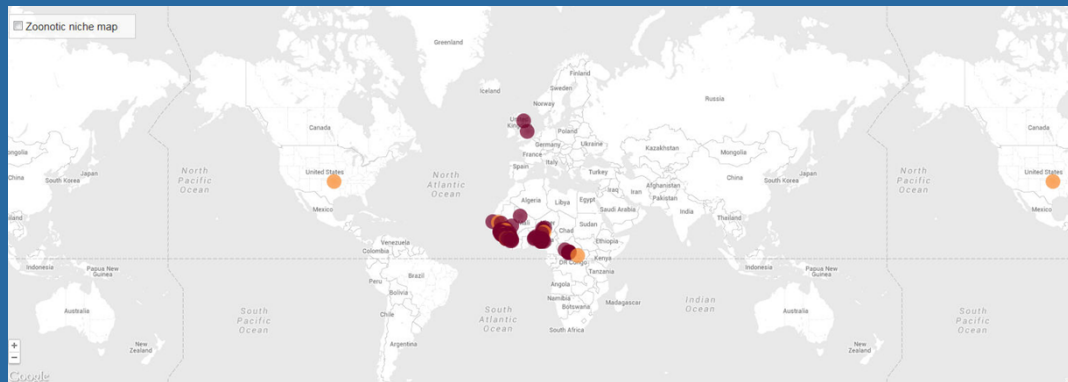


Collecting born-digital resources documenting the 2014 Ebola Outbreak



Source: WHO, October 1, 2014

Christie Moffatt

History of Medicine Division

National Library of Medicine

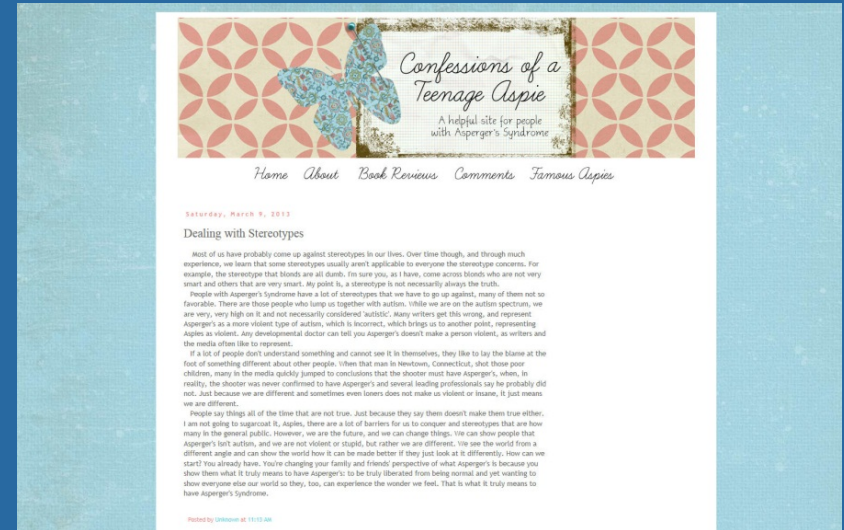
National Institutes of Health

U.S. Department of Health and Human Services



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



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, a platform for patient engagement. The main content is a blog post titled 'I've started an RFP for my skin cancer'. The author, Dave, explains that he has announced his new skin cancer diagnosis and is seeking input from vendors. He details the Request for Proposal (RFP) process, including the criteria for vendors and the importance of patient-centered care. The post includes a 'Request for Proposals: remove a basal cell carcinoma' form and a 'Subscribe by email' section. The website also features a navigation menu, a search bar, and various partner logos like Edelman Digital, TIME, Patient Safety, and HealthLeaders.

The screenshot shows the 'FLU.gov' website, a resource for flu information. The main content is a page titled 'Avian Influenza A (H7N9) Virus'. The page provides detailed information about the virus, including its symptoms, prevention, and treatment. It also includes a 'Current Flu Situation' section with a 'H7N9' tab selected. The page features a search bar, a navigation menu, and various links to related resources. The website is designed to be user-friendly and accessible, with a clear layout and easy-to-read text.



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.
<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
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Clinical Laboratory Science
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Communication Disorders
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Education for the Health Professions
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Endocrinology
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Health Communication

Obstetrics
Occupational Health and Safety
Oncology
Ophthalmology
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Orthopedics

Disaster Management
Emergency Medicine
Infectious Diseases
Public Health

Rehabilitation

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Medical Informatics
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Medicine
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Military Medicine
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Molecular Medicine
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Neurology
Neuroscience
Nursing

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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)





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

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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.

