

Ebola Researcher: Disease Could Go Airborne at Any Moment

Ebola transmitted as easily as the common flu, in an airborne fashion? This could become a reality as the Ebola epidemic continues, says a Purdue University researcher who has been studying the disease for 15 years.

In a pair of Fox News interviews, professor of biological science Dr. David Sanders pointed out that while there's no evidence of true "airborne Ebola" at this time, it conceivably is just one viral mutation away. On the Monday edition of *The Real Story with Gretchen Carlson*, Dr. Sanders "explained that a very closely related virus is known to spread among animals via the air," <u>writes</u> Fox News Insider blog. The site continues:



Sanders also pointed to the way in which the virus enters the body.

"Our own research shows that Ebola Zaire [common Ebola] enters human lung cells from the airway side. So it has the inherent capacity to enter the lung from the airway. I'm not saying that there's any evidence that the current spread is due to anything but bodily fluid contact, but we have to consider the possibility that it can enter through an airway route," said Sanders, adding that the virus can "morph" or "mutate" as the outbreak continues in Africa.

Elaborating further on *Fox and Friends* on Wednesday, Dr. Sanders <u>stated</u>, "It cannot be ruled out that it can acquire the capacity to go into the lung from the airway side.... I can't put a number on how possible that is, but the most important message is: the longer the epidemic goes on, the more cases we have, the more likely it [be]comes.... If you have a million cases rather than 10,000 cases, that increases the chance about 100-fold."

Viruses often mutate, which is why there are so many "strains" of flu. And how often do these mutations occur? Often enough so that flu shots are essentially useless, said epidemiologist and talk-show host Dr. Michael Savage yesterday on his *Savage Nation* radio show; he explained that the strain of flu virus on which a vaccine is based is not the same strain that will likely be prevalent during flu season, as he issued a warning about Ebola's capacity to mutate into an even more contagious disease.

Moreover, other experts say that Ebola can already be transmitted via the air "under certain circumstances." For example, a U.S. Army handbook published by the U.S. Medical Research Institute of Infectious Diseases (USAMRID) and entitled "USAMRID's Medical Management of Biological Casualties Handbook," issues just such a warning. As WND.com's Jerome Corsi <u>reported</u> two days ago:

On page 117 of the handbook, in a chapter discussing "Viral Hemorrhagic Fever" (VHF), a category

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of viruses that includes Ebola, USAMRID says: "In several instances, secondary infections among contacts and medical personnel without direct body fluid exposure have been documented. These instances have prompted concern of a rare phenomenon of aerosol transmission of infection."

Page 117 continues to specify: "Therefore, when VHF is suspected, additional infection control measures are indicated."

And the USAMRID's recommendations do indicate that Ebola is highly contagious. Corsi continues:

The USAMRID handbook recommends that for all VHF patients with significant cough, hemorrhaging or diarrhea, the hospital room should be a "negative-pressure isolation room" with six to 12 air exchanges, adequate to pump air out of the hospital room on a constant basis through bio-filters.

To make the point about airborne transmission of VHF viruses, including Ebola, USAMRID says all persons entering the patient's room should wear double gloves, impermeable gowns with leg and shoe coverings for contact isolation, eye protection and HEPA (N-95) masks or positive-pressure air-purifying respirators (PARRS).

Echoing this point about transmission via the air is the World Health Organization. As Corsi <u>wrote</u> at WND earlier this month:

In a largely overlooked media advisory email, the World Health Organization admitted there are some circumstances in which the current strain of Ebola in West Africa can be transmitted through coughing or sneezing.

"Theoretically, wet and bigger droplets from a heavily infected individual, who has respiratory symptoms caused by other conditions or who vomits violently, could transmit the virus — over a short distance — to another nearby person," the United Nations agency said Monday.

"This could happen when virus-laden heavy droplets are directly propelled, by coughing or sneezing (which does not mean airborne transmission) onto the mucus membranes or skin with cuts or abrasions of another person."

The WHO advisory said saliva and tears "may also carry some risk."

What's the distinction being drawn here between "airborne transmission" and transmission via the air? The mode of transmission explained above still involves coming into contact with bodily fluids — albeit indirectly — by way of perhaps imperceptible, infected airborne droplets.

The aforementioned warnings lie in stark contrast to reassurances offered by the federal government, such as comments Barack Obama made just yesterday. After a Cabinet meeting on the response to Ebola, the president <u>said</u>, "The only way that a person can contract Ebola is by coming into direct contact with the bodily fluids of somebody who is showing symptoms. In other words, if they don't have symptoms, they're not contagious."

This is nonsense, asserts Ebola expert Dr. Steven J. Allen, who holds a Ph.D. in bio-defense from George Mason University's College of Science. As Matthew Vadum <u>writes</u> at *FrontPage Mag*, Allen "says Obama is not telling the truth," and furthermore:

Although Ebola is indeed spread by means of body fluids there's a catch.

"We don't how long it can last on surfaces or as droplets in the air[,] so when President Obama said earlier this month you can't get it from sitting beside someone on a bus[,] that was a total lie," Allen



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said. "You can get the disease from such a small number of viral particles that logic says you can get it from someone coughing in your vicinity."

Also expressing this opinion is epidemiologist Dr. Savage. Savage, who has dubbed Obama "President Obola," played Obama's remarks during the earlier referenced radio segment and said that they simply were "not true."

Critics also might note that while we all have been treated for the flu or other contagious diseases, our doctors never wore hazmat suits when dealing with us. Yet as per the USAMRID's recommendations, this is precisely the protection deemed necessary with Ebola patients. And how low could the contagion risk be if front-line experts dress as if they're preparing for a moon shot?



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