

2015 年台南登革熱大流行： 成醫臨床經驗

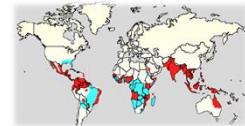


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感染病科 柯文謙

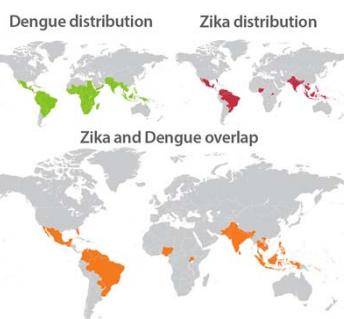
Global Estimates of Dengue



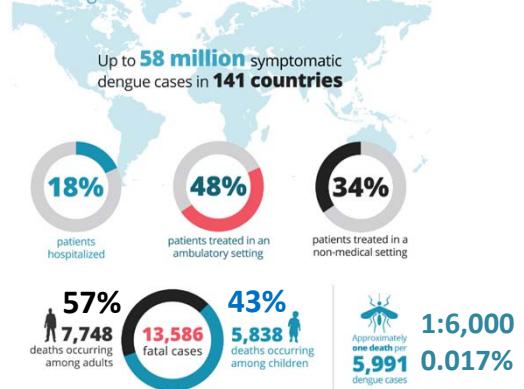
- At risk of dengue: 3.9 billion people in 128 countries
 - esp. Americas, South-East Asia, and Western Pacific
- Underreported and misdiagnosed
- Global estimates: annual 390 million DF cases, symptomatic 96 million (24.6%) cases
 - 566,000 dengue-attributable disability
 - 500,000 require hospitalization
 - 20,000 deaths
 - > 114 million disability-adjusted life-years (DALYs)

Dengue vaccine: WHO position paper – September 2018

Global Dengue Data

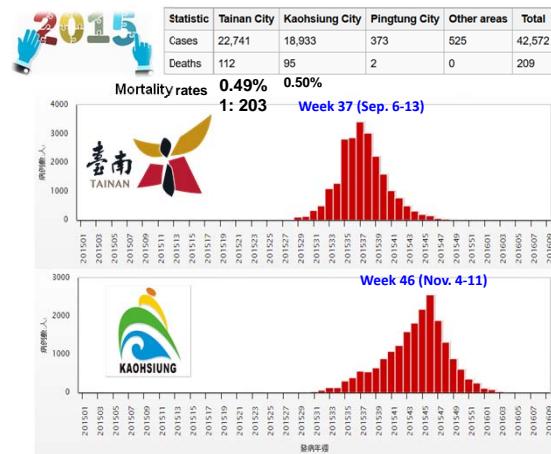
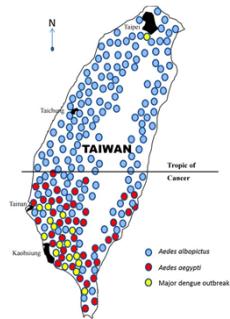


Global incidence of dengue Dengue in 2013

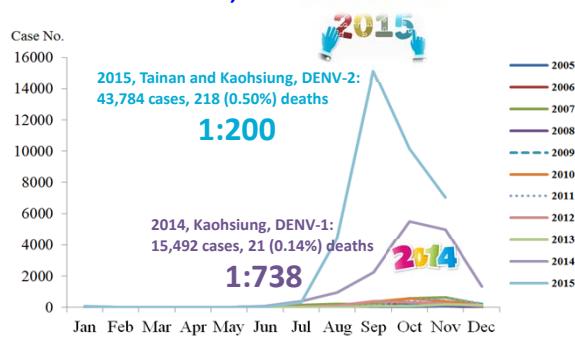


<https://www.breakdengue.org/measuring-the-true-cost-of-dengue/>

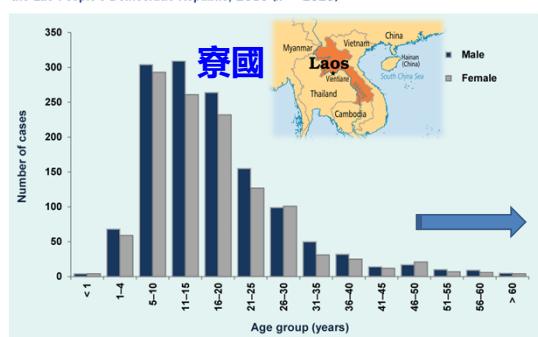
Taiwan Dengue Data



Confirmed monthly case numbers of dengue fever in Taiwan, from 2005 to 2015



Number of reported dengue cases by sex and age group, Savannakhet Province, the Lao People's Democratic Republic, 2010 ($n = 2523$)



2014 廣東登革熱大流行: 45,171例

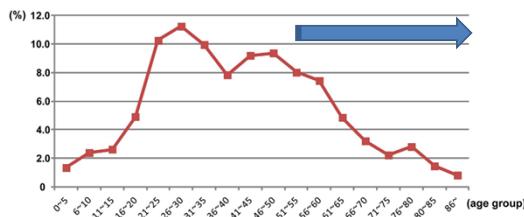


Figure 2. Age composition of the cases reported in the dengue outbreak in Guangdong in 2014. Patients aged 16–65 years old accounted for approximately 83.1% of all DF cases, with 65.9% in young age groups (21–55 years old). A main peak appeared in the 21- to 35-year-old group, and a secondary peak appeared in the 41- to 55-year-old group.

