

# Debate rages on action to halt W. African Ebola epidemic (Update)

July 3 2014, by Nana Boakye-Yiadom

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West African ministers held emergency talks Thursday on containing the worst Ebola outbreak in history, hoping to halt the virus' deadly rampage after a jump in the number of deaths.

The highly-contagious tropical bug has infected hundreds of people in Guinea, Liberia and Sierra Leone, with the latest World Health Organization (WHO) figures showing that confirmed or suspected cases had left 467 people dead and experts fearing it could spread throughout the region.

Health ministers from 11 nations were due to finalise two days of talks in Accra with global experts in communicable diseases, with debate raging over the measures required to stop Ebola in its tracks.

Jeremy Farrar, a professor of tropical medicine and director of The Wellcome Trust charity, caused controversy as the talks opened as he was widely quoted in global media calling on health authorities to offer experimental medicines, not yet fully tested, to patients.

"Tragic as these deaths and suffering are, humans are not Guinea pigs," virologist Ian Mackay, associate professor at the University of Queensland, told AFP, rejecting the suggestion.

"It's a very difficult situation made worse by the urgency of it."

Several biotech companies and US universities are developing potential

vaccines for Ebola, at various stages of testing, but none anywhere in the world is close to being licensed for distribution to the public.

"The question is: would these drugs be allowed to be used on UK citizens?" Mackay said.

"If the outbreak occurred there, or in the US, or Australia, would this be ethically acceptable in these countries?"

There are five species of Ebola, three of which—Zaire, Sudan and Bundibugyo—can kill humans.

Zaire Ebola, the deadliest and the species behind the current outbreak, can fell its victims within days, causing severe fever and muscle pain, weakness, vomiting and diarrhoea—in some cases shutting down organs and causing unstoppable bleeding.

There have been 21 Ebola outbreaks—not including isolated cases involving only one patient—since the virus first spread to humans in the Democratic Republic of Congo, then known as Zaire, in 1976.

Before the current crisis, Ebola had killed 1,587 people, two-thirds of those infected, according to an AFP tally based on WHO data.

The death rate for Ebola has been widely but incorrectly reported as "90 percent" by global media and some scientists, probably because around that percentage died in the original outbreak and a subsequent epidemic in neighbouring Congo-Brazzaville in 2003.

## **'Out of control'**

The mortality rate in the west African epidemic is slightly lower than the average, at 61.5 percent, but it dwarves every other outbreak in terms of

the geographical spread and the number of cases and deaths.

Medical charity Doctors Without Borders, known by its French initials MSF, said last week the outbreak was "out of control", with more than 60 hotspots.

However, experts say those who receive correct care—paracetamol to contain fevers, rehydration for diarrhoea and antibiotics for secondary infections—have a greatly improved chance of survival.

Ministers from Guinea, where 413 confirmed, suspected and probable cases have surfaced so far, including 303 deaths, and Liberia, which has seen 107 cases and 65 deaths, are at the Accra conference.

Sierra Leone, which has recorded 239 cases and 99 deaths, is also represented.

In addition, officials from Ivory Coast, Mali, Senegal, Gambia and Guinea-Bissau, along with Ghana and countries as far afield as Uganda and the Democratic Republic of Congo are attending.

They have been joined by a host of UN agencies and other aid organisations, including MSF and the Red Cross, as well as personnel from disease control centres in western Africa, the United States, Britain and the European Union.

One of the biggest obstacles to combatting the epidemic, say health experts, has been traditional practices—such as touching the bodies of victims at their funerals—which are causing the virus to spread.

Ministers and experts have set out a strategy placing traditional village elders—who are often more influential than foreign medical experts among the traditional forest-dwelling populations at the epicentre of the

outbreak—at the forefront of an education drive, a delegate told AFP.

"We have agreed to mobilise community leaders to be active participants in the efforts to curb the spread of the disease by building their confidence to trust the health workers who are in their communities," said Abdulsalami Nasidi, of the Nigeria Centre for Disease Control.

Lawrence Ntim-Gyakari, head of security at gold miner Newmont Ghana, said the discussions had made a "good start" with delegates demonstrating a "strong political will" to take serious action to bring the outbreak under control.

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