



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:

March 22, 2011

MEDICAL ALERT: POTENTIAL LOCALLY-ACQUIRED DENGUE INFECTION

Dear Oahu Clinician,

The Department of Health (DOH) is investigating four associated cases for likely dengue infection, which may have been locally acquired. Onset of fever, myalgias, retro-orbital pain, and subsequent rash occurred in late February 2011 with at least two cases yielding positive IgM antibodies to dengue thus far. One case required brief hospitalization for supportive therapy, but all have since recovered. None report any history of recent preceding travel.

Clinicians are requested to consider potential dengue infection in persons presenting with:

- Presence or history of fever lasting 2-7 days
- PLUS any two of following:
- Aches and pains (including frontal headaches, myalgia, and arthralgias)
 - Retro-orbital pain
 - Thrombocytopenia (<100,000)
 - Leukopenia
 - Hemorrhagic signs (e.g. petechiae, hematomas, positive tourniquet test)

For such patients, please send a serum specimen (red top tube) on ice with clinical information through your clinical laboratory to the State Laboratories Division for serological and polymerase chain reaction testing at the Centers for Disease Control and Prevention.

Classic dengue fever (“break bone fever”) is an acute mosquito-transmitted viral disease manifesting 3-14 days after the mosquito bite and characterized by high fever, symptoms as enumerated above, and sometimes also anorexia and nausea. Although many persons, particularly children and those with first time infection, may have little or no symptoms, for those with dengue fever, the major medical complications are febrile seizures and dehydration. Therefore, treatment should focus on controlling fever and ensuring hydration. Acute symptoms usually last no more than 7 days. However, hemorrhagic manifestations, although rare, are a major risk for those with history of previous dengue infection and typically present as the fever begins to subside. Clinicians are advised to monitor for hypotension and other early signs of shock in such patients.

Ill patients should be instructed to stay indoors until fever disappears as they may be a source of infection for other mosquitoes and subsequently the infection of other people. Encourage

patients to aggressively control and eliminate mosquitos around their homes and businesses by eliminating areas of standing water (e.g. planters, old tires, pet food/water bowls). Windows and door screens should be checked for holes/tears and repaired. Also, recommend to your patients to use mosquito repellents containing 20-30% DEET and wear long sleeves and pants when possible.

Please note that all cases of dengue must be reported to DOH by phone:

Oahu (Disease Investigation Branch)	(808) 586-4586
Maui District Health Office	(808) 984-8213
Kauai District Health Office	(808) 241-3563
Big Island District Health Office (Hilo)	(808) 933-0912
Big Island District Health Office (Kona)	(808) 322-4877
After hours on Oahu	(808) 566-5049
After hours on neighbor islands	(808) 360-2575 (toll free)

Thank you for your assistance in helping to identify potential dengue fever cases and protect the health of the people in Hawai'i.

Sincerely,



Sarah Y. Park, MD, FAAP
State Epidemiologist
Chief, Disease Outbreak Control Division
Hawaii Department of Health