PENNSYLVANIA DEPARTMENT OF HEALTH
2025 – PAHAN – 814-12-08- ADV
First Reported Outbreak Caused by Marburg Virus in Ethiopia

DATE:	12/8/2025
TO:	Health Alert Network
FROM:	Debra L. Bogen, MD, FAAP, Secretary of Health
SUBJECT:	First Reported Outbreak Caused by Marburg Virus in Ethiopia
DISTRIBUTION:	Statewide
LOCATION:	Statewide
STREET ADDRESS:	n/a
COUNTY:	n/a
MUNICIPALITY:	n/a
ZIP CODE:	n/a

This transmission is a "Health Advisory" which provides important information for a specific incident or situation and may not require immediate action.

HOSPITALS: PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, NURSING AND LABORATORY STAFF IN YOUR HOSPITAL. **EMS COUNCILS:** PLEASE DISTRIBUTE AS APPROPRIATE. **FQHCs:** PLEASE DISTRIBUTE AS APPROPRIATE. **LOCAL HEALTH JURISDICTIONS**: PLEASE DISTRIBUTE AS APPROPRIATE. **PROFESSIONAL ORGANIZATIONS:** PLEASE DISTRIBUTE TO YOUR MEMBERSHIP. **LONG-TERM CARE FACILITIES:** PLEASE SHARE WITH ALL MEDICAL, INFECTION CONTROL, AND NURSING STAFF IN YOUR FACILITY

SUMMARY

- On December 3, 2025, the Centers for Disease Control and Prevention (CDC) issued a Health Alert Network Health Advisory to provide information about the first confirmed Marburg Virus Disease (MVD) outbreak in Ethiopia's South Ethiopia and Sidama regions. **No confirmed cases have been reported in the United States (U.S.).**
- Providers should systematically assess patients with exposure risk and compatible symptoms for the possibility of viral hemorrhagic fevers including MVD through a triage and evaluation process which should include obtaining a detailed travel history. Early identification of MVD or other viral hemorrhagic fevers is important for providing appropriate and prompt patient care and preventing the spread of infection.
- Providers should include MVD in the differential diagnosis for an ill person who was in an area with an active MVD outbreak in the past 21 days, **AND** who has compatible symptoms (e.g., fever, aches, chest pain, fatigue, vomiting, diarrhea, or unexplained bleeding), **AND** has reported epidemiologically compatible risk factors, within the 21 days before symptom onset.
- To discuss any patient where MVD is being considered in a differential diagnosis or to request testing, please call DOH at 877-PA-HEALTH (877-724-3258) or your local health department.

Background

The Centers for Disease Control and Prevention (CDC) issued a Health Alert Network (HAN) Health Advisory to inform clinicians and health departments about a new outbreak of Marburg virus disease (MVD) in Ethiopia's South Ethiopia and Sidama regions. MVD is a severe illness that can be fatal.

On November 14, 2025, the Ethiopian Ministry of Health declared an MVD outbreak in the country's South Ethiopia Regional State. This is the first reported outbreak of MVD in Ethiopia. As of December 3, 2025, Ethiopia reported 13 laboratory confirmed cases, eight of which were fatal, in the country's South Ethiopia and Sidama regions. Additional cases may be retrospectively identified as the outbreak investigation progresses. Investigations are ongoing to determine timeline, transmission chains, and potential sources of the outbreak.

Specimens collected from a cluster of patients with suspected viral hemorrhagic fever cases led to the confirmation of MVD by the National Reference Laboratory of the Ethiopian Public Health Institute. The Ethiopian Ministry of Health reported that genomic sequencing suggests this is the same strain of Marburg virus reported in previous outbreaks in other East African countries.

CDC is working with the Ethiopian health authorities to support the response to this outbreak, including providing technical expertise in surveillance, case investigation, contact tracing, laboratory testing, and response coordination.

