

Social Issues

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# Stemping a deadly tide

The Ebola virus disease strikes fear into people's hearts, not only because of its high mortality rate, but also because it ravages the body of its victims in a horrible way. There have been regular outbreaks of the disease in the last four decades before now, but we still do not have a vaccine. Why has the world been doing so little to fight the spread of Ebola?

HE Ebola virus disease (EVD), also called Ebola hemorrhagic fever (EHF) or simply Ebola, was first identified in 1976. In that year, there were two **simultaneous** outbreaks, one in Sudan and the other in the Congo in a village near the Ebola River, which is how the disease got its name.

Since then, there have been outbreaks about once every two years, all confined to the African continent. One of the reasons the disease had not spread wider was because it kills its victims quickly, therefore limiting the chance of transmission.

# 2014: a different outbreak

BUT the latest outbreak is different. It has been called the worst ever, with already over 10,000 people in Africa infected with the Ebola virus, and thousands killed by the disease caused by the virus. Cases have also been reported, for the first time, in Western countries.

The outbreak started in February with the infection of a toddler with the Ebola virus, who died from EVD together with other members of his family who were also infected. Unfortunately, the family lived in an area where the borders of three countries – Guinea, Liberia and Sierra Leone – meet.

Some relatives and friends who went to the funeral were infected and took the disease back to their countries.

# Are cultural factors to blame?

EBOLA is introduced to humans through contact with infected animals, and passed on to other human beings via direct contact with bodily fluids such as blood and vomit. The virus is, so far, not airborne, meaning it cannot be transmitted just by a cough or a sneeze.

If patients had been isolated quickly, outbreaks could have been contained and should not have escalated to their present scale in just a few months. Some are blaming cultural practices as the culprit for the fast spread of the disease.

# A different understanding

VOLUNTEER doctors observed that voodoo is still practised widely in Africa, and many locals thought Ebola was caused by curses instead of viruses.

People with such erroneous beliefs chose to keep their sick relatives at home instead of sending them to hospitals promptly for treatment and isolation.

The consequences were depriving patients of timely medical attention, and exposing everyone in the same household, and even neighbours, to the the disease.

Also, many local people do not trust Western medicine. In some villages in Guinea, people actually thought the doctors were the agents spreading the disease. Naturally, they refused to grant entrance to the medical personnel.

And not knowing the risk of transmission, locals hugged and kissed the bodies of the deceased at their funerals.

# Western indifference

THE three countries most severely affected by the current outbreak Guinea, Liberia and Sierra Leone – are poverty-stricken and chronically ravaged by civil war. People lack proper education and their living conditions are unhygienic.

As Ebola outbreaks had, before 2014, been happening only in Africa and the affected regions mostly consisted of poor countries, the West has had little incentive to earnestly deal with them.

The situation could be very different had Western countries been threatened, as they were by smallpox or cholera. In those cases, drug companies were much more willing to devote mammoth amounts of research and money to creating a cure or vaccine.

Even as the current outbreak brought cases to the West for the first time, the reaction of the Western world was ludicrously pathetic. Columnist Scott Gilmore used the following analogy, "Imagine you are woken by your neighbours crying for help. You open a window to see their house on fire they have fled to the roof and are begging for a ladder. Instead of running to assist, you frantically change the batteries in your smoke detector before fainting from fright."



The Ebola disease first identified after an outbreak in a small rural village in the Democratic Republic of Congo, then known as Zaire.

2014

# **Early February**

Hemorrhagic fever epidemic breaks out in Guinea, West Africa.

# 31 March

US CDC sends five-member team to investigate the epidemic.

# Mid-June

Epidemic spreads to Nigeria capital Monrovia

# 27 July

Liberia closes border to curb outbreak.

# 8 August

WHO declares the epidemic an international public health emergency.

# 27 August

UN allocates US\$1.5 million (HK\$11.7 million) to help the Congo fight Ebola.

# 30 September

CDC confirms Duncan has Ebola; first case diagnosed in the United States.

# 23 Octobe

- All travellers coming to the United States from Ebola-affected areas actively monitored for 21 days.
- Mali reports its first confirmed case of Ebola in a child who had travelled there from Guinea

# 27 October

- US nurse Kaci Hickox, quarantined in New Jersey after returning from West Africa, released after testing negative for Ebola. Five-year-old boy who recently visited West Africa and had a
- fever is tested for the virus in New York

simultaneous (adj) 同時發生的

# Ebola 2014 outbreak timeline 1976

# 22 March

Guinea confirms hemorrhagic fever is Ebola.

# 23 May

Ebola virus reaches Guinea capital Conakry

# 25 July

Nigeria confirms its first fatal Ebola case.

# 31 July

Macau starts to evaluate and track travellers from the Ebola zone.

# 24 August

First Ebola case confirmed in the Congo

# 20 September

Liberian Thomas Eric Duncan flies from Liberia to Dallas after trying to help woman with Ebola in home country.

# 8 October

Duncan dies in Dallas hospital

# 24 October

Child in Mali case passes away



# Changing attitudes

IN the face of the largest Ebola epidemic in history, things are starting to change. The World Health Organization (WHO) is accelerating the process of vaccine development, and drug makers are compressing the process that usually takes years to weeks.

According to the WHO, a vaccine trial will start in West Africa in December. Millions of doses of experimental vaccines will be produced by the end of 2015.

WHO Assistant Director General Dr Marie Paule Kieny said, "Vaccines are not the magic bullet, but when ready, they may be a good part of the effort to turn the tide of the epidemic."

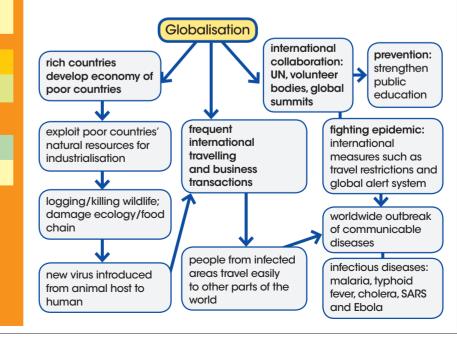
# International efforts needed

BUT the deadly tide is not easy to stop, and the prognosis is grim.

In September, the US Centers for Disease Control and Prevention (CDC) estimated up to 1.4 million people in West Africa may have Ebola by January 2015.

On the bright side, if one can call it that, the current Ebola outbreak has clearly awakened all countries in the world to the fact that, in the era of globalisation, no one is safe from a deadly communicable disease like Ebola.

And whether and when we can curb the Ebola epidemic now hangs on the collective efforts of the international community, particularly rich and powerful countries.



# Key ideas

The deadly Ebola virus disease was identified almost four decades ago but Western countries have not been keen on fighting it because it had been affecting only poor African countries. But attitudes have been changed by the latest outbreak, which is getting out of control in Africa and has seen cases reported in the West, with an experimental vaccine finally ready for human trials.

# Did you know?

The incubation period of the Ebola disease is two to 21 days, and humans are not infectious until they develop symptoms, which include the sudden onset of fever fatique. muscle pain, headache and sore throat, followed by vomiting, diarrhea, rashes and symptoms of impaired kidney and liver function, and in some cases both internal and external bleeding.

# Critical Questions:

- 1. Do you think Western countries have been slow to react to the threat of the Ebola disease?
- 2. What should be done to stem the Ebola epidemic?

### References:

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