

Collecting born-digital resources documenting the 2014 Ebola Outbreak



Source: WHO, October 1, 2014

Christie Moffatt

History of Medicine Division

National Library of Medicine

National Institutes of Health

U.S. Department of Health and Human Services

What is Web Archiving?

The process of gathering up (harvesting) data that has been published on the Web, storing it, ensuring the data is preserved in an archive, and making the collected data available for future research.

--International Internet Preservation Consortium (IIPC)



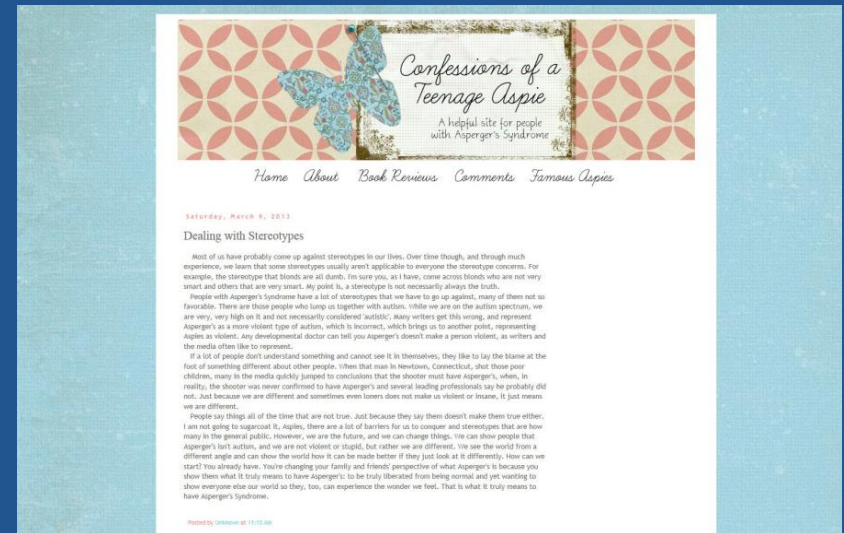
Why Archive the Web?

- Information published on the Web today will be the primary resources for future researchers.
- “A significant amount of the data that permeates nearly all aspects of life, culture, and scholarship today will not be available at a library or an archives unless attention and priority is paid to actively collecting born-digital materials”
--National Digital Stewardship Alliance (NDSA)



Web collecting at NLM

- Archiving NLM institutional content since 2003
- NLM Web Collecting and Archiving Working Group
- Archive-It partners since 2009
- Pilot collection on Health and Medicine Blogs



NLM web archive collections

- Avian Influenza A (H7N9) Virus
- Disorders of the Developing and Aging Brain: Autism and Alzheimer's on the Web
- NLM institutional web content
- Global Health Events

The screenshot shows the e-Patient Dave website. The main article is titled "I've started an RFP for my skin cancer". The author, Kyra, dated the post February 11, 2012 at 1:00 pm. The article discusses her experience with a Request for Proposal (RFP) for skin cancer treatment. On the right side of the page, there is a "Participatory Medicine" membership badge, an email subscription form, and several logos for partner organizations including Edelman Digital, TIME, Patient Safety, and HealthLeaders.

The screenshot shows the FLU.gov website page for "Avian Influenza A (H7N9) Virus". The page is organized into sections: "About the Flu", "Seasonal Flu", "Current Flu Situation", "How the Flu Virus Changes", "H7N9", "H2N2v", "H1N1 (Swine Flu)", and "H1N1 (Avian/Influenza)". The "About the Flu" section provides a detailed overview of the virus, its origin in China, and its potential for human-to-human transmission. The "Current Flu Situation" section notes that the virus has not been detected in people or birds in the United States. The "H7N9" section discusses the virus's ability to spread between people and its potential for becoming a pandemic. The "H2N2v" section mentions its discovery in a pig in 2005. The "H1N1 (Swine Flu)" section notes its emergence in 2009. The "H1N1 (Avian/Influenza)" section mentions its discovery in 2003. The page also includes a "Text Size" tool, a search bar, and a "Print" button.

NLM Congressional Mandate

“to collect and preserve scholarly and professional literature about health, medicine, and the biomedical sciences, **irrespective of format.**”



NLM Collection Development Policy

- Record progress in research in biomedicine and the related areas of the life sciences
- Document the practice and teaching of medicine broadly defined
- Demonstrate how health services are organized, delivered and financed
- Chronicle the development and implementation of policy that affects research and the delivery of health services
- Illustrate the public perception of medical practice and public health

Collection development manual of the National Library of Medicine, 4th ed., 2004.
<http://www.nlm.nih.gov/tsd/acquisitions/cdm/>



Subjects

Addiction Medicine
Aerospace Medicine
Allergy and Immunology
Anatomy
Anesthesiology
Anthropology
Behavioral Medicine
Biochemistry
Bioengineering
Bioethics
Bioinformatics
Biological Sciences
Biomathematics
Biomedical Imaging
Biomedical Research
Biophysics
Cardiology
Cell Biology
Chemistry
Clinical Laboratory Science
Cognitive Science
Communication Disorders
Complementary and Alternative Medicine
Cytology
Dentistry
Dermatology
Disaster Management
Education for the Health Professions
Embryology
Emergency Medicine
Endocrinology
Environmental Health
Exercise Science