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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

[More](#)

<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




USAID LEADERSHIP

HOME > FIGHTING EBOLA: A GRAND CHALLENGE FOR DEVELOPMENT > EBOLA

WHO WE ARE WHAT WE DO WHERE WE WORK RESULTS & DATA NEWS & INFORMATION WORK WITH USAID

EBOLA LATEST NEWS
CARE AND EVACUATION OF INTERNATIONAL RESPONDERS
GRAND CHALLENGE: FIGHTING EBOLA
MEDICAL VOLUNTEERS NEEDED
ON THE FRONT LINES OF AN EPIDEMIC

EBOLA



Fighting Ebola: A Grand Challenge for Development [LEARN MORE ->](#)

HOW CAN I HELP?

Medical Volunteers
We are appealing to the medical community to help with the outbreak. If you are a qualified medical professional, please contact reputable organizations with disaster information (CID).
As part of a comprehensive and coordinated response, we are developing an introductory safety training course for medical responders in Africa. Please contact us for more information.



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

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NIAD > Health & Research Topics > Ebola/Marburg > Research

Ebola/Marburg

Understanding Research

Ebola/Marburg Research
The molecular 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 Ocuvax, a Swiss-Italian biotech company recently acquired by GSK. The investigational vaccine, which was designed by VRC scientists, contains no infectious Ebola virus material. 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 vector platforms. A Phase I clinical trial is planned for late 2015 or early 2016. NIAID is also funding Profectus Biosciences to develop and test a recombinant vesicular stomatitis virus vectored vaccine against Ebola/Marburg. The vaccine is currently in preclinical testing to determine the most promising constructs. In addition, NIAID is working with Bavarian 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 developing a monoclonal antibody "cocktail" called MB-2003, which prevents Ebola virus infection in animals. This research vaccine for human and veterinary use and a live vaccine for use in wildlife in Africa are under development.

Website Tools
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Research Feature
Read about NIAID-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



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Ebola (Ebola Virus Disease)

Recommended Tweet Share

Language: English

2014 West Africa Outbreak
The 2014 Ebola epidemic is the largest in history, affecting multiple countries in West Africa. Two imported 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 25, 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 Monitoring and Movement 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 Evaluating a Person for Exposure to Ebola Virus](#)
October 26, 2014: [Identify, Isolate, Inform: Emergency Department Evaluation 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 HEALTHCARE 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 for only a few days is difficult.

International Organizations

World Health Organization

Health topics | Data | Media centre | Publications | Countries | Programmes | About WHO

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 rapidly managing the consequences of any further international spread. It also recognises the need to address, in parallel, the outbreak's broader socioeconomic impact.

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

GLOBAL EBOLA RESPONSE

Home | The Global Response | What We Need | News | UN Mission | Data | Resources | Donate

GLOBAL EBOLA RESPONSE

The UN system and the international community are coming together to deliver a rapid, robust and effective response to help the Governments and the people of Guinea, Liberia and Sierra Leone. Read, listen and watch how the UN and its partners are responding to the Ebola outbreak.

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THIS WEEK AT THE UN - 07 NOVEMBER 2014

EBOLA: UN SAYS EXPERIMENTAL VACCINE TRIALS IN WEST AFRICA COULD BEGIN BY JANUARY

JAPAN DONATES \$48 MILLION TO FIGHT EBOLA

Senegal is now free of Ebola virus transmission

Liberia comm stoppi

Ebola

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

Fact sheet on Ebola



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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

FIELD NEWS | 11.26.2014
Mali: MSF Expands Activities to Fight Ebola Outbreak

VOICE FROM THE FIELD | 11.26.2014
Ebola: "Three Miracles" in Bo, Sierra Leone

VIDEO | 11.09.2014
Preventing Malaria While Fighting Ebola in Liberia

PRESS RELEASE | 11.17.2014
Democratic Republic of Congo: Intervention for the Ebola Outbreak Comes to an End

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10 AID DELIVERED TO 1.3 MILLION PEOPLE IN 14 STRICKEN COUNTRIES



UN WARNS OF ECONOMIC HARDSHIP IN EBOLA-HIT COUNTRIES AS WORLD BANK AGREES

Situation Reports

Welcome to Ministry of Health and Sanitation, The Republic of Sierra Leone. Home News & Media Contact Us Staff Login

MINISTRY OF HEALTH AND SANITATION
THE REPUBLIC OF SIERRA LEONE

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

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Ebola Situation Report

- Ebola Situation Report_Vol 125
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- Ebola Situation Report_Vol 88
- 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	Cumulative Non-Case	Cumulative Suspected	Cumulative Probable	Cumulative Confirmed	Cumulative Suspected	Cumulative Probable	Cumulative 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



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UNMEER @UNMEER
 The official twitter account of United Nations Mission for Ebola Emergency Response. #EbolaResponse
 Accra, Ghana
un.org/ebolaresponse/

