

QUICK LINKS**African Trypanosomiasis—TRAVELER INFORMATION**

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Traveler Information

AFRICAN TRYPANOSOMIASIS**INTRODUCTION**

African trypanosomiasis (also known as sleeping sickness) is caused by parasites that are transmitted to humans through the bite of an infected tsetse fly. Infections can be caused by 2 different types of parasites—the Gambiense parasite or the Rhodesiense parasite; most infections in travelers are caused by the Rhodesiense type and are generally acquired in game parks in eastern or southeastern Africa.

EPIDEMIOLOGY

African trypanosomiasis occurs in African countries that lie south of the Sahara Desert.

- The acute form of this disease is caused by the Rhodesiense parasite and occurs in savannah grasslands and open woodlands in eastern and southeastern Africa. More than 95% of these cases occur in Tanzania, Uganda, Malawi, and Zambia, with smaller numbers from Zimbabwe and Mozambique—countries where tourists go on safari. This type of sleeping sickness occurs mostly in cattle herders and game park staff, but tourists on safari are readily exposed to the parasite and most cases in travelers are caused by this parasite.
- The chronic form is caused by the gambiense parasite and occurs in central Africa and limited areas of western Africa, around rivers in tropical and mangrove forests and along forested rivers stretching up into the savannah. More than 95% of these cases are reported from Democratic Republic of the Congo (DRC), Angola, South Sudan, Central African Republic, Republic of the Congo, Chad, and Uganda, with smaller numbers from Cameroon, Cote d'Ivoire, Equatorial Guinea, Gabon, Guinea, and Nigeria. This type of sleeping sickness occurs mainly in local populations in rural areas; cases among short-term travelers are rare, but expatriates living or working in these areas may be at risk.

RISK FACTORS

- The acute form: Tourists on safari in game parks (whether on foot or in vehicles) or visiting farms with livestock are at risk for infection in the countries noted above. Risk generally increases with the amount of time spent in the infected area, but some cases have occurred among individuals who have been in an infected area for only a few days. Walking safaris may be more risky than mini-bus safaris.
- The chronic form: Cases in short-term travelers are rare, but expatriates living or working in the areas noted above can be at risk. Outdoor activities increase the chances of coming in contact with the disease-carrying flies, but some urban areas also report transmission, including areas around airports such as Ndijili International Airport in Kinshasa, Democratic Republic of the Congo.

SYMPTOMS

Fever is the first symptom of infection with either type of trypanosomiasis. In some cases, a red nodule (chancre) appears at the site of the fly bite surrounded by inflamed tissue and edema, accompanied by enlarged lymph nodes and, oftentimes, a widespread rash.

- The acute form (Rhodesiense) is a severe illness that progresses rapidly, with symptoms beginning within days to weeks after infection. A chancre appears in about half of the cases. Most short-term travelers and tourists who acquire this form of the disease have fevers and systemic symptoms by the end of their trip or shortly after returning home. In the early stage of this disease, the infection is in the bloodstream but spreads to the central nervous system in the later stage.
- The chronic form (Gambiense) progresses more slowly. The first visual symptom may be the appearance of a lesion (chancre) at the bite site, but this may go unnoticed. Early symptoms include intermittent fevers, swollen lymph nodes, edema, and an

itchy rash. Months to years later, slowly progressive neurological symptoms occur, causing increasing sleepiness, coma, and death.

PREVENTION

The best way to avoid infection is to avoid areas of heavy infestation. Insect precautions are only marginally effective against tsetse flies (but will protect against mosquitoes, which carry other diseases such as malaria). Tsetse flies are attracted to bright clothing (especially blue) and can bite through light clothing. Travelers should wear light-colored clothes (but not blue) made from heavy material. Avoid close proximity to animals such as those found in game parks or farms with livestock. No vaccine is available and there are no safe preventive drugs.

NEED FOR MEDICAL ASSISTANCE

Travelers, expatriates, and immigrants coming from a sleep sickness-endemic country who suspect that they may have been infected should seek immediate medical assistance. Report any intermittent fever, especially if accompanied or preceded by an ulcerative skin lesion, swollen glands, or rash. Describe the travel itinerary, so the health care provider can determine if any risk areas were transited. Early diagnosis is vital. Treatment during the early stages is effective; treatment in later stages requires the use of very strong drugs. If left untreated, sleeping sickness is fatal.

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