

8 BEYOND OUR BORDERS

The 'Beyond our Borders' column focuses on selected and current international diseases that may affect South Africans travelling abroad. Numbers correspond to Figure 5 on page 15.

1. Cutaneous anthrax cases in Matabeleland South Province: Zimbabwe

Cutaneous anthrax has been diagnosed in 36 persons from the Umzingwane District, Matabeleland South Province since early December 2015. Anthrax is highly endemic in Zimbabwe, and the cases have been directly linked to livestock contact. Human-to-human transmission is rare; none have occurred during this outbreak. Risk to travellers is minimal; contact with cattle should be avoided.

2. Lassa fever: Nigeria

According to WHO and other global outbreak alerts, there are 239 suspected cases of Lassa fever of which 44 are confirmed, and deaths (case fatality 34%) from Dec 2015 until 24th January 2016. Lassa fever is an acute viral haemorrhagic illness of 1-4 weeks duration that occurs in West Africa. The Lassa virus is transmitted to humans via contact with food or household items contaminated with rodent urine or faeces. Person-to-person transmission can also occur. Clinical syndromes can result in significant illness. Therefore early supportive care and ribavirin is recommended to improve outcomes. Travellers are advised to report to health facilities immediately if any symptoms and signs are identified during or after a trip to this area.

3. Legionellosis: Spain

As of 30 Dec 2015 there were 228 confirmed cases of *Legionella* sp. infection, 23 of whom were hospitalized; 4 requiring intensive care unit support and 2 deaths following an acute outbreak in the city of Manzanares. An ornamental fountain at the Manzanares bus station is a suspected source. Initial testing has shown at least 2 strains of *Legionella* are responsible, though further tests are still on-going. The outbreak has since been contained and is unlikely to pose any significant risk to travellers.

4. Pertussis: Canada

According to global outbreak reports, there has been an increase in pertussis cases reported in the city and Ontario district from Oct 2015 – Jan 2016. Ten confirmed cases have been reported, and the outbreak has been seemingly contained within the district. Travellers should ensure that vaccinations are up to date if they are travelling to this area.

5. Dengue fever: Americas, Asia, Africa

Global outbreak reports have identified cases of Dengue fever throughout the Americas, in Asia and Africa in Dec 2015. Travellers are advised to continue exercising precautionary measures in preventing mosquito bites.

6. Middle East respiratory syndrome coronavirus (MERS-CoV): Saudi Arabia/UAE

According to global outbreak and official WHO reports MERS-CoV cases continue to be reported in significant numbers in Saudi Arabia, though other cases were also reported in South Korea during December 2015. There were 167 cases in total throughout December 2015 and 6 cases reported in Saudi Arabia and UAE within the first 2 weeks of January 2016. Travellers should continue to exercise good hygiene practices and avoid contact with camels and camel milk.

7. Yellow fever

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References:

www.promedmail.org
www.who.int

Source: Division of Public Health Surveillance and Response, NICD-NHLS (outbreak@nicd.ac.za)

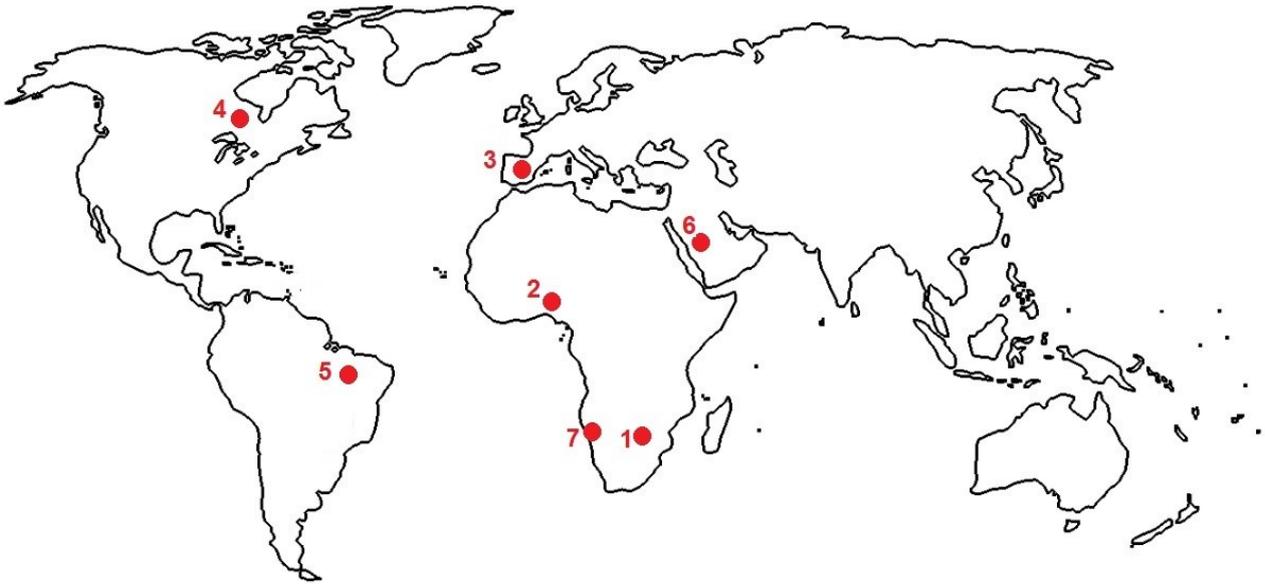


Figure 7. Current outbreaks that may have implications for travellers. Numbers correspond to text above. The red dot is the approximate location of the outbreak or event.