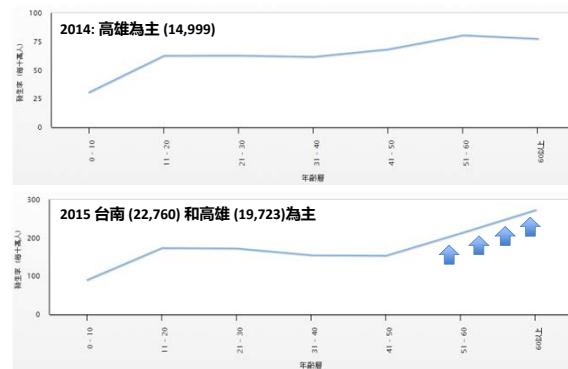
Sci Rep 2015 Nov 23;5:16913

Tainan City-based Dengue Data

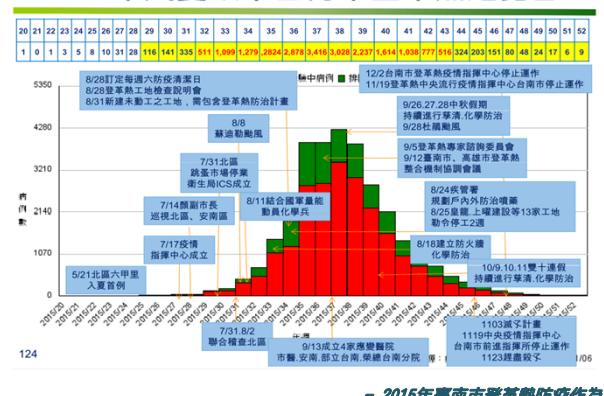


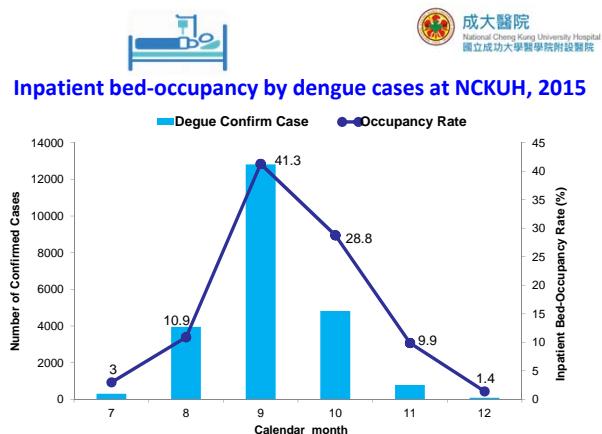
PLoS ONE 2017;12(11):e0188065

台灣登革熱患者年齡分布

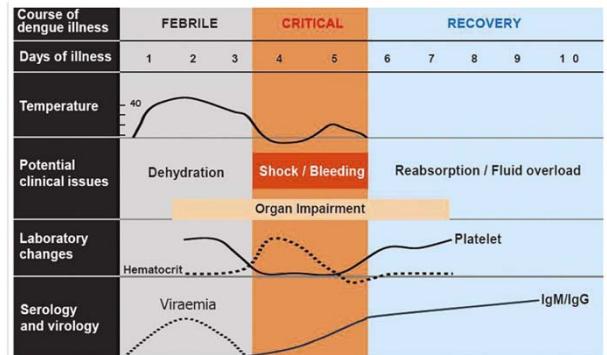


2015年入夏以來臺南市登革熱趨勢圖

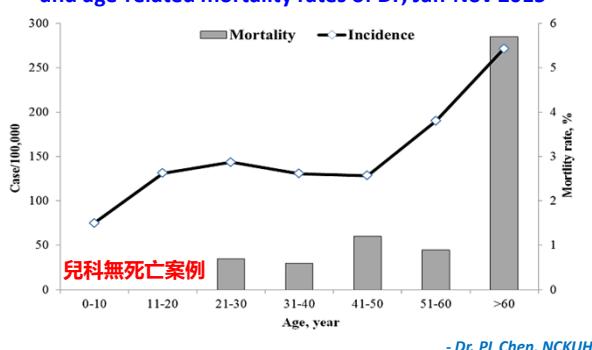




Natural History of Dengue Fever



Incidence of DF among different age groups in Tainan and age-related mortality rates of DF, Jan-Nov 2015

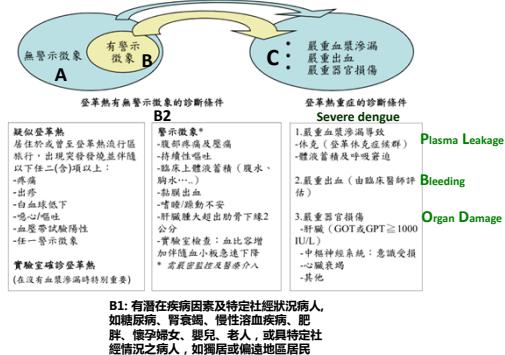


- Dr. PL Chen, NCKUH

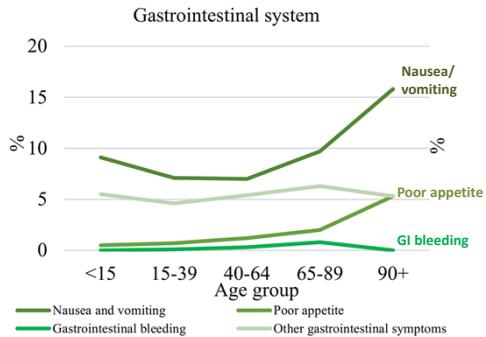


Skin rash of dengue fever

台灣登革熱病例通報定義 (2015.5.1起)
WHO登革熱病例分類, 2009

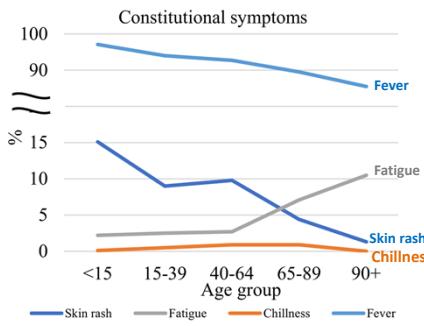


Secondary data from the Dengue Disease Reporting System, 2015: 22,777 laboratory-confirmed reported cases



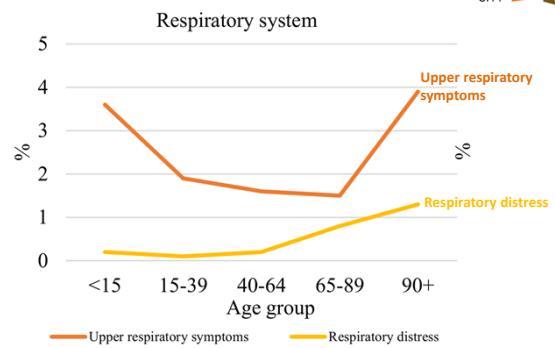
PLoS Negl Trop Dis 11(12): e0006091

Secondary data from the Dengue Disease Reporting System, 2015: 22,777 laboratory-confirmed reported cases

