



Date: February 24, 2016
To: CAHAN San Diego Participants
From: Public Health Services, Epidemiology Program

Zika Virus Advisory #3 – New CDC Guidelines and Health Advisory Issued and Case Count Update

This health advisory notifies CAHAN participants that the Centers for Disease Control and Prevention (CDC) has issued updated guidelines on Zika virus for the management of infants and children, and a health advisory on the sexual transmission of Zika. This advisory also updates international, national and local Zika case information and provides educational resources on Zika, including a CDC webinar on February 25, 2016.

Updated Interim Guidelines for Healthcare Providers

On February 19, 2016, CDC released the attached [Update: Interim Guidelines for Healthcare Providers Caring for Infants and Children](#). The guidance, which has been expanded to cover children up to 18 years old, includes these updates:

- A new recommendation that infants with typical head size, normal ultrasounds, and a normal physical exam born to mothers who traveled to or lived in areas with Zika do not require any special care beyond what is routinely provided to newborns.
- A new recommendation to include Zika virus disease in the differential diagnoses of children, in addition to infants, who have traveled to or lived in an area with Zika within the past 2 weeks and have at least two of these symptoms: fever, rash, red eyes, or joint pain. Because transmission of Zika virus from mother to infant during delivery is possible, this recommendation also applies to infants during the first 2 weeks of life whose mother traveled to or resided in an affected area within 2 weeks of delivery.

CDC Health Advisory on Sexual Transmission of Zika

On February 23, 2016, CDC issued the attached [Health Advisory Update: Interim Guidelines for Prevention of Sexual Transmission of Zika Virus – United States, 2016](#) as a reminder to clinicians and the public to be aware of and adhere to current recommendations for preventing sexual transmission of Zika virus, particularly for men with pregnant partners.

CDC and several state and local public health departments are investigating 14 cases of possible sexual transmission of the virus, including several events involving possible transmission to pregnant women. In two of these new suspected sexual transmission events, Zika virus infection has been confirmed in women whose only known risk factor was sexual contact with an ill male partner who had recently travelled to an area with local Zika virus transmission; test results of the male partners are pending. For four additional suspected sexual transmission events, preliminary laboratory evidence (i.e., reactive IgM antibody test) is available for the women, but confirmatory testing is still pending. For eight suspected events, including a case from San Diego, the investigations are ongoing.

In all events for which information is available, male travelers reported symptom onset within 2 weeks prior to symptom onset in their non-traveling female partner. Sexual transmission of Zika virus from infected women to their sex partners has not been documented, nor has transmission from persons who are asymptotically infected. Sexual transmission of many infections, including those caused by other viruses, is reduced by consistent and correct use of latex condoms.

More information about the sexual transmission of Zika may be found here: [Interim Guidelines for Prevention of Sexual Transmission of Zika Virus](#).

Zika-affected Countries and Case Count

To date, 29 countries and territories in the Americas have [reported local transmission of Zika virus](#). Over 130,000 confirmed and suspected Zika cases [have been reported](#) since the epidemic began in the Western Hemisphere in 2015. American Samoa, Cape Verde, Samoa and Tonga have also had recent reports of locally transmitted Zika virus. An up-to-date list of countries with ongoing Zika transmission may be found at the [CDC Zika Travel website](#).

As of February 19, 2016, 93 locally transmitted cases have been [confirmed in Mexico](#). There have been no reports of local transmission of Zika virus in Mexico City or in Baja California. Weekly updates on the locations in Mexico with locally transmitted Zika virus may be found at the [Mexican Ministry of Health Zika Information website](#) (in Spanish) under the tab labeled "Información Relevante."

As of February 17, 2016, 82 Zika cases have been confirmed in the continental United States. None have been locally acquired vector-borne cases. Local transmission has occurred in Puerto Rico and the U.S. Virgin Islands. U.S. case counts are updated weekly at [CDC Zika Disease in the United States website](#).

The California Department of Public Health (CDPH) has [reported 11 imported cases](#) of Zika virus since 2013. The number of laboratory-confirmed Zika cases in the state is updated weekly at the [CDPH Zika webpage](#).

