

Swiss Tropical and Public Health Institute Schweizerisches Tropen- und Public Health-Institut Institut Tropical et de Santé Publique Suisse



# What are the treatable causes of febrile illness that we are presently failing to recognize in LMICs?

Prof. V. D'Acremont, MD, PhD

Swiss Tropical and Public Health Institute

Lausanne University Centre for general medicine and public health

#### Mortality due to febrile illnesses worldwide



Each year, 3.3 million children still die from an acute febrile episode.





In LMICs, antibiotic consumption increased from 8 to 18 billions DDDs between 2000 and 2015.

Klein et al, PNAS 2018; World Bank 2016

Why do people still die of fevers despite the provision of antibiotics?



Children in Tanzania

# 71% Viral 61% 22% Bacterial 34%

#### Adults in Tanzania





The wrong class of antibiotics is given at a wrong dosage for a wrong duration.

- Amoxicilline → abdominal infection
- Co-trimoxazole → pneumonia
  - Amoxicilline given at regular (40 mg/kg) instead of high (90 mg/kg dosage to a patient with pneumonia
    - Patient stops prematurely because she/he feels better and to save medicines for the next time

Swiss TP



What is the cure rate when no specific tests are performed?





#### Basic clinical tests and treatment as promoted by IMCI





Diagnosis of co-factors and morbidities is essential





#### Do we always need a lab test to diagnose a disease?



Swiss TPH 😏

#### Do we always need a lab test to diagnose a disease?







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Do we have tests to avoid diagnosing infections one by one ? Swiss TPH



#### Comparison with conventional tests







HHV6 = Fever of 3 days = Roseola = Exanthema subitum = 6<sup>th</sup> disease





- Treatable with an antimicrobial imes
- Requiring a specific management ×
- Frequent enough
- Potentially severe X

> Test useful only to exclude a bacterial infection...



#### Parvovirus B19 = Slapped cheek disease = Erythema infectiosum = 5<sup>th</sup> disease





- Treatable with an antimicrobial imes
- Requiring a specific management X
- Frequent enough
- Potentially severe

Better test for anemia...

#### Most frequent infection in adults: dengue





#### Next most frequent infection in both adults & children: UTI



- Treatable with an antimicrobial
- Requiring a specific management ×
- Frequent enough
- Potentially severe ×

Urine dipstick in adults with urinary complaints & pregnant women



Urine dipstick in children <2 years with unspecific fever</p>





- Treatable with an antimicrobial
- Requiring a specific management X
- Frequent enough
- Potentially severe

Blood culture in admitted adults? (PCR is not sensitive enough)

Also because the next most frequent infection in adults is common bacteremia



Rapid test in children >2 years with abdominal tenderness?



What about bacteremia in children at primary care level?





X



#### 1. Syphilis in adults

- Treatable with an antimicrobial
- Requiring a specific management ×
- Frequent enough
- Potentially severe

#### 2. Acute HIV in adults

- Treatable with an antimicrobial
- Requiring a specific management
- Frequent enough

#### Rapid test for HIV & syphilis in all febrile adults

#### 3. CMV & EBV in children & adults

- Treatable with an antimicrobial
- Requiring a specific management ×
- Frequent enough
- Potentially severe ×

#### 4. Rickettsia in children & adults

- Treatable with an antimicrobial
- Requiring a specific management X
- Frequent enough
- Potentially severe

??? (combination of exposure, symptoms & signs (PCR? but not sensitive enough)

Х



#### Leptospirosis

- Treatable with an antimicrobial
- Requiring a specific management ×
- Frequent enough X
- Potentially severe
- Rapid test in patients with specific exposure, symptoms or signs?

### Chikungunya

- Treatable with an antimicrobial
- Requiring a specific management
- Frequent enough 🗙
- Potentially severe X
- Targeted (undifferentiated fevers with arthralgia?) surveillance in sentinel sites

#### **Disseminated tuberculosis**

- Treatable with an antimicrobial
- Requiring a specific management
- Frequent enough X
- Potentially severe

## > HIV Rapid test, POCT CD4 $\rightarrow$ LAM

#### Zika (only pregnant women

- Treatable with an antimicrobial imes
- Requiring a specific management X
- Frequent enough X
- Potentially severe in offspring
- $\succ$  Pregancy test  $\rightarrow$  Rapid test



#### "Fever" tests

- Severity test
- Test to decide on AB •

#### **Co-factors**

- Anemia •
- Respiratory distress •
- Hypoglycemia •

#### **Co-morbidities**

- Acute & chronic malnutrition, failure to thrive
- HIV •
- Sickle-cell •

#### Diseases requiring immediate testing

- Malaria & typhoid ٠
- UTI in sub-group of patients
- Dengue in Asia ٠
- HIV & syphilis in adults
- Common bacteriemia (admitted) ٠
- Rickettsia in sub-group of adults ٠
- Leptospirosis in sub-group of adults ٠
- Zika in pregnant women

#### **Diseases requiring surveillance**

- Dengue in Africa
- Chikungunya •
- Ebola, Marburg
- Yellow fever
- Diseases?
  - Lassa, Crimean-Congo
  - Plague ٠



#### SURVEILLANCE SYSTEM



#### PATIENT MANAGEMENT SYSTEM