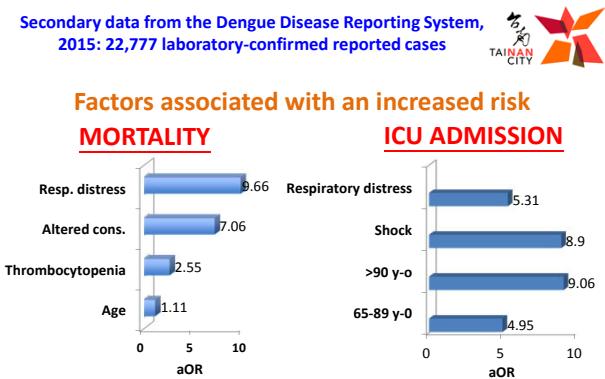
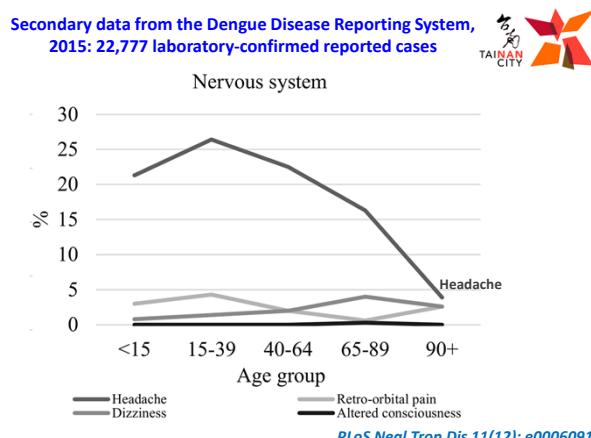
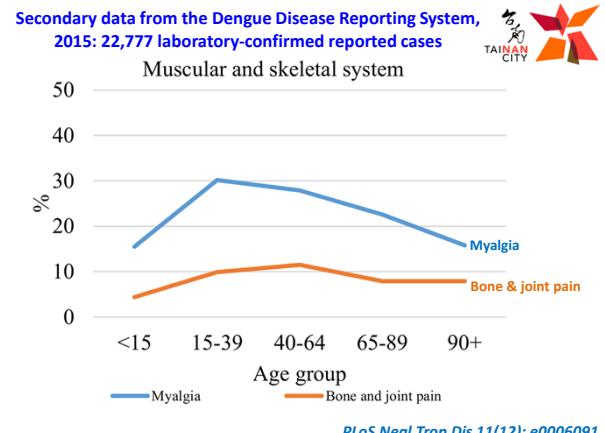
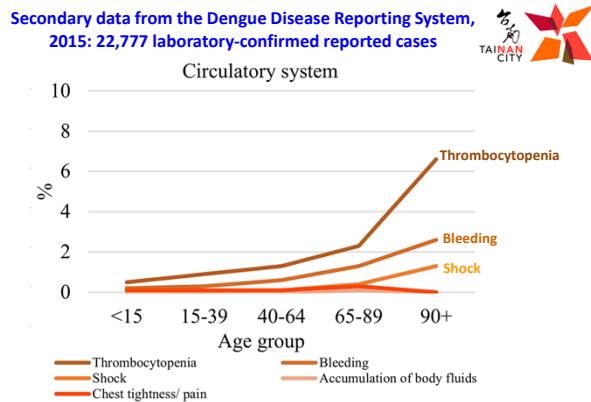


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Secondary data from the Dengue Disease Reporting System, 2015: 22,777 laboratory-confirmed reported cases



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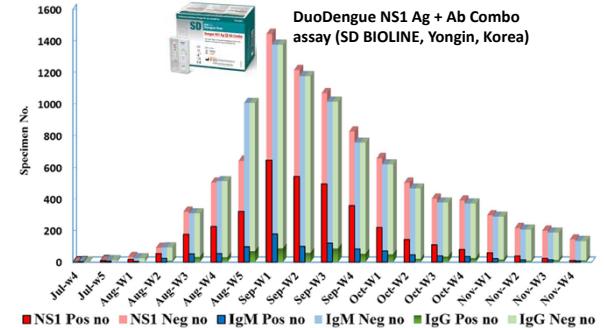
Secondary data from the Dengue Disease Reporting System,
2015: 22,777 laboratory-confirmed reported cases



- 年紀越大，不典型症狀較多，危急症狀較明顯
 - 隨著年紀越大，初始全身症狀較不明顯 (如：發燒、肌肉痛、頭痛、關節骨頭痛、紅疹、後眼窩痛)
 - 初始警訊或危急症狀較明顯 (如：體液蓄積、血小板減少、出血、呼吸窘迫、意識改變)
- 高重症照護需求：年紀、男性、倦怠、出血、休克、呼吸窘迫、意識改變
- 高死亡風險：年紀越大、血小板減少、休克、胸痛

PLoS Negl Trop Dis 11(12): e0006091

Detection of DENV NS1 antigen and DENV-specific IgM/IgG antibodies at Clinical Virology Laboratory of NCKUH, Jul-Nov 2015

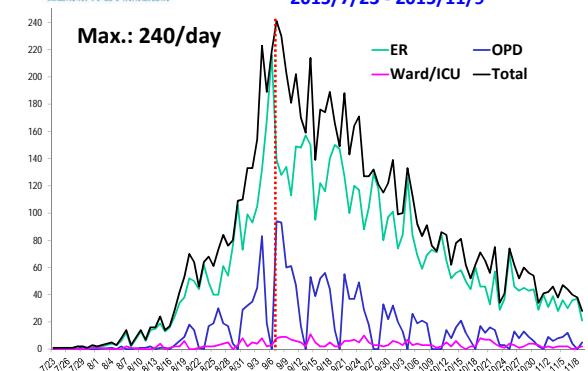


PLoS Negl Trop Dis 2016;10(10):e0005036

Hospital-based Dengue Data



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Age and fatality rates for 4,678 patients with dengue, 2015



