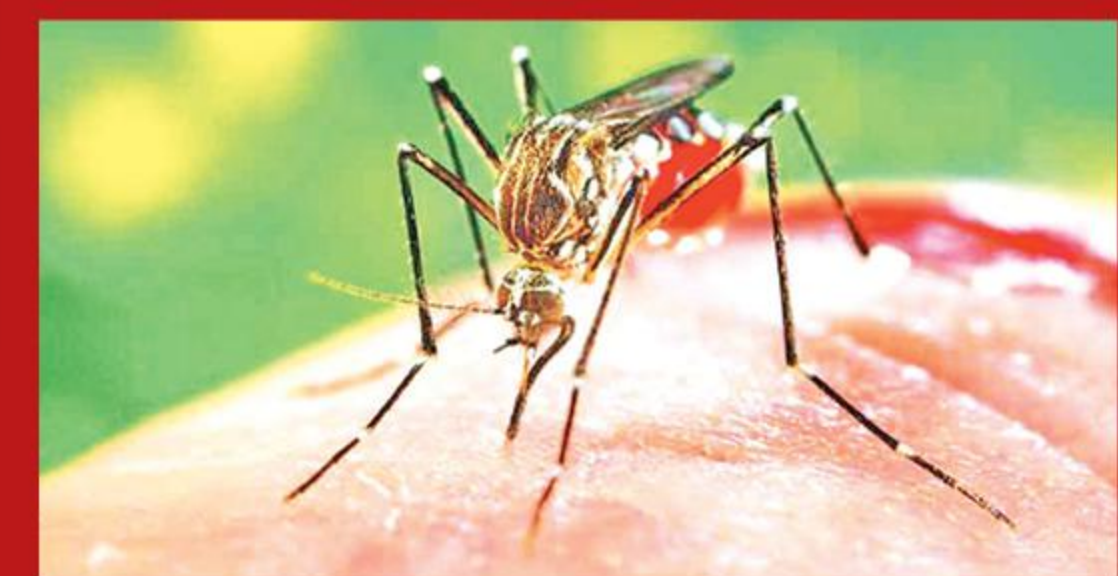




BE CAUTIOUS!

Dengue raises its head again



KEY FACTS: Dengue is a viral infection transmitted to humans through the bite of infected mosquitoes. The primary vectors that transmit the disease are *Aedes aegypti* mosquitoes and, to a lesser extent, *Aedes albopictus*.

The virus responsible for causing dengue is called dengue virus (DENV). There are four DENV serotypes and it is possible to be infected four times. While many DENV infections produce only mild illness, DENV can cause an acute flu-like illness.

Occasionally, this develops into a potentially lethal complication called severe dengue. There is no specific treatment for dengue/severe dengue.

Early detection of disease progression associated with severe dengue, and access to proper medical care lower the fatality rate of severe dengue to below one percent.

Dengue prevention and control depends on effective vector control measures. Sustained community involvement can improve vector control efforts substantially.

climate change in tropical and subtropical areas, and vectors might adapt to the new environment and climate.

The health authorities urged that if anyone knows that he or she has dengue, they should avoid getting further mosquito bites during the first week of illness. The virus may be circulating in the blood during this time, and therefore that person transmits the virus to new uninfected mosquitoes, which may, in turn, infect other people.

The proximity of mosquito vector breeding sites to human habitation is a significant risk factor for dengue. At present, the main method to control or prevent the transmission of the dengue virus is to combat the mosquito vectors.

ISHARA MUDUGAMUWA

The Health Ministry's National Dengue Control Unit (NDCU) reports a significant increase in the number of dengue patients across the country and a dengue epidemic is expected to increase in the future.

Dr. Indika Weerasinghe attached to the National Dengue Control Unit said that around 5,106 dengue cases have been reported so far in January this year. Over 9,000 dengue patients were reported in December last year.

Several districts in the country have been identified as dengue hotspots and dengue cases are more prevalent in Colombo, Gampaha, Kalutara, Galle, Badulla, Jaffna, Kurunegala, Kandy, Puttalam and the Ratnapura Municipal Council area.

About 50 percent of the dengue patients reported from the island are from the Western Province.

According to him, all six Medical Officer of Health (MOH) areas in the Colombo Municipal Council limits have been identified as risk areas for dengue.

He added 16 of the 18 MOH areas in the Regional Director of Health Services (Colombo) have also been identified as high-risk areas.

Dr. Weerasinghe said that in the Gampaha District, 13 of the 16 MOH areas are high-risk areas adding that the situation in the Kalutara District is better than Colombo and Gampaha. However, there is a risk for dengue in five MOH areas.

Outside the Western Province, there is a light epidemic situation surrounding urban areas such as Galle, Badulla, Jaffna, Kurunegala, Kandy, Puttalam and the Ratnapura Municipal Council area.

According to him, DENV-2 and DENV-3 are more prevalent in the country and after a few years, dengue cases of DENV-1 have also been reported in the country.

The National Dengue Control Unit points out that there is an increase in the number of dengue patients due to the changes in the circulating virus groups and the public should be especially vigilant in this regard.

The National Dengue Control Unit urged the public to follow health instructions against both dengue fever and COVID-19 in order to prevent the emergence of any complex situation from the dual public health concerns.

Hospitals across the country have introduced specialised methods of safe hospitalisation and triage of fever patients upon arrival at the hospital for treatment, with a special focus on the risk of COVID-19 disease.

Therefore, people should not be afraid to come to the hospital in case of suspected dengue.

In collaboration with health officers' offices across the country, the National Dengue Control Unit is constantly engaged in dengue control activities and is constantly educating the public through the media.

The National Dengue Control Unit points out that the active participation and intervention of the public in the control of dengue is important and calls for the commitment of all stakeholders in achieving disease control.

As per the World Health Organization (WHO) sources, dengue is caused by a virus of the Flaviviridae family and there are four distinct, but closely related, serotypes of the virus that cause dengue (DENV-1, DENV-2, DENV-3 and DENV-4). Recovery from the infection is believed to provide lifelong immunity against that serotype. However, cross-immunity to the other serotypes after recovery is only partial and temporary. Subsequent

SYMPTOMS

- » Fever, severe headache
- » Pain behind eyes
- » Muscle and joint pain
- » Nausea, vomiting, swollen glands
- » Unusual weakness, rash
- » Abdomen pain, cough, loose motion



ADVICES

- Immediate blood test on doctor's advice
- Rest and drink plenty of fluids
- Paracetamol can be taken to reduce joint pains, fever
- Aspirin or ibuprofen should not be taken

infections (secondary infection) by other serotypes increase the risk of developing severe dengue.

While the majority of dengue cases are asymptomatic or show mild symptoms, it can manifest as a severe, flu-like illness that affects infants, young children and adults, but seldom causes death. Symptoms usually last for two to seven days, after an incubation period of 4-10 days after the bite from an infected mosquito. The World Health Organization classifies dengue into two major categories: dengue (with/ without warning signs) and severe dengue. The sub-classification of dengue with or without warning signs is designed to help health practitioners triage patients for hospital admission, ensuring close observation, and to minimise the risk of developing the more severe dengue.

The WHO sources said that dengue should be suspected when a high fever (40°C/104°F) is accompanied by two of the following symptoms during the febrile phase (2-7 days):

- ♦ severe headache
- ♦ pain behind the eyes
- ♦ muscle and joint pains
- ♦ nausea
- ♦ vomiting
- ♦ swollen glands
- ♦ rash

SEVERE DENGUE

A patient enters what is called the critical phase normally about three to seven days after illness onset. During the 24-48 hours of the critical phase, a small percentage of patients may manifest sudden deterioration of symptoms. It is at this time, when the fever is dropping (below 38°C/100°F) in the patient, that warning signs associated with severe dengue can manifest. Severe dengue is a potentially fatal complication, due to plasma leakage, fluid accumulation, respiratory distress, severe bleeding, or organ impairment.

Warning signs that doctors should look for include:

- ♦ severe abdominal pain
- ♦ persistent vomiting
- ♦ rapid breathing
- ♦ bleeding gums or nose
- ♦ fatigue
- ♦ restlessness
- ♦ liver enlargement
- ♦ blood in vomit or stools



If patients manifest these symptoms during the critical phase, close observation for the next 24-48 hours is essential so that proper medical care can be provided, to avoid complications and the risk of death. Close monitoring should also continue during the convalescent phase.

There is no specific treatment for dengue fever. Patients should rest, stay hydrated and seek medical advice. Depending on the clinical manifestations and other circumstances, patients may be sent home, be referred for in-hospital management, or require emergency treatment and urgent referral. Previous infection with DENV increases the risk of the individual developing severe dengue.

Urbanisation is associated with dengue transmission through multiple social and environmental factors: population density, human mobility, access to a reliable water source, water storage practice etc.

The community's risks of dengue also depend on the population's knowledge, attitudes and practices towards dengue, as well as the implementation of routine sustainable vector control activities in the community.

Consequently, disease risks may change and shift with

Do's and Don'ts of Dengue



Do's

- ✓ Water storage vessels like bottles, cops, drums, pots, buckets, etc. should be cleaned every day and then filled. Also, they should be covered.
- ✓ Keep the areas around your house and the drains clean
- ✓ Use mosquito repellents and nets while sleeping.
- ✓ Wear full sleeve clothes to avoid mosquito bites

Don't's

- ✗ Don't let water accumulate anywhere in your house or the surrounding areas.
- ✗ Don't leave water tanks open kept on terraces and nearby places.
- ✗ Avoid consuming paracetamol and aspirin-based medicines without medical supervision.
- ✗ Do not panic. Most of the dengue patients can be cured with timely medical treatment.

