

Zika Virus Epidemiology and Recommendations

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Outline

- Updated Epidemiology
- Management of Pregnant Women
- Management of infants
- Reproductive Planning

Current Active Zika Transmission



Case Counts: U.S. States

- Travel-associated cases reported: 3,565
- Laboratory acquired cases reported: 1
- Locally acquired mosquito-borne cases reported: 59 (All in Florida)
- Total: 3,625
 - Guillain-Barré syndrome: 12
 - Sexually transmitted: 30 (including 1 in NH)

Travel Associated U.S. Cases

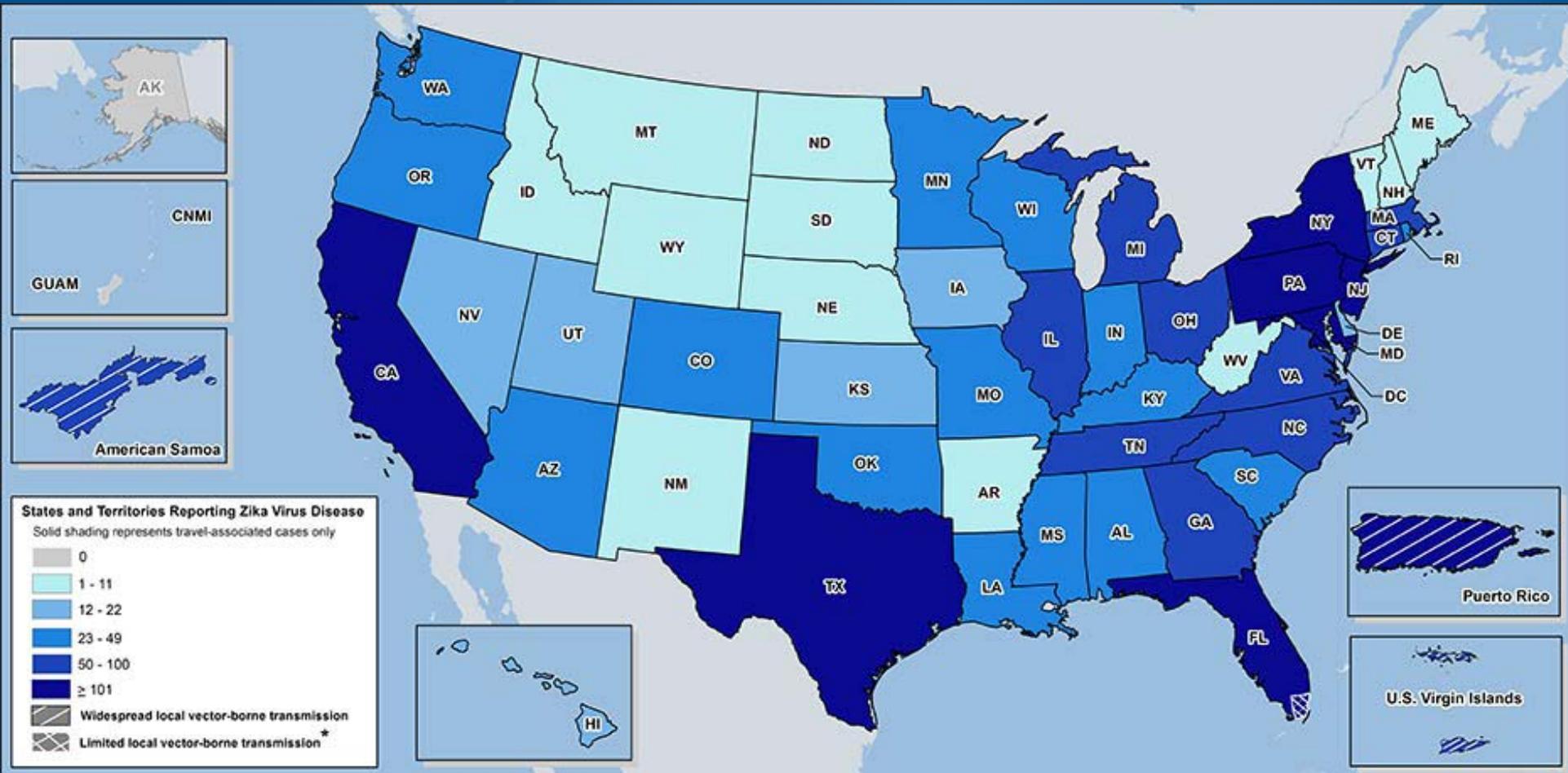
- New York City: 811 (23%)
- Florida: 672 (19%)
- California: 267 (7%)
- Texas: 204 (6%)
- New Jersey: 133 (4%)
- Pennsylvania: 129 (4%)

