

# Zika Virus

and how Arkansas is preparing

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#### What is Zika?

- Zika is a virus (related to dengue virus) that is spread through Aedes species mosquito bites.
- Aedes mosquitoes also spread dengue, yellow fever, and chikungunya viruses.
- Zika infection is a risk to anyone traveling to regions of world where Zika virus transmission is ongoing.
- Zika infection is a particular concern to pregnant women because of the association with birth defects.







# **Zika Virus History**

- First isolated from a monkey in Uganda in 1947
- Prior to 2007, only sporadic human disease cases reported from Africa and southeast Asia
- In 2007, first outbreak reported on Yap Island,
   Federated States of Micronesia
- In 2013–2014, >28,000 suspected cases reported from French Polynesia
- In May 2015, Brazil reported the first outbreak of Zika virus in the Americas

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## **Aedes Mosquitoes**

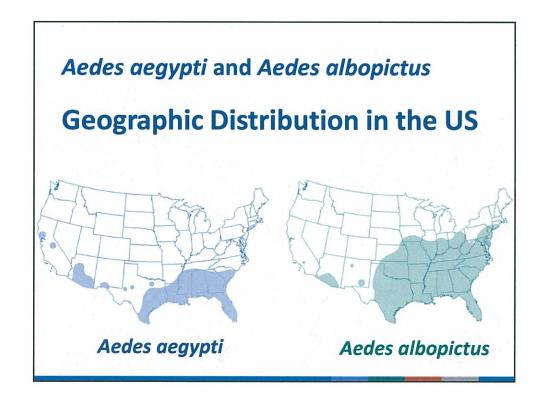
- Aedes aegypti more efficient vectors for humans, only bite people
- Aedes albopictus bite people plus other animals
- Both can transmit dengue and chikungunya viruses as well
- Lay eggs in water-holding containers around homes
- Live in and around households urban mosquito
- Aggressive daytime biters, also bite at night

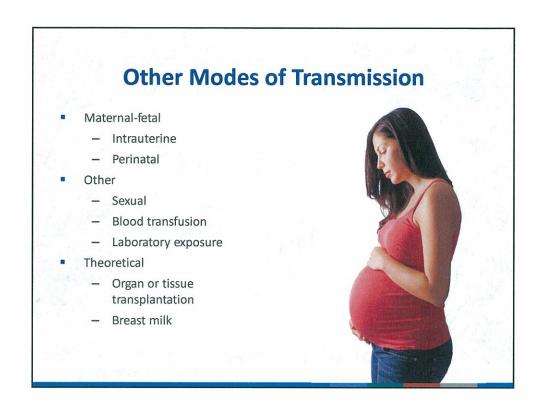


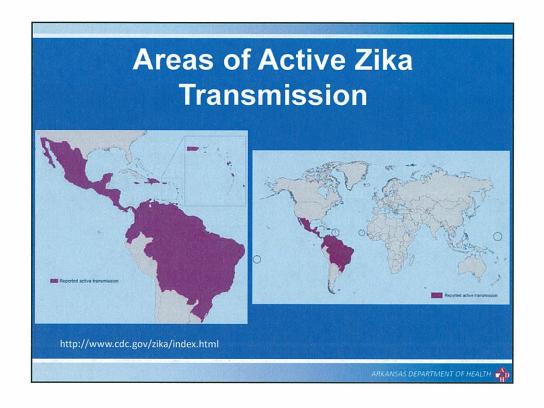
Aedes aegypti

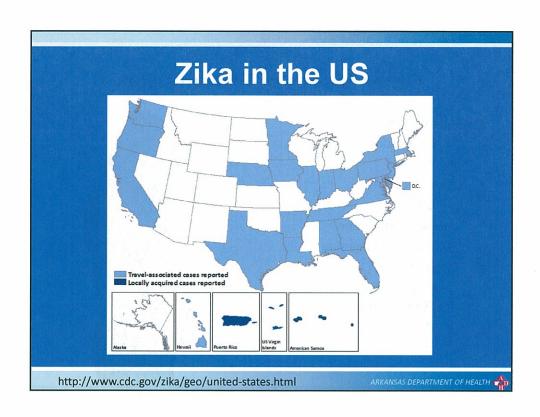


Aedes albopictus









# US States • Travel-associated Zika virus disease cases reported: 107 • Locally acquired vector-borne cases: 0 US Territories • Travel-associated cases reported: 1 • Locally acquired cases reported: 39

## **Symptoms**

- Only about 1 in 5 people infected with Zika virus become ill (similar to WNV).
- Most common symptoms are fever, rash, joint pain, or conjunctivitis (red eyes). Other common symptoms include muscle pain and headache.
- Illness is usually mild with symptoms lasting for several days to a week.
- Severe disease requiring hospitalization is uncommon.
- Deaths are rare.
- Guillain-Barré syndrome (GBS), which can cause paralysis, has rarely been associated with Zika infection.





