness amongst the crew regarding the Ebola outbreak and the measures needed to prevent it getting on board the ship, along with the steps necessary to detect and contain it if necessary;
* If Ebola is suspected seek immediate medical opinion and report as soon as possible to the next port of call through your Maritime Declaration of Health to the Port Health Authority;
* Be aware that any crew member who may present with any infectious disease must be isolated in the medical area or crew cabin;
* Limit the number of crew coming into contact with the patient;
* Avoid direct contact if possible;
* Cover all abrasions or open wounds with a waterproof dressing;
* Provide all the necessary personal protective equipment (disposable gloves, disposable non-permeable gown to cover all clothing and exposed skin, medical mask, eye protection, suitable footwear and disposable overshoes);
* Train crew in how to put on, and more importantly, how to remove the personal protective equipment safely;
* Train crew in the correct methods of disposal of used personal protective equipment and any other infectious waste produced in the cabin or isolation room.
* Employ special precautions in disposing of any Ebola related clinical waste. The Port Authority should be informed of the need for disposal as soon as possible;
* Emphasise the need for good hand hygiene;
* Keep a detailed log of all persons who have had contact with the patient;
* Ensure adequate cleaning and decontamination of affected areas of the vessel using appropriate chemicals;
* In the event of a sick crew member a Maritime Declaration of Health must be submitted to the next port of call 4 to 12 hours before arrival.
* All vessels which have been in West Africa (including bunkering/supplies) during the 30 days before entering a UK Port must also submit a Maritime Declaration of Health.

**If visiting an Ebola affected area (Guinea, Liberia or Sierra Leone) ports:**

* No shore leave for crew should be granted. Avoid/minimise physical contact with locals ashore;
* Only essential visitors should be permitted on board. These should be screened prior to boarding;
* Access by visitors must be limited to the vessels office which should be decontaminated after each visit;
* Always wear face mask goggles and gloves when dealing with shore personnel (including Pilots);
* Do not buy food/provisions;
* Encourage hand hygiene;
* Do not have crew changes.
* The Master should prepare and complete a temperature chart to record the body temperature of all crew members for the time in port and for 21 days after departure;
* Check for stowaways regularly and prior to departure.

**Ebola assessment**

Algorithm to inform the initial assessment of crew/passengers by Ships Masters

**Does this person appear unwell? Symptoms to look out for include fever (e.g. pale skin, sweating or shivering) and weakness (e.g. unable to stand unsupported).**

If **no**, continue as normal

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If **yes,** ask these questions

**Has this person arrived from Guinea, Liberia or Sierra Leone or have they spent any time in these countries within the past 21 days?**

If **yes**, ask these questions

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**While in that country(ies), has this person:**

* **Come into contact with a person known or suspected to have Ebola?**
* **Cared for anyone with a severe illness, or who has died of an unknown cause?**
* **Attended any funerals or had any contact with any dead bodies?**
* **Visited any traditional healers or been admitted to hospital?**

If **no**, continue

as normal

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If **yes to any of these**

**questions**

**Ensure minimum contact with person and their belongings.**

**Isolate the person in the medical room or own cabin. (not shared)**

**Contact the local Infection Prevention and Control Team at the nearest port for advice**