

Health Notification

Importation of Infectious Diseases: Public Health Recommendations to Manage the Returning Traveler

August 21, 2019

International travel increases the risk of contracting infectious diseases that can then be introduced locally. Vaccine preventable diseases (measles, mumps, influenza), severe respiratory pathogens (tuberculosis, MERS-CoV) and vector-borne infections (malaria, yellow fever, Zika, dengue) circulate around the world and could be imported to Philadelphia during the incubation period before patients become symptomatic. The Philadelphia Department of Public Health (PDPH) is issuing this health notification during the summer travel season to remind providers to always take a travel history, maintain familiarity with infectious diseases potentially acquired abroad, order appropriate diagnostic tests, and implement infection control actions to limit spread.

SUMMARY POINTS

- Always take a patient's travel history.
- Be familiar with infectious disease outbreaks and exposure risks abroad to assist diagnosis and management.
- Consider MERS-CoV in patients returning from the Hajj with acute respiratory infection.
- Report travel-related infections to PDPH at 215-685-6740 (after hours: 215-686-4514).

Health Risks and Current Outbreaks

- The Hajj, an annual religious pilgrimage to Mecca in Saudi Arabia, recently occurred from August 9-14, 2019. Over 2 million Muslims, including over 10,000 Americans, make the pilgrimage each year. Health departments have previously seen an increase in patients under investigation (PUIs) for the Middle East Respiratory Syndrome coronavirus (MERS-CoV) two to three weeks following the completion of Hajj as travelers return to the US. Consider MERS-CoV when evaluating patients who present with acute respiratory infection (fever and cough) with a recent history of travel to the Arabian Peninsula or exposure to a recent symptomatic traveler returning from that region. Other more common viral pathogens should be considered and tested for as well (influenza).
- Large measles outbreaks are ongoing in several countries in Europe, Asia, the Pacific and Africa and in several states [across the U.S.](#) where there are currently 1,203 cases. Domestic outbreaks have been linked to returning travelers who brought measles back from other countries. Exposure may also occur during travel to US states experiencing measles outbreaks.
- A large [Ebola virus outbreak](#) is ongoing in the Democratic Republic of Congo with 2671 cases as of July 28th. Effective control is challenging due to insecurity in the region. The World Health Organization has declared the outbreak a Public Health Emergency of International Concern. Despite this designation, few cases have been identified outside of the affected region in the DRC and the risk to returning Philadelphia travelers is very low unless travel itineraries include Ebola affected communities (North Kivu region, DRC).

Important Actions

- Routinely assess travel history especially for patients with fever, rash, GI or severe respiratory illness.
- Assess travel history for household members and other close contacts to identify additional exposure risk.
- Review travel itinerary and exposure history, timing of illness onset in relation to travel, illness severity, medical history, and pre-travel immunizations or prophylaxis.
- Order appropriate diagnostic tests. Contact PDPH at 215-685-6742 for coordination of specialized and confirmatory testing not routinely available through commercial laboratories.
- Report suspect and confirmed notifiable conditions to PDPH promptly. During business hours (8:30 – 5:00), call 215-685-6740. After hours, call 215-686-4514 and ask for Division of Disease Control on-call staff.

Essential Resources:

- The Centers for Disease Control and Prevention (CDC) maintains [Travel Health Notices](#), searchable by disease or country.
- For guidance on approach to returning travelers, click [here](#).