Chagas' Disease (American Trypanosomiasis)

Traveler Summary

Key Points

- Chagas' disease (American trypanosomiasis) is a parasitic infection occurring in Mexico and Central and South America that is mainly acquired through direct contact of the eyes, nose, or mouth lining with parasites from the feces of infected reduviid bugs.
- Risk is increased for travelers going to affected areas who stay in infested houses and for persons who consume foods (such as freshly prepared sugar cane or acai juice) from unsanitary sources.
- Symptoms include redness around a bug-bite area, swollen eyelids, fever, and swelling of lymph glands.
- Consequences of infection (which occur many years later) include irregular heartbeat, heart failure, and digestive problems.
- Prevention includes avoidance of infested accommodations and potentially contaminated food.
- No vaccine or preventive drugs are available.

Introduction

Chagas' disease (formally known as American trypanosomiasis) is a parasitic disease occurring in Mexico and Central and South America, which is mainly transmitted through contact with feces deposited by infected insects (kissing bugs) after a blood meal. The parasite is commonly found in burrows, hollow trees, palm trees, and other animal shelters and can also live in certain types of human dwellings, particularly thatch, mud, and adobe huts.

Transmission

Chagas' disease is mainly transmitted when an infected insect bites and takes a blood meal from a human and then deposits parasites from its feces into the bite wound or through the lining of the eyelid, nose, or mouth. Typically, these insects hide in crevices in the walls or roof during the day and feed at night. Transmission can also occur through blood transfusion, from mother to fetus, from transplanted organs, and orally through certain foods (contaminated, freshly squeezed sugar cane or acai juice) obtained from unsanitary sources in affected areas.

Risk Areas

Chagas' disease is common in Mexico and Central and South America; exceptions within this area include the Caribbean and Uruguay. Rare cases have been reported in the US

Risk Factors

Risk is low for persons staying in conventional, urban-type hotels and resorts but is increased for travelers going to affected areas who sleep in poorly constructed houses, especially huts made of mud, palm thatch, or adobe brick and particularly those with cracks or crevices in the walls and roof. Consumption of foods from unsanitary food sources, including freshly prepared sugar cane or acai juice, may also occur.

The risk of transmission via transfused blood may be more relevant to travelers who require urgent medical care while in rural areas of South America, where blood quality may be suboptimal.

Symptoms

Chagas disease has an acute and a chronic phase. Acute Chagas' disease, which usually occurs immediately after infection, may have no symptoms or very mild ones that may resolve spontaneously within 8 to 10 weeks. Symptoms may include a red swollen area near the bite location, painless swelling around the eye, fever, and swelling of lymph glands.

Consequences of Infection

Chronic Chagas' disease can develop years or decades after the initial infection. Heart problems or progressive heart failure can develop. Other organs (colon, esophagus) can also be damaged.

Need for Medical Assistance

Persons who develop symptoms of acute Chagas' disease during travel or after returning from risk areas should seek immediate medical attention. Chagas' disease can be serious and potentially fatal in children. Drug treatment is available for the acute and early stages of the infection.

Prevention

Nonvaccine

No vaccines or chemoprophylactic agents are available for the prevention of Chagas' disease. Whenever possible, avoid staying overnight in houses constructed of mud, adobe brick, or palm thatch, particularly those with cracks or crevices in the walls and roof; however, if using such dwellings is unavoidable, search the sleeping area thoroughly for bugs and use bed nets when camping or sleeping outdoors in affected areas. Unless a life-threatening emergency exists, blood transfusions that have not been assuredly screened for Chagas' disease should be avoided. Avoid consuming freshly prepared fruit and cane juices from unsanitary sources in affected areas.

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