# **Diagnostic Testing for Zika Virus**

- No commercially available tests
- Reverse transcriptase-polymerase chain reaction (RT-PCR) for viral RNA in serum collected ≤7 days after illness onset
  - Available at ADH lab as of 2/5/16
- **Serology** for IgM and neutralizing antibodies in serum collected ≥4 days after illness onset
  - Available at CDC. Will be available at ADH soon
- Plaque reduction neutralization test (PRNT) for ≥4-fold rise in virus-specific neutralizing antibodies in paired sera - Only available at CDC
- Immunohistochemical (IHC) staining for viral antigens or RT-PCR on fixed tissues
  - CDC only



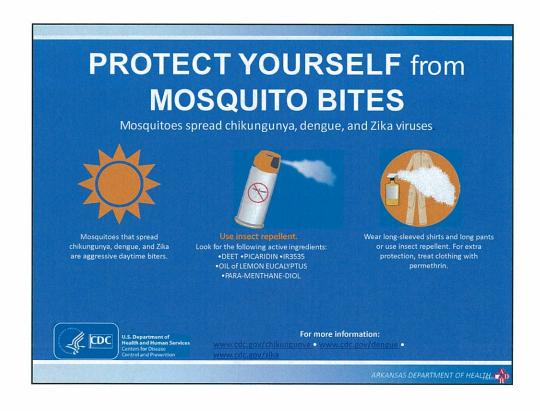


#### **Treatment**

- No vaccine or medications are available to prevent or treat Zika infections.
- Treat the symptoms:
  - Get plenty of rest
  - Drink fluids to prevent dehydration
  - Take medicines such as acetaminophen to relieve fever and pain
  - Aspirin and other non-steroidal anti-inflammatory drugs (NSAIDs), like ibuprofen and naproxen, should be avoided until dengue can be ruled out to reduce the risk of hemorrhage.

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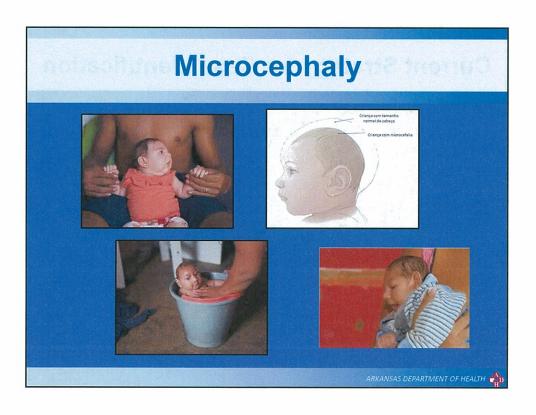


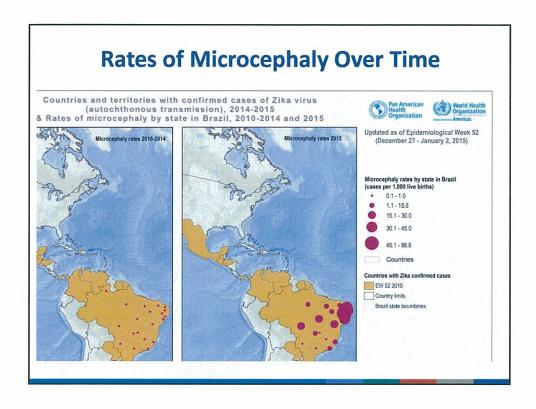


#### **Protect Others**

- Travelers to areas where Zika is present should avoid mosquitoes while abroad and for the first 10 days after they return home whether they have symptoms of illness or not.
  - During the first week of infection, Zika virus can be found in the blood and passed from an infected person to another mosquito through mosquito bites.
  - An infected mosquito can then spread the virus to other people.







#### **Current Strategy for Case Identification**

- Test travelers returning from Zika endemic areas with acute onset of fever, maculopapular rash, arthralgia, or conjunctivitis within 2 weeks after return
- Offer testing to women who traveled to areas with Zika virus transmission while they were pregnant
- Evaluate fetuses/infants of women who traveled to Zika endemic areas during pregnancy for possible congenital infection and microcephaly
- Consider possible local transmission in areas where Aedes species mosquitoes are active



#### Zika: What We Know

- Zika is primarily transmitted through mosquito bites.
- · It can be spread through sexual contact.
- · It might be spread through blood transfusion.
- Most people who get it do not have symptoms (80%).
- Zika virus can be spread from a pregnant woman to her fetus.
- There have been reports of a serious birth defect of the brain called microcephaly in babies of mothers who had Zika virus while pregnant.
- · There is no vaccine or treatment.





#### Zika: What We Don't Know

- If there's a safe time during your pregnancy to travel to an area with Zika.
- If you do travel and you are bitten, how likely you are to get Zika.
- If you are infected with Zika, how likely it is that your baby will have birth defects from the infection.
- And a lot more...





#### Recommendations

- If pregnant, or planning to become pregnant, do not travel to areas affected by Zika virus.
- If you travel to affected areas, protect yourself from mosquito bites.
- · Practice mosquito control at home in Arkansas, whether you have traveled or not (we still have other diseases carried by mosquitoes, like WNV and EEE).





# **ADH Preparation**

- · Mosquito Surveillance
- Communicating with healthcare professionals
- · Evaluating those with possible Zika and reporting cases to CDC (1 confirmed)
- · Communications Plan and ongoing communications with a variety of audiences
- Activation of EOC to Level 3: Increased Preparedness





