Preventing Ebola: Screen or Screen Door?

By ACSH Staff — October 9, 2014

Although the actual impact of Ebola on the world so far is minuscule, it has been the top news story much of the time over the past few weeks.

We at ACSH are no strangers to media scares and frenzies, and it is clear that this is one of the main drivers here. But it is not the only one.

The current Ebola outbreak is unprecedented, and this alone is guaranteed to create fear. When you add in the unceasing incompetence of our government (and subsequent mistrust by those of us who are at their mercy), being scared is maybe not so ridiculous this time despite the virtually nonexistent threat to most of us right now.

But, our health authorities have come up with another doozie screening people arriving from countries where the epidemic is ongoing. Sounds like a swell idea until you read it [1].

ACSH’s Dr. Josh Bloom is not a fan: I couldn’t believe what I was reading. The screening is a joke. It depends on taking temperatures and interviews methods that will be about as effective as checking for acne or asking incoming travelers if they’re hiding drugs in their suitcases without searching.

Why? Dr Bloom continues, An asymptomatic but infected person will have a fever for maybe one day (?) of the 21 day incubation period, And taking an Advil will mask it. Even if a fever is detected, what are the chances that it is a result of Ebola rather than norovirus (250+ million cases per year worldwide, a cold (At least four times that) or flu (or, especially in this population, malaria) all of which cause fevers? Taking temperatures at airports should prevent approximately zero infected people from entering the country.

But this isn’t the entire plan. The rest is even worse.
Dr. Bloom: They are also planning on using passenger interviews. Now there s a damn fine idea. Someone who arrives at JFK with a fever will be asked various questions to determine their possible exposure in Africa. Talk about a disincentive to be honest. Let s see, if I answer no I m in a cab in thirty minutes. If I answer yes, maybe I m in isolation for a few weeks along with a bunch of other sick Africans. I better think this over.

We remind readers that the risk of anyone contracting Ebola in the US is minuscule at this time, but this is unchartered territory, so no one really knows how this will play out. There are no definitive answers yet, and we are reliant on government agencies to protect us. This is perhaps more scary that the virus itself.

Dr. Bloom concludes, Forgive me if I am less than confident, but in the past few months, the CDC managed to stumble across an unsecured box of smallpox [2], which had been sitting around for decades. They also managed to send out live anthrax [3] (which was supposed to be dead) to research labs resulting in dozens of scientists being exposed. And, thanks to the geniuses at the Secret Service, the secure White House has been looking more like Pamplona during the running of the bulls. And this is only scratching the surface.

ACSH s Dr. Gil Ross is incredulous: Tom Frieden has been in charge of the CDC since 2009. These screwups all happened under his watch. It is astounding that he still has a job, and the fact that he is leading the fight to prevent Ebola from spreading should not help you sleep well at night.

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