Family Practice
Forensic Medicine
Gastroenterology
Genetics
Geriatrics
Gynecology
Health Communication

Obstetrics
Occupational Health and Safety
Oncology
Ophthalmology
Optometry
Orthopedics

Disaster Management
Emergency Medicine
Infectious Diseases
Public Health

Rehabilitation

Medical Humanities
Medical Informatics
Medical Sociology
Medicine
Microbiology
Military Medicine
Molecular Biology
Molecular Medicine
Nephrology
Neurology
Neuroscience
Nursing

Pulmonary Medicine
Radiology
Religion and Medicine
Reproductive Medicine
Rheumatology
Space Life Sciences
Sports Medicine
Surgery
Therapeutics
Toxicology
Urology
Veterinary Medicine



NLM Subject: Disaster Management

- Health planning and policies
- Health facilities management
- Public health workforce training
- Communicable disease control
- Emergency medical services
- Psychological preparedness and response
- Risk management
- Health information systems
- Laboratory diagnosis and characterization

“NLM may select examples of broader works on disaster management to document the public response to specific events or the social, political and cultural context of public health.” (NLM Collection Development Manual)





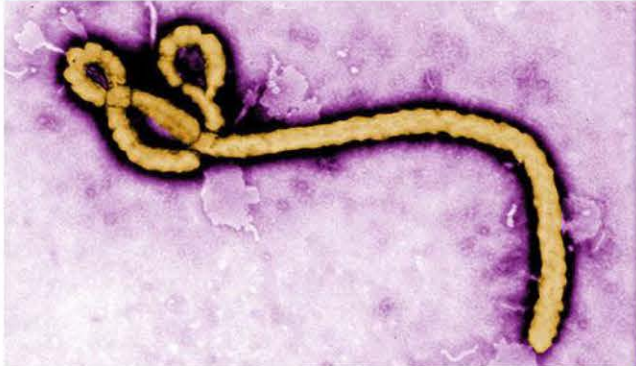
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Ebola Update

CDC and Texas Health Department Confirm First Ebola Case Diagnosed in the U.S.

What's New

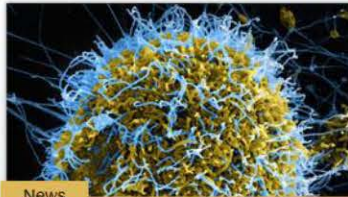


Outbreak

2014 Ebola Epidemic

Learn about the Signs, Symptoms, Transmission and Prevention of Ebola.

More



News

CDC Team Assisting in Dallas

CDC Team Assisting Ebola Response in Dallas as Investigation of First U.S. Case Underway.

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News

Ebola Case Diagnosed in U.S.

CDC and Texas Health Department Confirm First U.S. Ebola Case.

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Feature

Enterovirus D68

Facts about Enterovirus D68

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<http://www.cdc.gov/> on October 2, 2014





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Text size: [S](#) [M](#) [L](#) [XL](#)



Ebola Outbreak 2014 - 2015: Information Resources

- ▶ U.S. Federal Organizations
- ▶ U.S. Organizations
- ▶ International Organizations
- ▶ National Government (non-U.S.) Web Sites
- ▶ Free Resources from Publishers for Medical Responders
- ▶ Biomedical Journal Literature and Reports
- ▶ Ebolavirus Information Sources
- ▶ Diagnostic Testing for Ebola
- ▶ Ebola Treatment Drugs in Development & Trials
- ▶ Clinical Trials
- ▶ Situation Reports
- ▶ Training for Healthcare Workers
- ▶ Children and Ebola
- ▶ Multimedia Communication Resources
- ▶ Social Media
- ▶ Maps
- ▶ Health Resources for the Public
- ▶ Multi-Language Resources
- ▶ Disclaimer

Featured Sites

Disaster Distress Helpline
1-800-985-5990
Substance Abuse and Mental Health
Administration, U.S. Department of
Health and Human Services

For updates on Ebola info sources,
subscribe to DISASTR-OUTREACH-
LIB.

Ebola-related documents and
resources in the Disaster Lit
database.

Embed this page's content on your
own Web page. More about Content
Syndication.

http://sis.nlm.nih.gov/dimrc/ebola_2014.html



U.S. Federal Organizations



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Fighting Ebola: A Grand Challenge for Development

HOW CAN I HELP?

Medical Volunteers

We are appealing to the medical community. If you see a qualified medical professional, please contact the nearest USAID mission or the nearest USAID mission in your area. For more information, visit [USAID Medical Volunteers](#).

As part of a comprehensive and coordinated response, we are developing an introductory safety training for medical responders in Africa. We are seeking medical responders.



National Institute of Allergy and Infectious Diseases
Leading research to understand, treat, and prevent infectious, immunologic, and allergic diseases.