Comorbidities of 617 Hospitalized Patients with Laboratory-confirmed Dengue

Comorbidities	N (%)
Hypertension	329 (53.3)
Diabetes mellitus	208 (33.7)
Chronic kidney disease	157 (25.4)
End stage renal disease on regular dialysis	19 (3.1)
Cancer (solid tumor)	104 (12.9)
Coronary artery disease	82 (13.3)
Old stroke	73 (11.8)
Peptic ulcer disease	55 (8.9)
Liver cirrhosis	18 (2.9)
Systemic Lupus Erythematosus	6 (1.0)
Leukemia	2 (0.3)



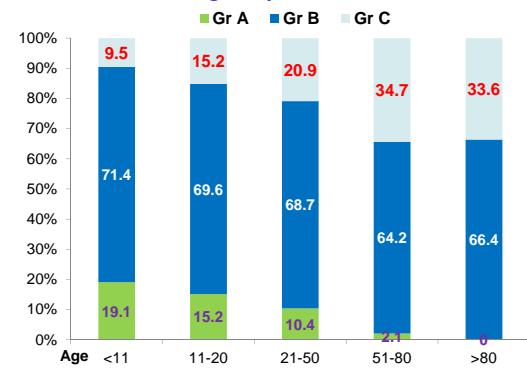
617 Hospitalized Patients with Laboratory-confirmed Dengue (2015.07.01-2015.12.31)

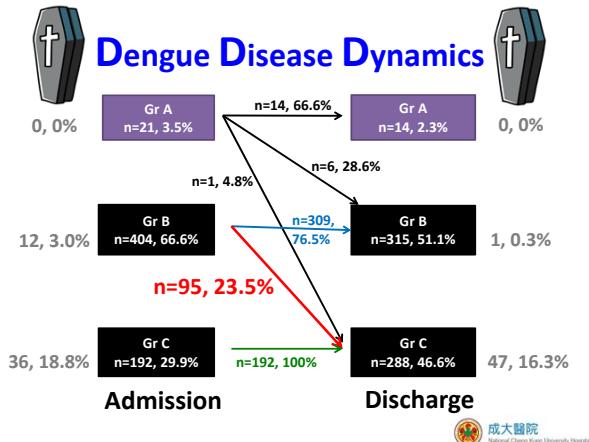
Characteristics	N, (%) or mean ± SD
Age, year	63.8 ± 21.7
Gender, male	324 (52.5)
Comorbidity	472 (76.5)
Warning signs at presentation	548 (88.8)
Severe dengue	284 (46.0)
Acute kidney injury	52 (8.4)
Sequential bacterial infections	47 (7.6)
Bloodstream infections	31 (5.0)
ICU care	84 (13.6)
Hospital stay, days	8.6 ± 8.0

30-day mortality: 7.8%



Dengue Severity in Different Age Groups Among Hospitalized Patients with DF





Risk Factors of Dengue fever Progression In Hospitalized Patients: From Gr. B to Gr. C

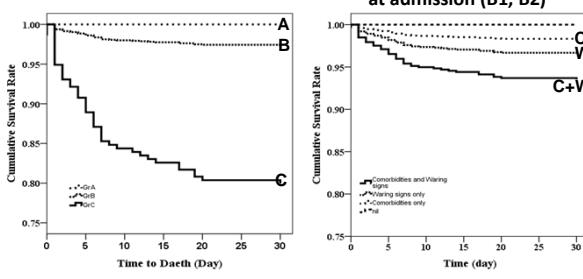
Variables	Stationary (n=309)	Progressive (n=95)	Univariate analysis		Multivariate analysis	
			OR (95% CI)	P values	OR (95% CI)	P values
Age; mean±S.D. years	61.3±23.2	69.6±16.5	-	<0.001	1.01 (0.98-1.03)	0.13
Male gender	154 (49.8)	47 (49.5)	1.01 (0.8-1.17)	1.0		
Waring Sign	269 (87.1)	87 (91.6)	1.62 (0.73-3.59)	0.28		
Co-morbidity	221 (71.5)	79 (83.2)	1.97 (1.09-3.55)	0.023		
No of Co-morbidity	2.0±1.9	2.9±2.2	-	<0.001		
Diabetes mellitus	86 (27.8)	47 (49.5)	2.54 (1.58-4.07)	<0.001	1.91 (1.01-3.64)	0.046
Chronic kidney disease	56 (18.1)	48 (50.5)	4.6 (2.81-7.57)	<0.001	4.4 (2.4-8.28)	<0.001
ESRD on regular Dialysis	4 (1.3)	3 (3.2)	2.49 (0.55-11.31)	0.36		
Solid tumor	51(16.5)	14 (14.7)	0.87 (0.46-1.66)	0.75		
Leukemia	1 (0.3)	0 (0)	1.0 (0.99-1.001)	1.0		
Liver cirrhosis	9 (2.9)	3 (3.2)	1.09 (0.29-4.10)	1.0		
CVA	27 (8.7)	22 (23.2)	3.15 (1.7-5.85)	<0.001	2.58 (1.24-5.36)	0.01
CAD	33 (10.73)	19 (20.0)	2.09 (1.13-3.88)	0.02		
Co-morbidity with Waring Sign	187 (60.5)	72 (75.8)	2.04 (1.21-3.44)	0.007		
Obesity	237 (40.3)	73 (97.7)	1.01 (0.59-1.74)	1.0		

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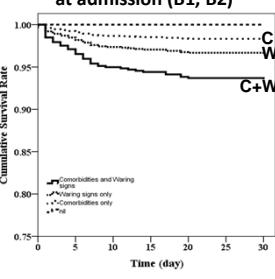


Survival Analysis of Hospitalized Patients with DF

WHO Classification at admission



Comorbidity or warning signs at admission (B1, B2)



