

# DENGUE

## PREVENTION AND HOME MANAGEMENT

(A READY RECKONER FOR PUBLIC)



### REPORT:

Every suspected / confirmed case of Dengue (NS1/IgM test) is taken seriously. Hence all public are advised to inform a positive report immediately to the respective Sub-Health Centre or PHC so that Sub-Health Centre team can visit and take measures to prevent transmission. Public are also requested to cooperate and aid the team in their visit and for measures undertaken

# TOGETHER IN THE FIGHT AGAINST DENGUE & MALARIA

## FOLLOW THIS RULE:

12 minutes at 12 noon for 12 weeks  
every Sunday empty any stagnant water  
in and around your house.  
Start this Sunday.



1. Dengue mosquitoes lay eggs in clean stagnant water and take 8-10 days to become an adult mosquito.
2. Empty stored/unused/stagnant water every 7 days to break the mosquito life cycle and make sure mosquitoes don't breed in buckets, bowls, animal dishes, flower pots, vases etc.
3. Dengue mosquitoes are day biters: can infect 20-25 people at a time for each meal.
4. Dengue mosquito can fly for a distance of 200mtrs and hence infect people within that distance. These mosquitoes usually thrive indoors to protect themselves from wind.
5. If you or your family member has contracted Dengue, it has probably come from your own or surrounding houses.
6. In case of fever take only paracetamol and drink plenty of fluids; avoid pain killers. Visit the nearest Sub-centre / PHC for a blood test/further advice as soon as possible.

**PLEASE SHARE THIS INFORMATION WITH EVERYONE**

# FACTS OF DENGUE SPREAD

- A single infected dengue (Aedes) mosquito lays 100-200 eggs at a time preferably in **clean stagnant water**, that in 7 days can release them as infected mosquitoes (complete its cycle from egg to an adult mosquito). It searches for small domestic/peridomestic containers with clean water to lay eggs. It lays eggs after 2-3 days of a full blood meal. Average Life Span of Female Aedes Aegypti mosquito is 30 days and Aedes Albopictus is about 8 weeks. During the rainy season the survival is longer. They need a blood meal every 72-96 hours and lay eggs multiple times. If the dengue Aedes mosquito is infective, all new mosquitoes produced from her eggs will also be infected Aedes mosquitoes which will spread the Dengue virus infection even without biting an infected patient. (**Transovarial transmission**) In this way dengue virus maintains itself in nature through mosquitoes. The virus is found in the salivary glands of the mosquitoes and gets transmitted to humans when it bites<sup>1</sup>. The Aedes mosquito can lay eggs in stagnant muddy waters too.
- Aedes eggs can withstand desiccation (without water) and can remain **dormant for more than one year** in dry conditions. When wind blows they can get transferred to water and if those are 'infected eggs' they will breed into infected mosquitoes. Hence Dengue cases can start even without an infected patient, at multiple locations, once the eggs come in contact with water in the early rains. And once started, till receptacles are cleared of water/rains are over, the dengue epidemic continues. This is a major hurdle in dengue prevention & control<sup>1</sup>. **Hence ONLY use of ANTI-LARVAL SPRAYING (Which anyhow has to be done every 7 days in the same container/place or is ineffective) and RANDOM SPACE FOGGING WITHOUT ACD is not of much help in the prevention of transmission.**

- *Aedes aegypti* mosquito breeds almost entirely in domestic man-made water receptacles found in and around households, **water storage containers, water reservoir, overhead tanks, desert coolers, unused tyres, coconut shells, disposable cups, unused grinding stone, industrial and domestic junk, construction sites, etc.** *Ae. albopictus* prefers natural larval habitats which include **tree holes, latex collecting cups, paper cups, leaf axils, bamboo stumps, coconut shells, etc**<sup>1</sup>.
- Hence conducting **Anti-Container Drives (ACD) every week (Every SUNDAY)** in and around your house/Vaddo to destroy the breeding sites is the **only proven easiest way** to curb the spread of Dengue.
- So carry out **weekly SUNDAY ACD** in your locality/around the house to remove all receptacles that is basically responsible for the spread of dengue.
- **Fogging** should be used only to target the infected mosquito at its resting place (in dark and indoor locations i.e. under the bed/table/chair/behind cupboard in the house, etc .. and other resting places around the house) before it lays eggs. **Indiscriminate fogging** in the air and on trees/plants/shrubs **has to be avoided at all cost as it can cause resistance to the insecticide.** On the contrary, the shrubs/weeds should be cut. Fogging should be avoided as it may **induce uneasiness** for the **breathing** of the patients<sup>2</sup>.



Hence immediate intimation of the **DENGUE POSITIVE REPORT TO THE PRIMARY HEALTH CENTRE/SUB-HEALTH CENTRE** is of utmost importance for the Health Authorities to carry out the needful measures is a must.



# ONLY PUBLIC INTERVENTION AND COMMUNITY PARTICIPATION CAN CURB THE SPREAD

Due to the increasing cases of Dengue in our Villages it is requested....

- Spend just 12 minutes of your time every Sunday at 12 Noon for 12 weeks (once a week ACD (Anti Container Drive) to empty all the receptacles specially the small ones/hidden ones eg. coconut shells, broken containers, tyres, cups, aluminium foils etc. in and around your house and neighbourhood and turn them upside down. This prevents mosquito eggs from turning into adult mosquitoes (Life Cycle of 7-8 days). Anything that can contain even 5ml water is enough to lay eggs. Have to search for these breeding sites in your surroundings.
- Collect the unwanted containers that can collect water and put in a garbage bag and hand them over to the garbage collector.
- Store water for home use in big barrels with a mosquito proof lid and not multiple small containers/buckets as mosquitoes easily lay eggs there.