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Ebola/Marburg

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Ebola/Marburg Research

The outbreak events that affect disease transmission and human response to Ebola and Marburg viruses are poorly understood. Researchers in NIAID's Division of Intramural Research and Vaccine Research Center, as well as NIAID-supported scientists at external institutions are studying all aspects of Ebola and Marburg viruses and how they cause disease. This includes seeking better ways to diagnose and treat Ebola and Marburg fevers, and using applied research to develop diagnostics, vaccines, and therapeutics.

Ebola Vaccine Research

The Vaccine Research Center (VRC) has developed an Ebola vaccine candidate in collaboration with Chiron, a Swiss-Italian biotech company, recently acquired by GSK. The investigational vaccine, which was designed by VRC scientists, contains an infectious Ebola virus inactivated. It is a chimpanzee adenovirus vector vaccine into which two Ebola genes have been inserted. This is a non-replicating viral vector, which means the vaccine enters a cell, delivers the gene inserts and does not replicate further. The gene inserts express a protein to which the body makes an immune response. The investigational vaccine has recently shown promise in a primate model. The VRC vaccine will enter into a phase 1 clinical trial which could start enrollment as early as fall 2014, pending approval by the FDA. The VRC is also in discussions with governmental and non-governmental partners regarding options for advancing this candidate beyond Phase I clinical evaluation.

Additionally, NIAID's Division of Microbiology and Infectious Diseases is supporting the Crucell Biopharmaceutical company's development of a multivalent Ebola/Marburg vaccine using recombinant adenovirus as a platform. A Phase I clinical trial is planned for late 2014 or early 2015. NIAID is also funding Profectus Biosciences to develop and test a recombinant vesicular stomatitis virus-rebased vaccine against Ebola/Marburg. The vaccine is currently in preclinical testing to determine the most promising constructs. In addition, NIAID is working with Bioware Nordic on development of a recombinant Marburg vaccine candidate that uses the Modified Vaccinia Ankara vector.

Investigators from NIAID's Division of Intramural Research and Thomas Jefferson University are working based on the established rabies virus vaccine and Ebola infection in animals. Their research is vaccine for human and veterinary use and a live vaccine for use in wildlife in Africa as soon as possible to humans.

WebSite Tools
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Research Features
Head about NIAID's supported research to develop a dual-purpose vaccine to protect humans and wildlife against Ebola and rabies.

Related Links
Centers of Excellence for Translational Research (CETR)
Laboratory of Infectious Diseases
Vaccine Research Center
National Library of Medicine, MedlinePlus
Centers for Disease Control and Prevention
World Health Organization



Centers for Disease Control and Prevention
CDC 24/7 Saving Lives. Protecting People.™

Ebola (Ebola Virus Disease)

Facebook | Twitter | Email

Language: English

2014 West Africa Outbreak

The 2014 Ebola epidemic is the largest in history, affecting multiple countries in West Africa. Two important cases, including one death, and two locally acquired cases in healthcare workers have been reported in the United States. CDC and partners are taking precautions to prevent the further spread of Ebola within the United States.

Latest CDC Outbreak Information
Updated October 26, 2014

What's New

- October 27, 2014 [Fact Sheet: Monitoring Symptoms and Controlling Movement to Stop Spread of Ebola](#)
- Updated October 27, 2014: [Interim U.S. Guidance for Ministry and Management of Persons with Potential Ebola Virus Exposure](#)
- Updated October 27, 2014: [Case Definition for Ebola Virus Disease \(EVD\)](#)
- October 27, 2014: [Epidemiologic Risk Factors to Consider When Examining a Person for Exposure to Ebola Virus](#)
- October 26, 2014: [Media, Social, and Emergency Department Call and Management for Patients Who Present with Possible Ebola Virus Disease](#)
- October 25, 2014: [Updated Case Counts](#)

[What's New \(Continued\)](#)



Ebola Signs and Symptoms

SIGNS AND SYMPTOMS
Symptoms may appear anywhere from 2 to 21 days after exposure to ebolavirus...

FOR HEALTH-CARE WORKERS
Updated guidance for managing or preparing for Ebola in the U.S. and abroad...

TRANSMISSION
Spread through bodily fluids of a person who is sick with or has died from Ebola...

PREVENTION
Those at highest risk include health care workers and the family and friends of an infected individual...

RISK OF EXPOSURE
During outbreaks of Ebola, those at highest risk include health care workers and family...

DIAGNOSIS
Diagnosing Ebola in an individual who has been infected is only a few days after onset...

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Ebola



MSF's West Africa Ebola response started in March 2014 and counts activities in Guinea, Liberia, and Sierra Leone. In response to a confirmed case in Mali, an MSF team arrived in the country this week to reinforce MSF's regular mission and provide technical support to the Ministry of Health.

MSF currently employs 263 international and around 3,084 locally hired staff in the region. The organization operates six Ebola case management centers (CMCs), providing approximately 600 beds in isolation. Since the beginning of the outbreak, MSF has sent more than 700 international staff to the region and admitted more than 5,200 patients, among whom around 3,200 were confirmed as having Ebola. More than 1,200 patients

News and stories from around the world

RELATED RECENT

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What MSF Expands

Activities to Fight Ebola

Outbreak

VOICE FROM THE FIELD

11 SEP 2014

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Sierra Leone

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Situation Reports

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437 patients have survived the EBOLA Virus disease and have been discharged.

