

Rickettsioses and Rickettsial diseases in Croatia

Boris Dželalija^{1,2}

¹ Department of Health Studies, University of Zadar, Zadar, Croatia

² Department of Infectious Diseases, Zadar General Hospital, Zadar, Croatia

Aim: To review the current state of knowledge concerning rickettsiae and rickettsioses in Croatia.

Methods: The PubMed database was searched from 1991 to 2018 by combining the words “rickettsia,” “rickettsiosis”, “and “Croatia”.

Results: Since 1969, Croatia appears to be free of epidemic typhus (ET) caused by *Rickettsia prowazekii* and the last case of Brill-Zinsser disease was recorded in 2008 (a total of 174 cases from 1957 to 2018). Mediterranean spotted fever (MSF) caused by *R. conorii* is the most frequent human rickettsial infection in Croatia, followed by murine typhus caused by *R. typhi*. Human cases of MSF and murine typhus have been predominantly observed along the eastern Adriatic coast from Zadar to Dubrovnik and between Zadar and Split, respectively. *R. akari*, etiologic agent of rickettsialpox, was isolated from the blood of a patient diagnosed with MSF in Zadar, but no cases of rickettsialpox were reported.

Conclusion: Rickettsiae and rickettsial diseases continue to be present in Croatia. So, it is very challenging for a *general practitioner (GP)* to recognize the clinical symptoms of rickettsial diseases. At hospital admission, physicians should also include rickettsioses in the differential diagnosis for sepsis syndrome, especially at the first examination of the patients with rash.

Key words: Rickettsiae, rickettsial diseases, Croatia