Dengue: Differently Conceptualized

The month of July heralds the monsoon season in northern India. Along with the clogged drains and submerged roads, tiny larvae starts thriving in the stagnant water pooled at every nook and corner of the cities. The menace grows, enlarges in size, with each passing day and brings the frightful, dreadful epidemic called Dengue. Dengue brings in misery, mortality and morbidity in the society. It exposes the lack of proper infrastructure and facilities, ignorance of the general masses about cleanliness and sanitation but on the other end, it discloses our social/cultural beliefs and lifestyle ideologies, and firmly unites us on the same.

Dengue symbolises selective autumn season for the papaya tree. The tree appears like a stump sans its leaves. The leaves have either been donated or stolen to ‘increase’ the platelet counts of a dengue patient struggling in some hospital. Although there is no scientific basis behind this practice but with the advent of the dengue season, every social media site turns into a medical expert committee comprising of non-medical personal, setting up the new guidelines for increasing the platelet count in the disease, without knowing the etiopathogenesis of the disease. Nobody knows the origin and spread of this great discovery (it just symbolises the power of social media and our firm belief in naturopathy).

The only discussion of the attendants surrounding the dengue patient is about the papaya leaf extract, and how a distant relative of their’s had a miraculous rise in platelet just after smelling the leaf extract!!! Surely if you will overhear them for few minutes, you will feel like a moron wasting time on reading the latest WHO guidelines, and meticulously calculating the fluid accordingly. Every what’s app group, facebook group and other social platforms will reiterate the usefulness and effectiveness of papaya leaf so enthusiastically that you will start questioning the WHO, as to why such a magical drug is not included in their guidelines.

The gasping moment is reached when a critically ill, patient with dengue shock syndrome (DSS) is about to be discharged, in a healthy state. The same patient who survived days of ventilation, profuse bleeding, refractory shock, severe sepsis, countless transfusions and extensive monitoring! The critical care team head with his 56-inches chest, basking in the glory of his success, is suddenly tapped on his shoulder by an ultra-educated, google savvy, chief executive of an IT firm and greeted, “Hello Doc, I think the flavonoid quercetin of Carica papaya really worked wonderfully well”.

Another surrogate marker (with 100% sensitivity and specificity) which marks the onset of epidemic is the maximum selling price of goat milk. The cost of the milk is directly proportional to the number of dengue cases. As the season peaks, so the cost of the milk. You could localize milk vendors in decent civil outfits in the cafeterias of the big corporate hospital (these places are specifically targeted as they provide the maximum value for the commodity). The deal is made outside the hospital premises and the milk is smuggled to the patient. The status of goat’s milk is equivalent to a divine syrup. The magical medicinal value is universally accepted as a secularist’s throughout the nation irrespective of any division of caste, creed, race, gender, education or financial status; only outcasted by evidence-based-medicine believing and science based medical fraternity.

So, in conclusion, dengue is not just a disease but a miserable festival, gifted to the people, by the people (due to the lack of their civic sense), from the government (due to lack of infrastructure) and celebrated with our strong customs, cultural beliefs, and our commitment towards magical cures and reluctance towards other means of treatment.

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