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Ebola Situation Report

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- Ebola Situation Report_Vol 116
- Ebola Situation Report_Vol 115
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- Ebola Situation Report_Vol 113
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- Ebola Situation Report_Vol 111
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- Ebola Situation Report_Vol 109
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- Ebola Situation Report_Vol 107
- Ebola Situation Report_Vol 106
- Ebola Situation Report_Vol 105
- Ebola Situation Report_Vol 104
- Ebola Situation Report_Vol 103
- Ebola Situation Report_Vol 102
- Ebola Situation Report_Vol 101
- Ebola Situation Report_Vol 99
- Ebola Situation Report_Vol 98
- Ebola Situation Report_Vol 97
- Ebola Situation Report_Vol 96
- Ebola Situation Report_Vol 95
- Ebola Situation Report_Vol 94
- Ebola Situation Report_Vol 93
- Ebola Situation Report_Vol 92
- Ebola Situation Report_Vol 91
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- Ebola Situation Report_Vol 87



Government of Sierra Leone
Ministry of Health and Sanitation
EBOLA VIRUS DISEASE - SITUATION REPORT (Sit-Rep) – 29 September, 2014

Main highlights

- For the 28th September 2014, a total of 181 new samples were received and analysed by the CDC Kenema Lab, the South African NICD MLU Lab-Western Area and the Chinese Lab-Jui: Kenema (13), Kambia (2), Koinadugu (1), Bombali (17), Tonkolili (19), Port Loko (62), Pujehun (4), Bo (4) and Western Area (59). Ninety (90) of these samples are positive, 72 are negative while 19 suspected cases have been recommended for a second test base on the symptoms onset.(See table 1)
- Two (2) samples (1 positive & 1 negative) are not included in table 1 below because of missing district variable
- The cumulative number of Laboratory confirmed cases are 2,090 while confirmed death is still 522 with a Case Fatality Rate (CFR) based on confirmed cases of 25.0%.

Table 1: National Cumulative summary of Ebola Cases 23 May - 28 September 2014

Name of district	District population	Number of cases on 28 Sept 2014				Cumulative cases as of 23 May - 28 Sept 2014				Cumulative deaths			CFR
		Non-Case	Suspected	Probable	Confirmed	Non-Case	Suspected	Probable	Confirmed	Suspected	Probable	Confirmed	
Kailahun	465,048	0	0	0	0	280	18	32	529	4	35	212	40.1
Kenema	653,013	11	2	0	0	596	35	0	426	4	0	232	54.5
Kono	325,003	0	0	0	0	35	40	1	18	1	0	2	0.0
Kambia	341,690	0	0	0	2	5	1	0	14	0	0	1	7.1
Koinadugu	335,471	1	0	0	0	28	0	0	0	0	0	0	0.0
Bombali	494,139	11	2	0	4	108	10	1	227	0	0	12	5.3
Tonkolili	434,937	4	6	0	9	44	10	0	74	0	0	5	6.8
Port Loko	557,978	19	4	0	39	110	14	1	270	1	1	17	6.3

Social Media

Dr. Tom Frieden retweeted

CDC @CDCgov · Nov 12

Unsafe burial practices are a major cause of new #Ebola cases in Sierra Leone. This week's #EbolaBigIdea is SAFE BURIALS SAVE LIVES

85 29

Dr. Tom Frieden @DrFriedenCDC · Nov 13

Sen. Frist on #Ebola: "...most effective way to protect the American people is to extinguish this fire at its source." fxn.ws/1xyoykB

17 7 [View summary](#)

Dr. Tom Frieden @DrFriedenCDC · Nov 13

Health care workers: Watch video w/ important tips on proper PPE use, caring for patients w/ #Ebola: bit.ly/11i0qXQ

YouTube



65 27 [View more photos and videos](#)



 **UNMEER**

The official twitter account of United Nations Mission for Ebola Emergency Response #EbolaResponse

Accra, Ghana
un.org/ebolaresponse

102 Photos and videos

TWEETS 402 FOLLOWING 264 FOLLOWERS 5,653 FAVORITES 621 LISTS 7 [Follow](#)

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UNMEER retweeted **World Bank** @WorldBank · 30m

Live TODAY 12:40pm ET: Watch Pres Kim, @UNSG & @WHO DG statement following UNCEB session on #EbolaResponse: wrk.bg/EFpcD

11 6

UNMEER @UNMEER · 1h

At 3:00 p.m. #NewYork time today, @UNBanbury to brief @UN #SecurityCouncil via video-conference from #Accra on #EbolaResponse efforts

11 2

UNMEER @UNMEER · 23h

Another busy day at @UNMEER HQ in #Accra with staff from @UN family united in their #EbolaResponse efforts

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#AlMcCarrie
Mesa @ Madrid
Dama Basanga Kuru Nyegele
#ch Helix 2
Abe Ji
Dongso

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Opening of Island clinic, new #Ebola treatment unit in #Monrovia, #Liberia, with 100 beds goo.gl/uzjFq9



RETWEETS 167 FAVORITES 66

9:17 AM - 22 Sep 2014



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AUTHOR: [Kathryn Stinson](#)

BLOG: [MSF Ebola Blog](#)

NATIONALITY: [South African](#)

COUNTRY: [Sierra Leone](#)

JOB TYPE: [Epidemiologist](#)

TOPIC: [Ebola](#)

The Ebola Clinic

21 October 2014

2 Comments [Comments](#)

"So just think of the one who is about to die, trapped between the fence while at the same time, there are all those people, on the other side of the fence,"
by Albert Camus.

