
Situation summary

Since the first report received by the Pan American Health Organization (PAHO) / World Health Organization (WHO) of autochthonous transmission of chikungunya infection on 6 December 2013, there are now six territories in the Region of the Americas, in the Caribbean, that have notified cases; these are the British Virgin Islands, Guadeloupe, Martinique, Saint Barthelemy, Saint Martin (French) and Sint Maarten (Dutch). See figure below.

The total number of cases registered has reached 786.¹ In addition, imported cases have been registered during this time in French Guiana (one imported case from Martinique and one from Saint Martin) and in Dominica (one imported case from Saint Martin). Thus far, the health services capacities of the concerned countries and territories have not been exceeded.

British Virgin Islands: PAHO/WHO was notified on 15 January 2014 of three autochthonous cases of chikungunya fever on the island of Jost Van Dyke of the British Virgin Islands.

Guadeloupe: Since the notification of the first confirmed case of autochthonous infection on 24 December 2013 to date, the total number of probable and confirmed cases of chikungunya infection in Guadeloupe has reached 68, including three imported cases from Saint Martin. No hospitalizations have been recorded. There is an increasing trend in the incidence of new cases.

Martinique: Since the notification of the first confirmed autochthonous cases on 19 December 2013 to date, the total number of probable and confirmed cases of chikungunya infection in Martinique has reached 267, of which 15 were hospitalized. There is an increasing trend in the incidence of new cases.

Saint Barthelemy: Since the notification of the first confirmed autochthonous cases on 31 December 2013 to date, the total number of confirmed and probable cases of chikungunya infection in Saint Berthélemy has reached 45. No hospitalizations have been recorded. There is a decreasing trend in the incidence of new cases following a peak during epidemiological week (EW) 1 of 2014.

Saint Martin: Since the notification of the first confirmed autochthonous cases on 6 December 2013 to date, the total number of confirmed and probable cases of chikungunya infection has reached 393, of which 17 were hospitalized, in Saint Martin (French).² Following an increase in

¹ The totals provided for the French collectivities of Guadeloupe, Martinique, Saint Barthelemy and Saint Martin include both probable and confirmed cases. A probable case as defined by the Institut de Veille Sanitaire (INVS), is a suspected case who presented borderline IgM or positive for chikungunya.

² The confirmed cases include one death of an adult with co-morbidities. This death is considered to be indirectly related to infection by chikungunya because of the existing co-morbidities.

the incidence of new cases observed in EW 52 of 2013, the incidence rate has remained constant.

Sint Maarten: Since the notification of the first case of autochthonous transmission on 19 December 2013 to date, the total number of confirmed chikungunya infection cases has reached 10 in Sint Maarten (Dutch). None of the cases required hospitalization.

Recommendations

Given the progression of autochthonous transmission of chikungunya fever in the Americas, the PAHO/WHO reiterates to Member States its recommendations to establish and maintain the ability to detect and confirm cases, manage patients and implement an effective public communication strategy to reduce the presence of the vector, especially in areas where the mosquito that transmits the disease is present.

PAHO/WHO recalls that the recommendations of the 9 December 2013 Epidemiological Alert on Chikungunya Fever continue to apply. PAHO/WHO reiterates the necessity to work in coordination with all partners in and out of the health sector, including the family and local community, to carry out vector control activities.

In order to facilitate decision making in the face of early identification of chikungunya fever by healthcare providers a diagnostic algorithm and guidance on clinical manifestations, laboratory diagnosis, clinical management and public health measures relevant to clinicians are available via the links provided below. The guidance also addresses recommendations in light of the possibility of blood-borne transmission of this virus.

- Diagnostic algorithm:
http://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=23978&Itemid=270&lang=en
- Aide Memoire for the clinical management of cases:
http://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=23974&Itemid=270&lang=en

Related Links

- Preparedness and Response for Chikungunya Virus – Introduction in the Americas. PAHO/WHO and US Centers for Disease Control and Prevention, 2011. Available at:
http://www.paho.org/hq/index.php?option=com_docman&task=doc_download&gid=16984&Itemid=
- Chikungunya - PAHO/WHO Health Topics. Available at:
<http://www.paho.org/chikungunya>
- Chikungunya – WHO Fact sheet No. 327, March 2008. Available at:
<http://www.who.int/mediacentre/factsheets/fs327/en/>

Figure. Countries/territories with autochthonous transmission of chikungunya in the Americas.

