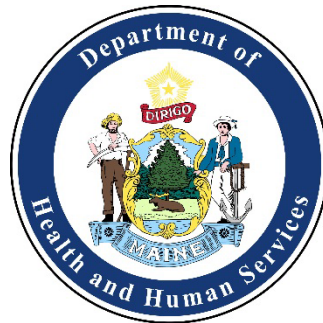


2026 Ebola and Hantavirus Disease Update

Maine CDC

Statewide Coordinating Council

June 18, 2026



Overview



**Review the
outbreak**



**Understand
the risk**



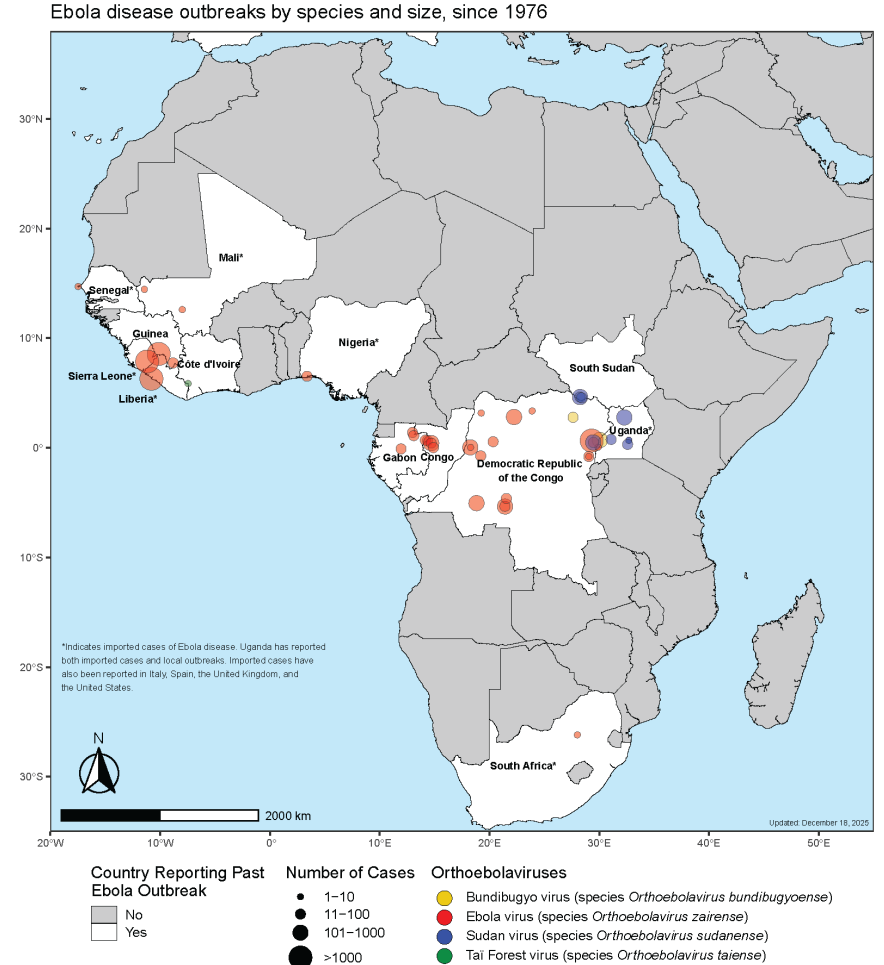
**Support our
community**

Hantavirus (*Andes virus*) Outbreak on a Cruise Ship

- US and Global public health organizations responded to a deadly hantavirus outbreak – specifically the *Andes Virus*) on a cruise ship (MV Hondius) in the Atlantic Ocean, reported on May 2, 2026.
 - 11 confirmed cases, 2 probable cases
 - 3 deaths
- U.S. CDC, in coordination with state and federal partners, repatriated 18 people who were potentially exposed to hantavirus on the M/V Hondius cruise ship in May 2026. They were flown to the National Quarantine Unit (NQU) at the University of Nebraska Medical Center for a 42-day public health monitoring period.
 - 8 people remain at the NQU, 10 have returned home to complete their monitoring. All people remain symptom-free and have met the criteria established by public health officials to safely continue monitoring at home.
 - **No exposed persons were residents of Maine.**
- The rodents that carry *Andes virus* have not been found in the United States.

Ebola Disease Background and Context

- There are 4 types of Ebolaviruses that cause illness in people:
 - Ebola virus (Zaire)
 - Sudan virus
 - Taï Forest virus
 - **Bundibugyo virus**
- This is the 3rd outbreak of the Bundibugyo species of Ebola virus. This is the largest outbreak of Bundibugyo virus and the 3rd largest outbreak of any Ebola virus
- **No current vaccine or treatment is available**, but some candidates are in the pipeline. Supportive care can improve clinical outcomes.