"Can you tell us who you were living with before you came across the fence. Feeling uncomfortably self-conscious to talk to him, I stand about seven metres away, in the tent, trying to catch the emotion in his face.

He is middle aged and he lost his wife to Ebola three days ago. He cared for her while she was dying. He was brought in by ambulance to our treatment centre last night with a fever. We are trying to probe very gently whether there was anyone else who may have been in contact with him when he became sick. This is so that the health promotion and surveillance teams can follow up with the contacts to ensure that that if they are in quarantine that they have sufficient food, drinking water, mattresses and soap for infection control, and to address the concerns of the community and sensitize them about Ebola.

"We are trying to probe very gently whether there was anyone else who may have been in contact with him when he became sick. This is so that the health promotion and surveillance teams can follow up with the contacts to ensure that that if they are in quarantine that they have sufficient food, drinking water, mattresses and soap for infection control, and to address the concerns of the community and sensitize them about Ebola."



BY FREDERICK BOBOR JAMES ON 19 FEB 2015

Sierra Leone: staying at zero in an ex-Ebola hotspot

Close to the centre of Komendeh Luyama village in Sierra Leone's Kenema district is a mud-walled family home that looks much like the others - except the doors and windows [...]



BY HELENE SANDBU RYENG ON 11 FEB 2015 • (2 COMMENTS)

Ebola in Liberia: from secret burials to safe burials

Secret burials were not in my vocabulary before I arrived in Liberia. When I think of burials I think of services with a lot of people. Powerful speeches about the [...]



BY GEETA RAO GUPTA ON 09 FEB 2015 • (1 COMMENT)

Witnessing rays of hope in West Africa's Ebola fight

In late January, Deputy Executive Director for UNICEF, Geeta Rao Gupta, travelled to Sierra Leone, Liberia and Guinea to support communities, partners and UNICEF staff as they continue to battle [...]





EDITOR'S CHOICE Ebola in U.S. • Hong Kong • Great American freakout • ISIS • Aral Sea • Volcano • Secret Service • Kansas City Royals

DEVELOPING STORY

Is it time to panic?



Click to play

1st Ebola diagnosis in U.S.

A patient at a Dallas hospital is the first person diagnosed with Ebola in the U.S. Should we be concerned? **FULL STORY**

- Ebola Fast Facts | How to help
- How the Ebola virus spreads
- Why isn't containment working?
- Bleach is best friend in this fight
- Photos | Now what?

THE LATEST

- **NEW** More bodies found on volcano
- Protests in HK on China's National Day
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- Death penalty in beheading case?
- Source: DNA links cases of Va. women
- Dad did double-take at suspect's pic
- Suspect in Realtor's killing: 'Sorry'
- Royals win AL Wild Card in classic
- Bill Maher slammed for comments
- Morgan: Walmart blames me?

OPINION

- Hong Kong chief: Raw emotion no help

SECRET SERVICE SECURITY LAPSES

Armed man shared elevator with Obama

Testimony given by the director of the embattled U.S. Secret Service appears to conflict with the news that a private security contractor with a gun shared an elevator with President Obama, in violation of protocol. **FULL STORY**

More: Director: WH intrusion 'unacceptable' • Secret Service: We're outraged • When to use deadly force?



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EDITOR'S CHOICE Ebola • Trooper killing • ISIS • Kim Jong Un • Death row • Newlywed murder-suicide

'What if they had taken him right away?'



Thomas Eric Duncan's family left devastated

Many are wondering why the first Ebola patient diagnosed in America died when several others treated in the U.S. survived. FULL STORY

- Bias? | Ebola patient's last words
- 6 possible Ebola cases in Spain
- 5 U.S. airports to screen for Ebola
- Official: Texas deputy not at risk

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updated 7:58 AM EDT, Thu October 16, 2014

EDITOR'S CHOICE Ebola • Severe weather • Kim Jong Un • Jack-o'-Lantern sun • Michelle Obama • So

Second health care worker tests positive for Ebola



Officials: Worker cared for Thomas Eric Duncan

The health care worker reported a fever Tuesday and was immediately isolated, a hospital spokeswoman says. FULL STORY

- Nurse: 'Doing well' | Fear spreads
- Texas doc gets testy on live TV
- Get up to speed | WHO on outbreak
- Gov.'s Ebola myth: Water kills it

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updated 12:38 PM EDT, Thu October 16, 2014

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Nurse with Ebola being moved to Maryland



Nina Pham to be treated at NIH

Pham, the first nurse infected, will be transferred to a National Institutes of Health facility, according to two sources. FULL STORY

- CDC director called to Capitol Hill
- Live blog: Latest updates on Ebola
- Spanish nurse is improving
- Liberia overwhelmed | Fear spreads

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updated 9:53 AM EDT, Fri October 17, 2014

EDITOR'S CHOICE Ebola • ISIS • iPad • Joe Biden's son • Winter weather • John Grisham • American

Microbiologist: Ebola's faster than us



Will be 'massive undertaking'

The current Ebola outbreak is 'running much faster' than the international response to it, the co-discoverer of the virus said. FULL STORY

- Did nurse's flights put 800 at risk?
- Who is Amber Vinson? | Fear grows
- Video of nurse in hospital bed
- Obama considering Ebola czar
- Can germ-zapping robot help?

