

World Health Organization Contradicts US Centers for Disease Control: Admits Ebola Can Spread via Coughing, Sneezing and Contaminated Surfaces

By [Mike Adams](#)

Theme: [Science and Medicine](#)

Global Research, October 09, 2014

[Natural News](#) 8 October 2014

The World Health Organization has issued a bulletin which confirms what [Natural News](#) has been asserting for weeks: that Ebola can spread via indirect contact with contaminated surfaces and aerosolized droplets produced from coughing or sneezing.

“...wet and bigger droplets from a heavily infected individual, who has respiratory symptoms caused by other conditions or who vomits violently, could transmit the virus — over a short distance — to another nearby person,” says a W.H.O. bulletin released this week. [1] “This could happen when virus-laden heavy droplets are directly propelled, by coughing or sneezing...”

That same bulletin also says, “The Ebola virus can also be transmitted indirectly, by contact with previously contaminated surfaces and objects.”

In other words, the WHO just confirmed what the CDC says is impossible — that Ebola can be acquired by touching a contaminated surface.

CDC remains in total denial, spreading dangerous disinformation about Ebola transmission vectors

This information published by the WHO directly contradicts the ridiculous claims of the CDC which continues to insist Ebola cannot spread through “indirect” means.

According to the CDC, Ebola can only spread via “direct contact,” but the CDC is basing this assumption on the behavior of the Ebola outbreak from 1976 — nearly four decades ago.

The CDC, in fact, continues to push [five deadly assumptions about Ebola](#), endangering the lives of Americans in the process by failing to communicate accurate safety information to health professionals and the public.

Because of the CDC’s lackadaisical attitude about [Ebola transmission](#), the Dallas Ebola outbreak may have been made far worse by people walking in and out of the Ebola-contaminated Duncan apartment while wearing no protective gear whatsoever.

Because the CDC sets the standards for dealing with infectious disease in the United States, when the CDC claims Ebola can only spread via “[direct contact](#),” that causes emergency responders, Red Cross volunteers and even family members to conclude, “Then we don’t even need to wear latex gloves as long as we’re not touching the patient!”

Not “airborne” but can spread through the air

Both the CDC and the WHO continue to aggressively insist that Ebola is not an “airborne” disease. “Ebola virus disease is not an airborne infection,” says the WHO bulletin. But that same bulletin describes the ability of [Ebola](#) to spread through the air via aerosolized droplets.

The medical definition of “airborne,” it turns out, is a specific, narrow definition that defies the common understanding of the term. To most people, “airborne” means it can spread through the air, and Ebola most certainly can spread through the air when it is attached to [aerosolized particles](#) of spit, saliva, mucus, blood or other body fluids.

The CDC has now admitted there is a slight possibility of Ebola mutating to become “airborne” but says that chance is very small. [2] However, all honest virologists agree that the longer Ebola remains in circulation in West Africa, replicating among human hosts, the more chances it has to mutate into an airborne strain.

But the virus doesn’t need to mutate to continue to spread. It has already proven quite capable of spreading via *indirect contact* in a way that all the governments of the world have been utterly unable to stop. Despite the best efforts of the [CDC](#) and WHO, Ebola continues to replicate out of control across West African nations. Even in the United States, the Dallas “patient zero” incident has reportedly caused 100 people to be monitored for possible Ebola infections.

This is why government claims that “we have this under control” are just as much hogwash as the claim that Ebola can only spread via “direct contact.”

But that seems to be the default response of government to all legitimate threats: first, deny reality and misinform the public. Keep people in the dark and maybe the whole thing can be swept under the rug... at least until the mid-term elections.

Sources for this article include:

[1] <http://www.who.int/mediacentre/news/ebola/06...>

[2] <http://thehill.com/policy/healthcare/220046-...>

The original source of this article is [Natural News](#)

Copyright © [Mike Adams](#), [Natural News](#), 2014

[Comment on Global Research Articles on our Facebook page](#)

[Become a Member of Global Research](#)

Articles by: [Mike Adams](#)

Disclaimer: The contents of this article are of sole responsibility of the author(s). The Centre for Research on Globalization will not be responsible for any inaccurate or incorrect statement in this article. The Centre of Research on Globalization grants permission to cross-post Global Research articles on community internet sites as long the source and copyright are

acknowledged together with a hyperlink to the original Global Research article. For publication of Global Research articles in print or other forms including commercial internet sites, contact: publications@globalresearch.ca
www.globalresearch.ca contains copyrighted material the use of which has not always been specifically authorized by the copyright owner. We are making such material available to our readers under the provisions of "fair use" in an effort to advance a better understanding of political, economic and social issues. The material on this site is distributed without profit to those who have expressed a prior interest in receiving it for research and educational purposes. If you wish to use copyrighted material for purposes other than "fair use" you must request permission from the copyright owner.

For media inquiries: publications@globalresearch.ca