Risk Factors of 30-day Mortality In 617 Hospitalized Patients With Dengue Fever

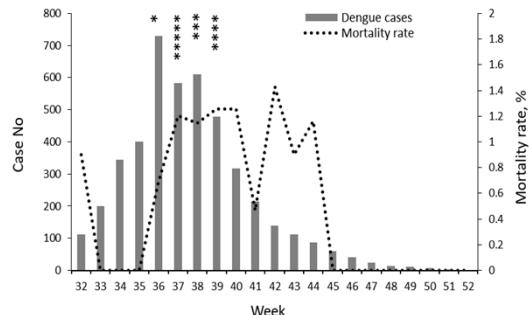
Variables	Survivors (n=571)	Non-survivors (n=46)	Univariate analysis		Multivariate analysis	
			OR (95% CI)	P values	OR (95% CI)	P values
Age; median (IQR), years	72 (55-78)	76 (71-84)	-	<0.001	1.05 (1.02-1.09)	0.002
Male gender	304 (95.8)	20 (8.2)	1.25 (0.87-1.72)	0.22	1.98 (0.97-3.97)	0.06
Co-morbidity	430 (91.1)	42 (8.9)	3.44 (1.21-9.77)	0.011	2.92 (0.82-10.42)	0.1
Hypertension	303 (53.1)	26 (56.5)	1.15 (0.63-2.11)	0.76		
Diabetes mellitus	187 (32.7)	21 (45.7)	1.73 (0.94-3.16)	0.10		
Chronic kidney disease	173 (30.3)	28 (60.8)	3.58 (1.93-6.64)	<0.001	1.57 (0.73-3.39)	0.25
Malignancy	91 (15.9)	13 (28.3)	2.09 (1.05-4.1)	0.04	2.32 (1.04-5.20)	0.04
Liver cirrhosis	15 (2.6)	3 (6.5)	2.59 (0.72-9.28)	0.14		
Cerebral vascular accident	65 (11.4)	8 (17.4)	1.64 (0.73-3.67)	0.23		
Coronary artery disease	74 (13.0)	8 (17.4)	1.41 (0.64-3.15)	0.37		
Sequential infection	35 (6.1)	12 (26.1)	5.4 (2.58-11.35)	<0.001	3.35 (1.40-8.03)	0.007
Emergency dialysis	19 (3.3)	10 (21.7)	8.1 (3.5-18.63)	<0.001	4.04 (1.39-16.63)	0.01
Waring sign presentation	479 (83.9)	45 (97.8)	8.46 (1.18-63.49)	0.008	8.5 (1.07-67.45)	0.04
Severe Dengue at admission	156 (27.3)	36 (78.3)	9.58 (4.64-19.76)	<0.001	7.51 (3.4-16.63)	<0.001

Data are given as the numbers (percentages) unless otherwise specified. Ellipses indicate "not available". OR indicates odds ratio, CI confidence interval.

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13 cardiac arrest events at ED in Tainan dengue outbreak



Dr. Lee JC, Unpublished data

Expanded dengue syndrome: Unusual or atypical manifestations

System	Unusual or atypical manifestations
Neurological	Febrile seizures in young children. Encephalopathy. Encephalitis/aseptic meningitis. Intracranial haemorrhages/thrombosis. Subdural effusions. Mononeuropathies/polyneuropathies/Guillane-Barre Syndrome. Transverse myelitis.
Gastrointestinal/hepatic	Hepatitis/fulminant hepatic failure. Acalculous cholecystitis. Acute pancreatitis. Hyperplasia of Peyer's patches. Acute parotitis.
Renal	Acute renal failure. Hemolytic uremic syndrome.
Cardiac	Conduction abnormalities. Myocarditis. Pericarditis.

Trop Med Int Health 2007; 12(9):1087-95



13 cardiac arrest events at ED in Tainan dengue outbreak

Serial No.	OHCA					IHCA							
	1	2	3	4	5	1	2	3	4	5	6	7	8
Age	55	62	69	80	62	45	76	70	76	41	78	74	83
Gender	F	M	F	F	M	M	F	M	M	F	F	F	F
Latest ER arrival to CPR, hours						1	14	7	4	39	20	22	46
Prior ER or OPD visits	Y	N	N	Y	Y	Y	N	N	N	Y	Y	N	N
WHO grade on latest ER arrival	C	C	C	C	C	C	B	C	B	A	B	B	B
Underlying disease													
Charlson's comorbidity index	5	9	3	8	6	3	6	5	5	1	4	6	9
CNS disease													
Coronary arterial disease		*											
Heart failure													
Hypertension													
Liver disease													
Chronic kidney disease													
Diabetes mellitus													
Cancer													
Unstable vital signs at the triage													
Thrombocytopenia at ER													
Evidence of plasma leakage at ER													

OHCA, out-hospital cardiac arrest; IHCA, in-hospital cardiac arrest at the emergency room; CPR, cardiopulmonary resuscitation; ER, emergency room; OPD, outpatient department; CNS, central nervous system.

Dr. Lee JC, Unpublished data

Expanded dengue syndrome: Unusual or atypical manifestations

System	Unusual or atypical manifestations
Respiratory	Acute respiratory distress syndrome. Pulmonary haemorrhage.
Musculoskeletal	Myositis with raised creatine phosphokinase (CPK). Rhabdomyolysis.
Lymphoreticular/bone marrow	Infection associated haemophagocytic syndrome. IAHS or Haemophagocytic lymphohistiocytosis (HLH), idiopathic thrombocytopenic purpura (ITP). Spontaneous splenic rupture. Lymph node infarction.
Eye	Macular haemorrhage. Impaired visual acuity. Optic neuritis.
Others	Post-infectious fatigue syndrome, depression, hallucinations, psychosis, alopecia.

