

## Afebrile dengue

Dear editor, the recent publication on dengue by Méndez-Domínguez et al. is very interesting<sup>1</sup>. Méndez-Domínguez et al. concluded that “*dengue fever in young infant infections may be afebrile, so it is important to suspect them appropriately in the presence of a generalised rash, tachycardia, and hypotension, in order to avoid the deadly consequences of dengue shock*”<sup>1</sup>. I would like to share experience and discuss on the afebrile dengue. In fact, dengue can present without fever, especially for the case that receive antipyretic drug<sup>2-3</sup>. In Thailand, where dengue prevalence is extremely high, “*up to 20% had afebrile presentation*”<sup>3</sup>. Sometimes, the case has fulfill dengue triad (hemoconcentration, atypical lymphocytosis and thrombocytopenia) without fever<sup>1,3</sup> and it is difficult for diagnosis. Some patients might present only with complaint of malaise and myalgia<sup>4</sup>. In tropical countries, dengue should be included in

differential diagnosis of any patient with acute illness regardless of fever.

## References

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**Viroj Wiwanitkit<sup>1</sup>**

<sup>1</sup>Visiting professor, Hainan Medical University, China; visiting professor, Faculty of Medicine, University of Nis, Serbia; honorary professor, Dr. DY Patil University, India; adjunct professor, Joseph Ayobabalola University, Nigeria.

Correspondence:  
wviroj@yahoo.com