Adenovirus

Traveler Summary

Key Points

- Adenovirus infection, caused by adenoviruses, occurs worldwide and is acquired mainly via direct contact with infected objects, inhalation of infected aerosolized respiratory droplets, and the fecal-oral route.
- Risk is increased for children and military recruits living in crowded conditions and in immunocompromised persons.
- Symptoms are usually mild and include cough, sore throat, pink eye, or fever.
- Consequences of infection rarely occur but can include brain inflammation, severe pneumonia, and death.
- Prevention includes observing good respiratory-hygiene (cough and sneeze etiquette) and hand-hygiene measures (frequent, thorough handwashing).
- Adenovirus vaccine (live) is routinely given to military recruits as 1 dose during initial training but is not approved for routine use or for travel.
- Vaccine side effects are usually mild and include nasal congestion, cough, headache, abdominal pain, vomiting, and diarrhea.
- Duration of vaccine protection is unknown; no booster dose is recommended.

Introduction

Adenovirus infections occur in infants and children worldwide and are the most common cause of respiratory tract infections. Transmission is mainly via direct contact with infected objects or inhalation of infected aerosolized droplets (e.g., from coughs or sneezes).

Risk Areas

Adenovirus infections occur worldwide throughout the year; however, outbreaks of adenovirus-associated respiratory disease occur most commonly in the late winter, spring, and early summer. Although more common in military recruits, adenoviruses have also been isolated from civilian adults with acute respiratory disease (ARD), especially in the northeastern U.S.

Transmission

Adenoviruses are mainly transmitted via direct contact (e.g., touching infected objects and then touching the eyes), inhalation of infected aerosolized droplets (e.g., from coughs or sneezes), exposure to infected tissue or blood, and the fecal-oral route; transmission from the ingestion of contaminated water occasionally occurs.

Risk Factors

Risk exists mainly for children and military recruits (due to close living and training environment); however, all ages are susceptible to infection. Infants, the elderly, and persons with underlying medical conditions and immunocompromising conditions are at increased risk for severe illness. On aircraft, risk of infection exists (although very low) for persons sitting within a 2-seat range (in back, front, and beside) of an infectious traveler.

Symptoms

Symptoms most commonly appear 2 to 14 days following exposure and include runny nose, nasal congestion, sore throat, cough, fever, or diarrhea.

Consequences of Infection

Serious illness rarely occurs, but complications can include brain, stomach, or bladder inflammation, severe pneumonia, and death (higher risk in transplant patients).
Need for Medical Assistance
Persons who develop serious symptoms of adenovirus infection should seek immediate medical attention. Antiviral drugs are generally ineffective against adenovirus infections.

Prevention

Nonvaccine
Observe respiratory-hygiene (cough and sneeze etiquette) and hand-hygiene (frequent, thorough handwashing) measures. In a military setting, bunk spacing should also be observed. Avoid close contact with persons who are ill.

Vaccine
Adenovirus vaccine (live) is given routinely to military recruits aged 17-50 years but is not approved for routine use or travel. Live viruses are shed in the stool for up to 28 days after vaccination, potentially exposing close contacts and causing disease; vaccinees should exercise caution during this time when in contact with children younger than 7 years, persons with weakened immune systems, or pregnant women. Proper personal hygiene, including hand-hygiene (frequent, thorough handwashing) measures, especially after using the bathroom, can minimize risk.

Side Effects
The most common vaccine side effects of adenovirus vaccine are mild and include headache, muscle aches, nasal congestion, nausea, abdominal pain, diarrhea, and vomiting, occurring within 2 weeks after vaccination. Serious side effects are rare but can include blood in the urine or stool, stomach or intestinal inflammation, and pneumonia within 6 months after vaccination.

Persons with underlying medical conditions or who have concerns about the vaccine should speak to their health care provider before vaccine administration.

Timing
Adenovirus vaccine is given in 1 dose (2 tablets). The tablets should be swallowed whole and not chewed or crushed. Duration of vaccine protection following a single dose as above is unknown. A booster dose is not recommended.

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