

Advisory for families staying and travelers visiting / returning after visiting West African Countries affected with Ebola Virus Disease (EVD):

Brief description:

- Ebola virus disease is rare.
- Disease is spread by contact with body fluids of An infected person or a diseased animal or by coming in contact with contaminated objects.
- The disease is characterized by symptoms such as fever, weakness, muscle pain, headache and sore throat, followed by vomiting, diarrhea, rash and in some cases bleeding.
- Persons who come in direct contact of body fluids of infected person or infected animal are at risk.
- There is no vaccine or drugs.
- Implementation of supportive therapy may increase the chances of survival.
- Early detection, isolation of cases, contact tracing and monitoring of contacts and rigorous procedures for infection can prevent further outbreak.
- In view of the prevailing situation it is advisable to avoid / defer travel to countries affected with outbreak of Ebola Virus disease.

Advisory for Indian families staying in affected areas (including travelers visiting):

- Avoid all contact with suspect / confirmed cases of EVD and blood and body fluids of infected people or animals during your stay.
- Do not handle items that may have come in contact with body fluids of diseased person or infected animal during your stay.
- If you have been exposed to a suspected/confirmed Ebola cases, self-monitor health for occurrence of symptoms (like fever, weakness, muscle pain, headache, and sore throat, followed by vomiting, diarrhea, stomach pain, rash and red eyes) for 30 days.
- In case you suffer from any such illness, immediately isolate yourself from other family members and report to the designated health facility for prompt management.
- Follow simple public health measures (also when accidentally exposed) like:
 - **Hand hygiene** Wash hands with soap and water for at least 30 seconds after assisting ill travelers or coming in contact with body fluids or surfaces that may be contaminated.
 - An alcohol-based hand cleaner is an alternative to hand-washing but will not be effective if hands are visibly soiled.
 - Avoid touching your mouth, eyes, and nose with unwashed or gloved hands.
 - Staying away to avoid close contact
 - Use of tissues or face mask to prevent contact with respiratory secretions

Advisory for families and travelers returning to India:

- If you have stayed in the areas where Ebola cases have been recently reported, self-monitor your health for occurrence of symptoms (like fever, weakness, muscle pain, headache, and sore throat, followed by vomiting, diarrhea, stomach pain, rash and red eyes) for 30 days.
- If you develop symptoms before travel, defer your travel and report to health facility
- In case you develop symptoms on flight report to the airlines crew.
- After disembarkation report to airport health officer on.
- In case you suffer from any such illness after reaching home, immediately report to the nearest designated health facility for prompt management.

Advisory for Airlines on Ebola Virus Disease (EVD):

1. In flight announcement as below:

“In view of the current Threat of Ebola Virus Disease (EVD): which has high mortality and is currently reported in West African Countries, travelers who have any fever, weakness, muscle pain, headache, sore throat, vomiting, diarrhea, rash, bleeding should report immediately to the airlines crew and at the immigration/medical unit on arrival. This is important for early diagnosis for prompt management and preventing spread. In case any of these symptoms develop within 30 days of arrival in the country the traveler should seek medical assistance from the designated hospitals and also inform the airport health office.”

2. All airlines should keep
 - a. First aid kits, universal precaution kits as per the ICAO guidelines and
 - b. A stock of triple layer masks (25 Nos.), disposable hand gloves (around 25) hand sanitizer and disposal bags: these are to be used for any passenger reporting with symptoms of Ebola Virus Disease (EVD) and co-passengers who are likely to have contacted the disease.
 3. Assist the staff of Health unit at the airport during disembarkation for Contact tracing of travelers identified as suspect by providing Public Health Passenger Locator cards (as requested by the Airport Health officer).
3. Follow proper aircraft defection procedures (as recommended by WHO/ICAO)

Advisory for specific public health measures for travelers suspected of EVD:

- Distancing of other passengers if possible from the symptomatic passenger (re-seating); with the ill travellers preferably near a toilet, for his/her exclusive use.
- Covering nose and mouth of the patient with a surgical facemask (if tolerated).
- Limiting contacts to the passenger to the minimum necessary. More specifically, only one or two (if ill passenger requires more assistance) cabin crew should be taking care of the ill passenger and preferably seating the passenger in an

isolated corner with dedicated toilet and only the cabin crew that have already been in contact with that passenger. This cabin crew should be using the Universal Precaution Kit (see below).

- Hand washing with soap after any direct or indirect contact with the passenger.
- Immediate notification of authorities at the destination airport in accordance with procedures promulgated by the International Civil Aviation Organization (ICAO).
- Immediate isolation of passenger upon arrival.

Dedicated crew member to assist the ill traveller, should be using suitable personal protection equipment (PPE) such as that recommended by ICAO Universal Precaution Kit (<http://www.capsca.org/CAPSCARefs.html>) for dealing with the traveler and for cleaning procedures on board as needed.

The possibility of transmission to other co-passengers and crew on board the aircraft should be assessed by health care providers on arrival. If the investigation concludes that the passenger has symptoms compatible with EVD and had a risk exposure in affected countries in the past 21 days, passengers as well as crew members may be at risk if they have been in direct contact with body fluids or heavily contaminated objects.

The following epidemiological measures based upon proximity to the index patient should be considered:

- **Passengers and crew with reported direct contact**

To gather this information, any records of significant events on the flight should be obtained from the airline. Co-travellers and crew members who report direct body contact with the index case should undergo contact tracing.

- **Passengers seated in an adjacent seat to the index patient**

As direct contact is the main route of transmission for Ebola virus, only passengers who were seated in an adjacent seat to the index case on the side, in front or behind, including across an aisle, should be included in contact tracing.

- **Cleaning staff of affected aircraft section**

If the case is suspected or diagnosed after leaving the aircraft, the staff who cleaned the section and seat where the index case was seated should also undergo contact tracing.

At the request of airport or port health authority, airlines may also ask some or all passengers to provide information on their itinerary and their contact details where there is a particular reason to believe they may have been exposed to infection on board of aircraft (e.g. per the ICAO public health passenger locator form)¹.
