Collecting born-digital resources documenting the 2014 Ebola Outbreak

Source: WHO, October 1, 2014
Web collecting at NLM--Background

- 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
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
Web collecting at NLM--Why?

- Information published on the Web today will be the primary resources for future researchers.
  --International Internet Preservation Consortium (IIPC)

- “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)
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.*
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

Disaster Management
Emergency Medicine
Infectious Diseases
Public Health

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

Obstetrics
Occupational Health and Safety
Oncology
Ophthalmology
Optometry
Orthopedics

Religion and Medicine
Reproductive Medicine
Rheumatology
Space Life Sciences
Sports Medicine
Surgery
Therapeutics
Toxicology
Urology
Veterinary Medicine
“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)
Ebola Update

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

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

- 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
- Ebola 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.

International Organizations

Global Alert and Response (GAR)

Ebola response roadmap

WHO has issued a roadmap to guide and coordinate the international response to the outbreak of the Ebola virus disease in West Africa. The roadmap aims to stop ongoing Ebola transmission worldwide within 6-9 months while swiftly managing the consequences of any further international spread. It also recognizes the need to address, in parallel, the outbreak’s broader socioeconomic impact:

- Ebola response roadmap
- Situation reports
- WHO response roadmap for scaled-up response to the Ebola outbreak - annexment

Ebola

Ebola virus disease is a severe, often fatal illness in humans.

Fact sheet on Ebola

Global Ebola Response

The Ebola virus disease is a severe, often fatal illness in humans. It is transmitted to humans from infected animals, with the highest risk of exposure being during handling or slaughtering of infected primates such as monkeys, gorillas, and chimpanzees. The virus can also be transmitted from person to person through close contact with infected individuals, particularly during the burial of infected persons. The incubation period of Ebola can range from 2 to 21 days, with an average of 5 to 10 days. The main symptoms of Ebola include fever, headache, muscle pain, fatigue, and vomiting. The mortality rate of Ebola can be as high as 90% in some cases. There is no specific cure or vaccine for Ebola, and treatment is largely supportive, focusing on managing complications and providing hydration and addressing fever.

MSF's West Africa Ebola response started in March 2014 and extends to 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 3,064 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 3,200 were confirmed as having Ebola. More than 1,200 patients have recovered and been discharged.

U.S. National Library of Medicine
Situation Reports

Ebola Situation Report

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

Main highlights:
- For the 29\textsuperscript{th} 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-Jul: Kenema (13), Kambia (2), Koinadugu (1), Bombali (17), Tonkolili (19), Port Loko (62), Freetown (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 based 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 whiles confirmed death is still 522 with a Case Fatality Rate (CFR) based on confirmed cases of 25.3%.

Table 1: National Cumulative Summary of Ebola Cases 23 May – 28 September 2014

<table>
<thead>
<tr>
<th>Name of district</th>
<th>District population</th>
<th>Number of cases on 28Sept 2014</th>
<th>Cumulative cases as of 23May 2014</th>
<th>Cumulative deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td>Non-Case</td>
<td>Suspected</td>
<td>Probable</td>
</tr>
<tr>
<td>Freetown</td>
<td>465,040</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kenema</td>
<td>613,013</td>
<td>11</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Kono</td>
<td>315,063</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Kambia</td>
<td>341,660</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Koinadugu</td>
<td>315,416</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Bombali</td>
<td>484,119</td>
<td>11</td>
<td>2</td>
<td>0</td>
</tr>
<tr>
<td>Tonkolili</td>
<td>434,917</td>
<td>4</td>
<td>6</td>
<td>0</td>
</tr>
<tr>
<td>Port Loko</td>
<td>517,978</td>
<td>19</td>
<td>4</td>
<td>0</td>
</tr>
</tbody>
</table>
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.” fkn.ws/1xyoykB

17 7

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

View summary

View more photos and videos

UNMEER

World Bank

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

11 2

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

WHO

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

WHO

RETTWEETS 167
FAVORITES 66
9:17 AM - 22 Sep 2014
“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 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.”
Sierra Leone: staying at zero in an ex-Ebola hotspot

Close to the centre of Komende 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 [...] 

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 [...] 

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 [...]
Is it time to panic?

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?

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

- Director: Wh intrusion ‘unacceptable’
- Secret Service: We’re outraged
- When to use deadly force?

READ THIS, WATCH THAT

- Once vast sea dries up to almost nothing
- This movie costs more than going to Mars
- The dark arts of golf’s glamour girl

OPINION

- Hong Kong chief: Ray monomy in help
“I’ve Never Had a Job Like This”: Life Inside an Ebola Treatment Unit

This blog is part of our Daily Dispatches series in which we've teamed up with photojournalist Morgana Wingard, who is on the ground with USAID staff in Liberia documenting the fight on Ebola. Her photo series and blogs from the front offer unique angles into the many facets of the Ebola story—from the health care workers battling Ebola from the front lines, to the many ways the epidemic is impacting the health, economy and future of the nation.

BUAKOMO, Liberia—“It becomes day-to-day life. You get into your PPE [personal protective equipment] and you go in every day and you feel safe,” explains Audrey Rangé—a nurse at the Bong County Ebola treatment unit run by International Medical Corps with support and funding from USAID.

Before landing at Roberts International Airport in Monrovia on September 5, Audrey worked on a maternal, child health and nutrition program in Timor-Leste. “I always wanted to do disaster relief work. The crisis started to take off. It was in the news a lot. People were talking about it. So I went online. I saw a position for an Ebola response nurse. To me it was just the right time. The description just kind of fit me. I was speaking

Harvard geneticist Dr. Pardis Sabeti spoke with us about her groundbreaking work sequencing the Ebola genome and what it means for an approach to tackling the outbreak.

The Historical Roots of the Ebola Scare in the United States

by Sheldon M. Stern

Sheldon M. Stern is the author of numerous articles and Aviding ‘The Final Failure’ (2015), The Cuban Missile Crisis (2012), and The Cuban Missile Crisis in American Memory: Myths vs. Reality (2012), in the Stanford University Press Nuclear Age Series. He received his Ph.D. from Harvard in 1970 and was historian at the JFK Library in Boston from 1977 to 2000.
Size of the collection

As of July 20, 2015:

- 269 starting point URLs
- 4,446,975 URLs
- 266 GB archived
- Global Health Events collection is available at https://archive-it.org/collections/4887
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.
“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.**”

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

Challenges/lessons learning

- Deciding to collect, then when to start and when to stop
  - WHO Public Health Emergency of International Concern (PHEIC)
  - NLM Emergency Access Initiative (EAI)

- Identifying/collecting a diversity of perspectives

- Time: for selecting new content, reviewing content crawled
Learn more:

- NLM Global Health Events web archive collection
  https://archive-it.org/collections/4887
- HMD Pinterest collection on Ebola web collecting
- NDSA 2015 National Agenda for Digital Stewardship

Questions? christie.moffatt@nih.gov