

- Dengue is a viral disease transmitted by bite of a mosquito in the day time (Malaria is transmitted by night time bite of another mosquito).
- Dengue presents with high fever and severe body ache; especially pain behind the eye balls, nausea & vomiting and may be a rash. These symptoms are similar to any other viral / bacterial infection.
- Diagnosis of Dengue is by a blood test and obtaining one of the below as positive:
- o NS1 antigen
- o IgM antibody
- o PCR Dengue (if NS1 and IgM are negative and there is strong clinical suspicion with thrombocytopenia (low platelets), PCR is resorted to.
- o IgG antibody indicates old infection.
- Dengue is a self-limiting condition.
- Mainstay of treatment is hydration and proper nutrition
- Most cases recover with domiciliary management
- A small percentage cases may progress to
- o Dengue Haemorrhagic Fever (DHF-episodes of bleeding from nose, intestinal tract or in urine)
- o Dengue Shock Syndrome (DSS-critical fall in blood pressure with patient requiring medicines to elevate blood pressure to normal)
- o Both of the above may need prolonged ICU management and could be fatal
- Dengue patients are to be monitored with regards to
- o Haemoglobin levels
- o Packed cell volume / Haematocrit value
- o Platelet count
- o White cell count
- Management of Dengue does not need antibiotics (unless there is evidence of secondary infection).
- NSAIDs (Non-Steroidal Anti-Inflammatory Drugs) are also better to be avoided in Dengue
- Platelet transfusion may be indicated at platelet count below 20,000/cmm or with evidence of mucosal bleeding
- Near 90%-95% patients do not need hospitalization
- Warning signs of Dengue (that may need hospitalization) are:
- o Abdominal pain or tenderness.
- o Persistent vomiting.
- o Clinical fluid accumulation (pleural effusion/ ascites).

- o Mucosal bleed.
- o Extreme lethargy or restlessness.o Liver enlargement > 2 cm.
- o Laboratory finding of increasing Haematocrit concurrent with rapid decrease in platelet count.