

Scrub typhus	<i>Orientia tsutsugamushi</i>	Central, southeastern, and eastern Asia	Vector (chiggers [mite larvae])	6–21 days	Fever, headache, myalgia, arthralgia, conjunctival injection, malaise, cough, transient maculopapular rash, eschar at site of mite attachment	Serology: Weil-Felix test detects cross-reacting antibodies to <i>Proteus mirabilis</i> OX-K.	Doxycycline or chloramphenicol	Personal protective measures; doxycycline prophylaxis	211
Chronic or Relapsing Clinical Course									
Cutaneous leishmaniasis	Old World: <i>Leishmania major</i> , <i>L. tropica</i> , <i>L. infantum-donovani</i> New World: <i>L. mexicana</i> complex, <i>L. braziliensis</i> complex	Southwest and central Asia, China, Africa, Central and South America	Vector (<i>Phlebotomus</i> spp. sandfly)	2–8 weeks (up to 18 months)	Single or multiple chronic, painless, nodular or ulcerative skin lesions ± eschar near inoculation sites on head and limbs, associated with spontaneous healing and scarring after 5–12 months; rare chronic or relapsing forms	Parasites in Wright-Giemsa-stained skin scraping, slit skin smear, or biopsy specimen; culture or PCR for speciation	Vigilant monitoring for spontaneous resolution; pentavalent antimony; oral azoles	Personal protective measures (sandflies can penetrate mosquito nets; permethrin coating enhances efficacy); vector and animal reservoir control	251
Visceral leishmaniasis (kala-azar)	<i>L. infantum-donovani</i>	Southwest and central Asia, Brazil, India, China, Africa	Vector (<i>Phlebotomus</i> spp. sandfly)	2–14 months (rarely up to 2 years)	Chronic fever, cachexia, anorexia, weight loss, pancytopenia, hepatosplenomegaly	Parasites in tissue (bone marrow, liver, lymph node, spleen) on histopathologic staining, culture, or PCR; rK39 serologic assay	Liposomal amphotericin B, pentavalent antimony, miltefosine	Personal protective measures, vector and animal reservoir control	251
Tuberculosis	<i>Mycobacterium tuberculosis</i>	Worldwide	Inhalation of aerosols from individuals with active pulmonary tuberculosis	1 month to many years	Fever, weight loss, night sweats, cachexia, cough, hemoptysis, pulmonary infiltrates	Sputum acid-fast smears, mycobacterial culture, nucleic acid amplification	Multidrug therapy (number depends on risk of drug resistance) including combination of isoniazid, rifampin, pyrazinamide, ethambutol, and others	Personal protective measures; chemoprophylaxis for skin test conversion	202
Q fever	<i>Coxiella burnetii</i>	Worldwide	Inhalation of aerosols from infected secretions of livestock herd or parturient animal; ingestion of raw milk	2–5 weeks for acute disease; chronic manifestations may present indolently over many years	Acute: undifferentiated febrile illness, atypical pneumonia Chronic: granulomatous hepatitis, culture-negative endocarditis, osteomyelitis (including vertebral), fever of unknown origin	Serology: complement-fixation antibody titer to phase I antigen	Doxycycline (with hydroxychloroquine for endocarditis)	Avoidance of unpasteurized products	211
Brucellosis	<i>Brucella abortus</i> , <i>B. melitensis</i> , <i>B. suis</i>	Worldwide; especially prevalent in southwest and central Asia, India	Inhalation of infected animal materials, ingestion of raw milk, direct animal contact	5 days to months	Skeletal, genitourinary, or pulmonary disease; chronic meningitis	Organism isolation from blood, bone marrow; <i>Brucella</i> -specific antibody	Doxycycline + rifampin or streptomycin	Personal protective measures, avoidance of unpasteurized dairy products	194e

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