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The incidence of dengue and its more severe form dengue haemorrhagic fever (DHF) is increasing in the Region of the Americas. After the first significant DHF epidemic in Cuba in 1981, and subsequently in the last decade, we have seen a steady increase in DHF (Figure 1). Unfortunately, the trend reflects that which occurred in Asia 30 years ago.

In view of this during the 43rd Directing Council of the Pan American Health Organization (PAHO), in September 2001, the Ministers of Health of all countries in the Americas, unanimously approved a Resolution to address dengue and dengue haemorrhagic fever. The Resolution highlights the need for a long-term change in health management, adopting strongly-integrated actions for dengue control and prevention at all levels. The Resolution also urges the incorporation of social communication and community participation in the national programmes, with a focus on both individual and collective behaviour change.

As a result, the Resolution encourages national programmes to move from the traditional vector control approach of actions (using insecticides) to focusing on community actions emphasizing "ownership" of dengue control and prevention. Social communication, health education, environmental management of water supply and disposal, as well as solid waste management, form the basis of the new generation of prevention and control programmes on dengue.

The CD 43.R4 Resolution agreed to by the Directing Council essentially concentrates on urging the Region’s ministries of health to promote inter- and intrasectoral coordinated actions, and to adopt environmental measures in the areas of urban planning and services. Coordinated environmental actions and partnership with...
New Generation of Dengue Prevention and Control Programmes:

Figure. Cases of DHF in the Americas, <1980 to 2001

Agencies and local government can provide sustainable activities to build proper systems for the disposal of solid waste (including discarded automobile tyres) and to increase regular water supply and refuse collection in order to reduce sources of Aedes aegypti. In addition, under the Resolution, health ministries are encouraged to strengthen the important component of social communication and community participation. Thus the Resolution aims to further promote the practice of good health behaviour, which will contribute to personal protection and reduce breeding sites in and around the home, the community, the workplace, and recreational sites.

PAHO is convinced that strengthening the social element of the programme while maintaining the other components will minimize the threat of an increase of dengue haemorrhagic fever and the reappearance of urban yellow fever in the Americas. PAHO is also conscious that the transition from vertical to horizontal programmes is a long-term process that will affect determinant and/or risk factors along the way, most likely in five to seven years.

Previous dengue control programmes have not proved successful or sustainable because they are expensive, vertically-structured, insecticide-based and include community participation or health education only in case of emergency ("epidemic windows"). Implementing the new generation of dengue prevention and control programmes will be an opportunity to change the similar trend that dengue in the Americas shares with the region of South-East Asia, where hundreds of thousands of cases of dengue haemorrhagic fever occur every year.
Other elements included in the Resolution are the delivery of appropriate care to the patients inside and outside the formal health sector, including the recognition of the disease, the diagnosis and adequate response (with special attention to initial care in the home and knowledge of basic measures of treatment).

The Resolution also encourages the standardization of case-reporting throughout the Region to facilitate a better exchange of information concerning dengue outbreaks. Emphasis is on reporting the nature of the circulating viruses, clinical cases (probable cases), laboratory-confirmed cases, cases of dengue haemorrhagic fever, and deaths due to dengue haemorrhagic fever/dengue shock syndrome. The Resolution further encourages the identification of serotypes and the implementation of preparatory emergency mechanisms to cope with outbreaks and epidemics.

To confront the challenges that dengue, dengue haemorrhagic fever and the possible reurbanization of yellow fever pose to the Region, it was resolved that PAHO continue to allocate resources within the Office, as well as in technical cooperation provided to the countries to promulgate work and staff training related to dengue prevention and control.

PAHO, which functions as the Regional Office of the World Health Organization (WHO) in the Americas, was established officially in 1902 and is the oldest health organization in the world, celebrating its 100th anniversary this year. PAHO works with all countries of the Americas to improve health and elevate standards of living.

References