

Yellow Fever: the repeated emergence



Omer Fayshal Pavel

When people are dealing with the Zika issue, another emergence took the concern of global health agencies, a hemorrhagic fever like Ebola but spreads by the mosquito bites like Zika. In 31st of August, 2016 a 4 hour long emergency meeting took place by the Emergency Committee (EC) regarding Yellow Fever, World Health Organization (WHO) and highlighted as an emergency issue.

Yellow fever is not new issue to history of public health. The incidence of Philadelphia in 1793 can't be ignored where 5,000 people were officially registered as victim who lost their lives and more than 20,000 people left the place to save their future. Time took for this incidence was less than 4 months. It was the first officially recorder incidence of this fever. Then the British soldiers of Haiti in the 1790s, in Virginia (1855) where 3000 people were killed, the death of 20,000 people in Mississippi Valley in early 1878 all of these indicates that Yellow fever is not a very recent issue. People are dealing with this more than 200 years.

Yellow fever is called acute and systemic hemorrhagic fever as it shows the symptom rapidly (acute) and does affect the whole body through blood circulation (systemic). This occurs by a RNA virus named Flavivirus, which is carried by the vector (affected) mosquitoes. In some patients this disease causes jaundice thus called yellow.

The most notable point is yellow fever neither have any individual symptom nor any strong

diagnostic procedure to detect. Often it is confused with the other hemorrhagic fevers and influenza or malaria. The primary symptoms unveil within 3 to 4 days with fever, muscle pain, nausea and headache. These symptoms demolishes the same time. When the immune system of a person can't protect the body from this virus then it turns severe within 24 hours including severe fever, pain and jaundice. Organ damage also occurs like kidney and liver get damaged rapidly. At the end time the patient start blood vomiting with intolerable abdominal pain, which lead the patient to death within 7 to 8 days.

Though the vector of this virus is mosquito, it is divided in to three categories according to the mosquito's habitat and location. The first category is the urban yellow fever, which spreads by the mosquitoes of mostly dense populated area and this can be devastating and cause epidemic if the low or non immunity profiled people are not vaccinated. In this category the vector carries virus from person to person. Then comes the second category of this fever, this is intermediate yellow fever and carrier of this category can breed in both in forest and near household areas. These mosquitoes can carry the virus from monkey to human and vice versa. This is the category responsible for the outbreak in Africa. The last sub type is the Sylvatic yellow fever, this is not threatening for the domestic people rather the main victims are the travelers. As the mosquitoes of this type need wild environment to breed and targets mainly the primates like monkey for blood to incubate the eggs, thus this vector carries the virus from monkey to monkey and then monkey to human. This is thought to be the origin of spreading of the yellow fever.

The recent scenarios anyone can't say that people are safe from this fever. In this August WHO conducted the biggest Yellow fever vaccination campaign in Kinshasa, people republic of Congo, where more than 7 million people were vaccinated within 2 weeks. In the previous second meeting of the EC regarding yellow fever took some decision for the affected countries. There mainly focused further strengthening of surveillance and laboratory capacity, vaccination, communications, mobilization, mosquitoes control and case management measures, also pointed on reinforcement of the need for yellow fever vaccination of all travelers and migrants. Basically vaccination is the only way to get rid of this fever. Avoiding mosquito bites is another way to reduce the chance of yellow fever emergence. As there is no cure of yellow fever so prevention is the only way to avoid.

Now this is 21th century, the century of science and success, but did we noticed there are nearly 40 new diseases put their names on the book of public health and in last five years and WHO verified more than 1100 epidemic events worldwide. Now it is very easy to us to travel one place to another like in last 2006, about 2.1 billion airline passengers travelled. This cross cultural communication can turn an epidemic into pandemic only due to our lack of protection. Once yellow fever was the issue of North America and Africa but now different cases were recorded in Asia also. The time has come to think about health awareness, is it only based on hand wash and sanitary latrine issues or includes updated health knowledge to pave the future?

The writer studies at Department of Pharmacy

East West University. He can be reached at o.f.pavelewu@gmail.com