Ebola Blasts from the Past

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Picture yourself living in a village in Guéckédou, Guinea. You return from a successful hunt with a guinea fowl to prepare dinner. This rare delicacy does not excite your two-year old son, instead he complains of stomach pain and says he has no appetite. The following day, his condition worsens and you contact the village nurse. She diagnoses him with malaria and gives him medication. Two days later, you are holding your son’s lifeless body in your arms. You ask yourself: what kind of illness keeps you from saving a loved one? Ebola. It takes and rarely spares, but among the afflicted still arise some heroes and survivors of the recent strain of the virus. While some may rush to avoid all areas Ebola, some daring organizations and individuals choose to take on this life-threatening challenge.

Ebola Today

Currently, Ebola’s death toll is at 4,877 with Guinea, Liberia, and Sierra Leone accounting for almost all cases (Narayan and Yan). The outbreak totals 9,936 cases to date, and is by far the deadliest, most aggressive, and disparaging strain of Ebola (Evans and Miles). There have been more cases between March and October 2014 than the combined Ebola outbreaks since 1976 (“Ebola virus disease”). In the midst of this outbreak, some doctors and individuals are at the forefront in fighting Ebola. Masked but brave, doctors infiltrate severely struck areas to treat and educate patients and their families about Ebola. Once treated, many victims face stigma. Many people unexposed to Ebola want to protect themselves and in doing so, they isolate the survivors of Ebola. Moreover, governments in the affected areas, UNICEF, Doctors Without Borders, and Catholic clinics are working to place people in new homes, especially young orphans. Additionally, individuals like Feimata Dunoh, an advocate for child welfare dating back to the civil war in Liberia, house orphans while searching for their relatives (McGroarty). Despite all noble efforts, Ebola is fatal and is yet to be contained.

Why so Deadly?

Although the virus is easily transmitted by contact, its “chameleon-like character,” slow global response, and civil strife and political instability drive the brutality of this modern strain of Ebola (Stern). With no known cure and an incubation period between two to twenty-one days, one is easily deceived by the virus’ common symptoms such as a fever, stomach pain, and loss of appetite; it has a 90 percent fatality rate (“Ebola Virus Disease”). For an outbreak that began in March, it was until 1,323 cases and 729 reported deaths in July before the global community became aware (“Ebola Virus Disease, West Africa-Update”). The Obama administration, the World Bank, the African Development Bank, and other organizations pledged 155 million dollars to alleviate the effects of Ebola. While their support is valued, about 1 billion dollars is needed to eradicate Ebola (Mark). Guinea, Liberia, and Sierra Leone are particularly vulnerable due to their recent history of civil war. The tragedy of war left individuals homeless, orphaned, and distraught and governments destabilized, impoverished, and distrusted. Consequently, the countries’ fundamental infrastructure is underdeveloped, especially their health care system, which crumbled at the sight of Ebola.

Treatment and Future

For silver lining, Emory Atlanta Hospital and Center for Disease Control built an isolation unit specifically for infectious disease. The center’s unique infrastructure and equipment provide a high degree of clinical isolation, which is imperative to successfully contain Ebola. Additionally, its staff trained in world-class protocols and procedures treated three Ebola patients. Example of what health care infrastructure should be in America and all over the world, Emory Atlanta Hospital demonstrates that indeed it is possible to contain and treat Ebola effectively, plus we already have the necessary science and technology. All that remains is for the rest of the world to follow. In order to combat Ebola, governments across the globe need to invest in their health departments. We need not face an outbreak of this caliber again. We need not lose another life to a virus we have once beaten. We need not be defeated by a blast from our past.

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References


