

Government of the District of Columbia
Department of Health



Chikungunya Virus Physician/Hospital Advisory

March 2, 2015

The District of Columbia Department of Health (DOH) is notifying all health care providers that effective January 1, 2015 the Centers for Disease Control and Prevention (CDC) classified Chikungunya virus as a **reportable disease**. In 2014, there were **nine confirmed** Chikungunya cases and *ten* cases classified as *probable* or *suspect* in District of Columbia residents. In addition, the rate of diagnosis remained constant throughout the year despite the change of seasons.

2014 DC Chikungunya Cases			
Final Case Status	Female	Male	Total by Case Status
Confirmed	7	2	9
Probable	4	2	6
Suspect	4	0	4
Total by Sex	15	4	19

All 2014 cases were linked to recent travel to **Chikungunya endemic countries** with no exposure to the virus within the District. In order to help keep the virus from becoming endemic in D.C., it is important to advise all potential patients with suspicion of exposure to **avoid contact with mosquitos for the first week after becoming symptomatic**. It is only during this time period that the illness is viremic and a biting mosquito can pick up the virus and transmit it to another person.

Therefore reducing patient contact with mosquitos helps minimize the opportunity for vector-borne transmission to close contacts and members of the community. Prevention will become increasingly important as the National Capital Region approaches the spring and summer of 2015.

Important prevention measures include:

- Use air conditioning or window/door screens to cool living quarters
- Use mosquito repellents on exposed skin when outside
- Wear long-sleeved shirts and long pants if feasible
- Empty standing water from outdoor containers

Due to the small window of time that Chikungunya is viremic, it is important to report suspect cases to DOH, as well as educate patients on mosquito-exposure reduction as soon as possible. Notification to DOH should occur the **day the patient is seen** and **before** laboratory test results are finalized. Due to processing time of clinical samples, final test results may not return until after interventions are most effective. Notifying DOH earlier allows more time to educate patients on reducing the risks of community exposures.

Factsheets on Chikungunya prevention are available in English and Spanish on the CDC's website (<http://www.cdc.gov/chikungunya/fact/index.html>) and a list of countries where cases have been reported is also available (<http://www.cdc.gov/chikungunya/geo/index.html>).

The most recent CDC case definition of Chikungunya virus disease is available online at <http://www.cdc.gov/NNDSS/script/conditionsummary.aspx?CondID=17>.

To help determine final case status, it is important to determine the patient's recent **travel history** and **clinical symptoms at onset**, in addition to the standard case report form. Completed forms should be faxed to DOH at (202) 442-8060 with attention to Dr. Andrew Hennenfent. The expanded Chikungunya case report form is available on the DOH website at <http://doh.dc.gov/page/chikungunya-information>.

If you have any questions, please contact Dr. Hennenfent at (202) 442-9143 or at Andrew.Hennenfent@dc.gov.

Sincerely,



John O. Davies-Cole, PhD, MPH
State Epidemiologist
District of Columbia Department of Health