

Public health recommendations for asymptomatic contacts of Crimean-Congo haemorrhagic fever (CCHF) in UK settings

This document should be used for exposures to CCHF that have occurred in the UK.

In this guidance, 'case' refers to a confirmed, symptomatic case of CCHF unless otherwise specified. 'Body fluids' can include blood, vomit, faeces, urine, saliva and semen.

For PPE requirements for the management of CCHF cases, please see the [ACDP Guidance on the Management of Patients with Viral Haemorrhagic Fever](#).

Any individual who has not had contact with the case within the last 14 days is not deemed to be a contact. For those individuals identified as potential contacts on a plane, please see the European Centre for Disease Prevention and Control (ECDC) [RAGIDA guidance](#) for contact classification.

The UKHSA Imported Fever Service or UKHSA Emerging Infections and Zoonoses team can provide assistance with contact categorisation on request.

Category	Example scenarios	Actions
<p>Category 5 (very high risk of exposure)</p> <p>Description Unprotected high risk or protracted contact with a case or infectious material</p>	<p>Household or overnight contact of a case while they were symptomatic</p> <p>Very significant exposure to material from a case such as:</p> <ul style="list-style-type: none"> • needlestick injury • confirmed history of splashes on mucous membranes or broken skin 	<ul style="list-style-type: none"> • inform about risk (very high risk of exposure) • give information sheet for Category 5 contacts <p>For 14 days following last exposure:</p> <ul style="list-style-type: none"> • self-isolate in private accommodation only, unless an alternative has been agreed with UKHSA • self-monitor and record temperature and symptoms twice daily (temperature to be taken before taking any anti-fever medication such as aspirin, paracetamol or ibuprofen) and report to UKHSA designated contact. If temperature cannot be taken, alternative arrangements for consultation with a clinician will be made with the relevant health services • if feeling ill in between reporting to the designated contact, take temperature, and if 37.5°C or higher, or if there are other symptoms suggestive of CCHF (as outlined in the contact information sheet) phone designated contact immediately • if any delay in making contact with the UKHSA designated contact phone NHS 111, and state that they have been exposed to CCHF virus. If seriously ill, dial 999, again reporting contact with CCHF virus <p>Additionally, for 14 days following the last exposure:</p> <ul style="list-style-type: none"> • avoid contact with other household members • do not share towels, bed linen, toothbrushes, razors or eating and drinking utensils such as cutlery or cups • avoid sexual contact <p>For category 5 contacts of CCHF, post-exposure antiviral prophylaxis can be considered and should be discussed on a case-by-case basis with the Imported Fever Service.</p>
<p>Category 4 (high risk of exposure)</p> <p>Description Unprotected close (within 2 metres) or direct contact with a case or infectious material</p>	<p>Direct contact (excluding direct contact with mucous membranes or broken skin) with a case or their body fluids without appropriate PPE, or where there has been a breach</p> <p>Unprotected sexual contact with a recovered CCHF case within 3 months of their illness</p> <p>Direct exposure of skin or mucous membranes to an environment contaminated with blood or body fluids of a case without appropriate PPE, including on clothing or bedding (for example in a room after the case has left but before decontamination)</p> <p>Unprotected handling of clinical or laboratory specimens from a case, for example through transporting samples or work in a laboratory without appropriate PPE or laboratory processes</p> <p>Passengers sat directly next to a case on a plane, and any crew, passengers or cleaning staff known to have had direct contact with the case, the case's body fluids, or items contaminated by their body fluids.</p>	<ul style="list-style-type: none"> • inform about risk (high risk of exposure) • give information sheet for Category 4 contacts <p>For 14 days following last exposure:</p> <ul style="list-style-type: none"> • self-monitor and record temperature and symptoms twice daily (temperature to be taken before taking any anti-fever medication such as aspirin, paracetamol or ibuprofen) and report to UKHSA designated contact. If temperature cannot be taken, alternative arrangements for consultation with a clinician will be made with the relevant health services • if feeling ill in between reporting to the designated contact, take temperature, and if 37.5°C or higher, or if there are other symptoms suggestive of CCHF (as outlined in contact information sheet) phone designated contact immediately • if any delay in making contact with the UKHSA designated contact, phone NHS 111, and state that they have been exposed to CCHF virus. If seriously ill, dial 999, again reporting possible contact with CCHF virus <p>If the contact does not have any symptoms, then they can carry out normal activities during the 14 days after the last exposure, except for:</p> <ul style="list-style-type: none"> • if a healthcare worker, no patient contact for 14 days after last exposure • avoid contact with immunosuppressed people [note 1], pregnant women, and children aged under 18 years of age for 14 days from last exposure. <ul style="list-style-type: none"> ○ Following a risk assessment redeploy or exclude from work for 14 days if work involves direct contact with individuals who are immunosuppressed, pregnant or children aged under 18 years of age. <p>If they do not have any symptoms, the following apply focusing on reducing contact with others wherever reasonably possible:</p> <ul style="list-style-type: none"> • advise all contacts to speak to line manager about options to reduce amount of contact with others at work e.g. remote working

