Factors to Discuss with U.S. Travelers Visiting Areas at Risk for Chikungunya

Assess likelihood of exposure to chikungunya virus

Evaluate level of disease activity at destination

Is there an outbreak? Is there elevated risk for U.S. travelers?

Consider duration of travel or residence and likelihood of future travel

- Longer duration travel to an area with transmission increases the likelihood a traveler might be exposed to an infected mosquito or future outbreak
- Travel to multiple areas with transmission increases the cumulative risk of infection

Discuss likelihood of exposure to *Aedes* species mosquitoes and adherence to mosquito bite prevention measures

- Aedes species mosquito mostly bite during the day, can bite indoors and outdoors, and are most prevalent in urban areas
- Traveler willingness to <u>prevent mosquito bites</u> (e.g., EPA-registered repellent, protective clothing) will influence risk
- Risk will typically be lower for travelers mainly in mosquito-protected indoor settings (e.g., buildings with air conditioning or window screens)

Assess risk factors for severe disease outcomes

Consider age of traveler

 Adults aged >65 years, infants aged <1 year, and neonates have a higher risk for rare but severe disease presentations

Review traveler's underlying medical or other conditions

- Certain medical conditions (e.g., diabetes, cardiac disease) increase the risk for severe disease
- Pre-existing joint problems are a risk factor for long-term arthralgia after infection
- Rarely, infection during pregnancy can result in fetal loss, stillbirth, or preterm birth. Infection near the time of delivery can cause severe disease in the newborn

Assess traveler preferences

Discuss the traveler's personal values and perception of risk

• Travelers likely have different risk tolerance for the possibility of acquiring chikungunya or the possibility of an adverse event after vaccination







