

## BEYOND OUR BORDERS: INFECTIOUS DISEASE RISKS FOR TRAVELLERS

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
<p><b><u>MERS-CoV</u></b></p> <p>Middle East: Jordan, Qatar, <b>Saudi Arabia</b>, and the United Arab Emirates (UAE).</p> <p>France, Germany, Spain, Tunisia and the United Kingdom</p>	<p>As of 09 December 2013, WHO has been informed of a total of 163 laboratory-confirmed cases of infection with MERS-CoV, including 71 deaths. The majority of the cases, 127 including 53 deaths have been reported from Saudi Arabia.</p> <p>Travel to the Middle East has been associated with all these cases</p>	<p>Infection prevention and control measures include good cough etiquette, avoiding contact with sick people, and frequent hand washing with soap and water or the use of an alcohol-based hand rub.</p> <p>Travellers should contact a medical practitioner if they develop acute respiratory symptoms upon return from a known risk area.</p>
<p><b><u>Avian Influenza (H7N9)</u></b></p> <p>Hong Kong</p> <p>China</p>	<p>As of 09 December 2013, two human case of avian influenza H7N9 in Hong Kong have been confirmed.</p> <p>As of 10 December 2013, 141 confirmed cases including 45 deaths have been reported.</p>	<p>No vaccine is currently available for avian influenza (H7N9) virus. Antiviral treatment is most effective when started as soon as possible after influenza illness onset.</p> <p>WHO does not advise special screening at points of entry, nor does it currently recommend any travel or trade restrictions.</p>

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<p><b><u>Dengue fever</u></b> Africa (Burkina Faso)</p> <p>Pakistan (Punjab Province, Sindh Province)</p> <p>India (Delhi, Karnataka State, Maharashtra State)</p> <p>Honduras</p> <p>Nicaragua</p> <p>Mexico (Baja California Sur State, Sonora State)</p>	<p>Dengue fever is considered to be endemic to many countries in all regions of Africa, but surveillance is poor and the disease under diagnosed. As of 06 December 2013, 33 hospitalised cases have been reported in Burkina Faso.</p> <p>As of 06 December 2013, 2 385 cases including 6 deaths have been reported in Punjab Province. In Sindh Province 5 058 cases including 30 deaths have been reported.</p> <p>As of 06 December 2013, 5 212 cases including 6 deaths have been reported in Delhi. In Karnataka State 6 023 cases including 12 deaths have been reported. In Maharashtra State 741 cases have been reported.</p> <p>As of 06 December 2013, 832 cases have been reported.</p> <p>As of 06 December 2013, 8 105 cases including 22 deaths have been reported.</p> <p>As of 06 December 2013, 2 024 cases including 78 DHF/serious cases have been reported in Baja California Sur State. In Sonora State 647 cases including 128 DHF/ serious cases have been reported.</p>	<p>Dengue fever is a mosquito-borne viral infection transmitted by the <i>Aedes</i> mosquito species. Dengue fever symptoms can take up to two weeks to develop from being bitten, and the symptoms include: sudden onset of fever, headache, pain behind the eyes, joint and muscle pain, rash, nausea and vomiting.</p> <p>Severe or complicated dengue fever is uncommon but can occur in the form of dengue haemorrhagic fever and dengue shock syndrome. This is more common in the young and elderly.</p> <p>Travellers should wear long-sleeved shirts and long pants during the day and stay in well-ventilated (fan/air-conditioned) rooms where possible; use mosquito repellents containing DEET to avoid being bitten.</p> <p>The burning of mosquito coils at night and sleeping under a mosquito net in a well-ventilated room are also helpful at preventing other infections transmitted through mosquito bites.</p>
<p><b><u>Chikungunya</u></b> India (Ahmedabad City)</p> <p>Micronesia</p>	<p>As of 19 November 2013, compared with 24 cases from September to November 2012, 369 cases were reported from September to 16 November 2013.</p> <p>As of 29 November 2013, more than 340 suspected cases have been identified on the main island of Yap and several of the smaller islands.</p>	<p>A mosquito-borne viral infection transmitted by <i>Aedes</i> mosquito species, which bite mostly during the day.</p> <p>The disease shares some clinical signs with dengue; however, the joint pain is often debilitating. Complications are uncommon but can cause death in the elderly. Onset of illness occurs usually between 4 and 8 days, but can range from 2 to 12 days.</p>

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<p><b><u>Chikungunya</u></b> <b>(continued)</b></p> <p>Singapore</p> <p>Philippines</p> <p>Caribbean (Saint Martin)</p>	<p>As of 06 December 2013, 924 cases have been reported.</p> <p>As of 06 December 2013, 1 609 cases have been reported. This is nearly triple the total of 561 cases recorded this time last year.</p> <p>As of 10 December 2013, two confirmed, four probable and twenty suspected cases have been reported.</p>	<p>Travellers should wear long-sleeved shirts and long pants during the day and stay in well-ventilated (fan/air-conditioned) rooms where possible; use mosquito repellents containing DEET to avoid being bitten. The burning of mosquito coils at night and sleeping under a mosquito net in a well-ventilated room are also helpful at preventing other infections transmitted through mosquito bites.</p>
<p><b><u>Yellow fever</u></b> Sudan (West Kordofan State)</p>	<p>Between 3 October and 24 November 2013, a total of 44 confirmed cases including 14 deaths have been reported. A total of 12 localities in West and South Kordofan are affected by the current outbreak. The communicable disease surveillance system has been strengthened in White Nile, Gezira, Kassala, Gedarif and Khartoum</p>	<p>There is no specific treatment for yellow fever. For travellers to yellow fever risk areas, it is recommended for the unvaccinated or those whose vaccination status is unknown that they receive yellow fever vaccination 10 days prior to departure. Travellers should wear long-sleeved pants and shirts during the day and stay in well-ventilated (fan/air-conditioned) rooms where possible; use mosquito repellents containing DEET to avoid being bitten. The burning of mosquito coils at night and sleeping under a mosquito net in a well-ventilated room are also helpful at preventing other infections transmitted through mosquito bites.</p>
<p><b><u>Cholera</u></b> Angola (Southern Provinces)</p> <p>Zimbabwe (Masvingo Province)</p> <p>Togo (Lome, Central Region)</p>	<p>As of 09 December 2013, over 1000 cases including 48 deaths have been reported.</p> <p>As of 09 December 2013, 5 cases have been reported.</p> <p>As of 30 November 2013, 130 cases including 7 deaths have been reported.</p>	<p>Drink and use safe water (bottled with unbroken seal, boiled or treated with a chlorine tablet).</p> <p>Wash hands with soap and safe water often. Eat hot well-cooked food, peel fruits and vegetables. Use latrines or bury faeces.</p>

