



Ebola disease: information sheet for category 1 returnees from an Ebola-affected area

You have been given this information sheet because you have been working in an area affected by Ebola disease. As your activities during your deployment have been assessed as very low risk, it is very unlikely that you have caught Ebola disease, and you can continue your usual activities. However, as a precaution, if you feel unwell with a fever (temperature of 37.5°C or higher) or other symptoms suggestive of Ebola disease within 21 days of being in an Ebola-affected area, call NHS 111 and tell them that you have recently returned from an area affected by Ebola disease.

About Ebola disease

Ebola disease is a rare but serious disease caused by orthoebolaviruses. There are 6 identified species of orthoebolavirus, 4 of which cause disease in humans.

Outbreaks of Ebola disease have previously occurred in the Democratic Republic of the Congo (DRC, formerly Zaire), Sudan, Gabon, Uganda, and the Republic of Congo.

In 2014, Ebola disease outbreaks occurred for the first time in West Africa, in Guinea, Liberia and Sierra Leone, and in these countries there was intense transmission in urban areas.

How Ebola spreads

The viruses that cause Ebola disease can spread by:

- direct contact with the organs, blood, secretions, or other bodily fluids of an infected person (including sexual transmission)
- contact with objects, such as needles or soiled clothing, that have been contaminated with infected secretions
- contact with an infected animal, such as chimpanzees, gorillas or fruit bats, either if they are found ill or dead, or collected as bushmeat

Ebola viruses are not spread through routine, social contact (such as shaking hands or sitting next to someone) with people who do not have symptoms. There is no evidence that Ebola viruses can spread through the air.

It can take up to 21 days from when someone is exposed to the virus or symptoms to appear.

Symptoms of Ebola disease

The onset of illness is sudden, with:

- high fever
- severe headache
- intense weakness
- muscle pain

A few days later symptoms can include:

- severe watery diarrhoea
- abdominal pain
- abdominal cramping
- nausea
- vomiting

Some patients with severe illness may develop internal and external bleeding.

Ebola disease is fatal in between 25% to 90% of all clinically ill cases, depending on the virus strain, the person's age, and other factors including whether the person has a weakened immune system. Starting supportive treatment promptly after symptoms begin can improve the likelihood of surviving the disease.

Preventing and treating Ebola disease

There are currently 2 licensed vaccines that offer protection from Zaire orthoebolavirus, which is the species of orthoebolavirus that has caused most of the large outbreaks. Vaccines are used to protect high risk individuals (for example, frontline workers and those reporting high risk contacts with confirmed cases) during outbreaks. There are no licensed vaccines for the other strains of orthoebolaviruses that affect humans.

To avoid orthoebolaviruses spreading between people, those caring for individuals with possible or suspected Ebola disease should avoid contact with the patient's bodily fluids and should wear personal protective equipment (PPE).

Treatment for Ebola disease is with supportive care, including balancing fluids and electrolytes, maintaining a person's oxygen status and blood pressure, and treating any co-infections. Supportive care improves survival, particularly if started early.

Currently, there are 2 approved antiviral treatments that can be used for Ebola disease caused by Zaire orthoebolavirus, known as monoclonal antibodies. These are available in the UK as well as supportive care.

Your risk of developing Ebola disease

You are not considered to be at risk of having caught Ebola disease. This is because although you were in an area affected by Ebola disease, you have reported that **you have not**:

- been in **close (less than 2 metres) or direct contact** with someone known to have Ebola disease while they had symptoms (with or without appropriate PPE)
- been in **direct contact** with the body fluids (or items contaminated with body fluids, such as bedding) from someone known to have Ebola disease while they had symptoms (with or without appropriate PPE)
- been in **direct contact** with the body of someone who died who was known to have Ebola disease (with or without appropriate PPE)
- had contact with specimens from someone known to have Ebola disease outside of a Level 4 laboratory operating to UK standards

Your family and household contacts are not at risk of catching Ebola virus from you. There are no restrictions on your activities, and there are no monitoring or reporting requirements.

What to do if you become ill

It is extremely unlikely that you have caught Ebola disease. However, if you feel unwell with any of the symptoms of Ebola disease as listed above within 21 days of your last possible contact with Ebola, stay at home. Take your temperature if you have a thermometer available. It is important to take your temperature before you take any medicines such as paracetamol, ibuprofen or aspirin, as these can reduce your temperature.

After taking your temperature, call NHS 111 and tell them that you have recently returned from an Ebola-affected area. Let them know if your temperature is 37.5°C or higher. They will arrange for you to be assessed by an appropriate clinician.

In an emergency, you should call 999 and tell them about your symptoms and that you have recently returned from an Ebola-affected area.

Further information

More information about Ebola disease can be found at:

- Ebola: overview, history, origins and transmission (<https://www.gov.uk/government/publications/ebola-origins-reservoirs-transmission-and-guidelines/ebola-overview-history-origins-and-transmission>)
- Ebola disease (<https://www.who.int/health-topics/ebola>)

Document information

Version 3.0. August 2026