**Please do the above for at least during the 3 months of the transmission season (July-September) so that we make/keep our Villages and Goa, Dengue free.**

# HOME MANAGEMENT OF DENGUE

If you get fever any of these days there are only 3 things required to be done...



- Take maximum rest and get good sleep.
- Hydrate yourself with plenty of fluids...at least 4-5 litres

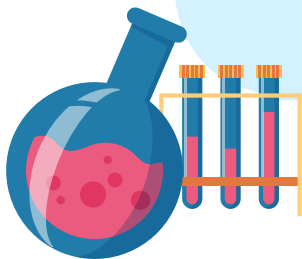
per day eg. Lime juice | ORS | Canji water | Fresh fruit juice | Coconut water | Soup etc ... besides plain water.



*(Easy to do it: Each time you visit the washroom.. drink a glass or 2 of fluids.)*

- If possible sleep under a bednet.
- Get Tested

Any Sub-Health Centre or PHC does the test for Malaria and Dengue. Fever starts 5-7 days after the mosquito bite. The whole disease lasts for 6 days with the first day of Fever as Day 1.



Days 3-6 are the most critical days of the course of illness after fever leaves the patient where in rest, oral fluids and checking for PCV (Packed Cell Volume) and platelets is of utmost importance.

# WHAT MAKES DENGUE SERIOUS?

Dengue gets serious in a short period of time only due to dehydration in the body that it causes. Drop in platelets don't kill unless it touches 20,000/cmm.

**BUT INTERNAL DEHYDRATION SURELY KILLS...** monitored only by doing serial/regular blood test for **PCV/HCT**.

**PCV/HCT the most important test** in Dengue Management.

A rise in PCV/HCT **more than 45** is of **serious** concern. By good oral hydration (4-5 lts of oral fluids) it has to be kept below 45.



## SEE THE DOCTOR

Visit a doctor or the Primary Health Centre as soon as possible for proper evaluation.

# DANGER SIGNS

As a few cases can get serious and require hospitalisation watch for:

- Persistent fever for more than 5 days
- Severe throbbing headache, not relieved with paracetamol
- Severe abdominal pain
- Severe vomiting
- Refusal to take orally/ poor intake
- Not passing urine for 12 hours.
- Tiny pin point sized bleeding / rash on the skin
- Bleeding from any other site in the body  
eg: nose / gums / red eyes/ blood in urine or stools/heavy menstrual cycles
- Signs of dehydration like dry eyes / dry tongue / dry lips
- Severe weakness and fatigue
- Black coloured stools
- Constant crying, restlessness, seizures
- Excessive Thirst (dry mouth)
- Difficulty in breathing
- Drowsiness or irritability, altered sensorium and behavioural changes
- Pale, cold or clammy skin

*(If any of the above signs... HOSPITALISATION IS A MUST)*



A drop in body temperature



Intense and continuous abdominal pain



Dizziness



Persistent vomiting



Drowsiness



Bleeding from gums or nose, blood in vomit, urine or stool



Restlessness



# ESSENTIAL DRUGS

THE BEST WAY TO BRING DOWN FEVER IS WITH PLENTY OF ORAL FLUIDS (4-5 lts/day).

- Only **PARACETAMOL** for fever/headache/Bodyache
- **DO NOT TAKE ASPIRIN or BRUFEN** or any **PAINKILLER TABLETS** as they can reduce platelets drastically in dengue.



## DIET

Easily digestible semisolid foods rich in carbohydrates, proteins and fruits, tizaan...a must.



# डेंग्यू मलेरिया आड एकवटीत झूज

हो नेम पाळचो:

12 मिनीट 12 वरांचेर 12  
आठवडे प्रत्येक आयतरा तुमचे  
भोवतणेचें सांठिल्लें उदक  
रिकामी करचे.



1. नितळ सांठिल्लया उदकान डेंग्यूची जळारां तांतया घालतात आनी सुमार 8-10 दिसानी हया जळारांची पूर्ण वाड जाता.
2. दर सात दिसांनी सांठयल्लें उदक रिकामी करचें आनी बालदी, कुंडी, आनी आयदनानी जळारां तांतया घालीनात हाची खात्री करुन घेवची.
3. डेंग्यूची जळारां दिसार्ची चाबतात । सुमार 20-25 लोकांक एक फावटी डेंग्यू दुयेंसाची लागण जावंक शकता.
4. डेंग्यूची जळारां सुमार 200 मीटर पर्यंत उडूंक शकतात। हाकाच लागून या अंतरार रावपी लोकांक हया जळारां पासून धोको उप्रासूं येता। वारयापासून आपलें रक्षण करपाक ही जळारां बंद आशिल्लया सुवातीनी रिगतात.
5. घरांतल्या खंयच्या मनशाक जर डेंग्यूची लागण जाल्ली आसत तर ती तुमच्याच वा भोंवतणच्या घरांपासून जाल्ली आसूं येता.
6. जोर आयलो जाल्यार पॅरासीटमोल घेवची, भरपूर उदक पियेवचे, दुखीचीं कसलीच वखदा घेवची न्हय आनी लागींच आशिल्लया भलायकी केंद्रान वचून रगत तपासून घेवचें / जांव वैजकी सल्लो बेगोबेग घेवची.

ही म्हायती चडान चड लोकांमेरेन पावोवची

# TOGETHER IN THE FIGHT AGAINST DENGUE & MALARIA

Kind Request:

Please pass on this information far and wide  
along with the pictures of the handbill for  
Dengue Prevention.



**Ref.:**

1. *National Guidelines for Clinical Management of Dengue Fever 2023.*
2. *Operational-Guidelines-Hospitals-to-Conrol-Aedes-Breeding-2022*