Summary

Meeting with health and other professions likely to enter into contact with Ebola patients

13 November 2014, HITEC Building, Luxembourg

The purpose of the meeting was:

• to inform the participants about the Ebola outbreak;
• to inform about activities at the EU level;
• to learn how health professional organisations inform their clients/target groups regarding Ebola;
• to identify gaps and problems for organisations and their members in the context of Ebola;
• to identify areas for EU support and discuss possible joint activities.

It was an interactive meeting, with presentations (some in the meeting room, others by internet connection) and discussion. At the end there was a “tour de table” with the participating organisations.

Even though the list of invited European organisations representing possible first points of contacts with potential Ebola patients in the EU include patients, general practitioners, health management associations, midwives, nurses, public health associations, hospital and healthcare federations, private hospitals, pharmacists, airports and sea port associations, funeral services, medical specialty organisations, only the following organisations were represented:

• UEMO: European Union of General Practitioners
• EFN: European Federation of Nurses Associations
• HOPE: European Hospital and Healthcare Federation
• EAHHP: European Association of Hospital Pharmacists
• EFFS: European Federation of Funeral Services
• ESCMID: European Society of Clinical Microbiology and Infectious Diseases
• UEMS: European Union of Medical Specialists

ECDC, WHO and ECHO (EU Humanitarian Aid and Civil Protection department) collaborated with the organiser (DG SANCO) in the meeting.

After an introduction by DG SANCO (Isabel de la Mata) on the objectives of the meeting that were not specifically related to Ebola treatment, but to communication on Ebola between the EU and European main organisations, Thomas Mollet (ECDC) gave a review of the Ebola situation in the world.

Germain Thinus (DG SANCO) showed what the EU has been doing about Ebola over the last 3 months. He explained that he is in charge of the Health Threats Unit under the umbrella of the Decision 1082/2013/EY for all threats, including HIV, flu, hepatitis, TB, antimicrobial resistance, HAI, and immunisation. He explained that in this meeting, gaps and
problems for organisations in the context of Ebola, and area for EU support and discussion about possible joint activities should be highlighted.

DG SANCO for Ebola is linked to ECDC for risk assessment, a network of clinicians, and training modules for health professionals. This is well explained on the SANCO webpage on Ebola.

Modris Stasul (DG ECHO) briefly presented the EU response to the Ebola outbreak. EU funding for Ebola is around 1 billion Euros.

Then Birgit Von Tongelen of DG-RTD (Research activities) gave an overview of EU financed research on Ebola that includes:

• ongoing Ebola research: FP7 projects
• “exceptional procedures”: Horizon 2020
• Other actions: IMI2, EDCTP2.

Regarding FP7, Ebola was included in the ongoing projects by using the flexibility of existing FP7 projects:

• ANTIGONE (soluble Ebola proteins responsible for damage to vessel wall)
• PREDEMICS
• PREPARE: streamlines Europe’s clinical research response to future epidemics
• TELL ME: models for improved risk communication.

“Exceptional procedures”, whose deadline was 6 October, received 8 proposals, one of which was rejected because out of the deadline. The full budget is 24.4 million euro; start is 1 November 2014. Five out of seven passed:

• EBOLAVAC (GSK BE)
• REACTION (INSERM FR)
• EBOLA-TX (BE)
• EVIDENT (DE)
• IF-EBOLA (FR).

Finally other actions included:

• IMI2: vaccines, fast diagnostic tests, new approach to manufacture and distribute vaccines
• EDCTP2: possibility to fund clinical trials as drugs, vaccine, diagnostics in upcoming calls.

Nabil Safrany (ECDC) spoke about ECDC and its mission against infectious diseases including Ebola. He said that ECDC does not do risk management. At present, ECDC activities against Ebola include:

• risk assessment
• support to response
• preparedness and capacity strengthening
• support advice and guidance
• information/communication.

Regarding these presentations, my question to the speakers was why there is limited EU research funding on safety of healthcare workers dealing with Ebola, and on risk
communication, as well. Moreover, I asked if the EU supports research on the compliance of EU healthcare workers (HCW) to personal protective equipment (PPE) and isolation procedures in those EU countries where they had managed Ebola patients, as well as in the other EU countries where training and education represent an important element of preparedness without actual Ebola patient admissions but with suspected cases. They replied that communication is included in each project, and healthcare safety is a matter of each country.

Diane K Gross (WHO EURO) finally showed the WHO portal extranet.who.int/Ebola and the mission of WHO EURO against Ebola.

After a break, Nafrany and Gross gave an overview of the resources available for health professionals on Ebola and showed a directory of ECDC guidance on EVD patient management.

The second part of the meeting was dedicated to a “tour de table” of the participating organisations in order to try to address the following issues:

- Has your organisation undertaken activities related to Ebola?
- Have your members identified gaps and specific problems?
- Is there a need for additional targeted information or other activities at EU level?
- Do you see a role of your organisation during this Ebola outbreak? For future serious cross border threats to health?
- Do you have developed Standard Operative Procedures (SOPs)-Protocols which you could share with them (EU)?
- Do you have preparedness activities on Ebola? Plans?

I explained the role of ESGITM and that it is going to prepare a website with links to national guidelines from around Europe that is lacking in the European scenario.

Finally I told them the objectives of UEMS and, in particular, those of UEMS ID that should guarantee the highest standard of care in ID by ensuring that ID is recognized in all EU countries. This is particularly important now that Ebola entered Europe. UEMS has also the objective of stimulating the participating countries to give professional training and education at the highest level, including for emerging infections like Ebola. Also free movement of ID specialists should be guaranteed, and this is of particular relevance in the light of the entrance of Ebola patients into European countries, because Ebola trained ID specialists could be a driver for training and education in EU countries under the umbrella of UEMS.

Finally I asked them about an integration of EU agencies, other professional societies and ESCMID/UEMS organisations for joint activities and projects, and eventually the direct involvement of ESCMID in research projects.

HOPE, the representative of Funeral services and the Pharmacists’ organisations explained their point of view. However, the most interesting point was made by the representative of the Federation of Nurses who criticized the lack of standardized operative procedures (SOP) for dressing, undressing and care of Ebola patients in Europe as the recent cases in Spain have taught us. In his opinion there is poor interest of European agencies on the safety of healthcare workers, particularly, nurses; he stated that SOPs should fit to nurses, and a list of centres that admit Ebola patients in Europe as well as trained healthcare personnel is lacking.
The DG SANCO representative concluded the meeting with the aim to develop our suggestions in a practical way; he said that another meeting will be held in a few weeks in order to better identify areas for EU support and discuss possible joint activities.

To summarize, the meeting was interesting and informative, and I found the following needs especially relevant:

- need for joined work (with EU/ECDC/WHO other organisation) for training/education, especially on the safety of HCWs;
- need for assessing the compliance to SOP/guidelines for safety;
- need for more information on research projects, some of them should be handled by health organisations represented in the meeting.

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