

HEALTH ALERT NETWORK
HEALTH DISTRICT 4

ZIKA VIRUS ADVISORY FOR HEALTH CARE PROVIDERS

Central District Health Department Asks Providers to be Alert for Zika Virus Illness
among Symptomatic Returning Travelers

January 20, 2016

Please consider Zika virus infection when evaluating patients presenting with clinically compatible symptoms after travel to affected areas, including Puerto Rico and multiple countries in the Americas south of the United States (<http://www.cdc.gov/zika/geo/index.html>).

Local transmission of Zika virus has not been documented in the continental United States. However, Zika virus infections have been reported in travelers returning to the United States. The potential vector mosquito species are not found in Idaho currently. With the recent outbreaks in the Americas, the number of Zika virus disease cases among travelers visiting or returning to the United States likely will increase.

Evaluation of Travelers

Zika virus infection should be considered in patients with symptoms including acute fever, rash, arthralgia, or conjunctivitis, with travel history to areas with ongoing transmission in the two weeks prior to onset of illness. Zika, dengue, and chikungunya virus infection have similar geographic distribution and clinical presentation. Because of this, patients with symptoms consistent with Zika virus disease should also be evaluated for dengue and chikungunya virus infection. Additional information for healthcare providers is available at <http://www.cdc.gov/zika/hc-providers/index.html>.

Reporting and Testing

Healthcare providers should report suspected Zika virus disease cases to CDHD at 208-327-8625 or the Idaho Bureau of Communicable Disease Prevention Epidemiology Program at 208-334-5939 to facilitate diagnostic testing through the Idaho Bureau of Laboratories. There is no commercially available test for Zika virus.

Serum specimens should be collected for testing within the first week of illness for RT-PCR AND ≥ 4 days after onset of illness for IgM and neutralizing antibody tests. When requesting testing, please provide the date of illness onset, dates of specimen collection, specimen type, description of clinical illness, travel history, and flavivirus vaccination history (e.g., yellow fever, Japanese encephalitis virus).

Pregnant women with a history of travel to an area with ongoing Zika virus transmission should be tested for Zika virus infection if:

- Reporting symptoms consistent with Zika virus disease during or within 2 weeks of travel OR
- Ultrasound findings show fetal microcephaly or intracranial calcifications.

Amniotic fluid may be tested and testing of tissue from live births with evidence of maternal or fetal Zika virus infection is recommended.

Treatment

No specific antiviral treatment is available for Zika virus disease. Treatment is generally supportive and can include rest, fluids, and use of analgesics and antipyretics. Fever should be treated with acetaminophen.

Additional Recommendations for Pregnant Women

Pregnant women should be advised to consider postponing travel to any area where transmission is ongoing. Pregnant women or women trying to become pregnant who wish to travel to these areas should be advised to strictly follow steps to avoid mosquito bites during the trip (<http://wwwnc.cdc.gov/travel/yellowbook/2016/the-pre-travel-consultation/protection-against-mosquitoes-ticks-other-arthropods>).

For additional information about management of Zika virus infection in pregnancy see <http://www.cdc.gov/mmwr/volumes/65/wr/mm6502e1er.htm>

For questions and additional information, please contact Central District Health Department Communicable Disease Control at (208) 327-8625.