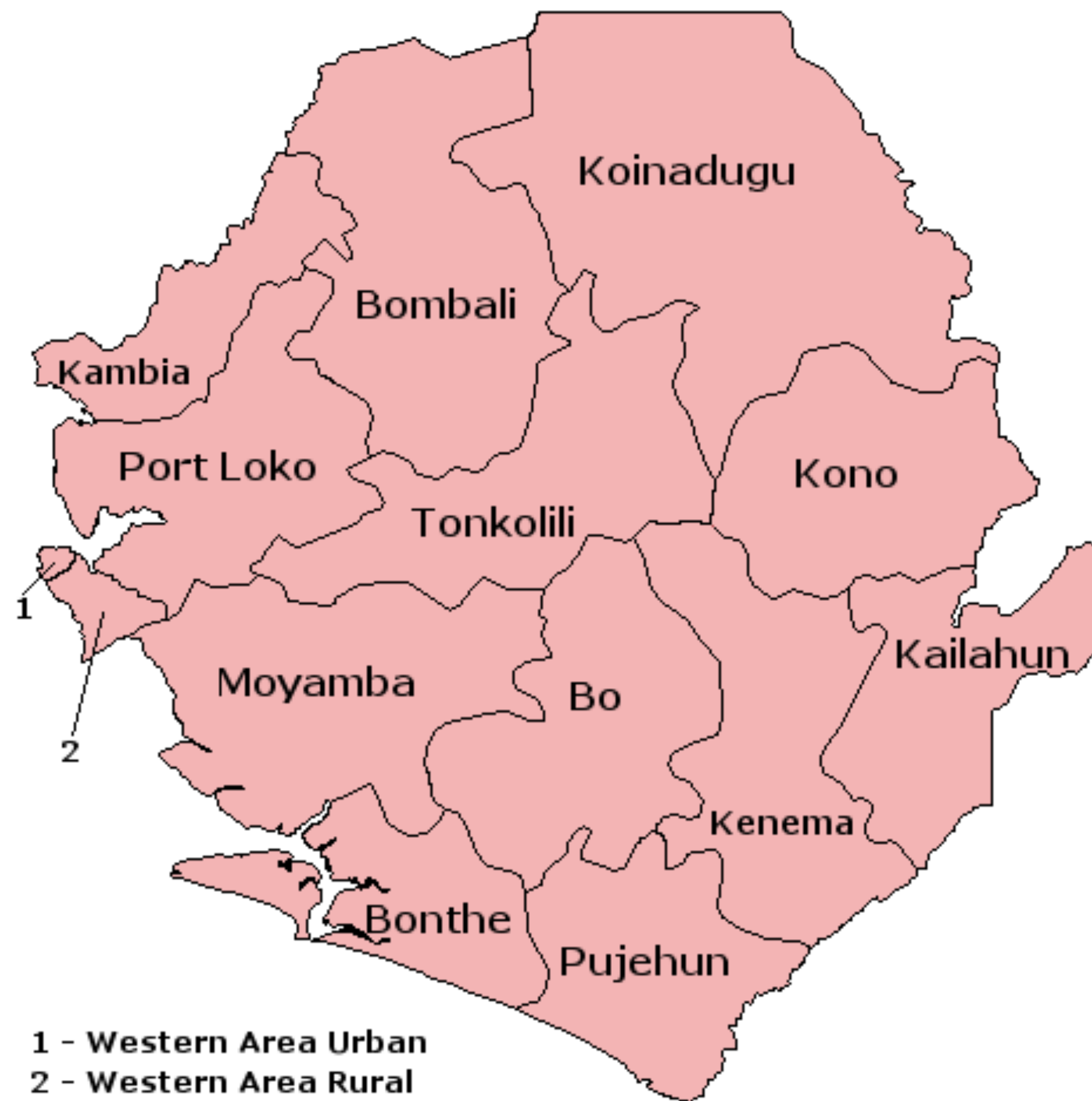


Promoting safe sex and condom use among Ebola virus disease (EVD) survivors to mitigate risk of sexual transmission through clinic-based education and semen testing in 3 districts in Sierra Leone

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Kono District

- District population of 500,000 people
- 81 EVD Survivors
- Seen in clinic weekly



Is Ebola virus sexually transmitted?

- No cohort studies, only a few case reports
- Only one case report has confirmed genetically linked EVD RNA between sexual contacts with no other inoculation history
 - Christie et al, 2015.
- Unpublished data from ongoing study in Sierra Leone shows EVD RNA can still be detected in the semen of survivors at least 400 days after their cure
 - CDC, MOHS Sierra Leone co-investigators

Risk Reduction Strategies used in Sierra Leone

- Clinic-based counselling
 - Abstinence counselling especially for the first 3 months after cure
 - Condom availability and education on how to use
- Semen testing
 - Men with positive EVD RNA in their semen are counselled more extensively and abstinence is encouraged until 2 negative retests

Methods of Semen Testing

- Men receive clinic-based counselling before semen collection
- Patients instructed to produce semen in private exam rooms
- After semen collection, rooms are cleaned by EVD survivors hired and trained in proper EVD precautions
- Samples are secured in double bags, transported in chlorine, and tested for persistence of EVD RNA via PCR
- Designed points of data collection: full H&P, socioeconomic eval, semen data sheet

Discussion and next steps

| Advantages | Disadvantages |
|--|--|
| Condom education protects against other STIs | Opens additional questions: Can you be an intermittent shedder? |
| Empowers men and women to protect themselves and their partners | Only testing half the population: not testing breast milk, children survivors, etc |
| Negative testing helps patients return to normalcy and heal PTSD | Increases stigma and may be a false sense of security |