Sir,

Ebola haemorrhagic fever (EHF) is emerging as a fast growing pandemic out of Western Africa and has already reached western shores. With a case fatality rate of 90%, it remains especially lethal to healthcare workers. It is estimated that one in ten doctors and nurses are being infected in the endemic regions. Knowledge and awareness gaps are as yet undetermined in Singapore amongst frontline staff who deal with critically ill patients and airway establishment in such patients. The authors wished to determine the extent of knowledge about the disease in all anaesthesia nurses and doctors, and awareness of the measures available to protect themselves in case of an epidemic. The hypothesis was that anaesthesia and ICU staff have wide gaps in knowledge about Ebola haemorrhagic fever and ways to protect from it in the healthcare setting. The authors aimed to determine these gaps and to make this knowledge available to the participants.

After obtaining ethical approval, an anonymous survey was carried out amongst anaesthetists, nurses and ICU staff. The questions were framed from information provided by the World Health Organisation (WHO) and Centre for Disease Control (CDC) websites. There were 21 questions dealing with the basic knowledge about the disease pathogenesis, epidemiology and the protective measures that have been advised. The participants could answer after discussion or after referring to any source. The survey was distributed via email and a single reminder was sent after one week. Completed forms were collected and collated. Results were entered into Excel and manually analyzed. There were 47 respondents who filled the forms. On average, 60% of the questions were answered correctly. The questions commonly poorly answered were dealing with transmission: (‘How long is the pathogen alive outside the host?’; ‘Is it more contagious than flu?’; ‘Are there any carriers of the virus?’); and about protection: (‘What is the best method to contain the outbreak?’). This indicated a dangerous trend towards ignorance in spread of endemics, despite knowledge dissemination at various institutional levels including lectures, journal articles and on rounds.

Since the emergence of the outbreak, nearly 6000 lives have been lost. Even though very few cases have been reported outside West Africa, the potential for the virus to travel in infected hosts is high because of the frequency of air traffic across the globe. Recently (October 2014), the American Society of Anaesthesiologists (ASA) Ebola workgroup, posted recommendations for all staff that can potentially take care of such patients. The CDC and WHO have also issued guidelines for healthcare staff and the public. Anaesthesia and ICU staff are in a unique position as they work very closely with infected patients, and since the procedures performed by them usually entail exposure to droplets or fluid, they can be especially at risk. The results of this survey show that there are knowledge gaps amongst anaesthetists, and ICU doctors and nurses, regarding Ebola haemorrhagic fever and personal protection from it whilst taking care of these patients as being one of the frontline staff. A broader information dissemination programme may help in keeping staff up to date in the frequently changing Ebola outbreak management. Surveys such as these are essential in order to obtain a quick snapshot of knowledge gaps and areas of further dissemination.

REFERENCES


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