Three travelers returning to San Diego have been confirmed with Zika virus infection: an individual who returned from the Cook Islands in July, 2014; an individual who returned from Kiribati in July, 2015; and an individual who returned from Colombia in January, 2016. All fully recovered and none were pregnant. Several other symptomatic travelers and asymptomatic pregnant women are currently under investigation by the County Epidemiology Program.

Actions Requested of Healthcare Providers:

- **Suspect** Zika (also consider dengue and chikungunya) in travelers with acute onset of fever, maculopapular rash, arthralgia, or conjunctivitis within 2 weeks after return from a place with local Zika virus transmission. Patients with Guillain-Barré syndrome after travel to Zika-affected areas should also be evaluated for the virus.
- **Report** suspected cases of Zika virus with appropriate symptomology and travel history to the Epidemiology Program by phone at 619-692-8499 during business hours Monday-Friday, or 858-565-5255 after-hours on evenings, weekend and County-observed holidays, **and** by faxing a [Confidential Morbidity Report Form](#) to 858-715-6458. Providers should have the following information ready before contacting the Epidemiology Program:
 - Symptoms, date of onset;
 - Dates of travel and country/countries of travel;
 - If pregnant, estimated gestational age;
 - History of previous infection with dengue, chikungunya or West Nile virus, and history of vaccination for yellow fever or Japanese encephalitis.
- **Test** patients with appropriate symptoms and travel history.
 - **Consultation and approval is required from the Epidemiology Program prior to testing.**
 - Some patients have experienced challenges at some commercial laboratories with specimen draws, especially when the only test ordered by a physician is for a Zika specimen intended for delivery to the San Diego County Public Health Laboratory. Providers should work with their supporting laboratories to be sure that specimens can be collected appropriately.
 - DO NOT send specimens directly to CDPH or CDC.
 - Updated specimen guidance can be found [here](#).
- **Advise** patients to avoid mosquito bites. Refer travelers, particularly pregnant women, to the [CDC Travel Advisories](#) for the most current information on Zika-affected countries, and refer patients to the [County Vector Control Program](#) for information on how to prevent mosquito breeding at their homes.

- **Evaluate** pregnant women who traveled to areas with Zika virus transmission while pregnant using the CDC updated [Interim Guidelines for Health Care Providers Caring for Pregnant Women and Women of Reproductive Age with Possible Zika Virus Exposure](#).
- **Inform** men who travel to Zika-affected countries that Zika can be sexually transmitted and to prevent transmission to women who are or may become pregnant using guidance available in the CDC [Interim Guidelines for Prevention of Sexual Transmission of Zika Virus](#).
- **Evaluate** fetuses and infants of women infected with Zika virus during pregnancy for possible congenital infection and microcephaly using the updated CDC [Interim Guidelines for Evaluation & Testing of Infants with Possible Congenital Zika Virus Infection](#).

CDC Clinician Outreach and Communication Activity (COCA)

CDC has scheduled a COCA call and webinar entitled “Update on Interim Zika Virus Clinical Guidance and Recommendations” on **February 25 from 11 AM to noon (Pacific Time)**. During this COCA Call, participants will learn why CDC has updated the clinical guidelines and how they can use the guidelines for Zika virus disease evaluation and testing. A recording of the call will be available on the [CDC COCA website](#) a few days after the event.

The phone number for the call is 888-455-0056, passcode 7024369. For webinar links and more information on this COCA call visit: http://emergency.cdc.gov/coca/calls/2016/callinfo_022516.asp

Useful Resources

Centers for Disease Control and Prevention

- [Fact Sheets and Posters in English and Spanish](#)
- [Questions and Answers for Obstetrical Healthcare Providers](#)
- [Questions and Answers for Pediatric Healthcare Providers](#)
- [Zika Virus Information and Guidance for Clinicians](#)

California Department of Public Health

- [Aedes aegypti and Aedes albopictus Mosquitoes in California \(CDPH\)](#)
- [Zika](#)

County of San Diego

- [Department of Environmental Health Vector Control Program](#)
- [Public Health Services Zika Virus Webpage](#)

Other

- [Zika Virus – Pan American Health Organization](#)
- [Center for Infectious Disease Research and Policy Zika Resource Webpage \(University of Minnesota\)](#)
- [Zika Virus Resource Centre - Lancet](#)
- [New England Journal of Medicine Journal Watch for Zika](#)

CAHAN San Diego

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