Trop Med Int Health 2007; 12(9):1087-95

Characteristics and initial laboratory data at the onset day of dengue fever (D0) among 4,069 hospitalized patients* in NCKUH, 2015

Variables	Fatal patients, n=37	Surviving patients, n=4,032	P values
Age, years	74.9±12.0	47.8±21.5	<0.0001
Male gender	14 (37.8%)	2039 (50.6%)	0.12
Days between illness onset and diagnosis	1 (0-5)	1 (0-67)	0.05
Days between illness onset and death	4 (0.7)	---	
Days between diagnosis and death	2 (-1-7)	---	
Ever hospitalization after the illness onset	24 (64.9%)	534 (13.2%)	<0.0001
Aspartate transaminase (U/L)*	185 (47-1,481)	35 (17-1,191)	<0.0001
Alanine transaminase (U/L)*	33.5 (10-357)	16 (10-491)	0.10
Activated partial thromboplastin time (seconds) ^c	39.7 (30.9-60.8)	38 (27.5-93.2)	0.65
Platelet ($\times 10^3/\mu\text{l}$) ^d	113 (19-228)	166 (5-567)	0.38

Note: Data are expressed as case number (%), mean ± standard deviation, median (range)

* 6 records from 6 patients in the fatal group and 526 records from 526 patients in the survivor group were provided at D0.

† 16 records from 16 patients in the fatal group and 1,105 records from 1,097 patients in the survivor group were provided at D0.

‡ 7 records from 7 patients in the fatal group and 306 records from 305 patients in the survivor group were provided at D0.

§ 3 records from 3 patients in the fatal group and 546 records from 542 patients in the survivor group were provided at D0.

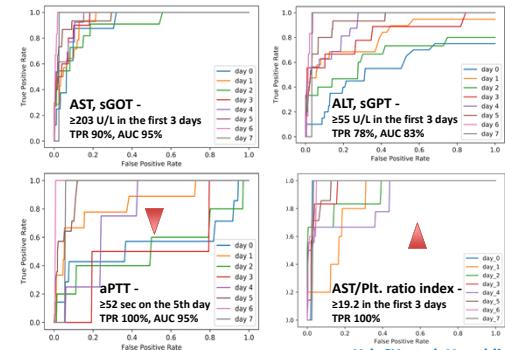
*Of 4,069 patients, 0.9% (37) died in one week after illness onset (i.e., early mortality)



Yeh CY, et al. Unpublished data



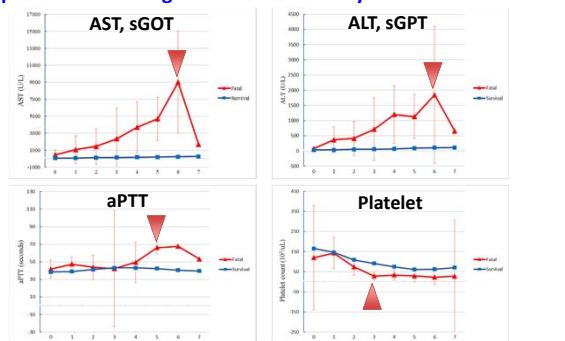
Receiver operating characteristic curves of 4 variables in patients with dengue fever within 7 days after illness onset



Yeh CY, et al. Unpublished data

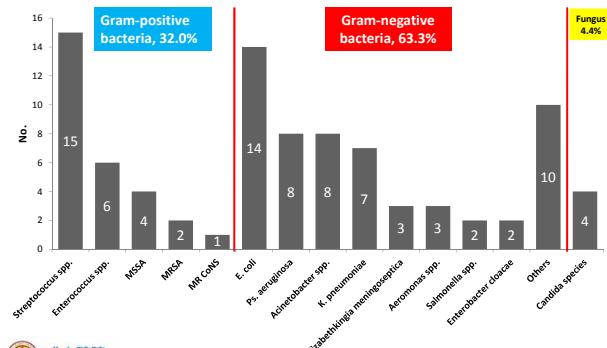


Trend variations in 4 lab. variables of fatal and surviving patients with dengue fever within 7 days after illness onset



Yeh CY, et al. Unpublished data

Pathogen distribution of BSIs in DF



Dr. Syue LS, JMII 2019

Pathogen distribution of Bloodstream Infections in DF

Pathogens	Isolate number (%)			
	All isolates n = 90	Group I n = 38	Group II n = 34	Group III n = 18
Gram-positive pathogens				
<i>Streptococcus</i> species	29 (32.0)	17 (44.7)	9 (13.2)	3 (16.7)
<i>Enterococcus</i> species	15 (16.7)	11 (28.9)	4 (11.8)	0 (0)
Methicillin-susceptible <i>Staphylococcus aureus</i>	6 (6.7)	2 (5.3) ^b	1 (2.9) ^b	3 (16.7) ^a
Methicillin-susceptible <i>Staphylococcus epidermidis</i>	4 (4.4)	1 (2.6)	3 (8.8)	0 (0)
Methicillin-resistant <i>Staphylococcus aureus</i>	2 (2.2)	2 (5.3)	0 (0)	0 (0)
Methicillin-resistant coagulase-negative <i>staphylococci</i>	1 (1.1)	1 (2.6)	0 (0)	0 (0)
Gram-negative pathogens				
<i>Escherichia coli</i>	57 (63.3)	21 (55.3)	23 (67.6)	13 (72.2)
<i>Pseudomonas aeruginosa</i>	14 (15.6)	9 (23.7)	4 (11.8)	1 (5.6)
<i>Acinetobacter</i> species	8 (8.9) ^a	3 (7.8)	3 (8.8)	2 (11.1)
<i>Klebsiella pneumoniae</i>	7 (7.8)	1 (2.6)	5 (14.7)	1 (5.6)
<i>Elizabethkingia meningoseptica</i>	3 (3.3)	0 (0)	0 (0)	3 (16.7)
<i>Aeromonas</i> species	3 (3.3) ^a	0 (0)	3 (8.8)	0 (0)
<i>Salmonella</i> species	2 (2.2)	0 (0)	1 (2.9)	1 (5.6)
<i>Enterobacter cloacae</i>	2 (2.2)	0 (0)	1 (2.9)	1 (5.6)
Others	10 (11.1)	5 (13.2) ^b	3 (8.8) ^b	2 (11.1) ^a
<i>Candida</i> species	4 (4.4)	0 (0)	2 (5.9)	2 (11.1)



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Dr. Syue LS, JMII 2019

Clinical characteristics and outcomes of 80 hospitalized adults with dengue fever and bloodstream infection (BSI) categorized by the time between admission and BSI onset

