Dear Editor,

The report by Pinheiro et al. on “Dengue infection in the nervous system: lessons learned for Zika and Chikungunya (CHIK) Infection” is very interesting\(^1\). The authors mentioned that “besides the typical clinical picture of CHIKV, atypical manifestations of neurological complications have been reported: meningo-encephalitis, meningoencephalo-myeloradiculitis, myeloradiculitis, myelitis, myelonueropathy, Guillain-Barré syndrome and others. The diagnosis is based on clinical, epidemiological, and laboratory criteria\(^1\).” They also discussed the clinical neurological problems due to Zika virus infection. Indeed, the similarity between clinical problems due to CHIKV and other arboviruses (dengue and Zika virus) can be observed. Nevertheless, a number of cases with those virus infections can be mild or asymptomatic.

Focusing on neurological problems due to CHIKV, we would like to share the experience from our setting, a tropical area, in Indochina. In our clinical centers, both dengue and CHIKV infections are common. Unlike dengue infection, the neurological problems of CHIKV are extremely rare, which is similar to the cases of Zika virus infection. According to a national report in Thailand on the confirmed cases of viral encephalitis during 2003–2005, there were no cases due to CHIKV infection\(^2\). Also, according to the latest large outbreak in a rural province in Thailand, many classical and atypical presentations of CHIKV infection have been observed but there were no patients presenting with neurological problems\(^3\).

Beuy Joob\(^1\), Viroj Wiwanitkit\(^2\)

References


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\(^1\) Sanitation1 Medical Academic Center, Bangkok Thailand;
\(^2\) Hainan Medical University, China;

**Correspondence:** Beuy Joob; Sanitation1 Medical Academic Center, Bangkok Thailand; Email: beuyjoob@hotmail.com

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