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ORIGINAL ARTICLE

Yellow Fever Disease: Pattern of Presentation of Patients in Federal Medical Centre, Asaba, Delta State, Nigeria

La Maladie de la Fièvre Jaune : Schéma de Présentation des Patients au Centre Médical Fédéral, Asaba, État du Delta, Nigeria

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ABSTRACT

BACKGROUND: Yellow fever has become a re-emerging disease of public health importance, especially in endemic areas like Nigeria and South America. Since 2017, Nigeria has been riddled with yearly outbreaks of the disease despite the availability of a safe and effective vaccine which was introduced into the country's Expanded Programme on Immunization in 2004. We aim to describe the presentation pattern of patients with the disease who were managed in the 2020 outbreak that occurred in Delta State.

METHODS: Data were collected from the case notes of 27 patients managed for the disease using a proforma to describe their symptoms, signs, treatment measures, and outcomes. This was a facility-based retrospective cross-sectional record review carried out in the hospital's isolation ward. Data were analyzed with IBM Statistical Product and Service Solutions version 21 and presented as percentages, mean, and standard deviation.

RESULTS: Most patients were male 20 (74.1%) and the mean age of patients was 26.4 ± 13 years. The most common presenting symptoms recorded among patients were generalized weakness 27 (100%), closely followed by fever 25 (92.6%), vomiting 20 (74.1%), and jaundice 18 (66.7%). Eleven (40.7%) had blood transfusion while only 2 (7.4%) had oxygen therapy.

CONCLUSION: Young adults and males were most affected, and the most common presentation was generalized weakness closely followed by fever. A high index of suspicion of yellow fever infection by healthcare workers will aid in the presumptive diagnosis and care of patients. **WAJM 2023; 40(4): 428–434.**

Keywords: Yellow fever, clinical presentation, Federal Medical Centre Asaba, Nigeria.

RÉSUMÉ

CONTEXTE: La fièvre jaune est devenue une maladie réémergente d'importance pour la santé publique, en particulier dans les régions endémiques comme le Nigéria et l'Amérique du Sud. Depuis 2017, le Nigéria est confronté à des flambées annuelles de la maladie malgré la disponibilité d'un vaccin sûr et efficace qui a été introduit dans le Programme élargi de vaccination du pays en 2004. Notre objectif est de décrire le schéma de présentation des patients atteints de la maladie qui ont été pris en charge lors de l'épidémie de 2020 qui s'est produite dans l'État du Delta.

MÉTHODES: Les données ont été recueillies à partir des notes de cas de 27 patients pris en charge pour la maladie, à l'aide d'un proforma décrivant leurs symptômes, signes, mesures de traitement et résultats. Il s'agissait d'un examen transversal rétrospectif des dossiers effectué dans le service d'isolement de l'hôpital. Les données ont été analysées avec IBM Statistical Product and Service Solutions version 21 et présentées sous forme de pourcentages, de moyenne et d'écart-type.

RÉSULTATS: La plupart des patients étaient des hommes 20 (74,1%) et l'âge moyen des patients était de $26,4 \pm 13$ ans. Les symptômes les plus fréquents enregistrés chez les patients étaient une faiblesse généralisée 27 (100%), suivie de près par la fièvre 25 (92,6%), les vomissements 20 (74,1%) et la jaunisse 18 (66,7%). Onze patients (40,7 %) ont subi une transfusion sanguine et seulement 2 (7,4 %) une oxygénothérapie.

CONCLUSION: Les jeunes adultes et les hommes étaient les plus touchés, et la présentation la plus courante était une faiblesse généralisée suivie de près par la fièvre. Un indice élevé de suspicion d'infection par la fièvre jaune de la part du personnel de santé facilitera le diagnostic présomptif et le traitement des patients. **WAJM 2023; 40(4): 428–434.**

Mots-clés: Fièvre jaune, présentation clinique, Centre médical fédéral d'Asaba, Nigeria

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