



Contents lists available at ScienceDirect

Asian Pacific Journal of Tropical Medicine

journal homepage: <http://ees.elsevier.com/apjtm>



Letter to the Editor <http://dx.doi.org/10.1016/j.apjtm.2016.03.036>

Afebrile, asymptomatic and non-thrombocytopenic Zika virus infection: Don't miss it!

Somsri Wiwanitkit^{1*}, Viroj Wiwanitkit^{2,3,4}

¹Wiwanitkit House, Bangkhae, Bangkok, Thailand

²Hainan Medical University, China

³Faculty of Medicine, University of Nis, Serbia

⁴DR DY Patil Medical University, India

Dear Editor,

The present emerging Zika virus infection becomes the big issue in tropical medicine. The disease is a kind of arboviral infection that can cause acute hemorrhagic fever similar to dengue [1,2]. At present, as a disease control measure, it is suggested that this new disease has to be included in differential diagnosis for any cases with acute febrile illness and thrombocytopenia [3,4]. However, there are some concerns adding to this suggestion. There are some conditions that practitioners have to know and concern. First, some patients might have no fever [5]. The afebrile presentation can be easily missed and delayed diagnosis can be expected. Indeed, the similar problem can be seen in many hemorrhagic diseases including to dengue [6]. Second, it should also be noted that not all patients have low platelet counts [7,8]. Cases without thrombocytopenia are reported in several publications. Finally, the cases that might be the most problematic situation is the asymptomatic infection or very mild symptomatic infection [9]. In fact, many Zika virus positive cases are reported in asymptomatic blood donors in the endemic area [10]. The recent report in Asian Pac Trop Med [11] from Thailand also confirmed for the existence of previous infection without concern of the cases [11]. Indeed, antenatal testing in asymptomatic pregnant is already recommended in the endemic area [3]. These three problems have to be kept in mind of all practitioners. The atypical case of Zika virus is possible and it is the suggestion that the disease should be always looked for in the present period of worldwide emerging.

Conflict of interest statement

We declare that we have no conflict of interest.

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*Corresponding author. Somsri Wiwanitkit, Wiwanitkit House, Bangkhae, Bangkok, Thailand.

E-mail: somsriwiwan@hotmail.com

Peer review under responsibility of Hainan Medical University.

Article history:

Received 15 Jan 2016

Received in revised form 16 Feb 2016

Accepted 15 Mar 2016

Available online 23 Mar 2016