

American Ebola doc: 'I am thrilled to be alive'

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Ebola victim Dr. Kent Brantly, left, embraces Dr. Bruce Ribner, medical director of Emory's Infectious Disease Unit, after being released from Emory University Hospital, Thursday, Aug. 21, 2014, in Atlanta. (AP Photo/John Bazemore)

Calling it a "miraculous day," an American doctor infected with Ebola left his isolation unit and warmly hugged his doctors and nurses on Thursday, showing the world that he poses no public health threat one

month after getting sick with the virus.

Dr. Kent Brantly and his fellow medical missionary, Nancy Writebol, who was quietly discharged two days earlier, are still weak but should recover completely, and no one need fear being in contact with them, said Dr. Bruce Ribner, who runs the infectious disease unit at Emory University Hospital.

Brantly's reappearance was festive and celebratory, a stark contrast to his arrival in an ambulance under police escort three weeks earlier, when he shuffled into the hospital wearing a bulky white hazardous materials suit.

"I am thrilled to be alive, to be well, and to be reunited with my family," Brantly said, choking up as he read a written statement. Then he and his wife turned and hugged a parade of doctors and nurses, hugging or shaking hands with each one. For some, it was their first direct contact without protective gear.

After Brantly, 33, and Writebol, 59, were infected while working with Ebola victims in Liberia, their charity organizations, Samaritan's Purse and SIM, reached out to top infectious disease experts for help.

Working connections, they obtained one of only five courses available worldwide of an experimental drug known as Zmapp, and Brantly and Writebol split the doses before being evacuated to Atlanta. The other four were later given to a Spanish priest, who died, and three doctors in Africa, who have been improving.

Writebol's son, Jeremy Writebol, spent two weeks at the hospital with her but left Tuesday morning.

"I haven't given her a hug yet, I am anxious to do that, but we are waiting for the right time and for her to be able to be with us," he said in a

telephone interview. He said his mother is able to move around, eat and drink normally.



Ebola victim Dr. Kent Brantly, right, hugs a member of the medical staff that treated him, after being released from Emory University Hospital Thursday, Aug. 21, 2014, in Atlanta. Another American aid worker, Nancy Writebol, who was also infected with the Ebola virus, was released from the hospital Tuesday. (AP Photo/John Bazemore)

Brantly didn't take questions at Thursday's news conference, but he did briefly describe how they confronted Ebola back in Liberia. He said aid workers had begun "preparing for the worst" after learning of the outbreak in March, and saw their first patient in June. Soon, many more arrived.

He said his team took all the precautions they could. After his wife and

children returned to the U.S. for a family wedding, he focused on work, moving patients to a bigger isolation unit. Three days later, he woke up feeling sick, and was diagnosed with the disease.

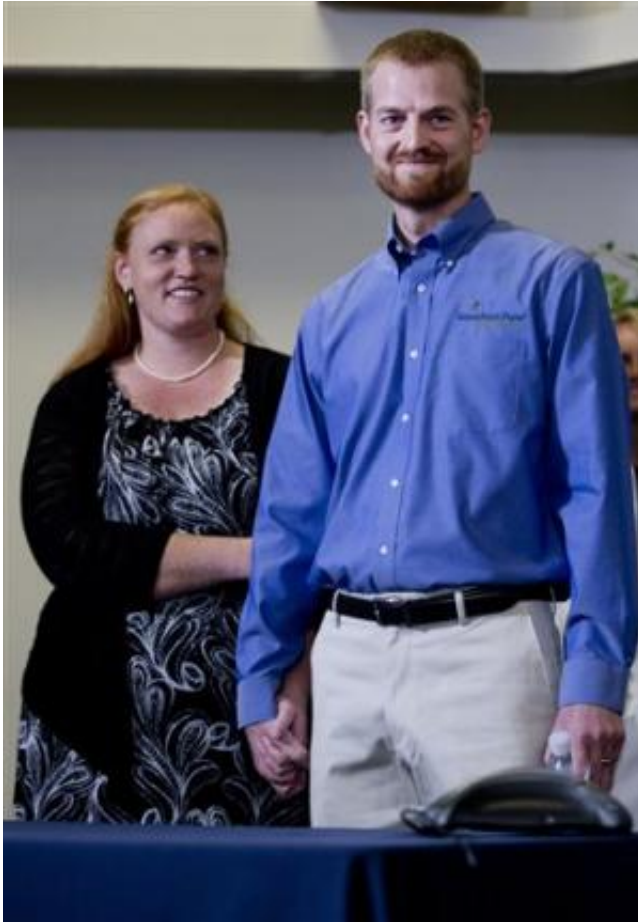
"As I lay in my bed in Liberia for the following nine days, getting sicker and weaker each day, I prayed that God would help me to be faithful even in my illness," Brantly said. "Through the care of the Samaritan's Purse and SIM missionary team in Liberia, the use of an experimental drug, and the expertise and resources of the health care team at Emory University Hospital, God saved my life."

His doctors cautioned that it's unclear whether the drug or a blood transfusion Brantly got from a young Ebola survivor in Africa was helpful or hurtful. The drug is so novel that it hasn't been tested in people, and might not have made any difference at all.

"Experimental means exactly that. They are the very first individuals to have received this treatment and frankly we do not know," Ribner said.

Both patients were discharged after their medical team made sure they won't infect others. Their blood tested clean of the virus, which is spread only through direct contact with the bodily fluids of sick people experiencing symptoms. Ebola survivors generally are not contagious once they've recovered.

Neither survivor is saying what they'll do next. Ribner said there's no concern of a relapse, "and in fact we would anticipate immunity from this virus if they were treating patients during this outbreak."



Ebola victim Dr. Kent Brantly stands with his wife, Amber, during a news conference after being released from Emory University Hospital, Thursday, Aug. 21, 2014, in Atlanta. Another American aid worker, Nancy Writebol, who was also infected with the Ebola virus, was released from the hospital Tuesday. (AP Photo/John Bazemore)

There is a huge gap between the top-flight care these Americans got at Emory, where a crew of five infectious disease experts and 21 nurses provided rigorous care, and West Africa, where the virus has killed more than 1,300 people and counting, and even such basics as sterile fluids can be in short supply.

Treating these two patients has already given doctors insights into how to

better care for Ebola patients anywhere. For example, they now believe common fluid-replacement measures may not have enough of certain nutrients patients need to recover. Emory physicians say they have begun sharing their findings to other doctors, and hope to publish in a medical journal.

At least 2,473 people have been sickened in this outbreak—more than the caseloads of all the previous two-dozen Ebola outbreaks combined, according to the World Health Organization.



Ebola victim Dr. Kent Brantly looks on during a news conference after being released from Emory University Hospital, Thursday, Aug. 21, 2014, in Atlanta. Another American aid worker, Nancy Writebol, who was also infected with the Ebola virus, was released from the hospital Tuesday. (AP Photo/John Bazemore)

Though health officials repeatedly have said the chance of a large Ebola

outbreak is very low in the U.S., a Harvard telephone survey released Thursday suggests people are worried. About 40 percent said they are very or somewhat concerned a large U.S. outbreak will occur within the next year.

The Harvard School of Public Health partnered with a polling firm to survey 1,025 U.S. adults, who answered the questions within the last week. The survey had a margin of error of plus or minus about 4 percentage points.

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