Viral Hemorrhagic Fever

Merlin disease code=6591 Crimean-Congo Hemorrhagic Fever
Merlin disease code=6592 Ebola Hemorrhagic Fever
Merlin disease code=6593 Guanarito Hemorrhagic fever
Merlin disease code=6594 Junin Hemorrhagic Fever
Merlin disease code=6595 Lassa Fever
Merlin disease code=6596 Lujo Virus
Merlin disease code=6597 Machupo Hemorrhagic Fever
Merlin disease code=6598 Marburg Fever
Merlin disease code=6599 Sabia-Associated Hemorrhagic Fever
Case report form (CRF): None
CONTACT BUREAU OF EPIDEMIOLOGY

Background
Diagnosis of viral hemorrhagic fever (VHF) must be made by a physician. Common presenting complaints are fever, myalgia, and prostration, with headache, pharyngitis, conjunctival injection, flushing, and gastrointestinal symptoms. This may be complicated by spontaneous bleeding, petechiae, hypotension and perhaps shock, edema, and neurologic involvement.

VHF can be caused by:
- Ebola virus
- Marburg virus
- Crimean-Congo hemorrhagic fever viruses
- Lassa virus
- Lujo virus
- New world arenaviruses (Guanarito, Machupo, Junin, Sabia viruses)

Clinical criteria for case classification
Both of the following:
- Fever >40 °C and
- One or more of the following clinical findings:
  - Severe headache, or
  - Muscle pain, or
  - Erythematous maculopapular rash on the trunk with fine desquamation 3–4 days after rash onset, or
  - Vomiting, or
  - Diarrhea, or
  - Pharyngitis (arenaviruses only), or
  - Abdominal pain, or
  - Bleeding not related to injury, or
  - Retrosternal chest pain (arenaviruses only), or
  - Proteinuria (arenaviruses only), or
  - Thrombocytopenia.
Laboratory criteria for case classification
One or more of the following laboratory findings:
- Detection of VHF viral antigens in blood by enzyme immunoassay (EIA) antigen detection, or
- VHF viral isolation in cell culture for blood or tissues, or
- Detection of VHF viral genes using reverse transcriptase polymerase chain reaction (RT-PCR) from blood or tissues, or
- Detection of VHF viral antigens in tissues by immunohistochemistry (IHC).

Epidemiologic criteria for case classification
One or more of the following exposures in the three weeks before onset of symptoms:
- Contact with blood or other body fluids of a patient with VHF, or
- Residence in or travel to a VHF endemic area, or
- Work in a laboratory that handles VHF specimens, or
- Work in a laboratory that handles bats, rodents, or primates from endemic areas, or
- Exposure within the past 3 weeks to semen from a confirmed acute or convalescent case of VHF within the 10 weeks of onset of symptoms.

Case classification
Confirmed:
A clinically compatible illness in a person with laboratory evidence.

Suspect:
A clinically compatible illness in a person with any of the epidemiologic linkage criteria.

Criteria to distinguish a new case from previous reports
Not applicable.

Comments
Detection of a possible case requires immediate notification of the Bureau of Epidemiology which is available 24/7 at (850) 245-4401.

Specimens from all cases must be sent to the Bureau of Public Health Laboratories for confirmation by the CDC.

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