# Dengue Outbreak Toolbox

**Updated: June 2019** 





# Key reference documents

- Technical handbook for dengue surveillance, dengue outbreak prediction/detection and outbreak response (Geneva: World Health Organization; 2016).
- Dengue guidelines for diagnosis, treatment, prevention and control: new edition (Geneva: World Health Organization; 2009).
- <u>Dengue health information page</u> (Geneva: World Health Organization).
- <u>Dengue and severe dengue fact sheet</u> (Geneva: World Health Organization; 2019).



# **Case definitions**

## WHO suggested outbreak case definition

Suspected case: not applicable

Probable case (with or without warning signs<sup>1</sup>):

- fever **and** two or more of the following: (nausea/vomiting, rash, aches and pains, tourniquet test positive, leukopenia);
- fever **and** two or more of the following: (nausea/vomiting, rash, aches and pains, tourniquet test positive, leukopenia) **and** any warning sign.

#### Confirmed case:

- A probable case with laboratory confirmation:
  - 1. Highly suggestive
    - Immunoglobulin M (IgM) positive in a single serum sample;
    - Immunoglobulin G (IgG) positive + in a single serum sample with a house index (HI) titre
      of 1280 or greater;
    - detection of viral antigen NS1+ in a single serum sample (by enzyme-linked immunosorbent assay (ELISA) or rapid tests).

<sup>&</sup>lt;sup>1</sup> Requiring strict observation and medical intervention. Warning signs may include abdominal pain or tenderness, persistent vomiting, clinical fluid accumulation, mucosal bleeding, lethargy, restlessness, liver enlargement >2 cm, or increase in haematocrit with rapid decrease in platelet count



#### 2. Confirmed

- o polymerase chain reaction (PCR) positive;
- virus culture positive;
- o IgM seroconversion in paired sera;
- o IgG seroconversion in paired sera **or** fourfold IgG titre increased in paired sera.

#### Severe dengue:

suspected dengue with one or more of the following: severe plasma leakage, leading to dengue shock syndrome, fluid accumulation with respiratory distress; severe bleeding, as evaluated by clinician; severe organ involvement, such as liver (aspartate aminotransferase (ASAT) or alanine aminotransferase (ALT) elevation > 1000), central nervous system (impaired consciousness) or heart and other organs.

#### WHO surveillance case definition

 Any person who lived in, or travelled to, a dengue endemic area with onset of fever and two or more of the following: nausea/vomiting, rash, aches and pains, tourniquet test positive, leukopenia, or any warning sign. In: <u>Dengue guidelines for diagnosis, treatment, prevention and control: new edition</u> (WHO, 2009).



### **Data collection tools**

- Case investigation forms: Not available.
- Line lists: Not available.
- Electronic tools: Not available.



# **Laboratory confirmation**

• <u>Technical handbook for dengue surveillance, dengue outbreak prediction/detection and outbreak response</u> (Geneva: World Health Organization; 2016 (Chapter 2, page 15)).



## Response tools and resources

- Western Pacific regional action plan for dengue prevention and control (Manila: WHO Regional Office for Western Pacific: 2016).
- Handbook for clinical management of dengue (Geneva: World Health Organization; 2012).
- Handbook for integrated vector management (Geneva: World Health Organization; 2012).





## Other resources

- (Lien erroné) Weekly Epidemiological Record; 93(36):457–476.
- <u>Meeting of the Strategic Advisory Group of Experts on Immunization, April 2018 conclusions and recommendations</u>. Weekly Epidemiological Record; 93(23):329–343.
- <u>Tool for the diagnosis and care of patients with suspected arboviral diseases</u> (Washington (DC): Pan American Health Organization, 2017).