



ALPHA UNIVERSITY

BORAMA

FACULTY OF HEALTH SCIECEN

DEPARTMENT OF PUBLIC HEALTHS AND PHARMACTY

COURSE: COMMMUNICABLE DISEASE

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1. Introduction to Arthropod-Borne Infections

Arthropod-borne infections, also known as vector-borne diseases, are illnesses transmitted to humans and other animals by arthropods, primarily insects and arachnids. These arthropods act as vectors, carrying pathogenic microorganisms such as viruses, bacteria, protozoa, and helminths from an infected host (human or animal reservoir) to a susceptible host. Common arthropod vectors include mosquitoes, ticks, fleas, lice, sandflies, and mites. These infections represent a significant global public health burden, particularly in tropical and subtropical regions where environmental conditions favor vector proliferation and pathogen transmission. Factors such as climate change, urbanization, deforestation, and increased global travel and trade contribute to the changing epidemiology and geographical expansion of many arthropod-borne diseases, posing ongoing challenges to public health systems worldwide. Understanding the complex interplay between the pathogen, vector, host, and environment is crucial for effective prevention and control.

2. Types of Arthropod-Borne Infections

Arthropod-borne infections can be broadly categorized based on the type of pathogenic microorganism they transmit:

3. Signs and Symptoms of Arthropod-Borne Infections

The signs and symptoms of arthropod-borne infections are highly variable depending on the specific pathogen involved, the host's immune response, and the severity of the infection. However, many share some common initial, non-specific symptoms, which can make early diagnosis challenging. These may include:

Fever (often sudden onset and high)

Headache

Muscle and joint pain (myalgia and arthralgia)

Fatigue and malaise

Rash (can vary in appearance, e.g., maculopapular, petechial)

Nausea, vomiting, and diarrhea

More specific or severe symptoms can develop depending on the disease. For instance:

Dengue: Severe headache, pain behind the eyes, severe joint and muscle pain ("breakbone fever"), and in severe cases (Dengue Hemorrhagic Fever/Dengue Shock Syndrome), bleeding, plasma leakage, and organ impairment.

Malaria: Cyclical fever, chills, sweats, headache, and potentially severe complications like cerebral malaria, severe anemia, and respiratory distress.

Lyme Disease: Characteristic "bull's-eye" rash (erythema migrans) at the site of the tick bite, fever, fatigue, and if untreated, can progress to involve joints, heart, and nervous system.

Zika Virus: Often mild, but can cause microcephaly and other congenital abnormalities in infants born to infected mothers, and Guillain-Barré syndrome in adults.

Yellow Fever: Jaundice (yellowing of skin and eyes), hemorrhage, and organ failure in severe cases.

4. Common Arthropod-Borne Infections

While numerous arthropod-borne infections exist, some are particularly widespread and have a significant global impact:

Malaria: Transmitted by Anopheles mosquitoes; caused by *Plasmodium* parasites. Remains a leading cause of death, especially among children in sub-Saharan Africa.

Dengue Fever: Transmitted by Aedes mosquitoes (*Aedes aegypti* and *Aedes albopictus*); caused by dengue virus. Rapidly expanding globally, with risk of severe complications.

Lyme Disease: Transmitted by Ixodes ticks; caused by Borrelia burgdorferi. Common in North America and Europe.

Chikungunya: Transmitted by Aedes mosquitoes; caused by Chikungunya virus. Characterized by severe, often debilitating joint pain.

Zika Virus Disease: Transmitted by Aedes mosquitoes; caused by Zika virus. Gained prominence due to its association with congenital birth defects.

Yellow Fever: Transmitted by Aedes and Haemagogus mosquitoes; caused by Yellow fever virus. Endemic in parts of Africa and South America, with risk of outbreaks.

West Nile Virus Infection: Transmitted by Culex mosquitoes; caused by West Nile virus. Can cause neurological disease in a minority of infected individuals.

Leishmaniasis: Transmitted by phlebotomine sandflies; caused by *Leishmania* parasites. Manifests in cutaneous, mucocutaneous, or visceral forms.

5. Prevention and Control Measures for Arthropod-Borne Infections

Prevention and control strategies target the vector, the pathogen, and human exposure:

Vector Control:

Environmental Management: Eliminating or modifying vector breeding sites (e.g., draining stagnant water for mosquitoes, clearing vegetation for ticks).

Chemical Control: Use of insecticides (e.g., indoor residual spraying, larviciding, space spraying), ensuring responsible use to avoid resistance and environmental harm.

Biological Control: Introduction of natural predators or pathogens of vectors (e.g., larvivorous fish, *Bacillus thuringiensis israelensis*).

Genetic Control: Emerging technologies like releasing sterile male insects.

Personal Protection:

Using insect repellents containing DEET, picaridin, or oil of lemon eucalyptus.

Wearing protective clothing (long sleeves, long pants, socks) especially during peak vector activity times.

Using insecticide-treated bed nets (ITNs), particularly for malaria prevention.

Screening windows and doors.

6. Diagnosis of Arthropod-Borne Infections Diagnosis involves a combination of clinical assessment, epidemiological information (e.g., trav	vel history exposure to vectors)
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7. Treatment of Arthropod-Borne Infections
Treatment strategies depend on the causative agent: