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Media alert from the Media Scanning & Verification Cell, IDSP-NCDC.

Alert ID	Publication Date	Reporting Date	Place Name	News Source/Publication Language
4390	31.10.2017	01.11.2017	Pune Maharashtra	www.timesofindia.com/English https://timesofindia.indiatimes.com/city/pune/chikungunya-sting-deepens-188-down-in-october-alone/articleshow/61349018.cms
Title:	Chikungunya sting deepens, 188 down in October alone in Pune, Maharashtra			
Action By CSU, IDSP -NCDC	Information communicated to DSU-Pune, SSU-Maharashtra			

Already battling dengue, the city has another reason to worry in chikungunya, cases of which have shown a considerable rise in October. The city recorded 28 chikungunya cases in June, which jumped to 128 in August and 140 in September to eventually rise to 188 till October 24. In total, the city has reported 576 chikungunya cases and over 4,666 cases of dengue till October 24 this year. These figures have been recorded both from private hospitals as well as government designated sentinel centres. Senior medical officer Sudhir Patsute, an infectious diseases expert, said, "In August and September, there were more dengue cases and a very few chikungunya cases. The ratio was 9:1 then. From the beginning of October, there has been perceptible rise in chikungunya cases. The ratio is 6:4 now."

Importantly, the fringe areas and some of the core city areas that have reported maximum dengue cases are also the ones accounting for more cases of chikungunya. "This is because the aedes aegypti mosquito is the vector for both dengue and chikungunya. The rainfall early this month provided fitting ground for the vector mosquito to breed and spread," Kalpana Baliwant, head of the insect control department of PMC, said.

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**Integrated Disease Surveillance Programme (IDSP), National Centre for Disease Control,
Ministry Of Health & Family Welfare, Government of India**

22-Sham Nath Marg, Delhi – 110 054

For more information please contact: Media Scanning & Verification Cell: - Phone (011)23946029

Email: - idsppediaalert@gmail.com, idspp-misc@nic.in, idspp-npo@nic.in

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Besides, unlike dengue, for which a patient's blood sample is tested for confirmation, chikungunya is mostly clinically diagnosed by doctors based on a patient's symptoms. Therefore, many times a patient is straight away prescribed symptomatic treatment without being subjected to any diagnostic tests. This is the reason why many chikungunya cases go unreported.

PMC woke up to initiating the control measures against mosquito-borne diseases from mid-August. "Till then, their surveillance and control measures were inadequate. One of the reasons was staff crunch in the insect control department. The posts were filled up on contract only in August," activist Sanjay Dabhade said.

"The Aedes aegypti mosquito has adapted to breeding in and around human dwellings, and deposits its eggs in any uncovered water container," entomologist Mukund Deshpande said.

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