No suspected, probable, or confirmed cases of MVD related to this outbreak were reported in the United States or other countries outside of Ethiopia as of December 3, 2025. The risk of spread to the United States is considered low at this time; however, clinicians should be aware of the potential for imported cases. As a precaution, this health advisory summarizes CDC's recommendations about MVD case identification, testing, and biosafety considerations in clinical laboratories for U.S. health departments, clinical laboratories, and health care workers.

CDC issued a Level 1 Travel Health Notice, advising people traveling to Ethiopia to practice usual precautions. The notice advises travelers to check their health for signs or symptoms of MVD while in the outbreak area and for 21 days after leaving and take appropriate actions (isolate, avoid travel, seek health care) if they become ill. Ethiopian national authorities are increasing response activities including screening, isolation of cases, contact tracing, airport exit screening, and public awareness campaigns to curb the spread of MVD. As of December 3, 2025, CDC is not recommending additional assessments or monitoring of travelers arriving from Ethiopia by the jurisdictional health departments.

Map from CDC: https://wwwnc.cdc.gov/travel/images/marburg-ethiopia.png

The risk of spread to the United States is considered low as of December 3, 2025. As a precaution, CDC is working to increase awareness of the outbreak among U.S. travelers, public health agencies, laboratories, and health care professionals nationwide. **It is important for clinicians to obtain a detailed travel history from patients with an acute febrile illness,**

especially those who were recently in affected areas of Ethiopia, while also ruling out more common causes of febrile illnesses. Early consideration of MVD in the differential diagnosis is essential to ensuring timely isolation and implementation of other precautions, informing public health, and providing prompt and appropriate care and diagnostics.

Marburg virus disease

MVD is a rare but highly fatal viral hemorrhagic fever (VHF) caused by infection with one of two zoonotic viruses, Marburg virus or Ravn virus. Both Marburg virus and Ravn virus are within the virus family *Filoviridae,* which also includes Ebola virus.

The incubation period for MVD ranges from 2 to 21 days after exposure. A person infected with the Marburg virus is not considered contagious until after symptoms appear. Early "dry" symptoms include fever, aches, chest pains, and fatigue, and later "wet" symptoms include vomiting, diarrhea, and unexplained bleeding. MVD is spread through **contact** (through broken skin or mucous membranes) with the body fluids (e.g., blood, urine, saliva, sweat, feces, vomit, breast milk, amniotic fluid, or semen) of a person who is sick with or died from MVD. People can also contract MVD if they have contact with infected animals, or through contact with objects like needles contaminated with the virus. **Marburg virus is not spread through airborne transmission**.

There are currently no Food and Drug Administration (FDA)-approved vaccines or treatments for MVD; however, investigational vaccines and treatments are in development. In the absence of early diagnosis and appropriate supportive care, MVD has a mortality rate of 23%–90%, depending on the virus strain and the level of case management. With early intensive supportive care and fluid replacement, mortality rates might be lowered.

CDC developed recommendations for U.S.-based organizations (e.g., nongovernmental, faith-based, academic, or aid organizations) with staff working in affected areas.

Recommendations for Clinicians and Health Care Facilities

- Be prepared to follow CDC's Infection Prevention and Control Recommendations for Patients in U.S. Hospitals who are Suspected or Confirmed to have Selected Viral Hemorrhagic Fevers.
- Systematically assess patients with exposure risk and compatible symptoms for the possibility of VHFs, including MVD through a clinical triage and evaluation process including a travel history.
    - Follow this job aid for a step-by-step approach to evaluating a patient with a suspected special pathogen infection.
    - A travel flag in electronic health records is crucial for quickly identifying patients who recently visited areas with VHF outbreaks, enabling timely detection and infection control.
- Include MVD in the differential diagnosis for an ill person who has compatible symptoms AND who reported epidemiological risk factors, such as **one or more** of the following, within the 21 days before symptom onset:
    - Had direct contact with a symptomatic person with suspected or confirmed MVD, or with any objects contaminated by their body fluids.
    - Experienced a breach in infection prevention and control precautions that resulted in the potential for contact with body fluids of a patient with suspected or confirmed MVD.
    - Participated in any of the following activities while in an area with an active MVD outbreak:

