

Dear All,

Few updates from the travel clinic front:

#### WHO disease outbreaks news:

- The [Ebola](#) virus disease (EVD) outbreak in North Kivu and Ituri provinces in the Democratic Republic of the Congo continued this week with similar transmission intensity to recent weeks, with an average of 85 cases per week (range 79 to 91 cases per week) in the past six weeks.
- Circulating vaccine-derived [poliovirus](#) type 2 – African Region
- [Middle East](#) respiratory syndrome coronavirus (MERS-CoV) – Saudi Arabia. From 1 through 30 June 2019, the National International Health Regulations (IHR) Focal Point of Saudi Arabia reported 7 additional cases of Middle East respiratory syndrome (MERS-CoV) infection.

#### NEWS and UPDATES:

- [Nematodes](#) are everywhere. They live in all soils across the world, in incredibly large numbers. For each human, there are about 60 billion nematodes in the Earth's topsoil.
- [Plasmodium falciparum](#) increasingly resistant to first line therapy in Southeast Asian settings, highlighting the complex and interconnected issues of stewardship, drug discovery, human migration, and more.
- Severe [yellow fever](#) in Brazil: severe hepatitis, pancreatitis and severe MOF
- [New Review](#): The effect of global change on mosquito-borne disease— “no consensus on how future changes in climatic conditions will impact mosquito-borne diseases exists.
- Molecular Genotyping of [Trypanosoma cruzi](#) by Next-Generation Sequencing of the Mini-Exon Gene Reveals Infections With Multiple Parasite Discrete Typing Units in Chagasic Patients From Yucatan, Mexico.
- [Chagas](#) Disease Prevalence in Colombia: A Meta-Analysis and Systematic Review
- [Paracoccidioidomycosis](#) to be accepted as a neglected tropical (fungal) disease
- Cross-protection of [dengue](#) virus infection against congenital Zika syndrome, northeastern Brazil
- Increase in [Hepatitis A](#) Virus Infections — United States, 2013–2018.
- [Chromoblastomycosis](#) in the Amazon region, Brazil, caused by *Fonsecaea pedrosoi*, *Fonsecaea nubica*, and *Rhinocladiella similis*: Clinicopathology, susceptibility, and molecular identification

#### CLINIC ACTIVITIES:

- We have reached more than 1,000 vaccines of Yellow fever given in our clinic. Thank you all for attending our celebration.
- Katherine and Carlos have been managing a complex case of cutaneous Leishmania acquired during travel.
- We recently saw couple of Chagas cardiomyopathy cases among foreign born patients
- Jon and Carlos saw a fascinating case of Fever in returning traveler from Africa w/ septic shock, polymicrobial bacteremia, liver abscess, helminth in hepatobiliary system due to *Ascaris lumbricoides*. Great care in a complex case by MICU, GI and ID



#### RESEARCH:

- Duration and determinants of [Chagas latency](#): an etiology and risk systematic review protocol.
- Our perspective on congenital [Chagas disease](#) in Colombia - Sierra Nevada de Santa Marta. We are setting the grounds for potential future Research projects.
- We have some exciting tropical medicine projects going. Please keep in touch if you would like to participate:
  1. Chagas latency systematic review — led by Sindhu. We are in the stage of data extraction. We currently have extracted data from 128 out of 178 papers. I'm sure she will appreciate any help. You only need internet access. Get in contact with me if you want to participate.
  2. Yellow fever vaccine population description — led by Mehdi and Kim. We currently have collected data for 65 individuals out of close to 1,000 (we are looking to get a couple of hundreds, but the more we can gather, the better). There are only about 3-4 data points. The rest of the data will be automatically collected. You would need EPIC access.

3. Cryptococcus risk in Diabetes Mellitus in our cohort— led by Solana. We have received the automatic A1c from personalized medicine. Would need to collect additional info in about 20-30 patients. You would need EPIC access.
4. Cryptococcus risk in Diabetes systematic review —led by Paula. We are in the process of screening full texts. Currently about 121 out of 274. You only need internet access
5. Pneumocystis pneumonia among HIV negative individuals — led by William and Eric. Now, we have collected data on 4 out of 64 patients. You would need EPIC access.

**COLOMBIA INFECTIOUS DISEASE ACADEMIC ACTIVITIES:**

Leila completed a rotation in Infectious Diseases and Tropical Medicine in Cali, Colombia at Universidad del Valle. She had a fantastic experience. Saw very complex TB and AIDS cases. Opportunity currently open for residents and fellows. We are trying to expand to include Attendings as well.

Colombia Infectious Disease Conference will take place in Cartagena, August 21-24, 2019. Carlos, Esther, Maheen and I are coming.

For those with a Twitter account, I regularly post travel papers updates. Happy to follow each other.  
Twitter: @andhen25

Thanks to all of you for your ongoing dedication to our Travel medicine clinic.

Best regards.

Andrés and Carlos