Characteristics	All cases n = 80	Group I n = 32	Group II n = 32	Group III n = 16	P value
	All cases n = 80	Group I n = 32	Group II n = 32	Group III n = 16	
Clinical condition & disease severity					
Admission to BSI, days	5.8 ± 8.5	0.4 ± 0.8	4.8 ± 1.2	18.4 ± 11.9	<0.0001
DF onset to BSI ^a , days	7.8 ± 8.7	2.3 ± 1.9	6.9 ± 2.0	20.6 ± 11.7	<0.0001
Concurrent gastrointestinal bleeding	32 (40.0)	15 (46.9)	14 (43.8)	3 (18.8)	0.15
Leukocytosis ($\geq 10,000/\text{mm}^3$) at BSI onset	32 (40.0)	11 (34.4)	12 (37.5)	9 (56.3)	0.32
Thrombocytopenia ($\leq 100,000/\text{mm}^3$) at BSI onset	62 (77.5)	25 (78.1)	28 (87.5)	9 (56.3)	0.05
Antibiotic usage before BSI	23 (28.8)	1 (3.1)	10 (31.3)	12 (75.0)	<0.0001
Multidrug-resistant pathogens	28 (35.0)	8 (25.0)	8 (25.0)	12 (75.0)	0.001
Inappropriate empirical antibiotic	35 (43.8)	14 (43.8)	10 (31.3)	11 (68.8)	0.05
Pitt bacteremia score ≥ 4 at BSI onset	30 (37.5)	13 (40.6)	12 (37.5)	5 (31.3)	0.82
APACH II score while BSI event	19.6 ± 11.8	22.0 ± 12.6	19.6 ± 12.3	14.8 ± 7.1	0.13
Clinical outcomes					
Total length of hospitalization	17.4 ± 20.6	9.1 ± 8.2	12.1 ± 8.2	44.4 ± 31.3	<0.0001
Severe dengue	48 (60.0)	19 (59.4)	18 (56.3)	11 (68.8)	0.70
Intensive care unit admission	41 (51.2)	16 (50.0)	15 (46.9)	10 (62.5)	0.58
Ventilation failure	27 (33.8)	10 (31.3)	10 (31.3)	7 (43.8)	0.64
In-hospital mortality	26 (32.5)	12 (37.5)	10 (31.3)	4 (25.0)	0.67



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Characteristics	All cases n = 80	Group I n = 32	Group II n = 32	Group III n = 16	P value
	All cases n = 80	Group I n = 32	Group II n = 32	Group III n = 16	
Age, years					
Age, years	73.2 ± 9.4	75.6 ± 7.4	72.6 ± 9.4	69.6 ± 11.7	0.10
Male	41 (51.3)	15 (46.9)	19 (59.4)	7 (43.8)	0.48
Comorbidities					
Charlson comorbidity index	2.38 ± 1.99	3.13 ± 2.28	1.84 ± 1.67	1.94 ± 1.53	0.02
Hypertension	59 (73.8)	28 (87.5)	20 (62.5)	11 (68.8)	0.07
Diabetes mellitus	41 (51.3)	18 (56.3)	13 (40.6)	10 (62.5)	0.28
Chronic kidney disease	21 (26.3)	9 (28.1)	9 (28.1)	3 (18.8)	0.75
Coronary artery disease	16 (20)	6 (18.8)	7 (21.9)	3 (18.8)	0.94
Cerebrovascular disease	10 (12.5)	6 (18.8)	3 (9.4)	1 (6.3)	0.37
Malignancy	16 (20)	10 (31.3)	4 (12.5)	2 (12.5)	0.12

- Group I (BSI onset within 48 hours after admission), Group II (between >48 hours and one week), Group III (more than one week)

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Risk factors of in-hospital mortality among 80 hospitalized adults with dengue fever and bloodstream infection (BSI)

Characteristics	All patients, n = 80			Group I and II ^a , n = 64		
	Surviving n = 54	Fatal n = 26	P value	Surviving n = 42	Fatal n = 22	P value
Age (mean ± SD), years	72.5 ± 9.4	74.7 ± 9.5	0.35	73.3 ± 8.7	75.8 ± 8.2	0.27
Charlson comorbidity index (mean ± SD)	2.1 ± 2.0	3.0 ± 1.8	0.07	2.2 ± 2.2	3.1 ± 1.8	0.12
Multidrug-resistant pathogens	15 (27.8)	13 (50.0)	0.05	7 (16.7)	9 (40.9)	0.03
Inappropriate empirical antibiotic therapy	19 (35.2)	16 (61.5)	0.03	12 (28.6)	12 (54.5)	0.04
Pitt bacteremia score ≥ 4 at BSI onset	5 (9.3)	25 (96.2)	0.00	3 (7.1)	22 (100)	0.00

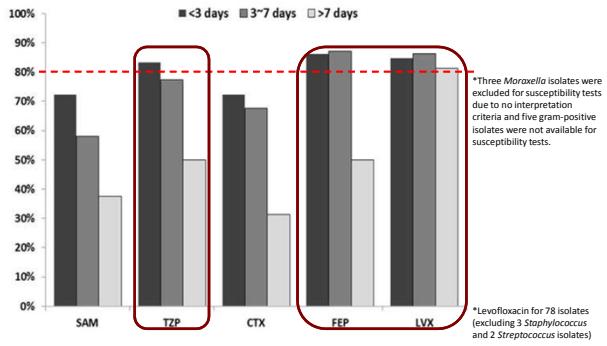
SD = standard deviation.

^aDefined as patients developed BSI within one week after hospital arrival.

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Susceptibility profile of 83 bacteremic isolates from hospitalized adults with dengue fever



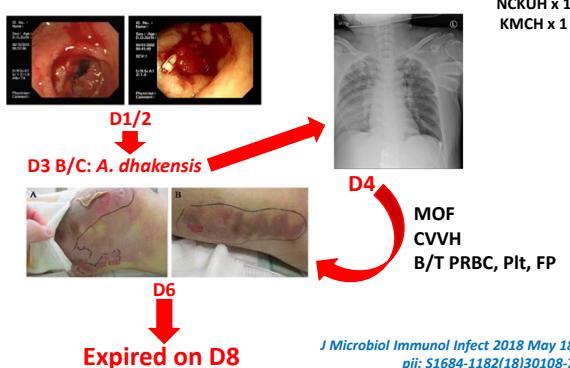
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Who will get bloodstream infections?