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updated 11:53 AM EDT, Thu October 16, 2014

EDITOR'S CHOICE Ebola • ISIS • Obama's credit card • 'The Night' • Joe Biden's son • Winter weather • Lindbergh killing • American

Belize rejects U.S. request



Ebola fears hit airline, cruise line

Julia Evers says Ebola 'can be potentially as contagious as the flu' as public that we will not get fighting - all at once - for decades. FULL STORY

- Trooper ban? | Obama czar slammed
- Powerful people, presidential words
- Ebola in U.S.: Who has it, who might
- Waters wider: My family is gone
- Map | Epidemics throughout history

LEADING THE MARCH

America's most famous neighborhood

Photographer Zia Mehalli chronicled the Hagin-Aubrey district of San Francisco from about 1910 to 1915, when it was being a quiet, non-diverse fringe area to Upper Central. FULL STORY

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updated 9:58 AM EDT, Fri October 17, 2014

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Guinea to Bellevue: Tracking the doc with Ebola



Jogging, bowling, riding subway

Craig Spencer was in contact with four people after he started exhibiting symptoms, authorities said, which is when he was contagious. FULL STORY

- NYC doctor has Ebola | Who is he?
- NEW Latest updates on Ebola crisis
- Paul Allen vows \$100M against Ebola
- Country won't screen fliers from U.S.
- Ebola's messy truth
- Country reports first Ebola case

Size of the collection

As of April 21, 2015:

- 254 starting point URLs
- 3,247,247 URLs
- 182 GB archived
- Global Health Events collection is available at <https://archive-it.org/collections/4887>





P.K. Lee/MSF

Three recovered Ebola patients get a ride back home after successfully completing their treatment. One patient holds her certificate of discharge that says she is free from Ebola and does not constitute a threat to the community.

Video Player

<https://wayback.archive-it.org/4887/20141114/234156/http://www.cdc.gov/hiv/ebola/resources/videos/ebola-first-lady-geneva-psa.mp4>



Top 10 Things You REALLY Need to Know about EBOLA

- 10 Your dog or cat is not spreading Ebola.**
There have been no reports of dogs or cats becoming sick with Ebola or of being able to spread Ebola to people or other animals. Because the risk of an Ebola outbreak spreading rapidly in the United States is very low, the risk to pets is also very low, too.
- 9 Food and drinks imported into the United States from West Africa are safe to eat and drink.**
No one has been infected with Ebola from foods that are imported into the United States to date. You can't get Ebola from food grown or legally purchased in the United States.
- 8 Mosquitoes are the deadliest animals in the world, but they don't carry Ebola.**
There have been no reports of mosquitoes or other insects transmitting Ebola virus. Only mammals (for example, humans, bats, monkeys, and apes) have become infected with Ebola virus and spread it. Mosquitoes do carry other organisms, like malaria and West Nile virus, that can make people very sick, and sometimes even cause death.
- 7 Your family members, coworkers, and neighbors returning from countries with Ebola outbreaks don't pose a danger to you and your family.**
Ebola is spread through direct contact with blood or body fluids (including but not limited to urine, saliva, sweat, tears, vomit, breast milk, and semen) from a person sick with Ebola. Not everyone coming from countries with Ebola outbreaks has been in contact with someone who has Ebola. Travelers coming from countries with a large Ebola outbreak will be given a CARE (Check and Report Ebola) kit at the airport to help monitor themselves for Ebola symptoms. In addition, they will be actively monitored, meaning they are checked on at least once a day by public health officials. It's safe for you and your family to be around people being monitored as long as they do not have signs or symptoms of Ebola.
- 6 Household bleach and other disinfectants kill Ebola.**
Household bleach or an EPA-registered hospital disinfectant will kill Ebola.
- 5 If you're feeling sick, think flu not Ebola.**
Although flu and Ebola have some similar symptoms, Ebola is rare disease, particularly in the United States. Flu is very common. To date, 10 cases of Ebola have been detected in the United States, and two of those were imported from West Africa. Every year in the United States, millions of people are infected with flu, hundreds of thousands are hospitalized, and tens of thousands die from flu. Unless you have had direct contact with someone who is sick with Ebola, your symptoms are most likely caused by flu, and you do not have Ebola.
- 4 Ebola is not airborne.**
Ebola is not a respiratory disease and is not spread through the airborne route. There is no evidence that Ebola is spread by coughing or sneezing. Ebola might be spread through large droplets (sputum or spray) but only where a person is very sick. That's why hospital workers must wear personal protective equipment around people with Ebola to stay safe.
- 3 The Ebola outbreak is not affecting the safety of airline travel.**
Airline travelers in the United States are extremely unlikely to become infected with Ebola. All travelers coming from Liberia, Sierra Leone, Guinea, or Mali, arrive at one of five airports in the United States where every screening by Customs and Border Protection and CDC is taking place.
- 2 Ebola is only spread from one person to another once symptoms begin.**
Symptoms of Ebola appear anywhere from 2 to 21 days (average 8 to 10 days) after being exposed. A person infected with Ebola cannot spread it to others until symptoms begin.
- 1 You can't get Ebola from a handshake or a hug.**
Ebola is spread through direct contact with body fluids from a person sick with Ebola. Direct contact means that blood or body fluids (including but not limited to urine, saliva, sweat, tears, vomit, breast milk, and semen) from an infected person (alive or dead) have touched another person's eyes, nose, or mouth, or an open cut or wound.

