

# Communicable Disease Branch

## 2014 Program Alert # 5

### “Chikungunya”



Date: June 27, 2014

To: Communicable Disease Staff in Local Health Departments

From: Carl Williams, DVM, State Public Health Veterinarian and Jodi Reber, RN, Vectorborne Nurse Consultant

Chikungunya was made immediately reportable in North Carolina effective June 23, 2014, under Temporary Order of the N.C. State Health Director. The following resources are included for your use:

1. Chikungunya Letter for N.C. Health Care Providers dated 23 Jun 2014. It was sent to local health directors through the phleaders listserv on Monday 6/23 with request to distribute to local physicians.
2. *CHIKV Guidance for State Health Departments*, provided by the CDC, gives instructions on case investigation and classification and provides a case definition.
3. Case report form
4. NC SLPH Chikungunya Testing Guidelines

#### Overview

Chikungunya (pronunciation: \chik-en-gun-ye) virus is transmitted to people by mosquitoes. The most common symptoms of chikungunya are fever and joint pain. Other symptoms may include headache, muscle pain, joint swelling, or rash. Outbreaks have occurred in countries in Africa, Asia, Europe, and the Indian and Pacific Oceans. In late 2013, chikungunya virus was found for the first time in the Americas on islands in the Caribbean. While a growing number of persons have been diagnosed with chikungunya infection in the U.S. after returning from travel to areas of endemicity, as of mid-June, 2013, there had been no evidence of acquisition of this infection from within the continental U.S. This, however, remains a concern as competent mosquito vectors are found there, such as *Aedes Albopictus*, also called the Asian tiger mosquito, in the Southeast.

#### Surveillance and Case Investigation

Local Health Departments should inform all providers that chikungunya infection is immediately reportable in NC since 6/23/14, whether suspected, probable, or confirmed.

A person is suspected of having chikungunya if they have all of the following: (1) sudden onset of fever, (2) arthralgia (joint pain) and (3) a history of travel to an area identified as being in a chikungunya outbreak (especially the Caribbean). Such a person is considered a suspect case when not laboratory confirmed. Testing is currently (June, 2014) available at Focus Laboratories and at CDC. Requests for testing by CDC must be submitted through the State Laboratory of Public Health (see also NC SLPH Chikungunya Testing Guidelines) and include filled out testing forms for both NC SLPH and CDC. These forms are:

1. SLPH using submission form #3445 (<http://slph.ncpublichealth.com/Forms/DHHS-3445-SpecialSerology-20130809.pdf>)
2. CDC submission form (<http://www.cdc.gov/laboratory/specimen-submission/form.html>)

Please use the attached *Chikungunya Case Report Form* and inform DPH of all cases under investigation. Until NC EDSS changes are made to include electronic reporting, please **send case reports to our secure fax at: (919) 733-9555.**

DPH is currently developing chikungunya resources: for the N.C. Communicable Disease Manual, reporting forms for use with NC EDSS reporting system, and N.C. Public Health website information pages. You will be advised when these resources become available. Until such time, please use the attached CDC guidance document and N.C. chikungunya report form.

#### Disease Introduction Prevention Measures

The viremic period (time when the virus is present in the blood of an infected person) is defined as 2 days prior to onset of symptoms through 5 days after onset of symptoms. Returning infected travelers can potentially infect the local mosquito population (in NC) while viremic. To prevent further spread of the virus, during the first week of illness

a persons suspected of having chikungunya should therefore be asked to avoid mosquito contact by staying indoors and by using DEET or other EPA approve mosquito repellent on their skin if they must go outside. See <http://www2.epa.gov/mosquitocontrol> for more information.

Person planning to travel should review the CDC traveler's health website prior to departure and implement recommended prevention measures (<http://wwwnc.cdc.gov/travel/>). Departing travelers to areas affected with chikungunya and other mosquito borne diseases should be advised to take precautions from being bitten from mosquitoes and returning travelers from these regions should be advised to seek medical attention if they become ill in the two weeks following their return.

## Resources

[Click here for frequently asked questions on chikungunya](#)

General information can be found here: <http://www.cdc.gov/chikungunya/>

Resources, such as a general factsheet for providers can be found here: <http://www.cdc.gov/chikungunya/hc/resources.html>

Travel related fact sheets/posters can be found here: <http://www.cdc.gov/chikungunya/fact/index.html>

If you would like to follow the surveillance information being collected by CDC from within the United States, it can be found at the bottom of the following page: <http://www.cdc.gov/chikungunya/geo/united-states.html>

If you would like to follow the surveillance information for the Caribbean and other countries in the Americas, it can be found here: [http://www.paho.org/hq/index.php?option=com\\_content&view=article&id=9053&Itemid=39843](http://www.paho.org/hq/index.php?option=com_content&view=article&id=9053&Itemid=39843)

Please contact Jodi Reber or Carl Williams at (919) 733-3419 with any questions.