		<ul style="list-style-type: none"> any length of trip by private car within the UK is permitted travel on local commuter or public transport is permitted, principally for work. Such trips should be as short as possible and avoided if possible no travel internationally or via air within the UK for 14 days after exposure non-essential medical or dental treatment should be postponed. For essential treatment, the healthcare provider must be informed prior to the procedure. do not share towels, bed linen, toothbrushes, razors or utensils avoid sexual contact avoid situations where self-isolation would be impossible in the event of becoming ill (such as crowded public places)
<p>Category 3 (medium risk of exposure)</p> <p>Description Unprotected close contact (excluding direct contact)</p>	<p>Someone who has been in the same room as and within 2 metres of the symptomatic case, without known direct contact to them, their body fluids or contaminated surfaces</p> <p>On a plane:</p> <ul style="list-style-type: none"> passengers seated one seat away from the case in any direction (including diagonally) passengers in the 3 nearest seats across the aisle if the case was seated in an aisle seat (the passenger directly across the aisle, the passenger across the aisle one row in front and the passenger across the aisle one row behind) cabin crew who served the section of the aircraft where the case was seated, unless it is known that they had direct contact with the case 	<ul style="list-style-type: none"> Reassure (medium risk of exposure) Give information sheet for category 3 contacts <p>Passive monitoring: For 14 days following last exposure:</p> <ul style="list-style-type: none"> self-monitor temperature twice daily (temperature to be taken before taking any anti-fever medication such as aspirin, paracetamol or ibuprofen). If temperature is 37.5°C or higher, or if there are other symptoms suggestive of CCHF (as outlined in contact information sheet), report to designated contact. If seriously ill, dial 999, reporting possible contact with CCHF virus <p>If the contact does not have any symptoms, then they can carry out normal activities during the 14 days after the last exposure, except for:</p> <ul style="list-style-type: none"> non-essential medical or dental treatment should be postponed. For essential treatment, the healthcare provider must be informed of the exposure history prior to the procedure do not share towels, bed linen, toothbrushes, razors or utensils use barrier contraception or avoid unprotected sexual contact <p>There are no restrictions on work, travel or social activities as long as the contact has no symptoms. However, healthcare workers should inform their line manager that they have been identified as a contact of CCHF virus but are able to work with no restrictions as long as they are asymptomatic.</p>
<p>Category 2 (low risk of exposure)</p> <p>Description Protected direct or close (within 2 metres) contact with a case or infectious material outside of a controlled environment</p>	<p>Direct or close (within 2 metres) contact with a case or their body fluids outside of a controlled environment (such as a Trexler, designated HCID unit), but wore appropriate PPE correctly with no known breaches</p> <p>Exposure to an environment contaminated with blood or body fluids of a case while wearing appropriate PPE correctly with no known breaches (for example in a room after the case has left but before decontamination)</p> <p>Laboratory staff in non-containment level 4 facilities handling specimens from a case who have had no breach of laboratory practice/PPE</p>	<ul style="list-style-type: none"> reassure (low risk of exposure) give information sheet for Category 2 contacts <p>For 14 days following last exposure:</p> <ul style="list-style-type: none"> self-monitor temperature twice daily (temperature to be taken before taking any anti-fever medication such as aspirin, paracetamol or ibuprofen). If temperature is 37.5°C or higher, or if there are other symptoms suggestive of CCHF (as outlined in contact information sheet), report to designated contact. If seriously ill, dial 999, reporting possible contact with CCHF virus <p>If the contact does not have any symptoms, then they can carry out normal activities during the 14 days after the last exposure, except for:</p> <ul style="list-style-type: none"> non-essential medical or dental treatment should be postponed. For essential treatment, the healthcare provider must be informed of the exposure history prior to the procedure do not share towels, bed linen, toothbrushes, razors or utensils use barrier contraception or avoid unprotected sexual contact <p>There are no restrictions on work, travel or social activities as long as the contact has no symptoms.</p>
<p>Category 1 (very low risk of exposure)</p> <p>Description Protected contact with a case or infectious material within a controlled environment OR</p>	<p>Household contact of a case while the case was asymptomatic in the 14 days before symptoms developed, but not after they became symptomatic</p>	<ul style="list-style-type: none"> reassure (very low risk of exposure) give information sheet for Category 1 contacts normal activities (no restrictions) key clinical advice for contact: if feeling ill (within 14 days of last exposure), take temperature (before taking any anti-fever medication such as aspirin, paracetamol, ibuprofen). If temperature is

Unprotected household contact with a case in the 14 days prior to symptom onset	Clinical staff caring for a case in a controlled environment (e.g., Trexler, designated HCID Unit) wearing appropriate PPE with no known breaches UKHSA laboratory staff in containment level 4 diagnostic laboratory handling specimens from a case who have had no breach of laboratory practice/PPE	37.5°C or higher, or if there are other symptoms suggestive of CCHF (as outlined in contact information sheet), call NHS 111 or, if very unwell, 999, and state recent contact with CCHF virus
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Note 1: Immunosuppressed patients, as per the [Green Book definition](#), includes those with primary or acquired immunodeficiency, or individuals on immunosuppressive therapy, and includes those with: solid organ cancer; haematological disease and/or stem cell transplant; Child's-Pugh class B or C liver cirrhosis; stage 4 or 5 chronic kidney disease; immune mediated inflammatory disorders (including neurological and rheumatological conditions) treated with B-cell depleting therapy within 12 months; uncontrolled HIV; solid organ transplant recipients.