U.S. Department of Health and Human Services
Centers for Disease Control and Prevention

Ebola Must Go: Bury All Dead Bodies Safely-Call 4455



Do not touch, wash or clean any dead body. Burying all who die safely is one of the best ways to make sure we have zero cases of Ebola in Liberia. Call 4455 to report a dead body and to alert the burial teams to pick up the body for free burial.

3

Allow for a Safe Burial when Someone Dies at Home

- 1** Do not touch, wash, or clean the body. Do not touch body fluids or anything a person who has died of Ebola has touched.
- 2** Fly your incense or pray at least 7 feet (1 meter) away from the body. Do not touch, kiss, clean, wash, or wrap the body.
- 3** Always wait 12 or a doctor's order when someone dies.
- 4** Cooperate with the volunteer and allow the burial team to enter your house to safely remove the body. A burial team member may take a swab sample to send to the laboratory to test for Ebola.
- 5** People who die must be buried quickly to protect others from Ebola. The burial team will place the body in a body bag and disinfect the home with a safe chlorine solution.
- 6** All items that the person who died touched with a mattress and clothing should be taken from the house and not used by anyone else.
- 7** The body will be taken for the burial team to a cemetery. Families cannot travel with the burial team to the cemetery. The family and a religious leader may be able to view the burial from at least 15 feet (5 meters) away.
- 8** If the Ebola test confirms that your loved one died of Ebola, you will have to stay at home for 21 days. This is how long it can take to develop Ebola symptoms. Health workers will visit the house every day to check if anyone becomes sick.

U.S. Centers for Disease Control and Prevention

Epidemic & Pandemic Alert and Response (EPR)

- Overview
- Components
- Features
- Outbreak News
- Situation reports
- Publications
- Ebola virus disease in West Africa

Ebola virus disease in Guinea (Situation as of 24 March 2014)

A total of 86 cases including 59 deaths (CFR: 68.5%) reported from 4 districts (Guekedou, Macenta, Nzerekore and Kissidougou)

Event description

The Ministry of Health (MoH) of Guinea has notified WHO of a rapidly evolving outbreak of Ebola virus disease in forested areas south eastern Guinea. As of 24 March 2014, a total of 86 cases including 59 deaths (case fatality ratio: 68.5%) had been reported. The cases have been reported in Guekedou, Macenta, Nzerekore and Kissidougou districts. In addition, three suspect cases including two deaths in Conakry are under investigation. Four health care workers are among the victims. Reports of suspected cases in border areas of Liberia and Sierra Leone are being investigated.

Six of seven blood samples from suspect cases tested at Institut Pasteur in Lyon, France were positive for Ebola virus by PCR, confirming the first Ebola haemorrhagic fever outbreak in Guinea. Preliminary results from sequencing of a part of the L gene has showed strong homology with Zaire Ebola virus. Additional laboratory studies are ongoing to confirm these findings.

Actions taken

The Ministry of Health (MoH) together with WHO and other partners have initiated measures to control the outbreak and prevent further spread. The MoH has activated the national and district emergency management committees to coordinate response. The MoH has also advised the public to take measures to avert the spread of the disease and to report any suspected cases.

Multidisciplinary teams have been deployed to the field to actively search and manage cases; trace and follow-up contacts; and to sensitize communities on the outbreak prevention and control. Missions are ongoing in the affected areas of Guinea.

search... Search

Cholera

Cholera fact sheet

Crimean-Congo haemorrhagic fever (CCHF)

CCHF fact sheet

Ebola virus disease

Fact sheet on Ebola virus disease [Français]

More on Ebola virus disease [Français]

Marburg

Marburg haemorrhagic fever fact sheet

Poliomyelitis

Poliomyelitis fact sheet

Yellow fever

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Ebola virus disease, West Africa – update 8 August 2014

Epidemiology and surveillance

Between 5 and 6 August 2014, a total of 68 new cases of Ebola virus disease (laboratory-confirmed, probable, and suspect cases) as well as 29 deaths were reported from Guinea, Liberia, Nigeria, and Sierra Leone.