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<p><b><u>Cholera</u></b> <b><u>(Continued)</u></b></p> <p>Cuba (Cienfuegos Province)</p> <p>Mexico (Veracruz, Hidalgo, Federal District, San Luis Potosi, Mexico State)</p>	<p>As of 26 November 2013, 64 cases including 1 death have been reported. An undetermined number of patients is in critical condition and more than 100 persons affected by profuse diarrhoea are awaiting test results. This is the second outbreak in the province so far in 2013.</p> <p>As of 26 November 2013, 184 cases including 1 death have been reported. Of these, 160 cases are from Hidalgo, 11 from Veracruz, 9 from Mexico State, 2 from Federal District and 2 from San Luis Potosi. The outbreak has been ongoing since September 2013.</p>	<p>Vaccines offer delayed and incomplete protection and should therefore not be used to substitute infection prevention and control measures.</p>
<p><b><u>Polio (wild- type)</u></b></p> <p>Cameroon (Ouest Region)</p> <p>Nigeria</p> <p>Horn of Africa (Somalia, Kenya, Ethiopia)</p> <p>Pakistan (Federally Administered Tribal Area)</p> <p>Syrian Arab Republic (Deir-Al-Zour Province, rural Damascus, Aleppo)</p> <p>Israel, West Bank and Gaza</p>	<p>As of 04 December 2013, 4 cases of wild poliovirus type 1 (WPV1) have been reported.</p> <p>As of 04 December 2013, 50 cases of WPV1 have been reported.</p> <p>As of 04 December 2013, 203 cases of WPV1 have been reported (183 from Somalia, 14 from Kenya and 6 from Ethiopia).</p> <p>As of 04 December 2013, 11 cases of WPV1 have been reported.</p> <p>As of 04 December 2013, 70 cases of WPV1 have been reported</p> <p>As of 04 December 2013, no case of paralytic polio has been reported in either Israel or West Bank and Gaza. However, environmental surveillance has detected WPV1 in 27 sites in Israel, 2 sites in West Bank and 1 site in the Gaza Strip. This suggests that the virus is circulating in the environment.</p>	<p>Travellers are advised to ensure that they have completed the recommended age appropriate polio vaccine series.</p> <p>It is recommended for the unvaccinated, incompletely vaccinated, or those whose vaccination status is unknown that they receive 2 doses of IPV administered at an interval of 4–8 weeks, a third dose should be administered 6–12 months after the second.</p> <p>Vaccinated travellers to the area should receive a booster (ideally the inactivated polio vaccine (IPV) or alternatively oral polio vaccine (OPV) booster.</p>

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<p><b>Measles</b></p> <p>DR Congo (Bandundu)</p> <p>Canada (Alberta)</p> <p>Australia (South Australia)</p> <p>Russia (Astrakhan Region, Dagestan)</p>	<p>As of 24 November 2013, 300 cases have been reported.</p> <p>As of 09 December 2013, 32 cases have been reported.</p> <p>As of 09 December 2013, 10 cases have been reported in the past month linked to Bali holiday-makers.</p> <p>As of 09 December 2013, 148 and 120 cases have been reported in Astrakhan Region and Dagestan, respectively.</p>	<p>Adolescents and adults (unless pregnant) who have not been vaccinated should be vaccinated. Children should be up to date with their routine measles immunisation schedule.</p>
<p><b>Plague</b></p> <p>Madagascar</p>	<p>On 10 December 2013, the Pasteur Institute of Madagascar confirmed bubonic plague as the cause of death in villagers near Mandritsara. At least 20 villagers were reported to have died the previous week. There are concerns that the disease could spread to towns and cities where living standards have deteriorated over recent years.</p>	<p><i>Yersinia pestis</i> is a zoonotic disease of wild rodents. Humans become infected through the bite of an infected rat flea or, less commonly, through contact with/inhalation of infectious droplets. Bubonic plague manifests as an acute illness with fever, headache, weakness and swollen, tender lymph nodes. Complications include septicaemic or pneumonic plague, which both carry high mortality rates. Bubonic plague per sé does not pose a risk for human-to-human transmission; however, pneumonic plague has been associated with human-to-human transmission.</p>

**References and additional reading:**

ProMED-Mail ([www.promedmail.org](http://www.promedmail.org))

World Health Organization ([www.who.int](http://www.who.int))

Centers for Disease Control and Prevention ([www.cdc.gov](http://www.cdc.gov))

Global Polio Eradication Initiative (<http://www.polioeradication.org/Dataandmonitoring/Poliothisweek.aspx>)

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