

Guidelines for treatment of Ebola patients are urgently needed

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As the Ebola Virus Diseases (EVD) epidemic continues to rage in West Africa, infectious diseases experts call attention to the striking lack of treatment guidelines. With over 16,000 total cases and more than 500 new infections reported per week, and probable underreporting of both cases and fatalities, the medical community still does not have specific approved treatment in place for Ebola, according to an editorial published in the *International Journal of Infectious Diseases*.

Not only are [treatment guidelines](#) lacking, but there are conflicting reports of [mortality rates](#) and few descriptions of actual treatments being used. What is clear is that the treatments in industrialized nations with well-developed public health systems differ significantly from those in less-developed nations, especially those with histories of civil wars and little health infrastructure. The few data available indicate that simple fluid replacement and correction of [electrolyte imbalances](#) will significantly reduce mortality.

According to authors Eskild Petersen, MD, Editor-in-Chief of the *International Journal of Infectious Diseases* and Professor of Tropical Medicine, Department of Infectious Diseases and Clinical Microbiology, Aarhus University Hospital, Aarhus Denmark, and Boubacar Maiga, MD, PhD, Faculty of Medicine, University of Sciences, Techniques and Technology of Bamako, (USTTB), Bamako, Mali, "Very little data has emerged. One published study reported a mortality of 72% but astonishingly the study contained no information on any treatment. Thus the question remains whether the patients included in that study received

any treatment at all."

These experts explain that management of the epidemic has fallen primarily to Non-Governmental Organizations (NGOs), which have not published any treatment result data and have been simply reporting confirmed cases and outcomes. Without data about the success or failure of specific treatments, treatment may only be palliation and "Ebola hospitals" may be no more than hospices intended to isolate cases from the community.

Staffing of treatment facilities is a crucial issue and it can be speculated that the NGOs do not have access to physicians and nurses with knowledge and experience in high-volume fluid replacement and correction of electrolyte imbalance.

The authors suggest that the World Health Organization take the leadership and develop guidelines for treatment including:

- Diagnosis of EVD
- Principles for intravenous fluid replacement
- Principles for measurement and correction of electrolyte imbalance
- Diagnosis and treatment of concomitant malaria
- Guidelines for administration of antibiotics based on suspicion of septicemia
- HIV testing
- Implementation of a reporting system for all EVD treatment facilities with weekly survival figure updates reported for each NGO to ensure quality control, transparency, and optimization of treatment algorithms

Petersen and Maiga further propose that one strategy could be twinning with hospitals in industrialized countries whereby these hospitals adopt

an EVD treatment facility and ensure staffing and training. "This of course would need support from national health authorities," they note. "Such a program would ensure that effective intravenous fluid replacement therapy would be provided, which would probably significantly reduce mortality, ensure confidence in [treatment](#) facilities from the local population, and thus increase the use of these facilities with earlier admissions and higher proportion of cases treated, isolated, and recovered."

More information: "Guidelines for treatment of patients with Ebola Virus Diseases are urgently needed," by Eskild Petersen, MD, and Boubacar Maiga, MD, PhD. DOI: [dx.doi.org/10.1016/j.ijid.2014.12.002](https://doi.org/10.1016/j.ijid.2014.12.002), *International Journal of Infectious Diseases*, Volume 30 (January 2015)

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