    - Had contact with someone who was sick or died, or with any objects contaminated by their body fluids.
    - Attended or participated in funeral rituals, including preparing bodies for funeral or burial.
    - Visited or worked in a health care facility or laboratory.
    - Had contact with cave-dwelling bats or non-human primates (e.g., monkeys, chimpanzees, gorillas).
    - Worked or spent time in a mine or cave.
- Consider and perform testing for more common diagnoses such as malaria, COVID-19, influenza, typhoid fever, or other common causes of gastrointestinal and febrile illnesses in an acutely ill patient with recent international travel and evaluate and manage appropriately.
- Know that patients with MVD may present with concurrent infections (e.g., co-infection with malaria), and the possibility of a concurrent infection should be considered if a patient has a clinical and epidemiologic history compatible with MVD. Presence in Ethiopia in the past 21 days **is not a reason to defer routine laboratory testing or other measures necessary for standard patient care.**
- Immediately **isolate and hospitalize** patients who have both an exposure risk AND any symptoms compatible with MVD.
- To discuss any patient where MVD is being considered in a differential diagnosis, to request testing, or to report a returning HCW, please call DOH at 877-PA-HEALTH (877-724-3258) or your local health department.
- Following the Bloodborne Pathogens standard, pursue routine laboratory testing to monitor the patient's clinical status and conduct diagnostic testing for other potential causes of the patient's illness while MVD testing is underway. **Do not delay MVD diagnostic testing while awaiting results of other diagnostic testing.**
- **Patients should remain in isolation at their presenting medical facility and cared for by trained personnel wearing appropriate Personal Protective Equipment (PPE).**

If MVD is suspected, please call DOH at 877-PA-HEALTH (877-724-3258) or your local health department. When a diagnosis of MVD is considered, DOH and your local health department (if applicable) will consult with CDC and their clinical team to help coordinate care and testing for the patient and help ensure appropriate precautions are taken to prevent potential spread.

- Counsel patients with planned travel to an MVD outbreak-affected area on ways to prevent exposure during their travel. Prevention methods include:
    - Avoid contact with blood and body fluids (or with materials possibly contaminated with blood and body fluids) of people who are sick.
    - Avoid contact with semen from a person who recovered from MVD until testing shows that the virus is no longer in the semen.
    - Do not touch the body of someone who died from suspected or confirmed MVD including during funeral or burial practices.
    - Avoid contact with cave-dwelling bats, bat urine or droppings, forest antelopes, nonhuman primates, and blood, fluids, or raw meat from these or unknown animals.
    - Refrain from entering areas known to be inhabited by bats, such as mines or caves.
- If you are a health care worker traveling to Ethiopia for work in clinical settings, be aware of the potential increased risk of exposure to MVD, the importance of following recommended infection prevention and control precautions, and the need for monitoring yourself for symptoms of MVD after returning to the United States.

Recommendations for Clinical Laboratory Biosafety

- Follow CDC's Standard Precautions for All Patient Care, which includes Occupational Safety and Health Administration's (OSHA) standard on Bloodborne Pathogens, and the Biosafety in Microbiology and Biomedical Laboratories Appendix N to reduce the risk of laboratory-

acquired illnesses from bloodborne pathogens, such as VHFs and other high-consequence diseases.
- Always handle blood and body fluids (e.g., urine, pleural fluid) as if they contain an unknown pathogen, taking the necessary precautions to avoid exposure.
- Be prepared to perform routine diagnostic testing that is critical to evaluating an ill traveler.
- Have a written Exposure Control Plan in place that includes **conducting a risk assessment** to eliminate or minimize employees' risk of exposure to blood, body fluids, or other potentially infectious materials.
- Make recommended PPE available and train staff to properly don (put on) and doff (take off) their PPE.
- If a laboratory facility needs to ship specimens to another facility for testing, the facility should collaborate with DOH or your local health department and follow appropriate packing and shipping requirements.

