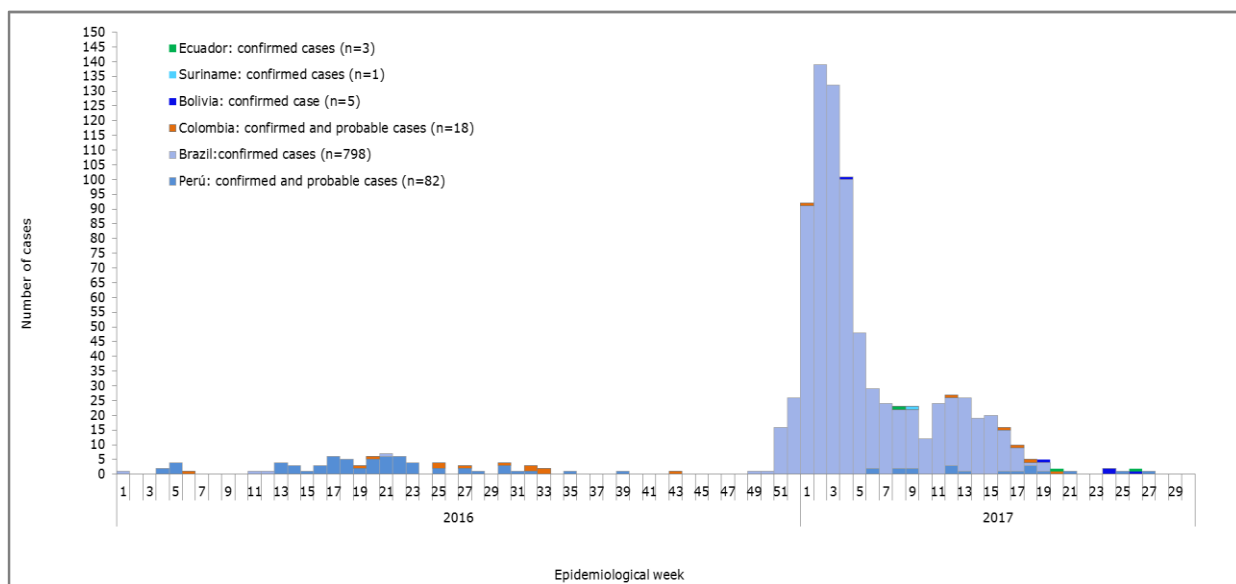


## Situation summary in the Americas

From epidemiological week (EW) 1 of 2016 to EW 30 of 2017, **Brazil**, the Plurinational State of **Bolivia**, **Colombia**, **Ecuador**, **Peru**, and **Suriname** have reported suspected and confirmed yellow fever cases (**Figure 1**).

**Figure 1.** Distribution of confirmed and probable yellow fever cases. The Americas, EW 1 of 2016 to EW 30 2017



**Source:** Data provided by the Ministries of Health of Brazil,<sup>1</sup> Bolivia, Colombia,<sup>2</sup> Ecuador, Peru, and Suriname and reproduced by PAHO/WHO.

<sup>1</sup> The Brazil data shown was estimated based on the information published in the Brazil Yellow Fever Report; Monitoring of Yellow fever cases and deaths in Brazil – Report 43, available at: <http://portalsaude.saude.gov.br/index.php/o-ministerio/principal/leia-mais-o-ministerio/619-secretaria-svs/11-svs/27300-febre-amarela-informacao-e-orientacao>.

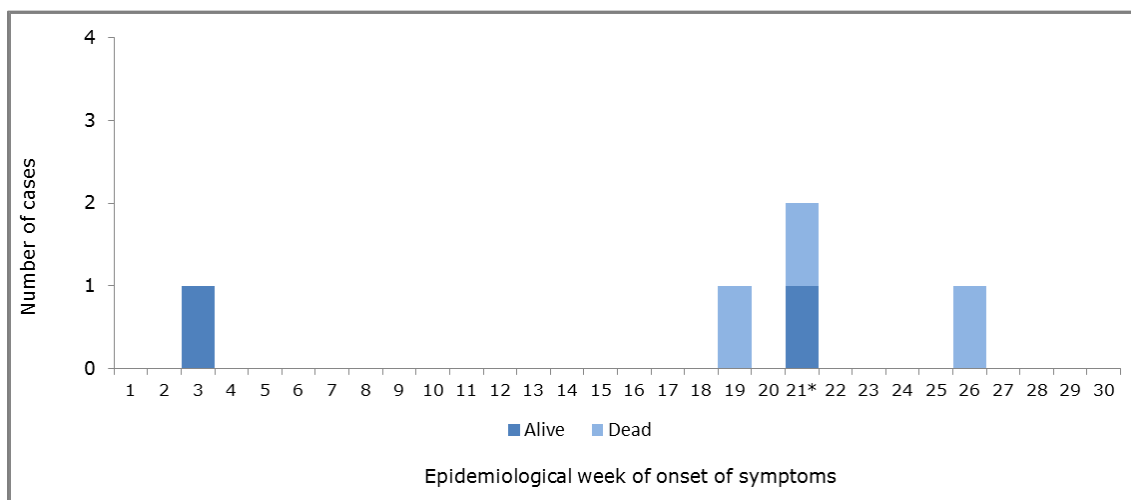
<sup>2</sup> The Colombia data was obtained from the Colombia Weekly Epidemiological Bulletins of EW 52 of 2016 and 25 of 2017, available at: <http://www.ins.gov.co/boletin-epidemiologico/Paginas/default.aspx>.

