

Advisory on Dengue fever and other vector borne diseases

The rainy season is very prone to diseases like Dengue, Malaria and Chikanguniya which spread during and after the rainy season every year. These mosquito borne diseases , sometimes gain epidemic proportions if preventive measures are not taken.

Preventive measures and control methods taken by school

- Fumigation of classrooms and open spaces are done once a week.
- Children are advised to wear mosquito repellants on exposed areas and full sleeved clothes and long dresses/ trousers that cover arms and legs to prevent mosquito bites.
- Taking preventive measure to ensure that there is no water logging in and around the school premises .Other adequate measures are also taken to prevent mosquito breeding.

Guidelines for control of Dengue

Do's	Don't s
1) Keep all the water containers / overhead tanks etc properly covered	1) Don't let water to collect in and around houses, offices, schools etc
2) Use mosquito repellants on exposed parts during daytime	2) Don't let broken earthen ware, tyres, furnitures, bottles, pots, flower vases etc to collect outside or on roof tops
3) Wear full sleeved clothes and long dresses/ trousers that cover arms and legs to prevent mosquito bites	3) Don't store water uncovered or in not properly covered containers/ tanks
4) Use mesh doors/ windows , mosquito coils. vapour mats to keep mosquito away	4) Don't give ASPIRIN or BRUFEN to patients with dengue fever
5) Use bed nets even during day time for infants and small children	
6) Dry all desert coolers and containers once a week	
7) Add two table spoons of petrol/ kerosene in desert coolers/ containers if they cant be dried weekly	
8) Weekly anti larval measures to be taken if there are water logging areas around premises	
9) Ensure that there is no water logging on roof tops and ground areas	
10) Protect dengue patients from mosquito bites by any above methods	

Dengue fever key facts

Mode of transmission

- Dengue is a mosquito-borne viral disease.
- The *Aedes aegypti* mosquito is considered the primary vector .
- It could breed in natural containers such as tree holes and bromeliads, but nowadays it has well adapted to urban habitats and breeds mostly in man-made containers including buckets, mud pots, discarded containers and used tyres, storm water drains etc..
- *Aedes aegypti* is a day-time feeder; its peak biting periods are early in the morning and in the evening before sunset.

Symptoms

Dengue should be suspected when a high fever (40°C/104°F) is accompanied by 2 of the following symptoms during the febrile phase (2-7 days):

- severe headache
- pain behind the eyes
- muscle and joint pains
- nausea
- vomiting
- swollen glands
- rash.

Warning signs

- severe abdominal pain
- persistent vomiting
- rapid breathing
- bleeding gums or nose
- fatigue
- restlessness
- liver enlargement
- blood in vomit or stool.

Treatment

- There is no specific treatment for dengue fever.
- Patients should rest, stay hydrated and seek medical advice. Depending on the clinical manifestations and other circumstances, patients may be sent home, be referred for in-hospital management, or require emergency treatment
- Paracetamol or acetaminophen can be given for fever and muscle pains. Brufen and aspirin should be avoided. These anti-inflammatory drugs act by thinning the blood, and in a disease with risk of bleeding , blood thinners may exacerbate the prognosis.

Warm Regards

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