

# First Ebola case diagnosed in US

By Shannon Jones  
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The first person to be diagnosed with the deadly Ebola virus in the United States—a man from Liberia visiting family in Texas—is being treated at a hospital in Dallas. His condition is listed as serious but stable.

Ebola is a severe, often fatal illness that is transmitted from wild animals to humans. It can then spread between humans through the exchange of bodily fluids such as vomit, urine and blood. The disease is currently ravaging West Africa, where its spread has been accelerated by the widespread poverty and desperately inadequate health care systems in the former colonial countries in the region. The average Ebola survival rate in the current outbreak is only 50 percent, according to the World Health Organization.

Thomas Duncan arrived from Liberia 10 days ago to visit relatives in Texas. A resident of Monrovia, Liberia's capital, Duncan worked as a driver for Safeway Cargo, the customs clearing agent for FedEx.

He reportedly had direct contact with a woman stricken with Ebola just four days before he departed for the US. He helped transport the woman to a hospital in a taxi after the family could not secure an ambulance. Tragically, the woman was turned away by the hospital, for lack of space, and died soon after.

Duncan was not ill during the flight from Africa and only later developed symptoms of the disease, which include high fever, vomiting and diarrhea.

Another person who came in close contact with Duncan is currently being monitored for symptoms. Several others who were potentially exposed are also being watched, including five school-age children. A nine-member team of federal health officials is overseeing the monitoring.

Despite attempts by the US media to create a sense of alarm, health care officials report the disease is not easily communicable. It can be transmitted only after symptoms develop, and then it can only be spread by direct contact with the bodily fluids of an infected

individual.

Health care workers have tested negative for the disease but will also be closely monitored for the next 21 days, the time it can take for symptoms of Ebola to appear. Most people exhibit symptoms within eight to ten days of being exposed. People who were on the flight with Duncan weren't at risk, health officials say, because at that point he was not symptomatic. He was checked for fever before he got on the plane.

Tom Frieden, director of the Centers for Disease Control and Prevention (CDC), said the number of people in contact with Duncan was small and the agency would take measures to make sure that everyone potentially exposed to the disease was monitored. The CDC first announced the diagnosis on Tuesday; Frieden said he had briefed President Obama on the case.

Texas Health Presbyterian Hospital has been the subject of criticism for its decision to send Duncan home when he first sought medical attention. He was diagnosed with a low-grade viral disease and given antibiotics. The staff apparently did not suspect Ebola at the time since he wasn't vomiting and didn't have diarrhea. However, he reportedly told health care workers he had been in Liberia. When he returned to the hospital two days later, staff suspected Ebola and placed him in isolation.

Public health officials say for months they have been urging doctors and nurses to take a travel history of anyone showing up with symptoms resembling Ebola and be alert for the disease in anyone who had been in Liberia, Sierra Leone or Guinea, the scene of the recent outbreak.

Four other Ebola patients have been treated in the US over the course of the past two months. They contracted the disease in Africa and were placed immediately in hospital isolation. They all survived, and three have already been sent home from the

hospital. A fifth person who was exposed to the disease in Sierra Leone is being monitored by the National Institutes of Health.

Texas Presbyterian already had a plan in place before the Duncan arrived to handle the disease. One week earlier, the hospital had held a meeting to discuss what to do in such a situation.

Duncan, however, will not receive the experimental anti-Ebola drug Zmapp because there is none left in stock in the US. The drug includes three man-made antibodies to the virus, which are grown in tobacco leaves and take months to produce. Despite the fact that the virus was discovered in 1976, there has been little research done in developing Ebola-fighting drugs, undoubtedly because of the high cost of research and the meager prospect of profitable return.

Health officials said it was only a matter of time before Ebola reached the United States.

The disease has already killed more than 3,000 people in West Africa this year. In response, there has been very limited aid from the United States and western European powers. Rather than provide resources to bolster the countries' health care systems, the US Obama administration has ordered the deployment of troops to West Africa, primarily to bolster the unstable regimes in the region. Predictions are that the number infected could reach 1.4 million by January in the absence of any effective measures to control the disease.

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