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Dengue reminder

Dengue is a viral infection transmitted by mosquitoes; it is found in tropical and sub-tropical climates, but also reported in parts of Europe

Worldwide dengue rates have grown dramatically in recent decades and it is estimated there are 100-400 million infections each year [1]. According to the World Health Organization, the Americas, South-East Asia and Western Pacific regions are the most seriously affected [1]. Seasonal cases are also reported in many European countries and the US [1-3].

In August 2020, five locally acquired cases of dengue were detected in a family cluster in Vincenza Province, North-East Italy [4]. These were the first confirmed cases of locally acquired (autochthonous) dengue in Italy. The cases were linked to a traveller returning from Indonesia [4].

Most people infected with dengue remain symptom-free. If symptoms occur, they usually start abruptly and include fever, headache, muscle and joint pain, nausea, vomiting and a rash. They usually occur within four to 10 days of being bitten. Most infections are self-limiting, with recovery three to four days after the rash appears. A small number of people develop more severe illness, which if left untreated can be fatal [1].

Advice for travellers

See our [Country Information](#) pages "Other risks" section for individual country recommendations to check the dengue risk at your destination. All travellers to areas reporting dengue cases or where dengue is believed to occur are at risk of dengue infection.

Reduce your risk by following [insect bite precautions](#). As dengue is spread by day-biting mosquitoes, particular care with bite avoidance is advised during the day, especially around dawn and dusk. The mosquitoes may be active from spring to as late as December in parts of southern Europe [5]; during these months, you should be especially vigilant with bite precautions. The risk of dengue is present throughout the year in the tropics.

If you develop symptoms such as high fever and severe headache or rash within two weeks of return from an area where dengue is known to occur, you should seek medical attention and tell your GP about your travel history.

There is no licensed vaccine available in the UK for travellers.

Advice for health professionals

Health professionals should consider the possibility of dengue in a returning UK traveller presenting with a fever or flu-like illness who has recently visited a dengue risk region. All those being assessed for possible [COVID-19](#) must be asked if they have travelled abroad; to exclude possible insect-borne infection.

Health professionals who suspect a case of dengue should send appropriate samples for testing (with full travel and clinical history) to the [Public Health England, Rare and Imported Pathogens](#)

[Laboratory](#). This is a specialist centre for advice and diagnosis of a wide range of unusual viral and bacterial infections, including dengue fever.

Resources

- [Dengue in brief](#)
- [European Centre for Disease Prevention and Control: Dengue](#)
- [Public Health England: Dengue fever: guidance, data and analysis](#)
- [Public Health England: Mosquito bite avoidance for travellers](#)

References

1. [World Health Organization. Dengue and severe dengue. 23 June 2020. \[Accessed 1 October 2020\]](#)
2. [European Centre for Disease Prevention and Control. Autochthonous transmission of dengue virus in EU/EEA 2010-2020. \[Accessed 1 October 2020\]](#)
3. [Centres for Disease Control and Prevention. Dengue in US States and Territories, 13 Aug 2019. \[Accessed 1 October 2020\]](#)
4. [Lazzarini L, Barzon L, Foglia F et al. First autochthonous dengue outbreak in Italy, August 2020. Euro Surveill. 2020; 25\(36\). \[Accessed 1 October 2020\]](#)
5. [European Centre for Disease Prevention and Control. Rapid Risk Assessment. Local transmission of dengue in France and Spain - 2018. 19 October 2018 \[Accessed 1 October 2020\]](#)