West African Trypanosomiasis

There are two types of African trypanosomiasis which is also called sleeping sickness. They are named for the areas in Africa in which they are found. West African trypanosomiasis, also called Gambian sleeping sickness, is caused by a parasite called *Trypanosoma brucei gambiense*. Tsetse flies can be found in Western and Central African forests, in areas of thick shrubbery and trees, by rivers and water holes. Risk of infection increases with the number of times a person is bitten by the tsetse fly. So tourists are not at great risk for contracting this disease unless they are spending long periods of time in rural areas of Western and Central Africa.

CAUSES

The disease is caused by the bite of an infected tsetse fly. These are found only in parts of Western and Central Africa. If you are infected and pregnant, you may rarely pass infection to your baby. It can also be contracted through blood transfusion or by organ transplant.

SYMPTOMS

A bite by the tsetse fly is often painful. Occasionally, 1-2 weeks after the tsetse fly bite, a red sore, also called a chancre (SHAN-ker) appears at the site of the infective bite. Several weeks to months later, other symptoms of sleeping sickness occur. These include:

- Fever.
- Rash.
- Swelling around the eye and hands.
- Severe headaches.
- Extreme fatigue.
- Aching muscles and joints.

You may develop swollen lymph nodes on the back of your neck called Winterbottom's sign. Weight loss occurs as the illness progresses. Once infection has invaded the central nervous system (brain and spinal cord), symptoms may include:

- Personality changes.
- Irritability.
- Loss of concentration.
- Progressive confusion.
- Slurred speech.
- Convulsions (*seizures*).
- Difficulty in walking and talking.

These symptoms become worse as illness progresses. Sleeping for long periods of the day and having insomnia at night is a common symptom. If left untreated, infection becomes worse. Death will occur within several months to years after infection. Symptoms occur within months to years after infection.

DIAGNOSIS

Your caregiver (*health care provider*) will order several tests to look for the parasite. Common tests include blood samples and a spinal tap. Your caregiver may also take a sample of fluid from swollen lymph nodes.

TREATMENT

Treatment should be started as soon as possible. It is based on the infected person's symptoms and laboratory results. Medication for the treatment of West African trypanosomiasis is available. Hospitalization is necessary for treatment. Periodic follow-up exams, including a spinal tap, are required for 2 years.

PREVENTION

- Wear protective clothing, including long-sleeved shirts and pants. The tsetse fly can bite through thin

fabrics. So clothing should be made of thick material. Wear khaki or olive colored clothing. The tsetse fly is attracted to both bright and dark colors.

- Use insect repellant. Though insect repellants have not proven effective in preventing tsetse fly bites, they are effective in preventing other insects from biting and causing illness.
- When sleeping, use bednets.
- Inspect vehicles for tsetse flies before entering. Do not ride in the back of jeeps, pickup trucks or other open vehicles. The tsetse fly is attracted to the dust that moving vehicles and wild animals create.
- Avoid bushes. The tsetse fly is less active during the hottest period of the day. It rests in bushes. But it may bite if disturbed.
- There is neither a vaccine nor recommended drug available to prevent West African trypanosomiasis.

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