Case Counts: U.S. Territories

- Locally acquired cases reported: 21,988 (98% in Puerto Rico)
- Travel-associated cases reported: 81
- Total: 22,069*
 - Guillain-Barré syndrome: 39

*Sexually transmitted cases are not reported for US territories

Zika Cases in the United States



Active Transmission in Florida

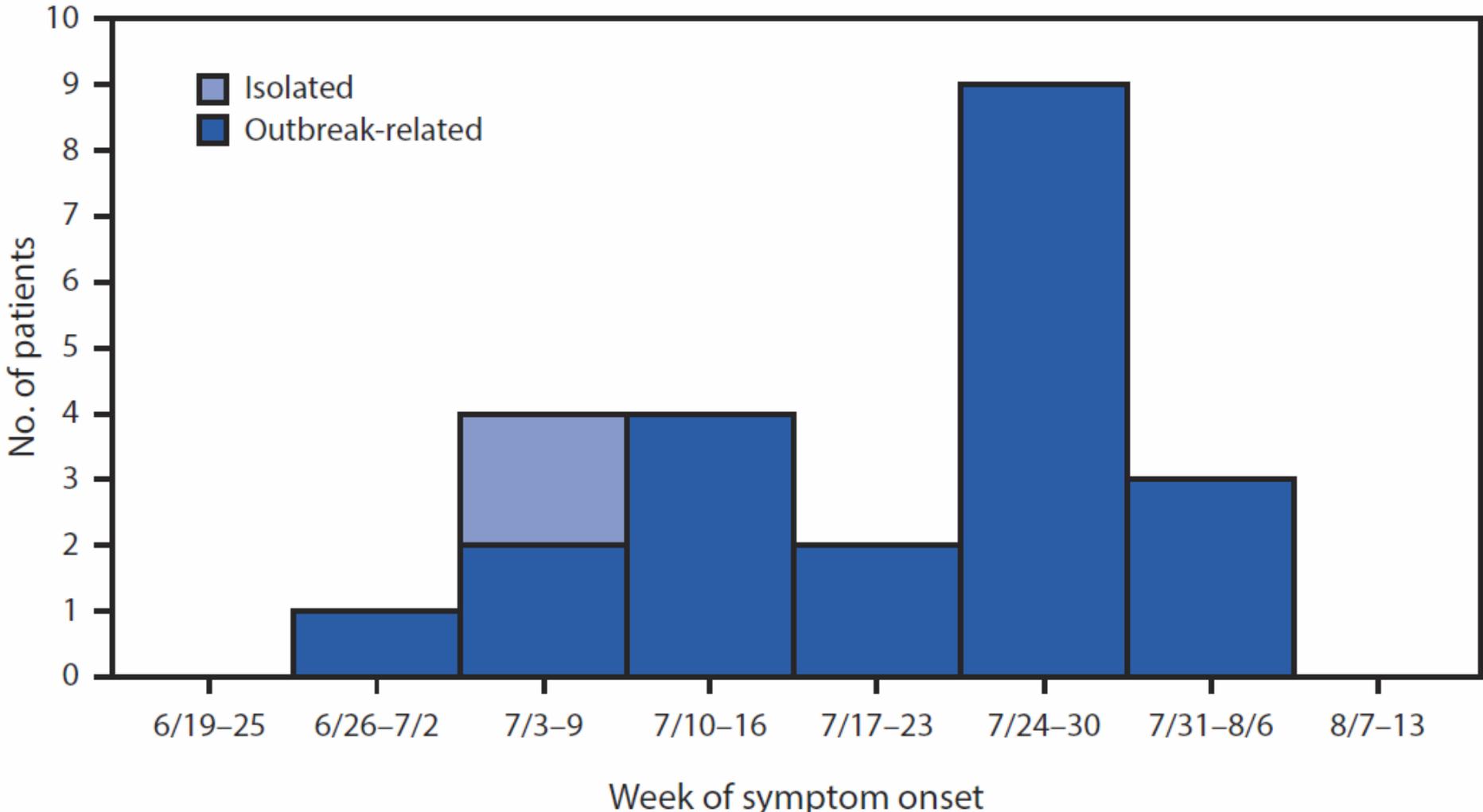


Wynwood Neighborhood, Miami, FL

- 2 cases identified in early July
- Cases worked within 120 meters of each other
- Tested both workplaces:
 - Workplace A: 1 additional case
 - Workplace B: 5 additional cases
- Community Uro-survey (150 meter radius):
 - 52 urine specimens from 28 households collected
 - 6 asymptomatic cases identified
- August 1st: CDC issued a travel advisory

- 3 surveys at locations bordering the 1-square mile area:
 - 289 specimens collected from 150 households
 - One travel-associated case
 - No cases of local transmission
- FQHC clinic within 1-square mile neighborhood
 - 77 urine samples collected
 - 3 additional cases
- Additional cases have since been identified in the Wynwood area
