

Ebola Vaccine:

What You Need to Know

Many vaccine information statements are available in Spanish and other languages. See www.immunize.org/vis

Hojas de información sobre vacunas están disponibles en español y en muchos otros idiomas. Visite www.immunize.org/vis

1. Why get vaccinated?

Ebola vaccine can prevent **Ebola virus disease** (*Zaire ebolavirus*).

Ebola virus disease is a rare disease that most commonly affects people and nonhuman primates (such as monkeys, gorillas, and chimpanzees). Outbreaks of Ebola virus disease occur mostly on the African continent.

Ebola virus spreads through direct contact with the blood, body fluids, and tissues of people or animals who are infected with the virus or who have died of Ebola virus disease.

Health care workers and family and friends in close contact with people with Ebola virus disease are at the highest risk of infection. There is little risk of catching Ebola virus disease for travelers or the general public who have not cared for or been in close contact with someone infected with Ebola virus.

A person can only spread Ebola virus to other people after they develop symptoms. Symptoms of Ebola virus disease may appear between 2 to 21 days after contact with the virus. Early symptoms of Ebola virus disease often include fever, aches, pain, sore throat and fatigue and progress to symptoms such as diarrhea, vomiting, unexplained hemorrhaging, and bleeding. Later, an infected person might experience symptoms of red eyes, skin rash, and hiccups.

Ebola virus disease is often deadly. Recovery depends on good supportive clinical care and the patient's immune response. Treatments that have become available in recent years are also increasing overall survival.

People who survive Ebola virus disease may have health problems after they recover. The most common problems are tiredness, headaches, muscle and joint pain, eye and vision problems (such as blurry vision, pain, redness, and sensitivity to light), weight gain, stomach pain, or loss of appetite. Other health problems can also occur. In some survivors, the virus may be hiding in certain areas of the body after they recover from the disease and can cause symptoms again later.

2. Ebola vaccine

Ebola vaccine is a live virus vaccine that is administered as a single dose by injection into a muscle. The vaccine contains a weakened strain of the vesicular stomatitis virus that has been altered to contain a gene from the Ebola virus. Because the Ebola vaccine only contains a gene from the Ebola virus instead of the whole Ebola virus, it cannot cause Ebola virus disease in the person being vaccinated or in other people who have contact with the person being vaccinated.

Ebola vaccine is recommended by CDC for **adults 18 years and older** at high risk for potential exposure to Ebola virus because they are:

- Responding or planning to respond to an outbreak of Ebola virus disease
- Laboratorians or other staff working at biosafety-level 4 or laboratory response network facilities in the United States that might handle specimens that might contain live Ebola virus
- Health care personnel working at federally or state designated special pathogen treatment centers in the United States involved or expected to be involved in the care and transport of patients with suspected or confirmed Ebola virus disease

A booster dose of Ebola vaccine is available for people at least 6 months after the single dose under an expanded access Investigational New Drug (IND) program. Booster dose eligibility is assessed on an individual basis. Talk with your health care provider if you have questions.

3. Talk with your health care provider

Tell your vaccination provider if the person getting the vaccine:

- Has had an **allergic reaction after a previous dose of Ebola vaccine**, or has any **severe, life-threatening allergies**, including to rice protein
- Is or planning to be **pregnant or breastfeeding**
- Has a **weakened immune system** or has **close contact with someone who has a weakened immune system**



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In some cases, your health care provider may decide to postpone Ebola vaccination until a future visit.

People with minor illnesses, such as a cold, may be vaccinated. People who are moderately or severely ill should usually wait until they recover before getting Ebola vaccine.

Your health care provider can give you more information.

4. Risks of a vaccine reaction

- Pain, swelling, and redness where the shot is given can happen after Ebola vaccination.
- Headache, fever, muscle pain, fatigue or tiredness, nausea, skin rash (including blisters), and abnormal sweating can happen after Ebola vaccination.
- Joint pain or swelling can occur after Ebola vaccination. Although rare, the joint pain or swelling can be severe and long lasting.
- Arthritis or worsening arthritis can occur after Ebola vaccine, most frequently in women and people with a medical history of arthritis.
- Certain white blood cell counts can become lower than normal after Ebola vaccination but are not associated with illness and go back to normal.

Ebola vaccine contains a live virus. It is possible that the vaccine virus might be transmitted to other people. Vaccinated people should take measures to prevent spreading the virus after Ebola vaccination:

- Do not donate blood for at least 6 weeks.
- Avoid sharing needles, razors, toothbrushes, and eating/drinking utensils and dishes and open-mouth kissing for 2 weeks.
- Use effective barrier methods to prevent pregnancy for 2 months.
- Consider avoiding close contact with high-risk people for up to 6 weeks. High-risk people include people with weakened immune systems, people who are pregnant or breastfeeding, and children younger than 1 year old.
- Try to avoid exposing livestock to blood or body fluids for at least 6 weeks.
- If you develop a rash after vaccination, cover the rash with a bandage until healed. Dispose of used bandages in a sealed plastic bag and wash hands with soap and water.

People sometimes faint after medical procedures, including vaccination. Tell your provider if you feel dizzy or have vision changes or ringing in the ears.

As with any medicine, there is a very remote chance of a vaccine causing a severe allergic reaction, other serious injury, or death.

5. What if there is a serious problem?

An allergic reaction could occur after the vaccinated person leaves the clinic. If you see signs of a severe allergic reaction (hives, swelling of the face and throat, difficulty breathing, a fast heartbeat, dizziness, or weakness), call **9-1-1** and get the person to the nearest hospital.

For other signs that concern you, call your health care provider.

Adverse reactions should be reported to the Vaccine Adverse Event Reporting System (VAERS). Your health care provider will usually file this report, or you can do it yourself. Visit the VAERS website at www.vaers.hhs.gov or call **1-800-822-7967**. *VAERS is only for reporting reactions, and VAERS staff members do not give medical advice.*

6. Countermeasures Injury Compensation Program

The Countermeasures Injury Compensation Program is a federal program that may help pay for costs of medical care and other specific expenses of certain people who have been seriously injured by certain medicines or vaccines. If you have been injured by the Ebola vaccine, you can learn more about this Program by visiting the program's website at www.hrsa.gov/cicp, or calling **1-855-266-2427 (855-266-CICP)**.

7. How can I learn more?

- Ask your health care provider.
- Call your local or state health department.
- Visit the website of the Food and Drug Administration (FDA) for vaccine package inserts and additional information at www.fda.gov/vaccines-blood-biologics/vaccines.
- Contact the Centers for Disease Control and Prevention (CDC):
 - Call **1-800-232-4636 (1-800-CDC-INFO)** or
 - Visit CDC's website at www.cdc.gov/vhf/Ebola/index.html.

