

NEJM Perspective: 'Shifting the Paradigm—Applying Universal Standards of Care to Ebola Virus Disease'

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LSTM's Senior Clinical Lecturer, Dr. Shevin Jacob is corresponding author on a perspective piece published in the *New England Journal of*



Medicine calling for universal standards of care to be applied in relation to Ebola Virus Disease (EVD).

The paper comes during an ongoing outbreak of EVD in the Democratic Republic of Congo (DRC), its 10th since the disease was first described in 1976. Historically, response to EVD outbreaks has centred around a strategy to 'identify, isolate and track' patients with EVD as a means of curtailing its spread and eventually eliminating the disease. Dr. Jacob and his colleagues explain that this approach, however, was often quite minimalistic when it came to supportive care for patients with EVD and occurred alongside a high mortality often fuelling community mistrust and resistance to broader outbreak control efforts.

Dr. Jacob and his colleagues go on further to explain that while the clinical teams including national staff, the World Health Organization (WHO) clinical expert team, Médecins Sans Frontières (MSF) and other non-government organisations (NGOs) aimed to improve outcomes by administering more aggressive supportive care from the start of the 2013-16 West African outbreak, providing this level of care was not without challenges. As the epidemic progressed, factors such as the limited number of health workers available to treat EVD patients meant that such care could not be delivered consistently. This reality was in direct contrast to those cases that were treated in Europe or the United States, where aggressive supportive care could be delivered, and the overall mortality was much lower.

Dr. Jacob suggests: "Supportive care for EVD patients continues to evolve and 'glimmers of hope' for improving standards of care for EVD <u>patients</u> can be seen in the context of the current <u>outbreak</u> in DRC." For instance, recent innovations such as the The Alliance for International Medical Action's Cube System, a portable biosecure individual patient room, allow for more patient-centred care through continuous observation and improved accessibility. With these visible changes, the



co-authors advocate that: "It should be no longer acceptable to have standards of care for EVD which depend on the setting, higher standards are no longer aspirational but possible and we should strive to provide people who are sick and suffering with the care that we ourselves would want to receive."

More information: William A. Fischer et al, Shifting the Paradigm—Applying Universal Standards of Care to Ebola Virus Disease, *New England Journal of Medicine* (2019). <u>DOI:</u> <u>10.1056/NEJMp1817070</u>

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