



Crimean-Congo haemorrhagic fever (CCHF)

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Key facts

- The Crimean-Congo haemorrhagic fever (CCHF) virus causes severe viral haemorrhagic fever outbreaks.
- Its outbreaks have a case fatality rate of up to 40%.
- CCHF is endemic in many countries in Africa, the Middle East, Asia, and Eastern Europe.
- There is no CCHF vaccine for humans or animals.

Transmission: vector-borne (ticks)

- The virus is mainly transmitted to people through bites from infected ticks
- Handling or butchering of infected animals, particularly livestock including cattle, sheep, and goats
- Close contact with the blood, secretions, organs or other bodily fluids of infected persons
- Transmission at healthcare facilities can also occur due to improper infection control and prevention practices

Most vulnerable to contracting the disease

- Farmers, abattoir workers, and veterinarians due to increased exposure to livestock and ticks (which often infest the livestock animals)
- People residing in or visiting areas where CCHF is endemic are at higher risk, particularly during tick activity seasons.
- Healthcare workers, especially if proper protective measures are not followed while caring for an infected patient

Most vulnerable to severe disease

- Elderly
- People with pre-existing health issues, including weakened immune systems
- Pregnant women

Symptoms

- Sudden onset of fever
- Dizziness
- Muscle pain
- Backache
- Neck pain and stiffness
- Photophobia (sensitivity to light)
- Diarrhea
- Sore eyes
- Sore throat
- Vomiting
- Headache
- Nausea
- Abdominal pain
- Mood swings
- Confusion

Severe symptoms

- Jaundice (yellow skin and/or mucosae)
- Liver enlargement
- Bleeding from the skin, internal organs, and other body openings
- Severe bruising and uncontrolled bleeding

What can you do to prevent and control an epidemic?

Reservoir control and prevention

- Identify and isolate suspected livestock

Personal protection and hygiene

- Promote handwashing with soap, especially:
 - After caring for or visiting sick people
 - After handling or slaughtering sick animals
- Promote the use of:
 - personal protective equipment (PPE) when caring for sick people or when touching sick or dead animals, specifically gloves and mask
 - gloves and other protective clothing while handling animals or their tissues in endemic areas, particularly during slaughtering, butchering and culling procedures in abattoirs or at home
- Discourage people from:
 - Unnecessary touching of sick or dead animals or things that might have been contaminated by their blood or body fluids
 - Close physical contact with CCHF-infected people
- Encourage farmers and abattoir workers to quarantine animals before they enter slaughterhouses and routinely treat animals with pesticides two weeks prior to slaughter.

Vector control and prevention

- Initiate elimination of ticks
 - Promote the use of approved acaricides (chemicals made to kill ticks) on clothing
- Prevent tick bites by encouraging people to:
 - Use personal protection (application of repellents, wearing long sleeved clothes, wearing of light coloured clothing to aid the detection of ticks on clothes)
 - Regularly examine their clothes and skin for ticks; and promptly and safely remove it
 - Avoid areas where ticks are abundant and seasons when ticks are most active

Monitoring the community and identifying sick people

- Identify community members who have suspected CCHF infection based on the community case definition

Treatment and management

- Rapidly detect and refer cases to health facilities early
- Support contact tracing and follow-up of contacts

- Provide psychosocial support to the sick person and their family members

Social mobilisation and behaviour change

- Find out the specific advice being given by health and other relevant authorities
- Model following this advice and inform community members of current health practice advice
- Offer support and encouragement to follow the advice
 - Try to gain understanding about if and why health practice advice is not being followed
 - With the guidance of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices

Immunization

- Currently, there are no vaccines for CCHF

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
 - How many people have fallen sick with CCHF? Where?
 - How many people have died? Where? When?
 - Who and where are the vulnerable people?
 - Where are the local health facilities and services? (include traditional healers)
- Record the following information on the back of the map:
 - When did people start to fall sick with CCHF disease?
 - How many people live in the affected community?
 - How many are children under five years old?
 - Which people in the community have contact with livestock and ticks?
 - Do people cook meat thoroughly before eating it?
 - Are there handwashing facilities in the community, at animal markets and other areas where livestock is slaughtered? Are soap and water always available?
 - What are the community's habits, practices and beliefs about handling and slaughtering animals, especially animals that are sick or dead?
 - What are the community's habits, practices and beliefs about repellents and sprays?
 - What are the community's habits, practices and beliefs about caring for and feeding sick people? Consider any differences in roles and responsibilities between men and women.
 - When babies and infants are sick, do women continue to breastfeed them?
 - Are children badly affected by the CCHF? Are there other groups (specific ages, occupations, geographic areas, etc.) that are badly affected?

- Is a social mobilization or health promotion programme in place?
- Which sources do people use/trust the most for information?
 - Are there rumours or misinformation about CCHF? What are the rumours?

Other resources

- World Health Organization (WHO); [Crimean-Congo haemorrhagic fever](#); 2022
- World Organization for Animal Health (WOAH); [Crimean-Congo Haemorrhagic fever, WHO Terrestrial Manual](#); 2024