

PENNSYLVANIA DEPARTMENT OF HEALTH
2014 - PAHAN-283-07-03-ADV
Three Imported Chikungunya Human Cases in
Pennsylvania-2014



DATE:	07/03/14
TO:	Health Alert Network
FROM:	Michael Wolf, Secretary of Health
SUBJECT:	Three Imported Chikungunya Human Cases in Pennsylvania-2014
DISTRIBUTION:	Statewide
LOCATION:	Statewide
STREET ADDRESS:	Statewide
COUNTY:	Statewide
MUNICIPALITY:	Statewide
ZIP CODE:	Statewide

This transmission is a “Health Advisory”: provides important information for a specific incident or situation; may not require immediate action.

HOSPITALS: PLEASE SHARE WITH ALL MEDICAL, PEDIATRIC, INFECTION CONTROL, NURSING, AND LABORATORY STAFF IN YOUR HOSPITAL

EMS COUNCILS: PLEASE DISTRIBUTE AS APPROPRIATE

FQHCs: PLEASE DISTRIBUTE AS APPROPRIATE

LOCAL HEALTH JURISDICTIONS: PLEASE DISTRIBUTE AS APPROPRIATE

PROFESSIONAL ORGANIZATIONS: PLEASE DISTRIBUTE TO YOUR MEMBERSHIP

The Pennsylvania Department of Health (PADOH) is reporting three imported Chikungunya (CHIK) cases in travelers returning from the Caribbean in 2014. Two cases of CHIK had been diagnosed in Pennsylvania in the previous ten years. All have been diagnosed in returning travelers.

Chikungunya virus is transmitted to people by mosquitoes. The most common symptoms of chikungunya virus infection are fever and joint pain. Other symptoms may include headache, muscle pain, joint swelling, or rash. Outbreaks have occurred in countries in Africa, Asia, Europe, and the Indian and Pacific Oceans. In late 2013, chikungunya virus was found for the first time in the Americas on islands in the Caribbean. Chikungunya virus is not currently found in the continental United States. There is a risk that the virus will be imported to new areas by infected travelers. There is no vaccine to prevent or medicine to treat chikungunya virus infection.

The time from virus infection to onset of disease symptoms is usually three to seven days. Acute symptoms typically resolve within seven to ten days. Some patients experience a relapse of arthritis. Complications include uveitis, retinitis, myocarditis, hepatitis, nephritis, hemorrhages, meningoencephalitis, myelitis, Guillain-Barre syndrome, cranial nerve palsies, and/or death.

Please note that since CHIK and dengue disease endemic areas often overlap, worldwide and they share the same *Aedes* vector mosquito; co-infection occurs, and no good differential diagnostic signs or symptoms exist, the Centers for Disease Control and Prevention (CDC) recommends that health care

providers **test all ill returned travelers for both diseases** to improve clinical outcomes: WHO Dengue Control Management Guideline: http://whqlibdoc.who.int/publications/2009/9789241547871_eng.pdf A laboratory diagnosis for either disease requires that blood be sent for testing for the presence of the virus, or antibodies. Pennsylvania Bureau of Laboratories (BOL) does not offer CHIK testing but the tests are available at commercial laboratories. .

Since there is no CHIK vaccine, the best way for people to prevent infection is to reduce exposure to infected mosquito bites via adult and larval mosquito control efforts, and public outreach. If a returned traveler becomes ill they should avoid being bitten by local mosquitoes during the first week of their illness to prevent virus spread in their community.

There is no treatment other than supportive care. Persons who think they may have CHIK should seek medical attention. Use acetaminophen for initial fever and pain control. If pain control is inadequate, consider using narcotics or NSAIDs. If the patient may have dengue, do not use aspirin or other NSAIDs until they have been afebrile ≥ 48 hours and have no warning signs of severe dengue (severe abdominal pain, persistent vomiting, mucosal bleeding, pleural effusion or ascites, hepatomegaly, or increased hematocrit with decrease in platelet count). Persistent joint pain may benefit from the use of NSAIDs, corticosteroids, or physiotherapy.

More CHIK information may be found from CDC at: <http://www.cdc.gov/chikungunya/>

Please share this information with appropriate personnel in your facility or practice.

Cases of arbovirus infection should be entered into Pennsylvania's web-based electronic disease surveillance system, PA-NEDSS: <https://www.nedss.state.pa.us/nedss/default.aspx>. For mosquito-related questions, please call your local health department or the Pennsylvania Department of Health at 1-877-PA-HEALTH (877-724-3258).

Categories of Health Alert messages:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; unlikely to require immediate action.

This information is current as of July 3, 2014, but may be modified in the future.
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