Te Marae Ora Cook Islands Ministry of Health Protocol

DENGUE CASE CLASSIFICATION	
Suspected	A clinically compatible case of dengue or severe dengue as defined below.
Probable	A clinically compatible case of dengue or severe dengue AND laboratory results indicative of probable infection as defined below OR epidemiologic link to a confirmed or probable case as defined below.
Confirmed	A clinically compatible case of dengue or severe dengue WITH confirmatory laboratory results as defined below.

1. Clinical description

Dengue - is defined by <u>fever</u> as reported by the patient or healthcare provider **AND** the presence of **one or more** of the following signs and symptoms:

- Nausea/vomiting
- Rash
- Aches and pains (e.g., headache, retro-orbital pain, joint pain, myalgia, arthralgia)
- Tourniquet test positive
- Leukopenia (a total white blood cell count of <5,000/mm³), or
- Any warning sign for severe dengue:
 - Abdominal pain or tenderness
 - Persistent vomiting
 - Extravascular fluid accumulation (e.g., pleural or pericardial effusion, ascites)
 - Mucosal bleeding at any site
 - Liver enlargement >2 centimeters
 - Increasing hematocrit concurrent with rapid decrease in platelet count

Severe dengue - is defined as dengue with any one or more of the following scenarios:

- Severe plasma leakage evidenced by hypovolemic shock and/or extravascular fluid accumulation (e.g., pleural or pericardial effusion, ascites) with respiratory distress. A high hematocrit value for patient age and sex offers further evidence of plasma leakage.
- Severe bleeding from the gastrointestinal tract (e.g., hematemesis, melena) or vagina (menorrhagia) as defined by requirement for medical intervention including intravenous fluid resuscitation or blood transfusion.
- Severe organ involvement, including any of the following:
 - Elevated liver transaminases: aspartate aminotransferase (AST) or alanine aminotransferase (ALT) ≥1,000 per liter (U/L)
 - Impaired level of consciousness and/or diagnosis of encephalitis, encephalopathy, or meningitis
 - Heart or other organ involvement including myocarditis, cholecystitis, and pancreatitis

2. Laboratory Criteria for Diagnosis

- Confirmatory:
 - Detection in serum or plasma of DENV NS1 antigen by immunoassay; or
 - Detection of DENV nucleic acid in serum, plasma, or peripheral blood mononuclear cells (white cells), by reverse transcriptase-polymerase chain reaction (RT-PCR) collected ≤ 5 days after illness onset, or
 - IgM anti-DENV seroconversion in acute (i.e., collected ≤5 days of illness onset) and convalescent (i.e., collected >5 days after illness onset) serum specimens; or
 - IgG anti-DENV seroconversion (primary infection) or ≥4-fold rise in titer in serum specimens collected at least 7 days apart (secondary infection)
- Probable:
 - Detection of NS1 antigen in serum (preferred), or plasma, by rapid test
 - Detection of dengue virus-specific IgG/IgM in serum or plasma, by rapid test

3. Epidemiological Link

 Association in time and place (e.g., household, family or school member, or neighbor) with a confirmed or probable dengue case.

