



Media Scanning & Verification Cell



Media alert from the Media Scanning & Verification Cell, IDSP-NCDC.

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6756	04.06.2022	06.06.2022	Bhavnagar Gujarat	www.newindianexpress.com/English https://www.newindianexpress.com/nation/2022/jun/04/two-cases-of-nose-bleed-fever-reported-in-india-one-diesnbsp-2461806.html
Title:	Two cases of nose-bleed fever reported, one dies in Bhavnagar, Gujarat			
Action By CSU, IDSP -NCDC	Information communicated to DSU – Bhavnagar, SSU- Gujarat			

India has reported two cases, including the death of a 55-year-old woman, from the deadly nose-bleed fever, which is witnessing an alarming rise in Iraq, where at least 18 people have died.

But, nose-bleed fever or Crimean-Congo haemorrhagic fever virus (CCHFV), which results in a high mortality rate of nearly 2 out of 5, hasn't led to an outbreak, as India is fully equipped to handle the virus that can lead to an epidemic, according to top scientists of Indian Council of Medical Research-National Institute of Virology (ICMR-NIV), which is a referral laboratory for the diagnosis of CCHF.

Both the cases were reported from Bhavnagar in Gujarat in March and April respectively, Dr Pragya Yadav, scientist and group leader of Maximum Containment Laboratory at NIV, Pune, told this newspaper.

The 55-year-old woman died of the viral disease, which causes rapid and severe internal and external bleeding in infected patients, including through the nose, in April.

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Integrated Disease Surveillance Programme (IDSP), National Centre for Disease Control,
Ministry Of Health & Family Welfare, Government of India

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A housewife, she used to look after livestock at her house and was later found to be infected following the tick bite. Later samples collected from her house found the livestock were infected too, Yadav said.

The first case in India was reported in March in a 39-year-old man, a construction worker, who survived. He used to rear livestock at his house.

"The two cases were quickly detected because of India's quick and active surveillance system," said Yadav, who was recently awarded for her work in developing Covid-19 vaccine, Covaxin. "The viral disease has been controlled and contained and there is no need to panic."

According to the World Health Organisation (WHO), the virus is primarily transmitted to people from ticks and livestock animals. Human-to-human transmission can occur resulting from close contact with the blood, secretions, organs or other bodily fluids of infected persons.

It is endemic in all of Africa, the Balkans, the Middle East and in Asia. It is difficult to prevent and treat the viral disease.

According to ICMR-NIV director Dr Priya Abraham, India is fully prepared to handle any CCHF outbreak. "We have done extensive research and surveillance to understand the disease burden and transmission dynamics," she said.

As India has reported outbreaks of CCHF since 2011, mainly from Gujarat and Rajasthan, testing and surveillance of the viral haemorrhagic fever have been an ongoing activity.

A total of 128 cases and 54 deaths have been reported from Gujarat and Rajasthan since 2011 in the country, said Yadav, who was among the initial scientific team that had helped in early isolation and strengthening of the contact tracing and containment of the disease when the first outbreak occurred in 2011.

The last serious outbreak was reported in 2019 when a maximum number of viral infections were reported from Gujarat and Rajasthan with a 50 per cent fatality rate.

Surveillance at the airport is very high, keeping in mind the unprecedented rate the virus has been spreading in Iraq since January. It was this vigil, which also helped Indian authorities to track two imported cases - one in 2016 (from Oman to Gujarat)

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and the second one in 2018 when an infected man from Dubai returned to Kerala, Yadav said.

The institute has been doing laboratory screening of CCHF for humans, animals and ticks.

The availability of BSL-4 facilities has also helped conduct “quick diagnosis of the suspected cases” across the country.

The institute has developed indigenous technologies that have not only helped in the timely diagnosis of suspected CCHF cases; but also rendered a great help in its surveillance of humans, livestock, and ticks in the country, said Abraham.

She said they also conducted a survey and found that the virus existed in a high proportion in the animal population in Gujarat for the past 30-40 years.

Later, another country-wide survey was conducted with the Indian Council of Agricultural Research (ICAR), where samples were taken from bovine, sheep and goats from 22 states and one union territory. The results also showed the prevalence of this virus in all these areas.

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