- Total associated case count: 29

FIGURE 2. Number of patients (n = 23) with symptomatic cases of locally transmitted Zika virus infection, by week of symptom onset and outbreak status — Miami-Dade and Broward counties, Florida, June–August 2016



CDC Recommendations on Florida

- Pregnant women should avoid travel to a 4.5-square mile area of Miami Beach
 - Exposure risk period: July 14th – present
- No longer recommends against travel for pregnant women to Wynwood
 - Exposure risk period: June 15 – Sept 18
- Pregnant women and partners of pregnant women concerned about potential Zika-virus exposure may consider postponing non-essential travel to all parts of Miami-Dade County

Transmission of Zika

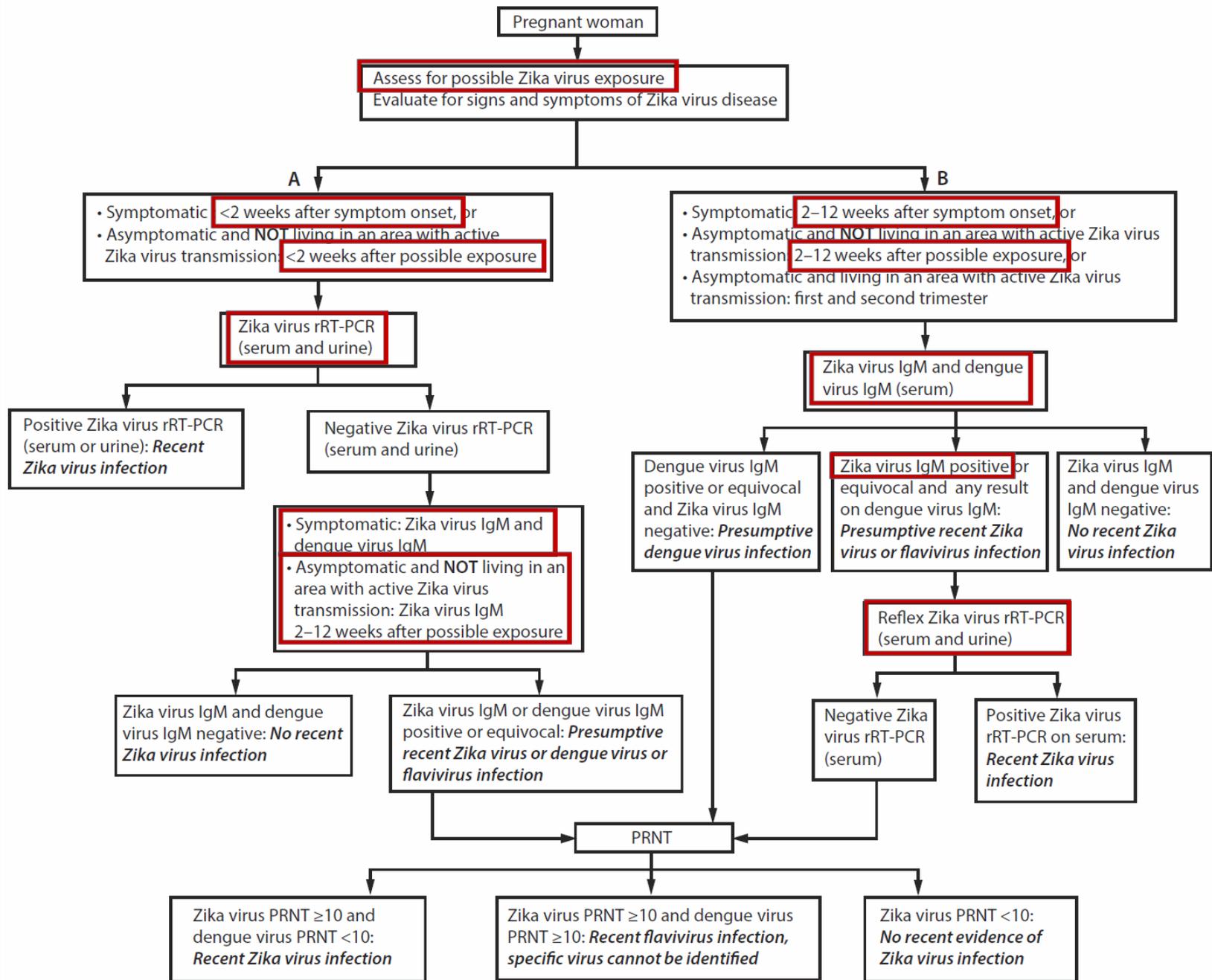
- Main modes of transmission:
 - Travel to an area with active transmission (mosquito bite)
 - Sexual contact with someone who has traveled
- Main concern is:
 - Pregnant women and their developing fetuses
 - AND
 - Those trying to conceive (intentionally or unintentionally)