Ebola Disease - Background and Context

- Ebola disease is serious, highly transmissible, and often fatal
- Virus is found in all body fluids of acutely infected individuals
- Transmission occurs through
 - Direct contact with body fluids of someone sick with or who has died from Ebola
 - Contact with contaminated items (clothes, bedding, equipment)
 - Sexual activity with someone who has recovered (through semen)
- NOT spread through airborne transmission

Situational Update – DRC and Uganda

- No cases have been reported outside of DRC and Uganda
- Data as of June 15, 2026



DRC

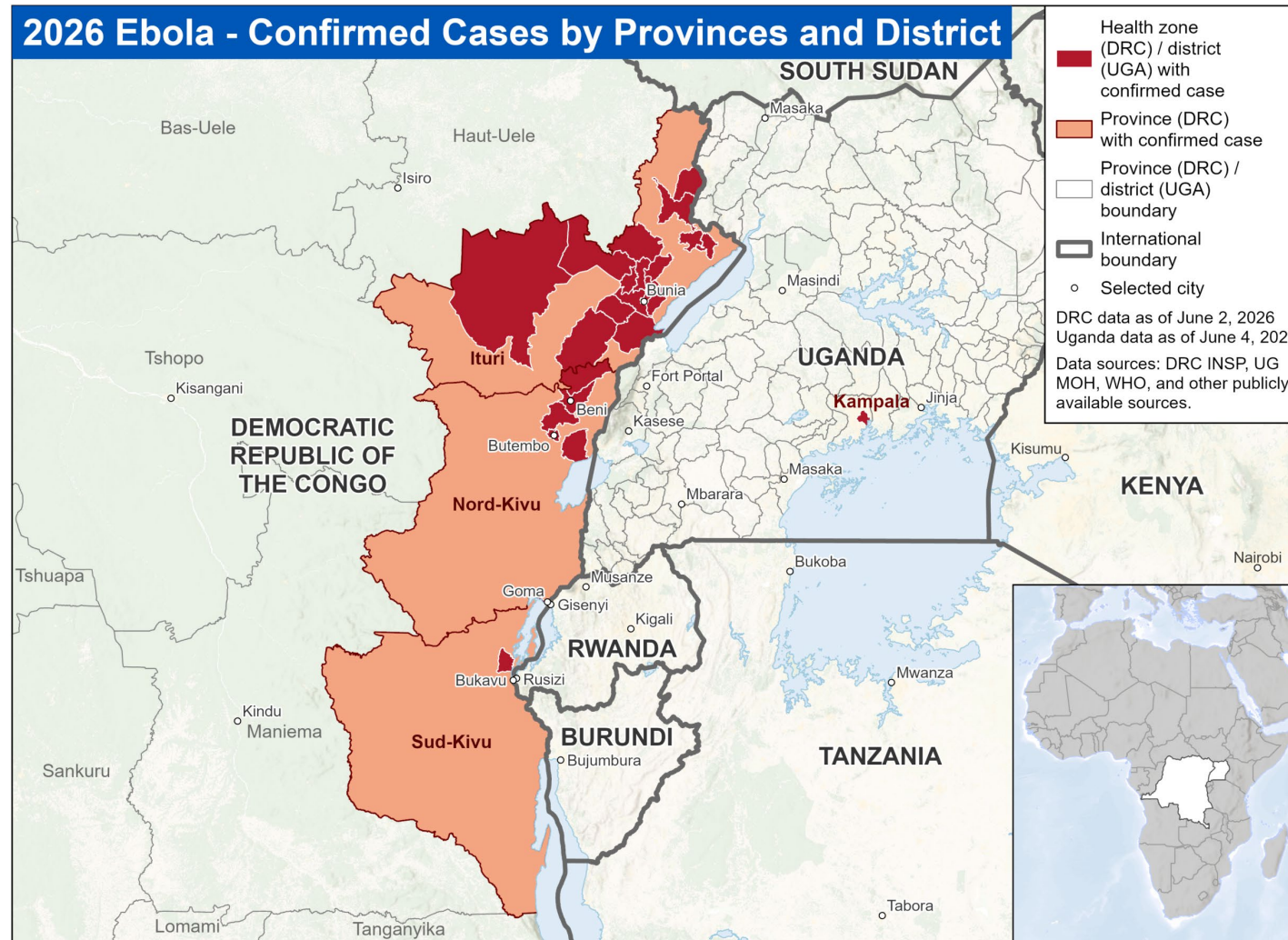
837 cases
196 deaths



Uganda

19 cases
2 deaths

Situational Update - DRC and Uganda



Preparedness in the U.S.

