Situation Report from Region VII’s Regional Emerging Special Pathogens Treatment Center

Ebola caused by Sudan Virus - Uganda

As of October 6th, 2022, there are a total of 44 confirmed cases, 19 probable cases, and 30 associated deaths (10 confirmed deaths, and 20 probable deaths) from Ebola caused by Sudan virus, also known as Sudan Virus Disease (SVD), in Uganda. The outbreak regions have spread to additional districts including: Mubende, Kassanda, Kyegegwa, Bunyangabu and now Kagadi. (HAN Archive - 00477 | Health Alert Network (HAN) (cdc.gov))

For Public Health Departments and Clinicians:
As of October 6, 2022, no suspected, probable, or confirmed SVD cases related to this outbreak have been reported in the United States or other countries outside of Uganda. On Oct. 6th, the Biden administration said that travelers who had traveled to Uganda would be redirected to airports where they can be screened and warned physicians to be alert for potential cases in the United States. The geographic scope of this outbreak in Uganda is currently limited to five districts in central Uganda and not the capital (Kampala) or the travel hub of Entebbe. While there are no direct flights from Uganda to the United States, travelers from or passing through affected areas in Uganda can enter the United States on flights connecting from other countries. It is important for clinicians to obtain a detailed travel history from patients with suspected SVD, especially those that have been in affected areas of Uganda. Early consideration of SVD in the differential diagnosis is important for providing appropriate and prompt patient care, diagnostics, and to prevent the spread of infection. Early recognition and identification of a suspected SVD patient under investigation (PUI) is critical. If a diagnosis of SVD is considered, clinical teams should coordinate with state/local public health officials and the CDC to ensure appropriate precautions are taken to help prevent potential spread of SVD.

If you have any, questions, need assistance, or have an education request please email the RESPTC at nbu@nebraskamed.com
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Identify, Isolate, and Inform:

1. **Identify** – Identify exposure history
   a. Recent travel to areas with ongoing outbreaks?
   b. Contact with individuals with confirmed or suspected disease within the past 21 days?
   c. Signs and Symptoms Consistent with disease?

2. **Isolate** – Isolate and Determine PPE needed
   a. Place in private room
   b. Designate essential personnel
   c. Designate essential equipment
   d. Determine PPE and Don and Doff appropriately

3. **Inform** – Notification
   a. Notify additional individuals per your facilities SOPs
   b. Report to health department

Transmission, Incubation, and Symptoms:
There have not been any changes in how this virus is transmitted, associated incubation periods or symptoms. People infected with Sudan virus cannot spread the disease until they develop symptoms, and they remain infectious as long as their blood contains the virus, and sometimes longer due to continued viral persistence in some body sites and bodily fluids. The virus spreads through direct contact with either blood or body fluids of a person who is sick with or has died from SVD or objects that have been contaminated with body fluids (blood, vomit, etc.) from a person sick with SVD or the body of a person who died from SVD. The incubation period ranges from 2 to 21 days. Symptoms of SVD can be sudden and include fever, fatigue, muscle pain, headache, and sore throat, followed by vomiting, diarrhea, rash, and other symptoms. The estimated case fatality ratios of SVD varies from 41% to 100% based on previous outbreaks.

CDC webpage on Identify, Isolate, Inform: Emergency Department Evaluation and Management for Patients Under Investigation (PUIs) for Ebola Virus Disease (EVD)

Need assistance on identifying types and amounts of PPE?
Check out the DISASTER AVAILABLE SUPPLIES IN HOSPITALS - DashTool

Vaccine and Medical Countermeasures:
There is currently no FDA-licensed vaccine to protect against Sudan virus infection nor licensed medical countermeasure. The Ebola vaccine licensed in the United States, ERVEBO, is indicated for the prevention of Ebola virus disease due to Zaire ebolavirus, and based on studies in animals, it is not expected to protect against Sudan virus or other viruses in the Ebolavirus genus. Also, there is currently no FDA-approved treatment for Sudan virus. Additional research on vaccine and medical countermeasures has begun.
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Additional Resources:

NETEC - 3 Things to know about the Sudan Ebolavirus Outbreak - Special Pathogens of Concern Situation Report: Sudan Ebolavirus, October 6, 2022 - YouTube

NETEC - Viral Hemorrhagic Fevers (VHFs) Matrix - 8c1dda9b0654d3013ddc57a29b960ab2.pdf (netecweb.org)


CIDRAP - Ebola sickens 8 more in Uganda; doctor among latest deaths - Ebola sickens 8 more in Uganda; doctor among latest deaths | CIDRAP (umn.edu)

Disaster Available Supplies in Hospitals - DISASTER AVAILABLE SUPPLIES IN HOSPITALS - DashTool

CDC Travel Notice - Ebola in Uganda - Alert - Level 2, Practice Enhanced Precautions - Travel Health Notices | Travelers' Health | CDC


CDC Ebola Preparedness: Emergency Department Training Modules - Ebola Preparedness: Emergency Department Training Modules | Emergency Services | Clinicians | Ebola (Ebola Virus Disease) | CDC