Recommendations for the Public

- Protect yourself and prevent the spread of MVD when living in or traveling to a region where Marburg virus is potentially present or that is currently experiencing an outbreak.
- In outbreak-affected areas, take the following actions to protect yourself:
    - Avoid contact with sick people who have symptoms such as fever, muscle pain, and rash.
    - Avoid contact with blood and other body fluids.
    - Avoid materials possibly contaminated with blood or other body fluids of people who are sick.
    - Avoid exposure to semen from men who have recovered from MVD until testing shows that the virus is no longer in the semen.
    - Do not participate in funeral or burial practices that involve touching the body of someone who has died.
    - Keep away from bats, forest antelopes, non-human primates (e.g., monkeys, chimpanzees, gorillas), and avoid contact with blood, body fluids, or raw meat from these or any unknown animals.
    - Do not enter areas where bats live, such as mines or caves.
- Monitor your health while you are in an area experiencing an MVD outbreak and continue to monitor for 21 days after returning.
    - If you develop symptoms of MVD during this time, isolate (separate) yourself immediately from others, do not travel, and contact local health authorities or a health care facility for advice.
    - Before you enter a health care facility, alert the health care providers of your recent presence in an MVD-affected area.

For More Information

General Marburg Information
- About Marburg Disease | Marburg Virus Disease | CDC
- History of Marburg Disease Outbreaks | Marburg Virus Disease | CDC
- Marburg in Ethiopia | Travel Notice | Traveler's Health | CDC
- Travelers' Health | CDC

Clinician Resources
- Clinical Overview of Marburg Virus Disease | Marburg | CDC
- Council of State and Territorial Epidemiologists (CSTE) 24-hour Epi-on-Call
- Post-Travel Evaluation to Rule Out Viral Special Pathogen Infection | Yellow Book | CDC
- Recommendations for Organizations Sending U.S.-based Personnel to Areas with VHF Outbreaks | Viral Hemorrhagic Fevers (VHFs) | CDC

- National Emerging Special Pathogens Training and Education Center (NETEC) Resource Library

Non-U.S. Health Care Settings

- Preparing Your Facility for Identification of Potential MVD Patients | Marburg Virus Disease | CDC
- Preventing MVD from Entering Your Healthcare Facility | Marburg Virus Disease | CDC
- Healthcare Worker and Inpatient Monitoring| Marburg Virus Disease | CDC
- Environmental Cleaning and Waste Management | Marburg Virus Disease | CDC
- Hand Hygiene | Marburg Virus Disease | CDC
- Environmental Cleaning and Disinfection| Marburg Virus Disease | CDC
- PPE Part 1: What, When, and Why to Use PPE | Marburg Virus Disease | CDC
- PPE Part 2: Putting on and Taking Off PPE | Marburg Virus Disease | CDC
- Waste Management Part 1: The Waste Management Process | Marburg Virus Disease | CDC
- Waste Management Part 2: Final Waste Disposal | Marburg Virus Disease | CDC
- Injection Safety | Marburg Virus Disease | CDC

U.S. Public Health Departments

- Public Health Management of People with Suspected or Confirmed VHF or High-Risk Exposures | CDC

If you have any questions, please call DOH at 877-PA-HEALTH (877-724-3258) or your local health department.

Individuals interested in receiving further PA-HANs are encouraged to register at HAN Notification Registration (mir3.com)

Categories of Health Alert messages:
Health Alert: conveys the highest level importance; warrants immediate action or attention.
Health Advisory: provides important information for a specific incident or situation; may not require immediate action. **Health Update**: provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of December 8, 2025, but may be modified in the future.