132 Photos and videos

Tweets Tweets & replies Photos & videos

UNMEER retweeted
World Bank @WorldBank · 39m
 Live TODAY 12:40pm ET. Watch Pres Kim, #UNSG & @WHO DG statement following UNCEB session on #EbolaResponse: wrld.bg/EFpCd
 11 6

UNMEER @UNMEER · 5h
 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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- #YaMeCansse
- Messi at Madrid
- Dinana Bwanjya Kamu Ngegalau
- Pach Perfect 2
- Allez Jo
- Dongwoo

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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

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Blogs, photos and stories from the front line of MSF's emergency medical work

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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 be while at the same time, there are all those people, on th
by Albert Camus.

"Can you tell us who you were living with before you ca across the fence. Feeling uncomfortably self-conscious to talk to him, I stand about seven metres away, in the t 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 [...]





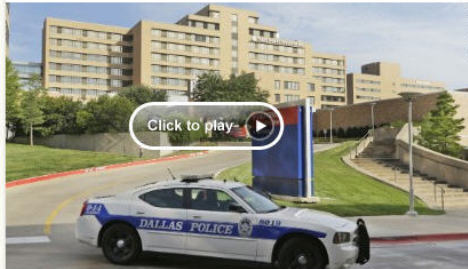
updated 5:29 AM EDT, Wed October 1, 2014

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DEVELOPING STORY

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?

THE LATEST

- **NEW** More bodies found on volcano
- Protests in HK on China's National Day
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- **NEW** School-shooting suspect caught
- 4 more kids with mystery illness
- 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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Nasdaq	4,403.39	-12.462	(-0.28 %)
S&P	1,672.29	-5.51	(-0.28 %)

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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?'



Click to play

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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Second health care worker tests positive for Ebola



Click to play

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 12:36 PM EDT, Thu October 16, 2014

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Nurse with Ebola being moved to Maryland



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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 5:53 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



Click to play

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 11:10 PM EDT, Fri October 17, 2014

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Belize rejects U.S. request



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Ebola fears hit airline, cruise line

John Kerry says Ebola "has the potential to become a scourge like H2N1 or polio that we will end up fighting -- all of us -- for decades." FULL STORY

- Travel ban? | Obama czar slammed
- Powerful people, provocative words
- Ebola in U.S.: Who has it, who might
- Victims wade: My family is gone
- Map | Epidemics throughout history

THE LATEST

- Obama's credit card declined
- Man gets life for killing unarmed teen
- Best seasonal message ever?!
- NEW Hurricane Gonzalo hits Bermuda
- College student with meningitis dies
- ISIS has three warplanes, group says
- NEW HK protesters cross police lines
- Duke Hagan deaf sends live girls
- 16 dead in gate collapse at concert
- Comet nears Mars, orbiters move
- Gay marriages can go ahead in 2 states
- Gov. Rick Scott defends 'gayler'

LOVING THE MIGHTY

America's most famous neighborhood

Photographer Jim Marshall chronicled the Haight-Ashbury district of San Francisco from about 1965 to 1968, when it went from being a quirky rock-dance stage area to hippie Central. FULL STORY

More Photos: 'The Height, Love, Rock and Revolution' | From Woodstock to Coachella | Films that shocked in the '60s

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updated 8:09 AM EDT, Fri October 24, 2014

EDITOR'S CHOICE Ebola • Mifair collision • Harcher attack • Canada shooting • ISIS • Foss Lake • D

Guinea to Bellevue: Tracking the doc with Ebola



Click to play

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 | Survivor
- Country reports first Ebola case



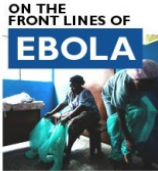
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16 Days Afghanistan Africa Agriculture

"I've Never Had a Job Like This": Life Inside an Ebola Treatment Unit

Posted by Morgana Wingard on Tuesday, October 21st 2014



This blog is part of our Daily Dispatches series in which we 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 team offer unique angles into the many facets of the Ebola story -- from life inside a treatment center, to profiles of 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.

SUAKOKO, 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 Rangel — a nurse at the Bong Couba Ebola treatment unit run by International Medical Corps with support and funding from USAID.

Before landing at Roberts International Airport in Monrovia on September 8, 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

EBOLA DEEPLY

Dr. Pardis Sabeti on Decoding the Ebola Genome

October 18th, 2014 by Ebola Deeply 2 min read

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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.

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Monday, November 17, 2014 | Preventing Disease, Prolonging Life and Promoting Health

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Public Health Perspectives

12 simple ways to prevent cancer

Guest Post: Public health agencies should prioritize public health based on evidence, not fear

What is the scariest disease? Depends how you define scary.