**Suggested citation:** Pan American Health Organization / World Health Organization. Epidemiological Update: Yellow Fever. 2 August 2017, Washington, D.C.: PAHO/WHO; 2017

Since the last [Yellow fever Epidemiological Update](#) published by the Pan American Health Organization, Regional Office of the World Health Organization (PAHO/WHO), only Bolivia has reported cases and no changes in the number of reported cases have been reported in the other countries.

In **Bolivia**, between EW 3 and EW 30 of 2017, a total of 5 yellow fever cases were confirmed, including 3 deaths (case fatality rate = 60%) (**Figure 2**). None of the cases had been vaccinated and all were infected in known areas with risk of yellow fever transmission in the departments of La Paz (4 cases) and Cochabamba (1 case). The age range of the cases is between 9 and 48 years and the majority (80%) are male.

**Figure 2.** Distribution of confirmed yellow fever cases according to EW of symptoms onset and clinical status of the case upon discharge. Bolivia, EW 1 to EW 30 of 2017.



\*the cases with onset of symptoms in EW 21 were infected in different departments

**Source:** Data provided by the Plurinational State of Bolivia Ministry of Health and reproduced by PAHO/WHO

## Recommendations

PAHO/WHO urges Member States to continue efforts to immunize at risk populations and take the necessary actions to keep travelers informed and vaccinated, when heading to areas where yellow fever vaccination is recommended.

### Vaccination

The yellow fever vaccine is safe and affordable and provides effective immunity against the disease in the range of 80 to 100% of those vaccinated after 10 days and 99% immunity after 30 days. A single dose provides life-long protection against yellow fever disease. A booster dose of yellow fever vaccine is not needed.

Given the limitations on the availability of vaccines and with the aim of promoting the rational use, PAHO / WHO reiterates its recommendations to national authorities:

1. Conduct an assessment of vaccination coverage against yellow fever in areas at risk at the municipal level to guarantee at least 95% coverage<sup>3</sup> among the resident population of these areas.
2. Member States that are not currently experiencing outbreaks should not conduct immunization campaign. Priority should be given to the use of vaccines in susceptible populations and to avoid revaccination.
3. Ensure vaccination of all travelers to endemic areas at least 10 days before traveling.
4. Depending on vaccine availabilities, Member States should have a small stock that allows them to respond to outbreaks.
5. Postpone routine vaccination in children in non-endemic areas until sufficient vaccines are available. Once there is availability, catch-up campaigns should be conducted to complete vaccination schedules.

## Precautions

It is recommended to individually assess the epidemiological risk of contracting disease when faced with the risk of an adverse event occurring in persons over 60 years who have not been previously vaccinated.

- The vaccine can be offered to individuals with asymptomatic HIV infection with CD4+ counts  $\geq 200$  cells / mm<sup>3</sup> requiring vaccination.
- Pregnant women should be vaccinated in an emergency situation and following recommendations of health authorities.
- Vaccination is recommended in nursing women who live in endemic areas, since the potential risk of transmitting the vaccine virus to the child is far lower than the benefits of breastfeeding.
- For pregnant or lactating women traveling to areas with yellow fever transmission, vaccination is recommended when travel cannot be postponed or avoided. They should receive advice on the potential benefits and risks of vaccination to make an informed decision. The benefits of breastfeeding are superior to those of other nutritional alternatives.

The following people are usually excluded from yellow fever vaccination:

- Immunocompromised individuals (Including those with thymus disorders, symptomatic HIV, malignant neoplasms under treatment, and those that are receiving or have received immunosuppressive or immunomodulatory treatments, recent transplants, and current or recent radiation therapy).
- People with severe allergies to eggs and their derivatives.

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<sup>3</sup> Pan American Health Organization. Regional immunization action plan. 54th Directing Council of PAHO, 67th session of the WHO Regional Committee for the Americas; 28 September – 1 October 2015; Washington (DC), United States. Washington (DC): PAHO; 2015. Available from: [http://www2.paho.org/hq/index.php?option=com\\_content&view=article&id=13101&Itemid=42296&lang=en](http://www2.paho.org/hq/index.php?option=com_content&view=article&id=13101&Itemid=42296&lang=en)

## Related Links

- PAHO/WHO Yellow Fever. Available at:  
[http://www.paho.org/hq/index.php?option=com\\_topics&view=rdmore&cid=5514&Itemid=40784&lang=en](http://www.paho.org/hq/index.php?option=com_topics&view=rdmore&cid=5514&Itemid=40784&lang=en)
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[http://www.paho.org/hq/index.php?option=com\\_topics&view=article&id=69&Itemid=40784&lang=en](http://www.paho.org/hq/index.php?option=com_topics&view=article&id=69&Itemid=40784&lang=en)
- WHO. Updates on yellow fever vaccination recommendations for international travellers related to the current situation in Brazil. Available at:  
<http://www.who.int/csr/don/20-march-2017-yellow-fever-brazil/en/#>