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***Supplemental Methods: Laboratory Workup and Serologic Testing for Uveitis***

Ebola Immunoglobulin IgG/IgM Assay

Serologic evidence of prior EBOV infection was evaluated using ReEBOV® IgG ELISA Test Kits (Zalgen Labs). Serum from subjects was diluted 1:100 in sample diluent and incubated for 30 minutes at room temperature. Plates were washed and incubated with IgG conjugate buffer for 30 minutes at room temperature. Plates were washed again and incubated with TMB substrate for 20 minutes at room temperature, then stopped and the optical density was read at 450 nm using a Biotek plate reader.

***Supplemental Methods: Ocular Fluid Sampling Procedure***

Following written informed consent with the assistance of a Sierra Leonean interpreter in the patient’s dialect when needed, the eye was marked and time out was taken to verify the patient’s identity and procedure site. Topical anesthesia with proparacaine was instilled, 4% lidocaine-soaked pledget was applied to the temporal cornea, and subconjunctival 2% lidocaine with epinephrine was administered. After an eyelid speculum was placed, a conjunctival swab specimen was taken from the inferior fornix with a Dacron swab and placed into viral transport media. Following instillation of 5% Betadine solution, an aqueous humor or vitreous humor sample was obtained. For aqueous humor sampling, a 30-gauge needle on a 1-cc tuberculin syringe was introduced with direct visualization of the needle over the iris plane, and 100 to 200 microliters of aqueous humor was aspirated or until a shallow anterior chamber was observed. For vitreous sampling, a 25-gauge 5/8” needle on a 3-cc syringe was used with needle entry 4 mm posterior to the pars plana. Balanced saline solution was instilled into the anterior chamber if needed following ocular fluid aspiration if significant hypotony was observed. A post procedure conjunctival Dacron swab was then taken from the inferior fornix and placed into viral transport media. All eyes were irrigated and rinsed and a drop of topical ciprofloxacin applied. An eye patch and shield were secured with tape and then removed the following day. Patients had a conjunctival swab of their inferior fornix taken at 24 hours post procedure after ophthalmic examination was performed.

***Supplemental Methods: EBOV Reverse transcription polymerase chain reaction (RT-PCR) testing of ocular fluid***

EBOV RT-PCR was performed on conjunctival swab specimens (pre-procedure, immediate post procedure, and 1-day post procedure) and ocular fluid (aqueous humor, vitreous humor) following RNA extraction using the QIAamp Viral RNA Mini kit (Qiagen, Germantown, MD), with a final elution of 30 ul which was run through the column twice at Kenema Government Hospital (KGH). The quality of RNA extraction was verified via evaluation of 18S human RNA using 0.5 μM of each 101bp amplicon primers: AGA4233\_18S1F – TCCTTTAACGAGGATCCATTGG and AG4234\_18S1R – CGAGCTTTTTAACTGCAGCAACT. Patient samples then underwent EBOV RT-qPCR analysis using the KGH primer set17 and Power SYBR Green RNA-to-Ct 1-Step qRT-PCR assay (Life Technologies, Carlsbad, CA). The 25 μL assay mix included 4 μL RNA, 1 μM primer KGH-fwd, 1 μM KGH-rev, 10 μL 2x Power SYBR Green RT-PCR Mix and 0.16 μL RT Enzyme Mix. The cycling conditions for both 18s and KGH-EBOV reactions were 48° C for 30 min and 95°C for 10 min, followed by 45 cycles of 95° C for 15 sec and 60° C for 1 min with a melt curve of 95° C for 15 sec, 60° C for 15 sec and 95° C for 15 sec.

***Supplemental Methods: Manual Small Incision Cataract Surgery (MSICS)***

Following written informed consent with the assistance of a Sierra Leonean interpreter in the patient’s dialect when needed, the eye was marked and time out was taken to verify the patient’s identity and procedure site. After 5 ml of retrobulbar anesthesia with 2% lidocaine was administered, the patient underwent MSICS procedure. A paracentesis was fashioned with a sideport blade temporally. A 27-gauge blunt cannula was used to aspirate approximately 100-150 ul of aqueous humor and stored for future analysis. Viscoelastic using Healon GV was then instille into the anterior chamber. A 6-mm conjunctival peritomy was fashioned at the superior corneoscleral limbus. Low-temperature cautery was applied to the sclera to establish hemostasis in the region of the scleral wound. A 5-mm “frown-shaped” incision was fashioned with a crescent blade and a microkeratome was used to enter the anterior chamber. A cystotome was used to create an opening in the anterior capsule of the lens after which an “envelope” shaped capsulorhexis was fashioned with the cystotome. The anterior capsule was harvested with Utrata forceps and stored in 10% formalin for future histologic analysis. Balanced saline solution wasu used to hydrodissect the lens from the anterior capsule. After additional viscoelastic was instilled into the anterior chamber, a bent cysotome was used to engage the lens nucleus and remove it in is entirety for storage in 10% formalin. The cortical and epinuclear material was aspirated with a Simco needle attached to a 10-cc syringe and stored. Viscoelastic was instilled into the capsular bag, after which an IOL of pre-determined lens power to achieve a postoperative refractive error from -0.50 to -1.00 Diopters was inserted. Following successful IOL implantation and removal of residual viscoelastic, 100-150 ul of aqueous humor was aspirated with a 27-gauge cannula on a 1-cc syringe for EBOV RT-PCR analysis. A 10-0 nylon suture was placed if needed and subconjunctival ceftazidime and dexamethasone injections were instilled. An eye patch and protective shield were subsequently secured for removal the following day.

***Supplemental Table 1. Ocular Symptoms at EVICT Enrollment***

|  |  |
| --- | --- |
| Ocular Symptom | No. reporting symptom (%) |
| Vision loss | 24 (49) |
| Eye pain | 18 (37) |
| Tearing | 13 (27) |
| Light sensitivity | 11 (22) |
| Eye Redness | 12 (24) |
| Floaters | 4 (8) |

***Supplemental Table 2. Systemic Symptoms at EVICT Enrollment***

|  |  |
| --- | --- |
| Systemic Symptom  | Number of patients (%)  |
| Headache | 36 (73) |
| Joint pain | 30 (61) |
| Weight loss | 29 (59) |
| Cough | 21 (43) |
| Fever | 21 (43) |
| Mood disturbances  | 20 (41) |
| Chest pain | 17 (35) |
| Itching | 15 (31) |
| Dizziness | 14 (29) |
| Chills | 13 (27) |
| Numbness | 13 (27) |
| Fatigue  | 12 (24) |
| Ringing in ears | 11 (22) |
| Shortness of breath  | 11 (22) |
| Muscle cramps | 9 (18) |
| Rash | 9 (18) |
| Palpitations | 8 (16) |
| Nausea | 7 (14) |
| Vaginal discharge | 7 (14) |
| Diarrhea | 4 (8) |
| Constipation  | 4 (8) |
| Amenorrhea  | 3 (6) |
| Insomnia  | 2 (4) |