General Recommendations Re: Travel to an Area with Active Zika Transmission

- Pregnant women should NOT travel
- Pregnant women who must travel:
 - Strictly follow steps to avoid mosquito bites
- Pregnant women who have traveled:
 - Talk to healthcare provider about testing
- Pregnant women who had sex with a traveler:
 - Talk to healthcare provider about testing
- Sexual partners of pregnant women who traveled:
 - Abstain from sex or consistently & correctly use condoms for the duration of pregnancy

CDC Guidelines for Caring for Pregnant Women with Possible Zika Exposure

<http://www.cdc.gov/zika/hc-providers/pregnant-woman.html>



What about someone who presents more than 12 weeks after exposure?

- Pregnant women with possible Zika virus exposure who seek care >12 weeks after symptom onset or possible exposure, IgM antibody testing might be considered.
- A negative IgM or PCR result >12 weeks after symptom onset or possible exposure does not rule out recent Zika virus infection.
- Serial fetal ultrasounds should be considered.

Healthcare Providers should call DPHS for Assistance with Testing

- 603-271-4496
- Patients should NOT call for testing

CDC Guidelines for Evaluation and Management of Infants with Possible Congenital Zika Virus Infection

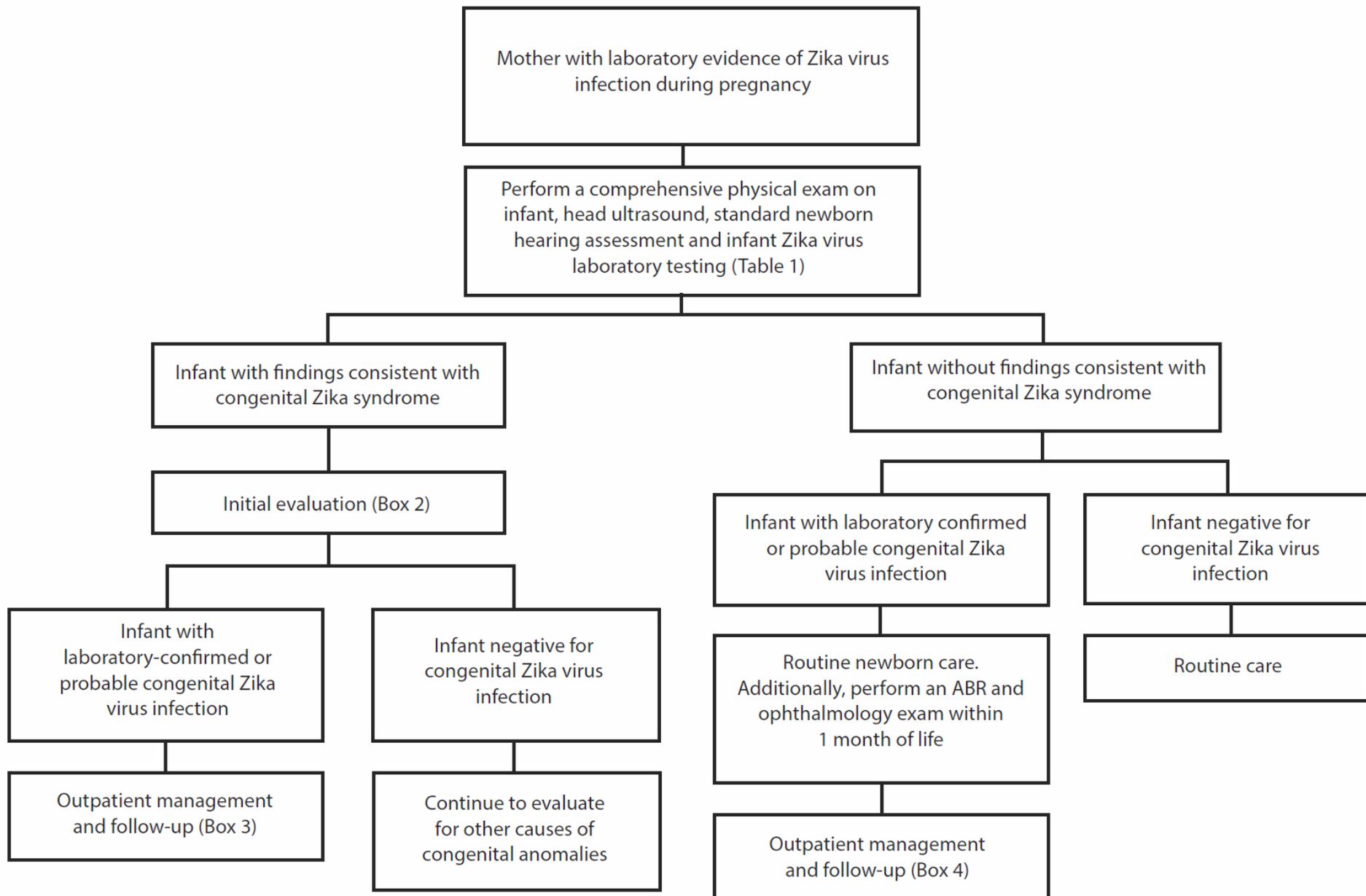
<http://www.cdc.gov/zika/hc-providers/infants-children.html>

Infant Diagnostic Testing For:

- Infants born to mothers with lab evidence of Zika infection

OR

