



Congo Fever Alert in Maharashtra

Why in News

The Palghar administration has asked authorities to remain alert against a possible spread of the Congo fever in the Maharashtra district.

Key Points

- **Background:** Congo fever was first discovered in **Crimea** in **1944** and was named Crimean hemorrhagic fever.
 - Later in **1969**, scientists discovered that the pathogen responsible for causing Crimean hemorrhagic fever and the one that caused illness in **Congo** in 1956 was the same.
 - Hence, the name changed to Crimean-Congo haemorrhagic fever.
- **Crimean-Congo Haemorrhagic Fever (CCHF):**
 - **Cause:** The CCHF is a widespread disease caused by a **tick-borne virus (Nairovirus)** of the **Bunyaviridae family**.
 - **Transmission:**
 - The virus is transmitted through bite of **Hyalomma tick**, an external parasite, living by feeding on the blood of mammals, birds etc.
 - It can also be contracted through contact with **viraemic animal tissues** (animal tissue where the virus has entered the bloodstream) during and immediately **post-slaughter of animals**.
 - **Human-to-human transmission:** It can occur resulting from close contact with the blood, secretions, organs or other bodily fluids of infected persons.
 - **Hospital-acquired infections** can also occur due to improper sterilisation of medical equipment, reuse of needles and contamination of medical supplies.
 - **Fatality:** CCHF outbreaks constitute a threat to public health services as the virus can lead to **epidemics**, with a high case **fatality ratio (10-40%)**.
 - **Case fatality rate (CFR)** is a measure of the severity of a disease and is defined as the proportion of cases of a specified disease or condition which are fatal within a specified time.
 - CCHF is **endemic** in all of Africa, the Balkans, the Middle East and in Asia.
 - **Symptoms:**
 - Fever, muscle ache, dizziness, neck pain, backache, headache, sore eyes and photophobia (sensitivity to light).
 - There may be nausea, vomiting, diarrhoea, abdominal pain and sore throat early on, followed by sharp mood swings, confusion, depression and liver enlargement.
- **Treatment:**
 - General supportive care with treatment of symptoms is the main approach to managing CCHF in people.

- The antiviral drug ribavirin has been used to treat CCHF infection with apparent benefit.
- There are no vaccines widely available for human or animal use.

THE DEADLY VIRUS

Crimean-Congo Haemorrhagic Fever (CCHF) virus is considered as biosafety level 4 pathogen with up to **50%** fatality rate. In case of nosocomial infection, mortality rate may go up to **80%**

It produces little or no disease in its natural hosts (animals) but causes severe infection in humans



FROM THE PAST

It was first described in the Crimea in 1944 and was found to be responsible for an illness in a human in Congo in 1956

The disease is also known as Khungribta (blood taking), KhumYmuny (nose bleeding) and Karakhalak (Black Death) in different parts of the world



WAY FORWARD

➤ Need for awareness

programmes for people living in close proximity to livestock, people working in slaughterhouses, those handling animal carcasses for livelihood and health workers

➤ Training for those working in primary healthcare centres, rural and district hospitals on biosafety issues, including isolation

➤ Better surveillance

INFECTIONS IN HUMANS

The regular mode of infection in humans are tick bites, nosocomial (originating in hospital) infection, crushing of infected ticks, direct contact with CCHF virus infected blood or tissue as during slaughtering infected animals



SYMPTOMS

Headache, high fever, back, joint & stomach pain, and vomiting

Rarer signs include jaundice, severe bruising and uncontrolled bleeding

TREATMENT

There are limited treatment options for CCHF. Ribavirin is the only known drug that is effective against it



RISK GROUP

Shepherds, campers, agricultural workers, veterinarians, abattoir workers, and other persons in close contact with livestock and ticks are at risk of infection

➤ Human-to-human transmission can be encountered in case of close contact with infected blood, secretions, organs or other body fluids of infected persons



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Source: IE

