

Topic

Zika Virus Update July 29, 2016

Update and
What is New

Incidence

As of July 25, 2016 in the United States



Zika Virus

- Greater than 1400 cases
 - 4 confirmed cases through local mosquito transmission in Florida
 - 15 sexual transmission (1 female to male)
 - 1 lab transmission
- 5 cases Guillain-Barre's Syndrome
- Local mosquito born transmission reported in 50 countries/territories

Pregnancy

- Greater than 400 pregnant women with Zika
- 12 newborns with birth defects
- 6 pregnancies terminated due to birth defects

- Congenital Zika Syndrome definition expanded:
 - A wide range of birth defects is being reported to the WHO as a result of intrapartum ZIKA infections e.g. microcephaly, craniofacial disproportion, spasticity, seizures, Irritability, eye problems, and brainstem dysfunction.

Transmission

- Unusual but reported transmission
 - Female to male AND Female to female
 - Caregiver of patient who died with extremely high viral load acquired disease presumably from non sexual secretions (urine, saliva)
- Semen carriage now reported for > 3 months.
- First two cases of possible mosquito local transmission reported in Florida.
- Protection against mosquito bites should be utilized.
 - Both DEET and Picaridin are considered similarly effective at equivalent concentrations.

	<ul style="list-style-type: none"> ○ Sunscreen should be applied before mosquito repellent and combination products are not recommended. <p><u>Guidelines and Testing</u></p> <ul style="list-style-type: none"> ● Pregnant women can have positive pcr tests (indicating acute disease) for up to 10 weeks after symptom onset (compared to usually < 1 week for non-pregnant persons). ● Some at risk asymptomatic pregnant women can have positive pcr tests in serum and/or urine ● CDC again updated guidance for prevention of sexual transmission July 25, 2016. <ul style="list-style-type: none"> ○ Now includes female to female and female to male barrier precautions. ○ In at risk situations, pregnant women should use barrier methods consistently or abstain from sex for duration of the pregnancy regardless of whether the partner is male or female. ○ Routine laboratory assessment of risk for sexual transmission is of uncertain value with present tests. ● New significantly updated CDC guidelines for testing pregnant women with possible Zika Virus exposure July 25, 2016. <ul style="list-style-type: none"> ○ Extends serum pcr testing to 2 weeks from onset of disease or after last day of exposure. ○ Explains pcr and IgM testing guidelines with ongoing exposure risk or end of exposure risk. ● Confirmatory PRNT testing for IgM positive patients has increased false positives and complicates interpretation of serologic tests. This raises the importance of developing better tests.
<p>What you Should Know</p>	<p><u>Screening</u></p> <ul style="list-style-type: none"> ● All pregnant women in the United States and U.S. territories should be assessed for possible Zika virus exposure at every prenatal care visit. ● The Zika Screening Algorithm (Zika Screening Algorithm) has been updated to reflect the most recent guidelines. ● The Sutter EHR will be updated to reflect current guidelines . <p><u>Evaluation</u></p> <ul style="list-style-type: none"> ● Infants born to women with laboratory evidence of confirmed or possible Zika virus infection should be evaluated for congenital Zika virus infection. ● Sexual transmission is possible not only from men but from women to men and women to women. <p><u>Testing</u></p> <ul style="list-style-type: none"> ● Urine pcr test is positive longer than serum test and should be included with all acute disease testing. ● Pcr tests in serum and urine may be positive for extended periods of time in pregnant women with Zika infection. ● Quest Labs can perform serum pcr testing but other tests are still being performed at State or CDC labs. Quest is working with the CDC to validate urine pcr testing. ● Quest Labs is keeping all specimens for 4 weeks. If a Public Health lab wants additional testing, Quest Labs will forward as requested for IgM/PRNT testing.

<p>What to DO</p>	<ul style="list-style-type: none"> • Ensure that the serum specimen has enough to enable Quest Labs to keep the specimen for 4 weeks, in case additional testing is needed. • Include urine specimens as well as serum when submitting specimens for ZIKA pcr testing • Contact your public health department or the CDPH VRDL (Viral and Rickettsial Diseases Lab) for questions concerning testing and diagnostic interpretation of results. • Utilize the CDC ZIKA site for latest guidelines as new information is being released regularly. • Utilize SHEMS Resources to educate staff and providers.
	<p><u>Additional Resource Tools:</u></p> <ul style="list-style-type: none"> • Resources and tools can be found on the SHEMS SITE by clicking HERE. • Details regarding updated CDC guidance can be found by clicking HERE. • Congenital Zika Syndrome <i>Bulletin of the World Health Organization</i> 2016;94:406-406A. http://dx.doi.org/10.2471/BLT.16.176990 • Update: Interim Guidance for Prevention of Sexual Transmission of Zika Virus-July 25, 2016 http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e2.htm • Update: Interim Guidance for Health Care Providers Caring for pregnant women with possible Zika virus exposure- July 25, 2016 http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm