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December 19, 2009

2 Kidney Recipients Contract Brain Disease From Donor

By DENISE GRADY

Two transplant patients are critically ill with a rare brain infection that was transmitted to them by kidneys taken from a donor at the [University of Mississippi Medical Center](#) in Jackson, health officials reported on Friday.

The same infection probably killed the organ donor, but it was not diagnosed; his doctors thought he had an autoimmune disease. Two other patients also received heart and liver transplants from the donor, but neither has become ill. The transplants took place in November, in three states. A spokeswoman for the university declined to say where the recipients were, citing patient confidentiality.

Three weeks after their transplant surgeries, the kidney recipients became ill abruptly, within hours of each other, with seizures, a change in mental status and fever, said Dr. Eileen Farnon, an epidemiologist at the [Centers for Disease Control and Prevention](#), which is investigating the cases. A doctor noted that both were transplant recipients, and immediately suspected that they might have contracted an illness from the donor.

Subsequent tests of tissue left from the deceased donor found the infection, which was also diagnosed in the patients. The patients are being treated with a mixture of antimicrobial drugs.

The infection is caused by an amoeba, *Balamuthia mandrillaris*, which lives in soil and water. Only about 70 cases have ever been identified in the United States. Nearly all have been fatal. The current cases are the first to have been found in transplant recipients. Although infections from transplants are uncommon, there have been cases in which recipients contracted West Nile virus, rabies and other infections.

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CDC: Rare infection passed on by Miss. organ donor

By HOLBROOK MOHR (AP) - Dec 18, 2009

JACKSON, Miss. — An extremely rare infection has been passed from an organ donor to at least one recipient in what is thought to be the first human-to-human transfer of the amoeba, medical officials said Friday.

Four people in three states received organs from a patient who died at the University of Mississippi Medical Center in November after suffering from neurological problems, said Dave Daigle, a spokesman for the Centers for Disease Controls and Prevention.

Organs are routinely tested for HIV, hepatitis and other more common infections, but occasionally rare ones slip through.

"We test for the known harmful diseases, but there's not a test for every single pathogen out there," said Dr. Kenneth Kokko, medical director of kidney transplants at UMMC.

Two of the recipients are critically ill, but the others haven't shown symptoms, Daigle said. The CDC confirmed the presence of the organism, known as *Balamuthia mandrillaris*, in one of the recipients.

Dr. Shirley Schlessinger, a UMMC doctor and medical director of the Mississippi Organ Recovery Agency, would not say which states had patients receiving the organs.

The public should not be concerned, both Schlessinger and Daigle said.

Balamuthia mandrillaris is a microscopic parasite found in soil that causes encephalitis in humans, horses, dogs, sheep and nonhuman primates. Scientists think people get infected by breathing it in, but it can also pass into the blood through a cut or break in the skin. It can be especially dangerous to people undergoing organ transplants, whose immune systems are purposely weakened so their bodies don't reject their new organs.

Human infections are very rare: Only about 150 cases have been reported worldwide since the disease was first identified in 1990. But it can be hard to diagnose because few laboratories test for it and many doctors don't know about it. Some cases are not identified until autopsy, according to the CDC.

"The thing we don't want to happen is for people to take this rare and extraordinary anomaly and think it speaks to a lack of safety," she said. "It's very rare so the likelihood that this will happen again (is small), I mean, it's rarer than rabies."

There are risks to transplants and doctors can't test for everything, but the potential benefits far outweigh the risks, she said.

AP Medical Writer Mike Stobbe in Atlanta contributed to this report.

On the Net:

- CDC details on *Balamuthia mandrillaris*: <http://bit.ly/7swHMV>.
- University of Mississippi Medical Center: <http://www.umc.edu>

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医薬品 研究報告 調査報告書

識別番号・報告回数	報告日	第一報入手日	新医薬品等の区分	総合機構処理欄
		2009. 9. 16	該当なし	
一般的名称	解凍人赤血球濃厚液		公表国	
販売名(企業名)	解凍赤血球濃厚液「日赤」(日本赤十字社) 照射解凍赤血球濃厚液「日赤」(日本赤十字社) 解凍赤血球-LR「日赤」(日本赤十字社) 照射解凍赤血球-LR「日赤」(日本赤十字社)	研究報告の公表状況	ベトナム	
		ProMED 20090831.3065, 2009 Aug 31. 情報源:Thanhnhien News.com, 2009 Aug 29.		
研究報告の概要	○ Dengue/ Dengue 出血熱 最新情報 [1]ベトナム ベトナムの首都ハノイの保健当局は、年初～8月下旬の Dengue 熱患者数が2500名近くに達したと報告した。これは、2008年の同時期の10倍以上となり、ここ数年で最悪の状態である。国立感染症・熱帯医学研究所の医師によると、患者の大半は市内の Hoang Mai, Thanh Xuan, Dong Da などの地区で発生しており、2008年に隣接の地区を合併して人口が増えたために患者が増加したという説を否定した。 南部のホーチミン市では、2009年の症例数は大きく増えてはいないものの、重症化・死亡する患者が多くなっている。市の保健当局によると、年初～現在までの症例数は7100例で2008年の同時期と比べて5%多く、死亡患者は現時点で7名となっている。同市の第一小児病院では治療を受けている80名以上の子供のうち、1/4は循環器障害、神経学的問題、出血などを発症するステージ3か4である。毎日20～25名の子供が入院しており、70%はホーチミン市の患者である。「症状が出て1～2日の間は、手足口病やH1N1インフルエンザと区別がつきにくい。H1N1では様々な症状が現れるため、Dengueへの警戒がおろそかになっているが、子供は死に至る危険性がある」と第一小児病院の医師は警告した。			使用上の注意記載状況・ その他参考事項等
	報告企業の意見			今後の対応
ベトナムの首都ハノイで、Dengue 熱患者数が2008年の同時期の10倍以上に達し、南部のホーチミン市では重症化・死亡する患者が多くなっているとの報告である。		日本赤十字社では、輸血感染症対策として問診時に海外渡航歴の有無を確認し、帰国(入国)後4週間は献血不適としている。また、発熱などの体調不良者を献血不適としている。今後も引き続き、新興・再興感染症の発生状況等に関する情報の収集に努める。		

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Archive Number 20090831.3065
Published Date 31-AUG-2009
Subject PRO/EDR> Dengue/DHF update 2009 (35)

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DENGUE/DHF UPDATE 2009 (35)

Earlier this week, the Hanoi Health Department reported that nearly 2500 cases of the mosquito-borne illness had been recorded citywide since the beginning of the year [2009], 10 times more than over the same period last year [2008]. The department said the figures were the worst in years. "The number of dengue cases has gone up critically," said National Institute of Infectious and Tropical Diseases deputy director Nguyen Hong Ha, adding that the institute had admitted up to 45 dengue patients a day recently. "Around 100 patients are receiving treatment at the institute right now. We're on overload," he said. "Patients have to share beds, and we've even had to set up beds in the corridors. But that's still not enough; ... we're buying more beds."

According to the doctor, most of the patients had come from inner-city districts like Hoang Mai, Thanh Xuan, and Dong Da. He said that fact refuted the popular theory that the number of Hanoi dengue patients had gone up because the capital had absorbed parts of Hoa Binh and Vinh Phuc in 2008.

Although the number of dengue cases recorded in Ho Chi Minh City hasn't increased sharply this year [2009], more patients have reached critical condition, and there have been more deaths related to dengue, said Dr. Phan Van Nghiem from the city's health department. Over 7100 cases have been recorded citywide since the beginning of the year [2009], an increase of 5 percent compared with the same period last year [2008]. The city has already seen 7 deaths due to dengue, according to the department.

Doctor Le Bach Lien, head of the Dengue Fever Department at Children Hospital No. 1, said her facilities were treating around 80 kids for dengue, 1/4th of whom were in stages 3 and 4 with symptoms like circulatory failure, neurological problems and hemorrhaging. "Around 20-25 children are admitted to the hospital with dengue fever every day," said Dr. Lien. "HMC kids account for 70 percent of our child patients."

Between 50 and 60 kids, mainly 3-10 years old, are receiving treatment

for dengue at HCMC Children Hospital No. 2, said Dr. Tran Thi Thuy, deputy head of the hospital's Infection Department. "Around 10 percent of them are in phase 4, the most critical phase, and experiencing physical shock," Dr. Thuy said.

Thu Duc General Hospital has reported that some 20-30 dengue patients, mainly adults, were currently undergoing treatment there.

"During the 1st 1-2 days of infection, dengue in kids is difficult to distinguish from hand-foot-mouth disease or H1N1 flu," Lien said. "As H1N1 flu manifests itself in complicated ways, many people have let their guard down against dengue fever. But dengue can be fatal for kids," she warned.

[Byline: Thanh Tung-Lien Chau]

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Communicated by:
PromED-mail Rapporteur Mary Marshall

A map of Viet Nam showing the provinces can be accessed at http://www.lib.utexas.edu/maps/middle_east_and_asia/vietnam_admin01.jpg. An interactive HealthMap/PromED-mail of Viet Nam can be accessed at <http://healthmap.org/r/008c>. - Mod.TY]

[2] Sri Lanka
Date: Sat 29 Aug 2009
Source: Xinhua News Agency [edited]
http://news.xinhuanet.com/english/2009-08/29/content_11961338.htm

The number of dengue cases has risen to 24 629 while 245 people have died of the disease in Sri Lanka so far this year [2009], the Epidemiological Unit of the Health Ministry said on Friday [28 Aug 2009].

The Epidemiological Unit said in its latest statistics that of the 24 629 cases, the highest number of patients were reported from June [2009] totaling 7048. It is followed by July [2009] with 6858 cases being reported.

This represents a sharp increase, as only 4156 dengue cases and 85 deaths were reported for the whole year of 2008.

Health officials said the majority of these cases have been reported from the areas of Kandy, Kegalle, Colombo, Gampaha and Kurumegala.

The rapid rise in the level of the epidemic has forced the health authorities to carry out extensive public awareness campaigns to eradicate the mosquito-based epidemic.

Households have been warned to keep the environment free of mosquitoes. Those who allow the mosquitoes to breed by allowing stagnating water face prosecution, with a special hotline being made available for public information.

There has been a decline in the number of dengue fever cases in August [2009], with 2387 cases being recorded as of [28 Aug 2009], officials said.

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Communicated by:
PRO/MBDS <promed-mbds@promedmail.org>

[During 2004 to 2009, the dengue outbreak in 2009 is the largest in Sri Lanka. Based on the above newswire, there have been 24 629 cases and 245 deaths so far (January-August 2009). The case fatality rate (CFR) is 0.99 percent. The number of reported dengue cases has dramatically increased nearly 6-fold as compared to 2008 (4156 cases).

At present, the trend of the dengue outbreak in Sri Lanka is decreasing, as there were 7048 cases, 6858 cases and 2378 cases reported in June, July and August 2009, respectively. However, more dengue outbreaks are also possible in November to February, when the

northeast monsoon begins.

Dengue is transmitted by the main vector, the *Aedes aegypti* mosquito. There are 4 distinct (but closely related) viruses that cause dengue. According to WHO's Regional Office for Southeast Asia (WHO/SEARO) report (available at http://www.searo.who.int/en/Section10/Section332_1100.htm), Sri Lanka, Indonesia, Thailand and Timor-Leste are classified in category A upon the transmission potential of dengue. The common characteristics among those countries are dengue fever (DF)/dengue haemorrhagic fever (DHF) as a major public health problem, which is the leading cause of hospitalization and death among children, and there are cyclical epidemics in urban centers and spreading to rural areas with multiple virus serotypes circulating.

In 2004, the total of dengue cases reported was 15 408 with 88 deaths (CFR 0.57) in Sri Lanka. During the past 20 years, the outbreak in 2004 was most serious, although the CFR was lower than in the past. Cases were reported every month, the highest being in June-July 2004. Cases were reported from 25 districts. Of these, 72 percent of cases and 78 deaths were from 5 cities, namely Colombo, Kandy, Gampaha, Kalutara and Kurunegala. The CFRs range from 0.4 percent to 1.1 percent.

In 2006, the reported dengue cases and deaths due to dengue had increased 2-fold as compared to 2005. The case fatality was maintained below one percent. In 2007 till May, 1846 dengue cases and 9 deaths have been reported from Sri Lanka (see http://www.searo.who.int/en/Section10/Section332/Section2277_11963.htm).

A map of Sri Lanka can be accessed at http://www.lib.utexas.edu/maps/middle_east_and_asia/sri_lanka_pol01.jpg. A HealthMap/PromED-mail interactive map of Sri Lanka can be accessed at <http://healthmap.org/r/009M>. - Mod.SCM].

[3] Myanmar (Rakhine)
Date: Mon 24 Aug 2009
Source: Mizzima News [edited]
<http://www.mizzima.com/news/inside-burma/2666-dengue-kills-three-afflicts-over>

According to information from the Ministry of Health, at least 3 people have died and 329 have been infected with dengue fever this year [2009] in Sittwe and Kyaukphyu of Arakan (Rakhine) State in western Burma (Myanmar).

According to the ministry of health, 2 people in Sittwe, capital of Arakan (Rakhine) state, have died and another in Kyaukphyu town.

