

Neonatal Ebola infection: An Interesting Issue in Pediatric Infectious Disease

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Dear Editor,

Ebola virus infection is a current global concern (1). This infection caused several deaths in Africa in 2015 (1). Ebola virus infection can occur in any age group. In pediatrics, the mortality rate of Ebola is very high (2). Neonatal Ebola infection is a particular area of interest. The first issue to be discussed is transplacental transmission and congenital Ebola infection in newborns. Infection in pregnant women can affect newborns (3, 4). In the current outbreak, Oduyebo et al. recently reported a case of Ebola in a mother infected in her third trimester who delivered a stillborn fetus (5). A previous report from Congo also recounted a case of a stillborn fetus (6). It seems that the infection is very virulent, and the affected fetus does not usually survive. Nevertheless, Ebola infection among the newborns has been observed. According to the report from Congo by Formenty et al., the youngest case was a five-day-old newborn, and there is high mortality among newborns even when the clinical presentation is only a fever (7). In Uganda, a case was reported in a three day old. A similar, very high fatality rate among newborns was also observed (8). The possibility of perinatal infection can be seen in these cases from Congo and Uganda where there was no evidence of Ebola infection in the mother during pregnancy (7, 8). Intrafamilial transmission from other members of the family to the neonates via body fluid contact is proposed (7, 8). In a recent publication in *Am J Infect Control*, the transmission of Ebola to a newborn through contact with the mother's body fluid was reported (9). In conclusion, as seen in clinical practice, neonatal Ebola virus infection has a very high mortality rate. Practitioners should be made

aware of this risk.

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