

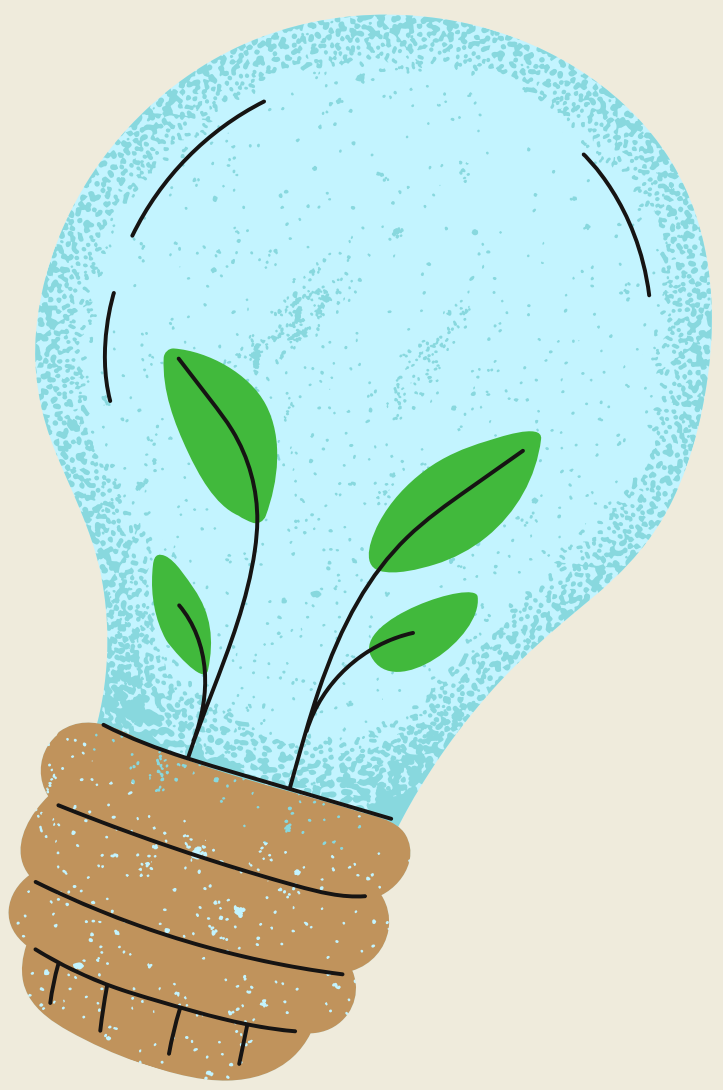
Chikungunya Strikes the Golden Years - The Unexpected Visitor

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Introduction

Chikungunya, a viral infection transmitted by mosquitoes, has rapidly spread worldwide in recent years. While typically viewed as a self-limiting illness, this disease can trigger severe and debilitating symptoms, especially in elderly patients with underlying conditions. It was first described during an outbreak in southern Tanzania in 1952 and has now been identified in nearly 40 countries in Asia, Africa, Europe and, most recently, the Americas. Symptoms usually begin 4 to 8 days after a mosquito bite but can appear anywhere from 2 to 12 days.

Case Description

Here, we present an intriguing case report of a senior citizen, age 84-year-old with multiple comorbidities, who experienced a week acute onset of fever, excruciating joint pain involving both ankles and wrists and macular rash more prominently on the lower limbs. With no history of recent travel or water activity, and mainly home-bound, the patient's initial lab results revealed a viral picture with a white cell count of $6.8 \times 10^9/L$, hemoglobin of 12.5 g/dL, and platelet count of $184 \times 10^9/L$. Extensive investigations for tropical infections like dengue and leptospirosis yielded negative results, and autoimmune screening was not significant. However, her Chikungunya IgM was positive, indicating recent chikungunya infection.

Discussion

This case report highlights the importance of considering chikungunya as a possible diagnosis in elderly patients who present with fever and joint pain. The symptoms experienced by the patient were severe and debilitating, impacting their quality of life. Since the elderly population is more vulnerable to the complications of infectious diseases, including chikungunya, it is crucial to raise awareness and focus on optimal management strategies for this disease in this age group. This case emphasizes the urgent need for further research on the management of chikungunya in the aging population. Given the increasing global spread of the disease and the potential for severe symptoms in elderly individuals with underlying conditions, it is important to develop effective treatment and prevention strategies specifically tailored to this vulnerable group. Further studies could explore the optimal pharmacological interventions, supportive care measures, and preventive measures such as mosquito control and vaccination to mitigate the impact of chikungunya on the elderly.

Conclusion

This case report underscores the significance of considering chikungunya as a differential diagnosis in elderly patients with fever and joint pain. Moreover, it highlights the urgent need for further research on optimal management strategies for this disease in the aging population.

It's time to take action