"Though dengue is not very dangerous, 2 people died in our town, scaring people. There are many dengue afflicted child patients in hospital, but I cannot tell the exact number. Besides, there are many more unreported cases in the villages. The villagers cannot afford treatment at the hospital. Only the affluent in the town can get admitted to the hospital. Dengue has infected not only children but adults as well. There are many people from different age groups being treated at our hospital. Most patients are children, and the fever lasts less than a week, after which the patient is out of danger," a doctor in Sittwe Hospital said.

But some patients need to be treated for over a week. "My daughter had dengue since the beginning of this month [August 2009] and was hospitalized as soon as she was infected. Now she has been discharged. Though her condition has improved, she has not yet fully recovered. She has been absent from school for over 2 weeks," [her mother] in Sittwe told Mizzima.

Teachers are worried about their students, as many are absent from schools. "There are many children who cannot come to school because of the flu. Their friends say they either have flu or dengue fever. Some could not come to school for a whole month [August 2009]. We are worried about their education given the long absence from classes," a class teacher in the State High School No. 2 in Sittwe told Mizzima.

Though the symptoms of the disease are coughing, sneezing, fever, and

body ache, in this type of influenza, similar symptoms are not found, and there are only sudden high fever plus headaches.

Rash, bleeding from the nose and gums, bloodstains in the urine and stool were found in these patients. Patients are known to become unconscious, have convulsions, perspire with high fever, vomit continuously, and suffer from shock.

Dengue fever cases were also reported in Pyi, Pa-an in Karen State and Htantalan town in Chin State.

The Health Ministry release said that about 30 people die of dengue fever in Rangoon [Yangon] annually.

Communicated by:
PRO/MBDS <promed-nbds@promedmail.org>

[The newswire above is the 4th report of dengue cases and deaths in Myanmar since mid June 2009. However, it is the 1st report from Rakhine state (formerly Arakan), one of 7 states of Myanmar situated along the western coast. According to the newswire, there have been 329 dengue fever cases with 3 fatalities (2 cases from Sittwe and another one from Kyaukphyu town) during 2009.

The previously reported dengue outbreak in Myanmar occurred in Myitkyina, capital of Kachin State (see prior PRO/MBDS posting Dengue Myanmar (03): RFI 20090728.2650). There are no current reports of morbidity and mortality statistics in the country with respect to dengue fever in 2009. However, as of 24 Jul 2009, there were 838 cases with 6 deaths of dengue during 2009 in Yangon, Myanmar (see prior PRO/MBDS posting Dengue - Myanmar (02): Yangon 20090726.2635).

In Myanmar, dengue fever (DF)/dengue haemorrhagic fever (DHF) is one of the leading causes of morbidity and mortality among children under the age of 10 years, with approximately 85 percent of cases occurring in this age group. An annual average of 7000-10 000 cases of DF/DHF are reported nationwide. However, in recent epidemic years (2001, 2005, and 2007), the number had risen to over 15 000 cases. In 2007, 62 percent of all reported cases were from Yangon Division (31 percent), Ayeyarwaddy Division (16 percent) and Mon State (15 percent) (1).

The 1st major epidemic of the disease syndrome in Myanmar occurred in the capital, Yangon in 1970. Since then, epidemics have continued to occur in a cyclic pattern, and the disease has spread from Yangon to most parts of the country. Between 1970 and 1995, there were 83 381 cases of DHF with 3243 deaths, a case fatality rate of 3.88 percent. During the 1st 5 years in which DHF was known to occur in the country, almost all the cases were confined to the Yangon division. By 1975, the disease syndrome had begun to spread and, in that year, 31 percent of the DHF cases occurred in Mandalay and only 29 percent in Yangon. However, Yangon still remains the most serious focus of DHF (2).

According to WHO's Regional Office for South-East Asia (WHO/SEARO) report available at <http://www.searo.who.int/EN/Section10/Section332/Section2277_11962.htm>, in 2005 the total dengue cases reported was 17 454 and 169 deaths in Myanmar, and the case fatality rate was maintained below one percent. The increase in case load and deaths compared to 2004 is almost 2 times. In 2006, the reported dengue cases and deaths were reduced as compared to 2005. The case fatality rate in 2006 was slightly above one percent. The seasonal trend shows July as the peak month, and cases start increasing from May to peak in July-August.

