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## **Rickettsial diseases: An overview**

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Rickettsial infections are an important cause of undifferentiated febrile illness in tropics. Rickettsiae are a rather diverse collection of organisms with several variations; this prohibits their description as a single homogenous group. Rickettsia is maintained in nature through a cycle involving reservoir in mammals and arthropod vectors. The public health impact of these on lives or productivity lost is largely unmeasured but suspected to be quiet high worldwide. The rickettsial diseases were believed to have disappeared from India are reemerging and recently their presence has been documented in at least 11 states of India. Many cases of rickettsial diseases go unnoticed due to the lack of diagnostic tools. Greater clinical awareness, a higher index of suspicion and better use of available diagnostic tools will increase the frequency with which rickettsial diseases are diagnosed. Specified IgM ELISA or DNA PCR are preferred tests. New or emerging rickettsial diseases, tickborne lymphadenopathy (TIBOLA) and Dermacentor have borne necrosis eschar lymphadenopathy (DEBONEL) related to *Rickettsia slovaca* infection have been described. Rickettsial diseases are one of the many causes of PUO cases (Pyrexia of Unknown origin). Even if advanced diagnostic facilities are not available, simple and easy to perform Weil Felix test can aid in the diagnosis of rickettsial infections.

## **Biography**

Sachin H Jain has completed his Masters in Microbiology at age 25 years from Seth GS Medical College and KEM Hospital, Mumbai India. He worked in Sydney, Australia before moving back to Mumbai and worked as Head Microbiologist and Infection Control Officer at Saifee Hospital, Mumbai for 9.5 years and now Currently as Head Microbiology and Infection Control Officer at Reputed Hinduja Healthcare Surgical Hospital, Mumbai India. He has delivered many lectures in India and China, Sydney and Vitebsk.

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