

7 BEYOND OUR BORDERS

The 'Beyond our Borders' column focuses on selected and current international diseases that may affect South Africans travelling abroad.

Disease & countries	Comments	Advice to travellers
1. Water and food borne diseases		
Cholera		
<u>Dominican Republic</u>	The number of cases has increased over recent weeks, linked to the trend of increasing case numbers reported in Haiti.	<u>Advice to travellers:</u> Prevention measures include consumption of safe water (bottled water with an unbroken seal, boiled water or water treated with chlorine tablets); strict washing of hands with soap and safe water, eating of well-cooked food only, and careful selection of fruit, eating only those that can be peeled.
<u>Haiti</u>	A sustained trend of increased case numbers has been reported during 2015 to date (almost 17 000 cases since January).	
<u>Cuba</u>	A laboratory-confirmed case was reported on 01 July 2015 of a UK holiday maker who was diagnosed on his return.	
2. Vector-borne diseases		
Dengue		
Americas and Asia	As of 21 July 2015, ongoing outbreaks or high rates of autochthonous transmission of dengue have been reported in the following countries of the Americas and Asia: <u>North America:</u> Mexico <u>Central America:</u> Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua <u>Hispanic Caribbean:</u> Dominican Republic, Puerto Rico <u>English, French and Dutch Caribbean:</u> Aruba, French Guiana, Guyana, St Martin <u>Andean and Southern Cone:</u> Brazil, Colombia, Peru, Argentina and Paraguay <u>Asia:</u> Malaysia, Philippines, Indonesia, India, Sri Lanka, Viet Nam	Refer to article on pages 4-5 of this Communiqué for further information.

Disease & countries	Comments	Advice to travellers
2. Vector-borne diseases (continued)		
<p>Chikungunya</p> <p>Global</p>	<p>As of 21 July 2015, ongoing outbreaks or high rates of autochthonous transmission of chikungunya virus have been reported in the following countries of the Americas and Asia:</p> <p><u>North America</u>: Mexico</p> <p><u>Central America</u>: El Salvador, Guatemala, Honduras,</p> <p><u>Caribbean</u>: French Guiana, Puerto Rico</p> <p><u>Andean and Southern Cone</u>: Brazil, Colombia, Peru, Paraguay</p> <p><u>Asia</u>: Malaysia, Philippines, Indonesia, India, Sri Lanka, Viet Nam</p>	<p>Chikungunya (like dengue fever) is a mosquito-borne viral infection transmitted by <i>Aedes</i> spp. mosquitoes, which bite mostly during the day.</p> <p>The incubation period is usually 3-7 days (range 1-12 days), and the illness is characterised by an abrupt onset of fever and arthralgia. Arthralgia is usually bilateral and symmetrical and is often severe and debilitating. Other symptoms may accompany the fever and arthralgia, including: headache, myalgia, arthritis, conjunctivitis, nausea, vomiting, and nonspecific maculopapular rash.</p> <p>Laboratory findings can include lymphopenia, thrombocytopenia, elevated creatinine, and elevated hepatic transaminases.</p> <p>Most chikungunya infections are self-resolving, but rare complications include bullous skin lesions, uveitis, retinitis, myocarditis, hepatitis, nephritis, meningoencephalitis, Guillain-Barré syndrome, and haemorrhage.</p> <p>There is no specific antiviral therapy, and treatment is symptomatic.</p> <p>Travellers should wear clothing that minimises skin exposure (i.e. long-sleeved shirts and long pants) during the day, and apply mosquito repellents to exposed skin or clothing.</p>

References and additional reading:

ProMED-Mail (www.promedmail.org)

World Health Organization (www.who.int)

Centers for Disease Control and Prevention (www.cdc.gov)

European Centre for Disease Prevention and Control (www.ecdc.europa.eu)

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Source: Division of Public Health Surveillance and Response, NICD-NHLS