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1. World Health Organization: Joint plan of action scaling up dengue prevention and control for the cyclone Nargis-affected populations. June-September 2008 (available at <http://www.who.int/hac/crises/mmr/myanmar_joint_plan_of_action_dengue_2008.pdf>.
2. Prasittisuk C, Andjaparidze AG, Kumar V. WHO South-East Asia Regional Office: Current Status of Dengue/Dengue Haemorrhagic Fever in WHO South-East Asia Region. Dengue Bulletin Volume 22, December 1998 (available at

<http://www.searo.who.int/en/Section10/Section332/Section520_2414.htm>).

For maps of Myanmar see
<<http://www.worldatlas.com/webimage/countrys/asia/lqcolor/mmcolor.htm>>
and
<http://www.lib.utexas.edu/maps/middle_east_and_asia/burma_pol_96.jpg>. For the interactive HealthMap/PromED-mail map of Myanmar with links to other PromED-mail reports in Myanmar and surrounding countries, see <<http://healthmap.org/r/00IU>>. - Mod.SCM)

[4] India (Gujarat)
Date: Mon 31 Aug 2009
Source: Times of India [edited]
<<http://timesofindia.indiatimes.com/NEWS/City/Rajkot/Dengue-outbreak-gets-severe>>

The dengue outbreak in the city is refusing to die down, with 15 cases reported in the city in the past 48 hours. With 3 fresh cases reported on Sunday [30 Aug 2009], the total number of patients being treated for the disease in the city has gone up to 55. One person has died of the disease till date. The patients were admitted from Sukhnathpara, Sardarnagar and Baharwadi areas. On Saturday [29 Aug 2009], there were 7 new cases reported.

"We are doing our best to tackle the situation in the city. The district collector PR Sompura has formed a special team to root out the virus from the city. Daily, 10 teams under this special team are conducting door-to-door surveys along with officials from Amreli municipality, to find out cases," a district health official said.

Apart from health officials, teams from the municipality are also conducting cleanliness drives throughout the city. "We are fumigating all streets of the city every evening to kill mosquitoes carrying the dengue virus and cleaning any water-logged areas. However, our job will get more challenging with the 2nd spell of rainfall that has begun since the past 72 hours," an official from Amreli Nagar Palika said.

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PromED-mail <promed@promedmail.org>

[Fumigating the streets will be of only temporary value. Eliminating the vector mosquito breeding sites in and around houses and other buildings will provide more effective control of the outbreak.

An interactive map of Gujarat, India showing the location of Amreli and vicinity can be accessed at
<<http://www.maplandia.com/india/gujarat/amreli/amreli/>>. A HealthMap/PromED-mail interactive map of India can be accessed at <<http://healthmap.org/promed/en?v=22.9.79.6.5>>. - Mod.TY)

[5] Pakistan
Date: Wed 26 Aug 2009
Source: The News [edited]
<<http://www.thenews.com.pk/print1.asp?id=195030>>

Out of 18 patients of a locality admitted to Holy Family Hospital Saturday [22 Aug 2009] evening, 5 were declared positive for dengue fever by the National Institute of Health (NIH), Islamabad. The confirmation of 5 cases as positive, the 1st in this season in this region of the country, has convinced a number of health experts in town to fear an outbreak of the infection.

"The confirmation of 5 cases proved the existence of *Aedes aegypti*, the female mosquito that causes dengue fever [transmits dengue viruses]-in town. The deaths of 2 children on Friday night and Saturday morning [21 and 22 Aug 2009] due to fever in the area from where 18 patients have been taken might be attributed to dengue fever or DHF," said NIH.

A special team of the District Health Department headed by District Health Officer Dr. Khalid RaMdawa has shifted some 16 children and 2 adults to the HFH after suspecting them cases of dengue fever on Saturday evening [29 Aug 2009] from a village not more than 25 km from here. The team was constituted after the Executive District Officer (Health) received reports of deaths of the 2 children. The deceased as well as all the suspects admitted at HFH have been living in a cluster of nearly a dozen families settled near the village Larr in Dhoke Jhando, located in union council Thatta Khalil of Taxila.

All the 5 cases confirmed so far for the infection range between 3 and 8 years of age. The HFH has sent blood samples of a total of 18 suspected patients of dengue fever to NIH for dengue serology, of which 5 have been confirmed positive, 9 negative, while results of 4 cases have not been finalised as yet.

Experts do believe that with the detection of 5 confirmed cases in the outskirts of twin cities of Islamabad and Rawalpindi, a rising threat of an outbreak of dengue and DHF seems to be lurking, as the disease has a tendency to occur in epidemics and outbreaks and spreads like wild fire.