By Beth Szwarcicki
Posted October 28, 2014

Whether you're personally afraid of Ebola or not, you have to admit it's a scary disease: no vaccine, no cure, and high fatality rate are just a few of its distinguishing features. Recently I polled my friends on what diseases they were

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Want to submit a guest post? Check out our Guest Post Guidelines or email us at publichealthperspectives@plos.org

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Public Health Perspectives **Aboard!**

Viet **Le** is a 2th year graduate student in the Department of Molecular Biology, Cell Biology & Biochemistry at Brown University.

Jason **Silverstein** is a Ph.D. Student in the Social Anthropology Department at Harvard University.

Read more about the Public Health blog.

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HISTORY MADE EVERY DAY

10/24/14

The Historical Roots of the Ebola Scare in the United States

tags: Ebola

Like

by Sheldon M. Stern

Sheldon M. Stern is the author of numerous articles and *Averting the Final Failure: John F. Kennedy and the Secret Cuban Missile Crisis Meetings (2003)*, *The Week the World Stood Still: Inside the Secret Cuban Missile Crisis (2005)*, 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>





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/4387/20141114234156/http://www.cdc.gov/hf/ebola/resources/videos/ebola-first-lady-guinea-psa.mp4> play



Allow for a Safe Burial when Someone Dies at Home

- Do not touch, wash, or clean the body. Do not touch body fluids or anything a person who may have died of Ebola has touched.
- Pay your respects or pray at least 3 feet (1 meter) away from the body. Do not touch, kiss, clean, wash, or wrap the body.
- Always call 117 or a district alert line when someone dies.
- Cooperate with the counselor and allow the burial team into your home to safely remove the body. A burial team member may take a swab sample to send to the laboratory to test for Ebola.
- 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.
- All items that the person who died touched such as a mattress and clothing should be taken from the house and not used by anyone else.
- The body will be taken by 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.
- 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

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



3

Do not touch, wash or clean a 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.

Top 10 Things You REALLY Need to Know about EBOLA

- You can't get Ebola from a handshake or a hug.**
Direct contact means that blood or body fluids (including but not limited to urine, saliva, sweat, feces, vomit, breast milk, and snot) from an infected person (alive or dead) have touched another person's eyes, nose, or mouth, or an open cut or wound.
- Ebola is only spread from one person to another once symptoms begin.**
Symptoms of Ebola appear anywhere from 2 to 21 days (average 6 to 10 days) after being exposed. A person infected with Ebola cannot spread it to others until symptoms begin.
- 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 entry screening by Customs and Border Protection and CDC is taking place.
- 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 (splashes or sprays) but only when a person is very sick. That's why hospital workers must wear personal protective equipment around people with Ebola to stay safe.
- 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. In fact, four cases of Ebola were 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.
- Household bleach and other disinfectants kill Ebola.**
Household bleach or an EPA-registered hospital disinfectant will kill Ebola.
- 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, feces, vomit, breast milk, and snot) 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 CAGE (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.
- 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.
- 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.
- Your dog or cat is not spreading Ebola, but they don't carry 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.

U.S. Department of Health & Human Services
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

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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

Epidemic & Pandemic Alert and Response (EPR)

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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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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

Yellow fever fact sheet

“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.”

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FDA Statement

FDA warns consumers about fraudulent Ebola treatment products

For Immediate Release

August 14, 2014

Statement

[Español](#)

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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 for the treatment of Ebola available for purchase. Individuals promoting these products are in violation of the law.

Individuals promoting these products are in violation of the law. Immediate action to correct these violations is being taken.

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



The image is a screenshot of a World Health Organization (WHO) website article. At the top right, the WHO logo and name are visible, along with the Arabic word 'عربي'. Below the logo is a navigation bar with links for 'Home', 'Health topics', 'Data', 'Media centre', 'Publications', 'Countries', 'Programmes', and 'Governance'. The main heading of the article is 'Ebola diaries: Lessons from previous Ebola outbreaks help with the response in Guinea'. Below the heading, the author is identified as 'Marie Claire Mwanza, a social mobilization expert'. The text of the article describes Marie Claire Therese Fwelo Mwanza's experience at WHO, her role in ending Ebola outbreaks in the Democratic Republic of Congo in 2014, and her subsequent work in Guinea. Below the text is a photograph of a group of people, including several WHO staff members in white shirts and caps, and a woman in a blue WHO vest. They are standing in front of a building, and some are wearing shirts with 'Ebola est une réalité' (Ebola is a reality) written on them.

<http://www.who.int/features/2015/ebola-diaries-mwanza/en/> (July 20, 2015)

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 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? christie.moffatt@nih.gov