- The overall risk to the American general public and travelers remains low.
- U.S. CDC actions
 - Travel Notices for DRC and Uganda
 - Non-US citizens who have traveled to DRC, South Sudan, or Uganda in the last 21 days are not allowed to travel to the US
 - Funneling of passenger to and enhanced entry screening for US citizens at 4 US airports (JFK, Washington Dulles, Atlanta, Houston)
 - Monitoring recommendations for travelers during the 21 days following departure from affected countries
 - Health advisories and interim guidance for health departments

Preparedness in Maine

- Working with state and local partners to ensure preparedness plans are up-to-date and functional and coordinating with U.S. CDC
- **Infectious Disease Epidemiology**
 - Monitoring of travelers from affected countries
 - Maintaining existing disease surveillance systems to detect potential cases of Ebola
- **Chief Medical Officer and Healthcare Epidemiology**
 - Supporting preparedness with hospitals, other health care facilities, EMS
 - Supporting clinical consults for persons who present with symptoms
- **Health and Environmental Testing Laboratory**
 - Facilitates testing through regional labs and U.S. CDC
- **Office of Readiness and Response**
 - Supporting coordination including interagency/interdepartmental coordination
 - MEMA, DPS, DEP, EMS, OCME
 - Personal protective equipment stockpile

Stigma and Community Impact

- During the 2014-2015 West Africa Ebola outbreak, African immigrants across the US experienced discrimination, regardless of any actual connection to the outbreak.
- Communities already carrying cumulative trauma may experience fear, anxiety, and discrimination related to the Ebola outbreak.
- You can fight stigma by:
 - Know the facts about Ebola and correct rumors
 - Raising awareness about Ebola without increasing fear
 - Relying on information from credible sources
 - Being respectful of people who have traveled to the affected area
 - Showing support for people who have been affected by Ebola

Fighting Ebola ... AND Stigma

Ebola is a scary disease. Many people have gotten sick and died from it. It's normal to feel worry and fear when something is unknown or not well understood. In outbreaks like these, we can use our fear to learn how to help instead of hurt.

Many people have been the target of stigma during the Ebola outbreak

- People who traveled to West Africa to help fight the outbreak
- People from Africa or of African descent
- People who look African

What does stigma look like?

Once you know what stigma looks like, you can help to fight it. Stigma means:

- Making negative comments about a group of people and Ebola
- Not letting people go to school or work because of fears about Ebola
- Avoiding family, friends, or neighbors (or others) who have recently returned from West Africa
- Treating people of African descent differently, or assuming they must have or can spread Ebola

You can fight stigma by

- Knowing the facts about Ebola and correcting rumors when you hear them
- Raising awareness about Ebola without increasing fear
- Relying on information from credible sources only
- Being respectful of people who have traveled to West Africa
- Showing support for people who have been affected by Ebola

Know these facts about Ebola

- Ebola is caused by a virus, not a person.
- Ebola isn't spread through casual contact (hugging, shaking hands, sitting near someone).
- Ebola is not spread through the air, by water, or by food legally grown in the U.S.
- Ebola is spread by direct contact with infected blood and body fluids.

It's also important to remember ...

- People from West Africa are not more likely to get Ebola than anyone else. Viruses cannot target a specific group of people.
- Just because a person traveled to West Africa, it doesn't mean they were exposed to Ebola.
- People who have recently traveled to West Africa are screened when they get here and watched for symptoms for 21 days.
- Africa is a big continent, and only three West African countries have had large outbreaks of Ebola.

CDC If you are worried or have questions, educate yourself by using trustworthy sources of information. You can learn about Ebola on CDC's website: cdc.gov/Ebola

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Source: [CDC](http://cdc.gov) (2015, West Africa Response)

Resources

ME CDC <https://www.maine.gov/dhhs/mecdc/diseases-conditions/animal-borne-diseases/viral-hemorrhagic-fever>

U.S. CDC <https://www.cdc.gov/ebola/about/index.html>

WHO <https://www.afro.who.int/health-topics/ebola-disease/situation-reports>

US travel notices

- <https://wwwnc.cdc.gov/travel/notices/level3/ebola-democratic-republic-of-the-congo>
- <https://wwwnc.cdc.gov/travel/notices/level2/ebola-uganda>
- <https://www.cdc.gov/ebola/situation-summary/returning-travelers.html>