

Dengue Fever

2010 Case Total	4	2010 Incidence Rate	0.11 per 100,000
2009 Case Total	0	2009 Incidence Rate	0.00 per 100,000

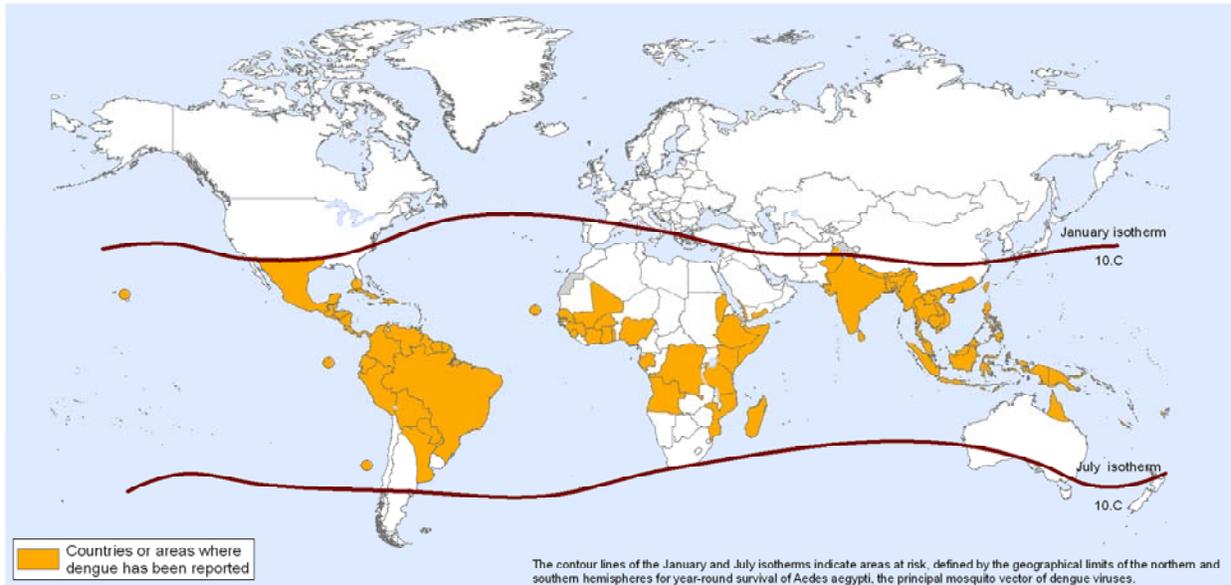
Dengue fever is endemic in at least 100 countries in Asia, the Pacific, the Americas, Africa, and the Caribbean (refer to map). Cases of dengue fever are generally acquired outside of the US (imported or travel-associated), but non-imported cases have been identified in Hawaii in 2001, Texas in 2005, and Florida in 2009 and 2010. Most dengue cases in U.S. citizens occur in endemic areas, such as, Puerto Rico, the U.S. Virgin Islands, Samoa, and Guam.

In Oklahoma, all dengue fever cases reported in 2010 were imported. Two cases reported visiting the Caribbean, one case visited Central American, and one case visited Southeast Asia during the incubation period. Only one case was hospitalized for this illness. All four cases reported being bitten by mosquitoes. Only one of the cases reported using mosquito repellent/prevention methods. The cases' ages ranged from 12 to 23 years. All four cases reported fever and myalgia. Three of the cases reported chills and anorexia and two cases reported rash, vomiting, backache, and eye pain. Other symptoms associated with dengue include intense headache, arthralgia, and a generalized maculo-papular rash.

Dengue fever is transmitted through the bite of an infected mosquito. Prevention of dengue fever may be achieved by routine use of an insect repellent containing 20 to 30% DEET (N, N-diethyl-m-toluamide) when visiting or residing in an endemic area along with sleeping indoors with screened windows or mosquito netting protection. The CDC Division of Vectorborne Infectious Diseases website has recommendations, news and updates for travelers and clinicians regarding dengue fever at <http://www.cdc.gov/NCIDOD/DVBID/dengue>. Persons planning travel to areas where dengue is endemic can check the CDC Traveler's Health recommendations by accessing the website www.cdc.gov/travel.

If a case of dengue fever is reported to the Oklahoma State Department of Health (OSDH), further testing may be performed by the Center for Disease Control Dengue Branch (CDC) upon request by the Acute Disease Service (ADS). The diagnosis and treatment of dengue and dengue hemorrhagic fever are guided by the symptoms and findings the patient presents, and cannot depend on laboratory confirmation, since routine tests can not confirm dengue with the speed required for patients in critical condition. Commercial laboratories are capable of testing for dengue. Confirmatory testing is performed only by the CDC using acute and convalesce blood samples. For unique circumstances, the OSDH ADS can arrange confirmatory testing at the CDC.

Dengue, countries or areas at risk, 2010



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Data Source: World Health Organization
Map Production: Public Health Information
and Geographic Information Systems (GIS)
World Health Organization

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Source: WHO, International Travel and Health <http://www.who.int/ith/en/>