Dengue is a Reportable Disease in the United States

Some diseases in the United States, as in other countries, must be reported by physicians and hospitals to public health authorities as a means of establishing the baseline occurrence of the disease or condition. In this way any increase above baseline will promptly trigger a public health response. This is especially important with infectious diseases because it allows authorities to alert the community of an increased health risk and to take action to protect the public. In the US, CDC is responsible for collecting and analyzing these data. On the recommendation of the Council of State and Territorial Epidemiologists (CSTE), dengue viral infections, including dengue fever and dengue hemorrhagic fever, became reportable in January 2010.

In 2007, there were more than 10,500 cases of dengue reported among Americans residing in the continental United States and its territories. Many of these cases occurred among the 4 million US citizens that reside in Puerto Rico, the US Virgin Islands, and US Territories in the Pacific. However, there were several hundred cases among travelers returning to the continental US from dengue-endemic countries in the Caribbean, Mexico, Central and South America, and Asia and the Pacific. Clearly, dengue poses an increasing risk to public health in the United States.

Dengue was once common in the southern and eastern US, but few cases had occurred in the continental US for over 50 years until recently. Returning DENV-infected travelers can introduce a risk of local DENV transmission to areas of the US where one of the mosquito vectors for dengue (Aedes aegypti or Aedes albopictus) is present. With dengue as a reportable disease, there are now increased opportunities to investigate cases, to detect outbreaks earlier, and to have statistics that more accurately reflect reality.

The Council of State and Territorial Epidemiologists (CSTE), representing each state and territorial jurisdiction in the country, determines the list of reportable diseases. CSTE balances the resources demanded by reporting diseases against the potential public health benefit, and revises the list of reportable diseases periodically. Health care providers can refer to CDC’s dengue website (www.cdc.gov/dengue) for complete information on properly diagnosing and reporting dengue cases, including information on diagnostic sample submission. CDC laboratories in San Juan, Puerto Rico and Fort Collins, Colorado offer free diagnostic testing for specimens submitted by state, county, or city health departments.

CDC encourages providers to report all confirmed and presumptive cases of dengue to their local or State Health Department who will report them to ArboNET, a national electronic passive surveillance system for arboviral diseases. Dengue fever (DF) and dengue hemorrhagic fever (DHF), including the most severe form of DHF, dengue shock syndrome, are now reported on a weekly basis to the Morbidity and Mortality Weekly Report (MMWR) via the ArboNET surveillance system. Ultimately, adding dengue to the nationally reportable disease list allows state and CDC authorities to systematically review collected data to identify trends in disease importation. As a result, local communities can focus their attention on prevention, while local health care providers can be more vigilant in looking for the potential of dengue in their patients.

Resource