Expression of NF-kB and COX-2 in Young Versus Older Patients with Sporadic Colorectal Cancer.

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Aim: to investigate which recent infection could have caused the present dengue-like symptoms, in adult patients clinically fulfilling the WHO criteria for dengue, in which serologically were not confirmed for dengue virus infections. Methods: prospective study. During an outbreak of dengue (between May 1995 and May 1996) 118 consecutive adults (>13 years) suspected by the WHO 1997 case definition of DF or DHF were investigated. Patients were examined for history of illness, physical and laboratory findings consisting of full blood counts, prothrombin time (PT), activated partial thromboplastin time (aPTT), liver function (bilirubin, ASAT, ALAT), renal function (creatinine), and serological assays included dengue, hantavirus, chikungunya, R. typhi, R. tsutsugamuchi, rubella virus, influenza A virus, and leptospira. Results: in 58 of the total 118 patients, recent dengue virus infection was serologically confirmed. In 20 of the remaining 60 patients, we found serological evidence of another recent infection: hantavirus (5), chikungunya virus (2), R. typhi (5), R. tsutsugamuchi (2), rubella virus (3), influenza A virus (1), and leptospira (2). No evidence for recent infection with any of the mentioned agents was detected in the remaining 40 specimens. Conclusion: we conclude that based on clinical characteristics alone, it is not easy to diagnose dengue. Specific laboratory tests to differentiate dengue from other febrile illnesses are needed. Among these, in Indonesia hantavirus infection should be considered as well.

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