Head of Pathology Department at Rawalpindi Medical College Professor Dr. Abbas Hayat has repeatedly expressed to "The News" that the spikes of dengue fever, if they occur repeatedly, might be more deadly and might result in severe complications, including hemorrhagic manifestations. Two months back, he said that the situation might be alarming after the monsoon, as the climate after monsoon is considered to be the most suitable for the breeding of the mosquito *Aedes aegypti* that causes [transmits the viruses that cause] DF and DHF. DHF is a cause of disease and death primarily among children in tropical Asia.

Studies have revealed that people at a higher risk for dengue transmission are children, travellers and tourists, whereas adults residing in endemic areas are also susceptible to contracting the disease.

The District Health Department has already claimed that it has performed fogging and sprinkled insecticidal spray in and around Larr; however, experts believe that a continuous surveillance is needed at this time to avert a possible outbreak of dengue fever.

[Byline: Muhammad Qasim]

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[A HealthMap/ProMED-mail interactive map of Pakistan can be accessed at <<http://healthmap.org/promed/en?v=30,69,4,5>>. - Mod.TY]

[6] Mauritius
Date: Thu 17 Aug 2009
Source: Eurosurveillance [edited]
<<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=19314>>

[The following article presents an interesting approach for mapping dengue outbreaks. - Mod.TY]

Abstract

During the month of June 2009, Mauritius experienced a short-lived outbreak of dengue fever localised in its capital city Port Louis. *Aedes albopictus*, a secondary vector of dengue viruses, was the probable vector. We introduce a method which combines Google Earth images, stochastic cellular automata and scale free network ideas to map this outbreak. The method could complement other techniques to forecast the evolution of potential localised mosquito-borne viral outbreaks in Mauritius and in at-risk locations elsewhere for public health planning purposes.

Reference:

71

Ramchurn SK, Moheeput K, Goorah SS. 2009. An analysis of a short-lived outbreak of dengue fever in Mauritius. Euro Surveill 14:19314.
Available online:
<<http://www.eurosurveillance.org/ViewArticle.aspx?ArticleId=19314>>.

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[A HealthMap/ProMED-mail interactive map of Mauritius can be accessed at: <<http://healthmap.org/promed/en?v=-20,3,57,9,5>>. - Mod.TY]

[7] Dominican Republic
Date: Fri 28 Aug 2009
Source: El Nuevo Diario [in Spanish, trans. Mod.TY, edited]
<<http://elnuevodiario.com.do/app/article.aspx?id=165814>>

A dozen people, including adults and children, are affected by dengue, with one of these in a serious state, reported the representative of the municipal district Canca La Reina, Licenciado Manuel Antonio Rojas. The district executive said that the dreaded dengue outbreak that hit the different communities of Canca la Reina is produced by a strong wave of mosquitoes left by the passage of recent rains that have fallen in the past weeks. He recalled that in 2003, 4 people died in this community, affected by dengue, which is the reason that a call was issued to the provincial Health Directorate so that urgent measures would be taken together with the municipal government to avoid a repetition of that history. Tony Rojas said that the municipal government has maintained operations to eradicate trash, mosquito breeding sites and wells where the mosquito that is the dengue vector breeds.

He pointed out that the outbreak has become present in various communities of Canca La Reina, but the main effects have occurred in the Manhattan sector, where there is an affected child in an extremely serious state. "We have called Public Health on other occasions to carry out work against the dengue vector mosquito, but they have not reciprocated," complained Representative Tony Rojas. He said that the situation is very serious because there are more than 12 people affected by dengue.

Representative Tony Rojas stated that the municipal government is coordinating an urgent operation to tackle the epidemic of mosquitoes, stressing that the health of the population of Canca La Reina is in danger.

[Byline: Arcadio B. Rojas]

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[A HealthMap/ProMED-mail interactive map showing the Dominican Republic and its location in the Caribbean can be accessed at <<http://healthmap.org/promed/en?v=18,9,-70,5,5>>. - Mod.TY]

[see also:

Dengue/DHF update 2009 (34) [20090823.2977](#)
Dengue/DHF update 2009 (33) [20090817.2908](#)
Dengue/DHF update 2009 (32) [20090811.2864](#)
Dengue/DHF update 2009 (31) [20090803.2723](#)
Dengue/DHF update 2009 (29) [20090720.2574](#)
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Dengue/DHF update 2009 (27) [20090706.2425](#)
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Dengue/DHF update 2009 (24) [20090614.2211](#)
Dengue/DHF update 2009 (23) [20090608.2121](#)
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