

Reply to Steptoe et al

Soushieta Jagadesh [1], Tom E. Fletcher [1, 2], Stephen Sevalie [3], Ralf Weigel [1], Janet T. Scott [4]

1. Liverpool School of Tropical Medicine, United Kingdom;
2. Department of Infectious Diseases and Clinical Microbiology, Ondokuz Mayıs University Hospital, Samsun, Turkey
3. 34 Military Hospital, Freetown, Sierra Leone
4. University of Liverpool Institute of Translational Medicine and National Institute for Health Research Health Protection Research Unit in Emerging and Zoonotic Infections, United Kingdom

Correspondence:

S. Jagadesh

Institut de Recherche pour le Développement

275, Route de Montabo

97300 Cayenne

(soushie.jagadesh@gmail.com).

Alternate address of correspondence:

Dr. Ralf Weigel

Liverpool School of Tropical Medicine

L3 5QA

United Kingdom

Contact number: +44 151 705 2586

Email: ralf.weigel@lstm.ac.uk

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Dear Editor,

We thank Steptoe et al for highlighting their research in the ocular health of Ebola Virus Disease (EVD) survivors [1]. We agree that the interpretation and value of subjective experiences can be challenging. Disability is a complex phenomenon that is not always easily amenable to objective biological quantification. The self-reported physical limitations and mental health problems provide an insight into the perception of health by the EVD survivors and remains a valuable tool to assess the quality of life.

In Liberia the lack of correlation between self-reported ophthalmic symptoms and diagnosis of uveitis in EVD survivors further highlights the need for screening and research [2]. Blindness was reported in 38% of EVD survivors with uveitis in this study. We recognize the potential challenges of cataract surgery reported by Steptoe et al, and look forward to seeing further results from the EVICT II study in Sierra Leone, which has reported to date that cataract surgery was safe and effective in EVD survivors, leading to meaningful restoration of vision [3].

The gravity of ocular disease and the need of ophthalmological expertise in the rehabilitation of the survivors in West Africa are now widely reported in the media [4]. We concur that health system strengthening with the integration of survivor care may ensure long-term sustainable rehabilitation, and acknowledge the large unmet need for healthcare in the general population. However, EVD survivors remain at greater risk of visual disability, and would benefit from the Ebola survivor specific international funding.

Note

The authors have no reported conflicts of interest.

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