

YELLOW FEVER FREQUENTLY ASKED QUESTIONS

What is yellow fever?

- Yellow fever is an acute illness caused by the yellow fever virus

Where is the yellow fever virus found?

- The yellow fever virus is found in tropical and subtropical areas in South America and Africa
- It is NOT found in Jamaica

How is yellow fever spread?

- The virus is spread through the bite of infected mosquitos, such as the *Aedes aegypti*
- Mosquitoes may acquire the virus for life by biting either infected monkeys or infected humans
- The virus is **NOT** spread from person to person

How soon do people get sick after being bitten by an infected mosquito?

- The incubation period or the time from infection to illness is usually three to six (3-6) days

What are the signs and symptoms?

First phase (acute):

- Symptoms may be mild and go unnoticed
- Symptomatic illness begins with fever, chills, headache, backache, general muscle pain, upset stomach, and vomiting
- Most patients improve and their symptoms disappear after three to four (3-4) days

Second phase (toxic):

- Approximately, 15-25% of patients enter a second, more toxic phase within 24 hours of the initial remission
- As the disease progresses, weakness, jaundice, bleeding of the gums, hematemesis (vomiting of blood) and blood and protein in the urine may occur

- Bleeding occurs because of problems with the clotting of blood. This is why yellow fever is referred to as a “haemorrhagic fever.”
- Illness usually lasts two (2) weeks, after which 20-50% die, the remainder of patients recovers
- Persons who recover from yellow fever have lifelong immunity

How is yellow fever diagnosed?

- Diagnosis is usually based on blood tests that look for virus or antibodies that a person's immune system makes against the viral infection

Who should be tested?

- Any person who develops jaundice within two (2) weeks of a fever, and has recently returned from travel or transited an area where there is risk of yellow fever transmission or has been in contact with a return traveller, should be tested for yellow fever

What are the complications?

- Liver and renal failure
- Death

How is yellow fever treated?

- There is no specific treatment for yellow fever
- If possible, patients with yellow fever should be hospitalized for treatment of their symptoms and closely observed by healthcare workers
- Rest, fluids, and use of pain medications and fever-reducing medications may relieve symptoms of fever and aching (acetaminophen / paracetamol)
- Certain medications should be avoided, such as aspirin or other non-steroidal anti-inflammatory drugs (i.e. ibuprofen and naproxen), because these may increase the risk for bleeding
- Any superimposed bacterial infection should be treated with an appropriate antibiotic

How can yellow fever infection be prevented?

1. Vaccination

- The yellow fever vaccine is safe and affordable, and a single dose provides life-long immunity against the disease

2. **Use insect repellent.** When you go outdoors, use an EPA-registered insect repellent such as those containing DEET, picaridin, IR3535, or oil of lemon eucalyptus on exposed skin. Even a short time outdoors can be long enough to get a mosquito bite.
3. **Wear proper clothing to reduce mosquito bites.** Wear long-sleeves, long pants and socks when outdoors. Mosquitoes may bite through thin clothing, so spraying with an EPA-registered repellent will give extra protection
4. **Be aware of peak mosquito hours.** The peak biting times for many mosquito species is dusk to dawn. However, *Aedes aegypti*, one of the mosquitoes that transmits yellow fever virus, feeds during the daytime. Take extra care to use repellent and protective clothing during daytime as well as during the evening and early morning.
5. Control of *Aedes aegypti* mosquitoes
 - Mosquito control includes identifying and eliminating mosquito breeding sites and killing adult mosquitoes

FREQUENTLY ASKED QUESTIONS RELATED TO THE VACCINE

Who should get the vaccine?

- Yellow fever vaccine is recommended for people age nine (9) months or older who are traveling to, transiting through, or living in areas at risk for yellow fever virus transmission

Who should not get yellow fever vaccine?

- Infants younger than six (6) months of age should not get the vaccine. In addition, anyone with a severe allergy to any part of the vaccine, including eggs, chicken proteins, or gelatin should not get the vaccine
- Anyone who has had a severe reaction to a previous dose of yellow fever vaccine should not be vaccinated again.

If you have any of the following conditions, your healthcare provider can help you decide whether you can safely receive the vaccine:

- HIV/AIDS or other disease that affects the immune system
- Weakened immune system as a result of cancer or other medical conditions, transplant, or drug treatment (such as steroids, chemotherapy, or others that affect immune function)
- Thymus disorder
- Adults 60 years of age and older
- Infants 6 - 8 months of age
- Pregnant women and nursing mothers

When should the vaccine be administered?

- It should be given at least ten (10) days prior to travel

What are the side effects of yellow fever vaccination?

- Reactions to yellow fever vaccine are generally mild
 - They can include mild headaches, muscle aches, and low-grade fevers
 - There have been reports of extremely rare but serious events following yellow fever vaccination (life-threatening allergic reaction, disease affecting the nervous system, and disease affecting certain internal organs)

How long should a woman wait to conceive after receiving a yellow fever vaccination?

- Yellow fever vaccination has not been known to cause any birth defects when given to pregnant women. Yellow fever vaccine has been given to many pregnant women without any apparent adverse effects on the foetus. However, since yellow fever vaccine is a live virus vaccine, it poses a theoretical risk. While a two (2) week delay between yellow fever vaccination and conception is probably adequate, a one (1) month delay has been advocated as a more conservative approach. If a woman is inadvertently or of necessity vaccinated during pregnancy, she is unlikely to have any problems from the vaccine and her baby is very likely to be born healthy