- Infants with findings of congenital Zika syndrome AND whose mothers had a possible epidemiologic exposure
- *Infant testing includes: Urine and Serum PCR, Serum IgM, +/- CSF testing (if available) for PCR and IgM*



Should Non-Pregnant Patients be Tested for Zika?

- Testing to assess risk of sexual transmission is **not recommended**.
- Testing to assess risk to couple who are trying to conceive (and risk to potential fetus) is **not recommended**.
- Testing is available for people who may have been exposed to Zika through sex and who have symptoms.
- Testing is available for individuals who may have been exposed AND are symptomatic, if the healthcare provider thinks it will affect clinical management.

Reproductive Planning

- Healthcare providers should discuss reproductive/family planning with patients
- Those not wanting to conceive should be made aware of the risks of Zika and given access to effective contraception
- Semen testing is not available and not recommended to assess for sexual transmission risk

CDC Guidance For Those Trying to Conceive *(Updated by CDC 9/30/16)*

- Women (whether symptomatic or asymptomatic):
 - Wait **8 weeks** after symptoms first appeared, or exposure occurred, before attempting conception
- Men (whether symptomatic or asymptomatic):
 - Wait **6 months** after symptoms first appeared, or exposure occurred, before attempting conception
- Men and women trying to conceive should consider avoiding travel to areas of active transmission

Questions?