EID Weekly Updates:



Emerging and Reemerging Infectious Diseases, Region of the Americas

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YF Cases by Epidemiological Weeks America Region, 2002 - 2003 # Cases Bolivia Brazil Colombia Peru 1 4 7 10 13 16 19 22 25 28 31 34 37 40 43 46 49 52 3 6 9 12 15 18 21 24 27 Total Peru Epidemiological Weeks

Jungle Yellow Fever (JYF)

- 1. Jungle Yellow Fever in the Americas Up to Epidemiological Week (EW) 29, a total of 109 cases of Jungle Yellow Fever (JYF), with 50 deaths, have been reported to PAHO by Bolivia (4), Brazil (62), Colombia (33), Peru (7) and Venezuela
- (3). The distribution of cases by EW is presented in the graphic to the right.
- 2. Update on the current outbreak of Jungle Yellow Fever in Colombia Since the last report on 9 July 2003, the Ministry of Health of Colombia reported to PAHO the occurrence of 6 new cases of JYF in the Department of Norte de Santander. The total number of cases identified so far in this current outbreak is 24, with 12 deaths. The affected counties are Convención (6), El Carmen (5), El Tarra (1), Teorema (3) and Tibú (9). Immunization campaigns are underway in the affected area aiming to vaccinate all residents. Vaccination is also recommended to all travelers to the affected and neighboring counties.

West Nile Virus (WNV)

- 1. Situation in the USA
 - As of 17 July 2003, there are 5 human confirmed cases of West Nile Virus infection in the USA: Alabama (1), South Carolina (1) and Texas (3). In addition, verified cases of avian, animal or mosquito infections reported as of 16 July 2003 include 32 states: Alabama, Arkansas, Colorado, Florida, Georgia, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Michigan, Minnesota, Mississippi, Missouri, New Jersey, New Mexico, New York, North Carolina, North Dakota, Nebraska, Ohio, Oklahoma, Pennsylvania, South Carolina, South Dakota, Tennessee, Texas, Virginia, West Virginia, Wisconsin and Wyoming.
 - A map of verified avian, animal or mosquito infection during 2003 is available on the CDC website.
- 2. *In Mexico*, as a result of the presence of WNV circulation in the country, the Secretary of Agriculture, Rural Development, Fishing, and Human Nutrition recognizes the need to active the emergency sanitation system in order to prevent and control the transmission of West Nile Virus.

Severe Acute Respiratory Syndrome (SARS)

PAHO/WHO would like to acknowledge the efforts of the Ministries of Health for regularly providing the Organization with SARS surveillance reports and for their invaluable assistance in verifying and following up rumors throughout the SARS epidemic. This has allowed PAHO/WHO to monitor the evolution of the epidemic and to provide information in a timely manner.

WHO plans to consolidate and synthesize global surveillance data for the outbreak period from 1 November 2002 to 5 July 2003. It is recognized that data cleaning and case re-assessment activities are on-going and, in some jurisdictions, final outcomes of probable cases are not yet determined.

In effect, previously-reported probable cases should be discarded if an alternative diagnosis can fully explain their illness.

WHO is now in the process of reviewing case definitions and the global surveillance of SARS in the post-epidemic period. We will disseminate the new surveillance protocol as soon as possible.

Please note that PAHO/WHO will continue to identify and verify rumors of events of international public-health concern, including rumors about SARS, through the well-established mechanisms of the Subregional Emerging and Reemerging Infectious Diseases Networks.

Number of Reported Suspected and Probable Severe Acute Respiratory Syndrome (SARS) Cases, by Result of Serologic Tests for SARS-Associated Coronavirus (SARS-CoV) Infection (USA, 15 July 2003)				
Case Status	Convalescent Serum Negative for SARS- CoV Antibodies	Convalescent Serum Specimen Not Obtained	SARS-CoV Infection Confirmed by Serology	iotai
Suspected	169	175	0	344
Probable	38	28	8	74
Total	207	203	8	418
Source: CDC, MMWR 52 (28): 664-665 (18 July 2003).				

International Conference on Emerging Infectious Diseases 2004: Call for Abstracts

The conference, the fourth in a series that began in 1998, focuses on the exchange of scientific and public-health information on global emerging infectious disease issues. *Dates:* 28 February–3 March 2004. Atlanta, Georgia. *The deadline for abstract submission is 14 November 2003. Late-breaker abstract submission deadline: 16 January 2004.*

Note from PAHO

The e-mail address used to communicate to *EID Weekly Updates* has changed to emerg@paho.org. Please do not hesitate to contact us through this address should you have any questions or concerns.

We would like to inform you that this weekly newsletter will be posted on PAHO's webpage every Friday afternoon via the following link: <u>EID Weekly Updates</u>.