- Tan Tock Seng Hospital Singapore, concurrent bacteremia in patients with dengue: **PBS of ≥4** (aOR 14.73, 95% CI 1.30–167.28)
 - *J Microbiol Immunol Infect 2017;50(3):314-20*
- CMH, risk factors of concurrent bacteremia in patients critically ill with severe dengue: **higher CRP levels** (aOR: 1.026; 95 % CI 1.008–1.044; P=0.005) and **longer APTTs** (aOR: 1.034; 95% CI: 1.004–1.065; P=0.027)
 - *J Med Microbiol 2016;65(12):1505-11*
- CKMH KHH, independent risk factors for dengue + bacteremia: **acute renal failure** (OR 51.45, P = 0.002) and **prolonged fever (> 5 days)** (OR 26.07, P = 0.017)
 - *Am J Trop Med Hyg 2005;72(2):221-6*



Two fatal cases of *Aeromonas dhakensis* bacteremia and necrotizing fasciitis in severe dengue patients

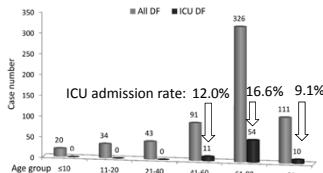


ICU-based Dengue Data





75 dengue adults in ICUs 20150701-20151231



- Mean age: 72.3 year-old
- Three major comorbidities: HTN (72.0%); Diabetes mellitus (43.7%); Chronic kidney disease (22.7%)
- In-hospital case fatality rate 41.3%
 - Independent risk factors:
 - cardiac arrest before ICU admission (HR: 6.26)
 - initial prolonged APTT (>48 sec; HR: 3.91)
 - acute kidney injury at ICU admission* (HR: 2.48)

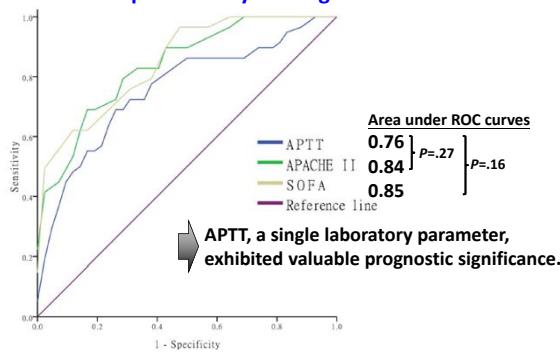
*AKI (defined by KDIGO clinical practice guidelines) in the first 24 h after ICU admission.

PLoS Negl Trop Dis 2017; 11(1): e0005270

Epidemiology/Laboratory-based Dengue Data



ROC curves of 3 continuous variables in predicting in-hospital fatality of dengue adults in ICUs



PLoS Negl Trop Dis 2017; 11(1): e0005270

Suboptimal diagnostic performance of dengue NS-1 antigen rapid test during non-endemic periods in southern Taiwan

*1,262 non-duplicated patients tested by NS1 antigen: 16 (1.27%) positive results

Exclusion of 6 patients with recent travel to dengue-endemic countries, false-positive rate: 70.0% (7/10)

No.	Age/Sex	Clinical diagnosis	Chronic underlying diseases
1	37y/M	Septic shock and Lemierre's syndrome with <i>Fusobacterium necrophorum</i> bacteremia	Renal lithiasis
2	58y/M	Septic shock, spondylodiskitis and psoas muscle abscess with MRSA ^a bacteremia	Spinal cord injury, end-stage renal disease, gallstones
3	10m/F	Roseola infantum	nil
4	19y/M	Acute suppurative tonsillitis	nil
5	78y/F	Acute ischemic stroke	Adrenal insufficiency, peptic ulcer disease
6	65y/M	Scrub typhus	Hypertension, atrial fibrillation
7	85y/F	Influenza A(H3) with septic shock	Atrial fibrillation

^aMethicillin-resistant *Staphylococcus aureus*

*SD BIOLINE Dengue NS1 Ag rapid test (Standard Diagnostics, Yongin, Korea).

*January 01, 2016 - December 31, 2017



Cong-Tat Cia, Wen-Chien Ko. JMII (Accepted)

Prolonged persistence of IgM against dengue virus detected by commonly used commercial assays

- Prospectively investigated 44 adults with anti-DENV IgM in the 2015 dengue epidemic in Taiwan: 17 symptomatic, 27 asymptomatic
- Anti-DENV IgM: ELISA tests from Standard Diagnostic (SD) and Focus Diagnostic
- Rapid IgM test: SD BIOLINE Dengue Duo rapid dengue tests

ELISA tests	Initial		6 months		12 months	
	SD	Focus	SD	Focus	SD	Focus
All cases	44/44 100%	40/44 91%	31/44 71%	6/44 14%	18/39 46%	3/39 8%
Symptomatic	17/17 100%	16/17 94%	11/17 65%	1/17 6%	7/15 47%	1/15 7%
Asymptomatic	27/27 100%	24/27 89%	20/27 74%	5/27 19%	11/24 46%	2/14 8%
Anti-DENV IgM, rapid tests	86.4%		68.2%		35.9%	

BMC Infect Dis (2018) 18:156

Summary

- Multiple chronic diseases and comorbid conditions in elderly dengue patients
- Elderly dengue patients are likely to present atypical symptoms
- Clinical deterioration (Gr. B  C): underlying diabetes mellitus, chronic kidney disease, or old stroke
- Prognostic factors
 - hospitalized adults with DF: increased age, underlying cancer, sequential bacterial infection, emergent dialysis, warning signs or severe dengue at presentation
 - severe dengue in ICUs: cardiac arrest before admission, acute respiratory or renal failure at admission, and APTT >48 seconds