**Opinion** Article



# Short Note on Ebola Virus Disease

### Paterson Sharrock\*

Department of Parasitology, Federal University of Minas Gerais, Belo Horizonte, Minas Gerais, Brazil

## DESCRIPTION

Ebola Virus Disease (EVD), formerly known as Ebola haemorrhagic fever, is a severe, often fatal illness affecting humans and other primates. The virus is transmitted to people from wild animals (such as fruit bats, porcupines and non-human primates) and then spreads in the human population through direct contact with the blood, secretions, organs or other bodily fluids of infected people, and with surfaces and materials (e.g. bedding, clothing) contaminated with these fluids.

#### Signs and symptoms

Symptoms might also additionally seem everywhere from 2 to 21 days after touch with the virus, with a median of eight to ten days. The path of the infection commonly progresses from "dry" signs and symptoms initially (along with fever, aches and pains, and fatigue), after which progresses to "wet" signs and symptoms (along with diarrhea and vomiting) because the character will become sicker. The symptoms of Ebola are fluids and electrolytes, oxygen, blood stress medication, blood transfusions, treatment for different infections.

#### Primary signs and symptoms of Ebola

Loss of appetite, fever, sore throat weak point and fatigue, aches and pains, along with intense headache and muscle and joint pain, gastrointestinal signs and symptoms along with stomach pain, diarrhoea, and vomiting, unexplained haemorrhaging, bleeding or bruising.

EVD is an extraordinary however intense and regularly lethal sickness. Recovery from EVD relies upon on suitable supportive medical care and the patient's immune response. Studies display that survivors of Ebola virus contamination have antibodies (proteins made with the aid of using the immune device that become aware of and neutralize invading viruses) that may be detected within the blood up to ten years after recovery. Survivors are concept to have a few protecting immunity to the sort of Ebola that sickened them.

#### Treatment of Ebola virus disease

There's no cure for Ebola, though researchers are working on it. There are two drug treatments which have been approved for treating Ebola. Inmazeb is a mixture of three monoclonal antibodies (atoltivimab and maftivimab,). Ansuvimab-zykl (Ebanga) is a monoclonal antibody given as an injection. It helps block the virus from the cell receptor, preventing its entry into the cell.

#### Prevention and vaccination

Ebola Virus Disease (EVD) is a very rare disease caused by infection with Zaire ebolavirus, one of four types of the virus that is known to cause illness in people. It is believed to occur naturally in specific animal populations that live in multiple sub-Saharan African countries. In the areas of sub-Saharan Africa where EVD is most common, Ebola virus is believed to spread at low rates among certain animal populations. When living in or traveling to a region where Ebola virus is potentially present, there are a number of ways to protect and prevent the spread of EVD. Avoid contact with semen from a man who has recovered from EVD, until testing shows that the virus is gone from his semen. Avoid contact with items that may have come in contact with an infected person's blood or body fluids (such as clothes, bedding, needles, and medical equipment). Avoid contact with blood and body fluids (such as urine, feces, saliva, sweat, vomit, breast milk, amniotic fluid, semen, and vaginal fluids) of people who are sick.

**Received:** 5-Jan-2022, Manuscript No.jtd-22-e292; **Editor assigned:** 10-Jan-2022, Pre QC No. jtd-22-e292 (PQ); **Reviewed:** 24-Jan-2022, QC No. jtd-22-e292; **Revised:** 28-Jan-2022, Manuscript No. jtd-22-e292 (R); **Published:** 4-Feb-2022, DOI: 10.35841/2329-891X-22.10.e292.

Citation: Sharrock P (2022) Short Note on Ebola Virus Disease. J Trop Dis. 10:e292.

**Copyright:** © 2022 Sharrock P. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Correspondence to: Paterson Sharrock, Department of Parasitology, Federal University of Minas Gerais, Belo Horizonte, Minas Gerais, Brazil, E-mail: Spaterson@gmail.com