

LETTER TO EDITOR

Dengue: Beat Dengue Bite by Prevention

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To,
The editor,

It is once again in news that dengue is roaming about in our surroundings. Dengue is a mosquito-borne viral disease that is transmitted by female mosquitoes belonging to the species *Aedes aegypti* followed by *Aedes albopictus*. The disease is widespread throughout the tropics, with local variations in risk influenced by rainfall, temperature and unplanned rapid urbanization. There are 4 distinct, but closely related, serotypes of the virus that cause dengue (DEN-1, DEN-2, DEN-3 and DEN-4).¹ Before 1970, only 9 countries had experienced severe dengue epidemics. The disease is now endemic in more than 100 countries. America, South-East Asia and Western Pacific regions are the most seriously affected ones. This viral infection causes flu-like illness, and occasionally develops into a potentially lethal complication called severe dengue. As mentioned earlier, dengue is found specifically in tropical and sub-tropical climates worldwide, mostly in urban and semi-urban areas. Severe dengue is a leading cause of serious illness and death among children in some Asian and Latin American countries.¹ Dengue is endemic in Pakistan with its usual peak incidence in the post monsoon period.² In children under 16 years of age it was reported for the first time in Pakistan as an undifferentiated fever in year 1985.³ Clinical presentation, laboratory diagnosis and management of dengue in Pakistan has been quite complex due to concurrent or super infection with malaria, typhoid and hepatitis. Thrombocytopenia, leukopenia with raised ALT and AST is the common laboratory presentation in patients presenting with high grade fever along with generalized body pain specially headache and backache. Highly variable mortality during various outbreaks may also be attributed to co-morbid conditions, lack of proper management guidelines and training of health care professionals.⁴ There is no specific treatment for dengue,

but early detection and access to proper medical care lowers fatality rates below 1%. Therefore due attention should be given to dengue prevention and control which solely depends on effective vector control measures. These include preventing mosquitoes from accessing egg-laying habitats by environmental management and modification, disposing solid waste properly, removing artificial man-made habitats, covering, emptying and cleaning of domestic water storage containers on a weekly basis, applying appropriate insecticides to water storage outdoor containers, use of personal household protection such as window screens, long-sleeved clothes, insecticide treated materials, coils and vaporizers, improving community participation and mobilization for sustained vector control, applying insecticides as space spraying during outbreaks as one of the emergency vector-control measures.⁵ Being health professionals each one of us must disseminate this basic knowledge regarding dengue and its prevention in the community so as to share our responsibilities hand in hand with the governmental departments and agencies.

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