

Epidemiology Unit, Ministry of Health



Chikungunya - Situation Report

25/06/2025

Surveillance Case Definition for a Suspected Case:

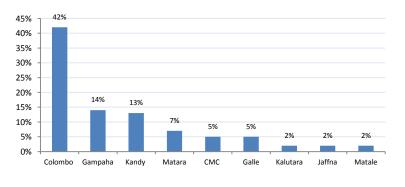
A person who lives in or has traveled in the previous 2 weeks to areas with Chikungunya transmission, and has fever* associated with arthralgia or arthritis that is not explained by other medical conditions, with or without other extra- articular manifestations that can range from mild to severe.

* fever is usually sudden onset lasting no more than 7 days.

CHIKV Genotype: Indian Ocean Lineage:

Whole genome sequencing of the currently circulating CHIKV strain identified it as belonging to the Indian Ocean Lineage (IOL), which is consistent with strains now circulating in South Asia (Tibutius Jayadas et al., 2025). It is similar to the strain responsible for major outbreaks in 2006–2007 (Hapuarachchi et al., 2009).

Reported Cases by Patient's District (Cumulative %)

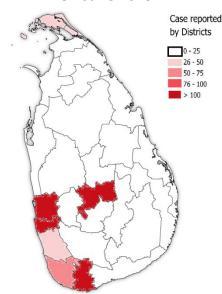


Guidelines on the Surveillance and clinical management of chikungunya are now available on the Epidemiology Unit's Website;

https://www.epid.gov.lk/storage/post/pdfs/en 684fe524 98043 Clinical%20Management%20of%20Chikungunya% 20Infection%20through%20Disease%20Phases.pdf1.

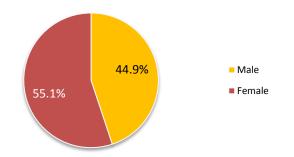
- 1. Guideline for surveillance of Chikungunya (May, 2025)
- 2. Laboratory Diagnosis and Acute Clinical Management of Chikungunya (April 2025)
- Clinical Management of Chikungunya through Disease Phases (Reviewed and updated, June 2025)

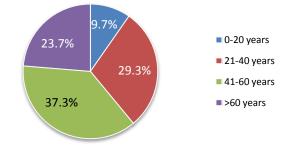
Chikungunya distribution up to 25th June 2025



Gender distribution of reported Chikungunya cases

Age distribution of reported Chikungunya cases





Actions guided by surveillance data:

Information gathered through surveillance has been used to guide and implement specific public health actions in the areas that were affected. Areas with increasing case trends were prioritized for intensified vector control measures, including larval source reduction, fogging operations, and entomological surveillance. Public awareness activities were scaled up in collaboration with district level authorities to improve early care-seeking and reduce mosquito breeding at household level. Sentinel surveillance was initially established and subsequently expanded to achieve island-wide coverage, while updated clinical guidelines were disseminated to frontline healthcare staff to ensure early recognition, standardized case management, and timely reporting.