Health sector response

On Wednesday, 6 August and Thursday, 7 August, an Emergency Committee was held via teleconference to determine whether the current outbreak constitutes a Public Health Emergency of International Concern. After discussion and deliberation on the information provided, the Committee advised that:

- the Ebola outbreak in West Africa constitutes an 'extraordinary event' and a public health risk to other States;
- the possible consequences of further international spread are particularly serious in view of the virulence of the virus, the intensive community and health facility transmission patterns, and the weak health systems in the currently affected and most at-risk countries.
- a coordinated international response is deemed essential to stop and reverse the international spread of Ebola.

It was the unanimous view of the Committee that the conditions for a Public Health Emergency of International Concern (PHEIC) have been met.

On Friday, 8 August, the Director-General, Dr Margaret Chan, gave a press briefing to the international media from WHO Headquarters. Dr Chan will give an additional briefing on the situation of the outbreak and the ongoing response in the region to the Permanent and Observer Missions to the United Nations and other international organizations in Geneva on Tuesday, 12 August. Permanent Representatives of the affected countries have been invited to speak on behalf of their respective Governments on the national Ebola response and priorities.

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“Six of seven blood samples from suspect cases tested at Institut Pasteur in Lyon, France were positive for Ebola virus by PCR, confirming the first Ebola haemorrhagic fever outbreak in Guinea.”

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News & Events

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FDA Statement

FDA warns consumers about fraudulent Ebola treatment products

For Immediate Release

August 14, 2014

Statement

[Español](#)

[Français](#)

The U.S. Food and Drug Administration is advising consumers to be aware of products sold online claiming to prevent or treat the Ebola virus. Since the outbreak of the Ebola virus in West Africa, the FDA has seen and received consumer complaints about a variety of products claiming to either prevent the Ebola virus or treat the infection.

There are currently no FDA-approved vaccines or drugs to prevent or treat Ebola. Although there are experimental Ebola vaccines and treatments under development, these investigational products are in the early stages of product development, have not yet been fully tested for safety and efficacy. There are no approved vaccines or drugs to prevent or cure Ebola available for purchase.

Individuals promoting these products should take immediate action to correct the information.

It is important to note that according to the Centers for Disease Control and Prevention (CDC), Ebola does not pose a significant risk to the U.S. public. Unfortunately, during outbreak situations, fraudulent products that claim to prevent, treat, or cure a disease all too often appear on the market. The FDA monitors for these fraudulent products and false claims and takes appropriate action to protect consumers.

Inquiries

Media

[FDA Office of Media Affairs](#)
301-796-4540

Consumers

888-INFO-FDA

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Related Information

“the FDA has seen and received consumer complaints about a variety of products claiming to either prevent the Ebola virus or treat the infection.”

Future research

- Maintain record of scholarship and varied perspectives in the historical record
- Preserve at-risk artifacts of cultural and technological change
- Diversity of materials
- Historians will be able to research digital collections in revealing and novel ways

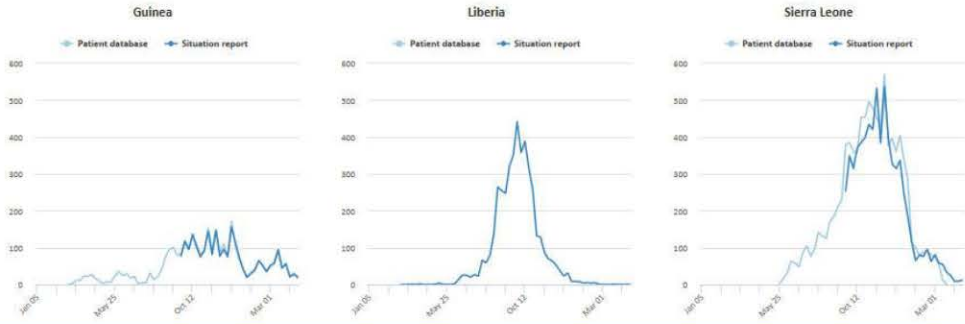




Crossing the border, Ebola enters Sierra Leone
 02 April 2015 - Following confirmation of Ebola cases in Guinea, Dr Nsenga went to Sierra Leone to help assess emergency response capacity. During his trip, the first signs of Ebola crossing the border were detected. Originally from DRC, Dr Nsenga quickly realized that the few cases in Kailahun could quickly become a serious health emergency.

Current Situation

Cases in the most affected countries



<http://apps.who.int/ebola/> (April 22, 2015)



NDSA 2015 National Agenda for Digital Preservation

- A gap is starting to emerge between the types of materials that are being created and used in our society and the types of materials that make their way into libraries and archives.
- The stewardship community must recognize this gap, understand why it exists, and determine how it could be addressed at local, regional, and national levels.



Learn more:

- NLM Global Health Events web archive collection
<https://archive-it.org/collections/4887>
- HMD blog *Circulating Now* <http://circulatingnow.nlm.nih.gov/>
- HMD Pinterest collection on Ebola web collecting
<https://www.pinterest.com/NLMHistory/ebola-2014-a-web-archive-collection/>
- NDSA 2015 National Agenda for Digital Stewardship
<http://www.digitalpreservation.gov/ndsa/documents/2015NationalAgenda.pdf>

Questions? moffattc@mail.nih.gov

