

2024 Health Advisory #26: Travel-Associated Infectious Diseases

- Providers should remain vigilant for travel-associated infectious diseases at this time of year.
 - Rates of travel-associated diseases typically spike in New York City (NYC) every September, after people return from their summer travels.
- For people who develop illness after spending time internationally, consider the travelassociated diseases most commonly reported in NYC:
 - Mosquito-borne diseases (dengue, malaria)
 - Enteric diseases (hepatitis A, typhoid fever, paratyphoid fever)
 - Tuberculosis
 - Diseases for which there are current global outbreaks (<u>measles</u>, <u>mpox</u>, <u>oropouche</u>)
- Provider resources and personalized travel advice for disease prevention are available on the Heading Home Healthy website.

September 18, 2024

Dear Colleagues,

New York City (NYC) providers should remain vigilant for travel-associated infectious diseases as people return from summer travel.

Every year, hundreds of people in NYC are diagnosed with infectious diseases after traveling to or coming from areas where diseases such as malaria, hepatitis A, and tuberculosis are endemic (Table 1). The NYC Health Department closely monitors travel-associated diseases related to current global outbreaks; in 2024, this includes measles, clade I mpox, dengue, and oropouche, among others.

Inquire about recent travel for any patient presenting with a febrile illness. Consider reportable travel-associated diseases in NYC patients who are ill with a recent history of travel (Table 2). Immediately isolate patients with suspected measles, MERS, mpox, or tuberculosis. After isolating patients appropriately, call the NYC Health Department to report suspected cases and to obtain additional guidance.

Inquire about upcoming travel during regularly scheduled appointments. Offer <u>vaccines</u> for travel-associated diseases, including hepatitis A and typhoid fever, for people traveling to endemic areas. Remind travelers to protect themselves from mosquito-borne diseases by wearing protective clothing and using <u>insect repellant</u>. Encourage all patients traveling internationally, regardless of destination, to remain up to date with their measles, mumps, and rubella (MMR) vaccine. This includes an early, extra dose of MMR for infants aged 6–11 months prior to international travel; children 12 months of age and older should receive two doses of MMR vaccine, separated by at least 28 days.

Provider resources and personalized travel advice are available on the <u>Heading Home Healthy</u> website, a collaborative effort supported by the Centers for Disease Control and Prevention (CDC). CDC also offers a <u>comprehensive list of endemic diseases by country</u>.

Ensuring all New Yorkers have access to health care is a top priority of the NYC Health Department. Refer your patients for free assistance to sign up for low- or no-cost health insurance by having them call 311, text CoveredNYC (SeguroNYC for Spanish) to 877877, or visit nyc.gov/getcoverednyc.

As always, we appreciate your continued collaboration to identify cases of these reportable diseases to help inform prevention and mitigation efforts.

Sincerely,

Celia Quinn, MD, MPH

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Deputy Commissioner

Division of Disease Control

Table 1: Number of NYC Residents Diagnosed with Common Travel-Associated Diseases, 2017–2024						-2024		
Disease	2017	2018	2019	2020*	2021*	2022	2023	2024 (as of 9/17/24)
Chikungunya	13	7	6	6	1	4	14	3
Dengue	32	22	108	34	19	59	169	159
Hepatitis A	45	23	29	14	12	20	40	25
Malaria	228	203	243	61	211	231	338	179
Measles	1	59**	605**	0	0	0	1	13
Middle East Respiratory Syndrome (MERS)***	0	0	0	0	0	0	0	0
Mpox Clade I***	0	0	0	0	0	0	0	0
Oropouche***	0	0	0	0	0	0	0	0
Paratyphoid fever	13	13	15	5	5	10	10	7
Tuberculosis	608	553	559	444	529	534	684	Data not available
Typhoid fever	36	39	30	15	11	35	42	20
Zika	148	19	13	1	0	0	0	0

^{*} The decrease in reported cases in 2020-2021 is likely a result of less international travel and changes in healthcare-seeking behavior during the COVID-19 pandemic.

^{***} These are emerging infections with previously limited transmission in the U.S., but are being monitored closely for importation.

Table 2: Infectious Diseases to Consider in International Travelers					
Disease	Regions at Highest Risk	Current Outbreaks	More Information		
Chikungunya	Caribbean, Central and South America, Africa, Asia, Pacific Islands	-	 CDC: Chikungunya NYC Health Department: Chikungunya 		

^{**} This includes cases associated with an outbreak in NYC which originated with an internationally imported case.

Dengue Hepatitis A	Caribbean (including Puerto Rico and the Dominican Republic, Central and South America, Africa, Middle East, Asia, Pacific Islands Caribbean, Mexico, Central and South America, Africa, Eastern Europe, parts of Asia	Dengue is the most frequently reported cause of acute febrile illness among returning U.S. travelers. Multiple dengue outbreaks are occurring globally, with a small number of locally acquired cases in the U.S., including Florida, California and Texas.	•	CDC: Dengue NYC Health Department: Dengue NYC Health Department: June 2024 Dengue Health Alert CDC: Hepatitis A NYC Health Department:
Malaria	Tropical or subtropical areas of: Africa, Asia, Central and South America	-	•	Hepatitis A CDC: Malaria NYC Health Department: Malaria
Measles	Global	Measles remains a common disease in many parts of the world including Europe, the Middle East, Asia, and Africa. There has been an increase in measles cases globally and within the U.S. in 2024.	•	CDC: Measles CDC: Global Measles Outbreaks CDC: U.S. Measles Outbreaks NYC Health Department: Measles
Middle East Respiratory Syndrome (MERS)	Countries in and near the Arabian peninsula (Bahrain, Iran, Jordan, Kuwait, Lebanon, Oman, Qatar, Saudi Arabia, United Arab Emirates, Yemen)	-	•	CDC: MERS NYC Health Department: MERS
Mpox Clade I	Democratic Republic of the Congo (DRC) and neighboring countries (Republic of the Congo, Angola, Zambia, Rwanda, Burundi, Uganda, South Sudan, Central African Republic)	The ongoing global mpox outbreak that began in 2022 is caused by clade II. An outbreak of clade I, which can cause more severe disease, began in DRC in 2023 and has since spread to other countries. There have been no reported cases of clade I mpox in the U.S. to date.	•	NYC Health Department: Aug 2024 Mpox Health Alert CDC: Mpox NYC Health Department: Mpox
Oropouche	South America, Caribbean (including Cuba and the Dominican Republic)	There has been an increase in Oropouche virus disease cases in South America and the Caribbean in 2024.	•	NYC Health Department: Aug 2024 Oropouche Health Alert CDC: Oropouche
Tuberculosis	Caribbean, Central and South America, Africa, Asia, Pacific Islands, Eastern Europe	Tuberculosis is endemic in many parts of the world and is a leading cause of death among all infectious	•	CDC: Tuberculosis NYC Health Department: Tuberculosis

		diseases globally. The number of tuberculosis cases in NYC increased 28% between 2022 and 2023.		
Typhoid Fever and Paratyphoid	Southern Asia (Bangladesh, India, and Pakistan), Africa,	There is an ongoing outbreak of extensively	•	CDC: XDR Typhoid Fever in Pakistan
Fever	Caribbean, Central and South America, Middle East	drug-resistant (XDR) typhoid fever in Pakistan.	•	CDC: Typhoid Fever and Paratyphoid Fever NYC Health Department: Typhoid Fever
Zika	Caribbean, Central and South America, Africa, Asia, Pacific Islands	-	•	CDC: Zika NYC Health Department: Zika