

Clinical Characteristics and Outcomes in Patients 65 Years of Age or Older, Infected with Dengue Virus in Colombia

Fernando Rosso, MD, MSC^{1,2,3} Robinson Pacheco, MSC², Sara Vanegas³, Sarita Rodríguez, MD²

¹Infectious Diseases, Fundación Valle del Lili, Cali, Colombia, ²Clinical Research Center, Fundación Valle del Lili, Cali, Colombia, ³Universidad ICESI, Cali, Colombia

Fernando Rosso, Fundación Valle del Lili, Av. Simón Bolívar. Carrera 98 No. 98-49, Santiago de Cali, Colombia. (572) 3319090 (7105) Frosso07@gmail.com

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Background

Little is known about dengue's epidemiology and clinical features in elderly patients. Nevertheless it is presumed that severity, complications and mortality are higher in this age group. The aim of this study was to describe the incidence of dengue infection in elderly with acute febrile syndrome, and to describe the complications and severity of clinical presentation in Cali, Colombia

Results

A total of 215 febrile elderly patients were assessed, of which 37 patients (17.2%) were found to have dengue. Median age was 71 years, 48.7% were female. Patients with at least one comorbidity were 97.3%. Serological tests were 51.4% positive for NS1 Ag, 27% for IgM and 54.1% for IgG; 37.8% were primary infections, and 62.2% were secondary infections. Most frequent symptoms at admissions were: Fever 91.9%, myalgia 81.1%, headache 48.6%. Severity of infection was categorized according to World Health Organization (WHO) criteria: dengue in 62.2%, dengue with warning signs in 16.2%, and severe dengue in 21.6%. Nearly fifty seven percent (56.7%) were admitted to hospital, and 21.6% were admitted to intensive care unit (ICU). None died. Median hospital days of were 4 (1-8) for those admitted to general wards, and 2.5 days (0.5-10) for those requiring ICU admission.

Estudio	García-Rivera 2003 n= 822	Ing-Kit Lee 2008 n=66	D,C,Lye 2010 n=66	Ching-Chi Lee MD 2013 n=31	Emily K, Rowe April 2014 n = 295	Rosso et al 2015 n=37
Common symptoms rather to consult						
Fever	118 (97,5)	60 (90,9)	61 (92)	29 (93,5)	273 (92,5)	34 (91,9)
Myalgia	-	12 (18,2)	40 (61)	6 (19,4)	5495 (82,1)	30 (81,1)
Headache	-	30 (45,4)	40 (61)	7 (22,6)	3287 (49,1)	18 (48,6)
Rash	27 (25,7)	10 (15,2)	25 (38)	2 (6,5)	3186 (47,6)	11 (29,7)
Anorexia	-	-	23 (35)	-	-	10 (27)
Arthralgia	-	7 (10,6)	40 (61)	1 (3,2)	-	10 (27)
Warning signs						
Severe abdominal pain	-	22 (33,3)	10 (15)	-	66 (22,4)	14 (37,8)
Sudden decrease in temperature / hypothermia	-	-	-	-	-	10 (27)
Persistent vomiting	-	11 (16,7)	24 (36)	-	0 (0)	6 (16,2)
Postural hypotension	-	16 (24,2)	0	-	-	5 (13,5)
Fluid accumulation	2 (2,2)	52 (78,8)	0	-	4 (1,4)	11 (29,7)
Hemorrhagic manifestations	-	56 (84,8)	2 (3)	6 (19,4)	37 (12,5)	8 (21,6)
Gastrointestinal bleeding	8 (8,1)	21 (32)	0	-	40 (0,6)	2 (5,4)
Hematuria	3 (2,9)	7 (10,6)	0	-	5 (1,7)	4 (10,8)
Chronic diseases						
Hypertension	-	35 (53)	32 (48)	11 (35,3)	157 (53,2)	22 (59,5)
Hypothyroidism	-	-	-	-	-	11 (29,7)
Mellitus diabetes	-	19 (28,8)	11 (17)	8 (25,8)	64 (21,7)	9 (24,3)
Heart disease	-	2† (3)	4 (6)	4 (12,9)	-	9 (24,3)
Malignancy	-	4 (6)	-	3 (9,7)	4 (1,4)	8 (21,6)
Clinical outcomes						
Shock	0	7 (10,6)	-	0 (0)	6 (2,0)	2 (5,4)
Death	3 (4,3)	5 (7,6)	0	-	0 (0)	0(0)
Hospital stay	-	7,9 ± 4,9	4 (3, 8)	7,4 ± 5,8	-	4 (1-8)
Hospitalization in ICU	-	-	0	2 (6,5)	2 (0,7)	8 (21,6)
Stay ICU	-	-	-	0,7 ± 2,8	-	2,5 (0,5-10)

Methods

We conducted an observational and descriptive study in a cohort of elderly patients with serological diagnosis of dengue in Cali, Colombia

Conclusion

Dengue infection in endemic areas is expected to happen during childhood or earlier in adult life. However, we found in our study a high proportion of elderly patients (almost 20%), and of them more than a half were classified as severe infection requiring hospitalization. However no one died. These findings could be related with co-circulation of different strains. In hyperendemic regions as Colombia, dengue infections will be present in elderly patients. Adequate management prevents dengue mortality

References

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