



Zika Virus

Public Information Update/phone script

Date: February 25, 2016

Time: 12:00 p.m.

**** Highlighted text indicates new, revised or updated information**

Note to operators: When people call asking questions that are specific to their personal situation, tell them that we cannot provide advice about how to manage a particular individual. The decision on how best to manage a particular individual must be made in conjunction with the individual's health care provider.

ZIKA VIRUS

What is Zika?

Zika is a viral infection that is spread by the bite of an infected mosquito. Outbreaks typically occur in tropical Africa and southeast Asia. In May 2015, Brazil reported the first outbreak of Zika in the Americas. Zika is now present in many tropical areas.

What are the countries and territories that have reported ongoing transmission in the Americas Region?

Since this is an evolving situation, the list of affected countries is likely to change. For up-to-date lists of countries please visit the CDC website at <http://www.cdc.gov/zika/geo/> or the Pan American Health Organization at www.paho.org. As of February 19, 2016 the countries and territories have reported ongoing transmission of Zika include: American Samoa, Aruba, Barbados, Bolivia, Bonaire, Brazil, Cape Verde (Africa), Colombia, Costa Rica, Curacao, Dominican Republic, Ecuador, El Salvador, French Guiana, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Jamaica, **Marshall Islands (Oceania/Pacific Islands)**, Martinique, Mexico, Nicaragua, Panama, Paraguay, Puerto Rico, Saint Martin, Samoa (Oceania/Pacific Islands), Suriname, Tonga, **Trinidad & Tobago**, U.S. Virgin Islands, and Venezuela.

Are there any people with Zika in the US or New Jersey?

Locally transmitted cases of Zika by mosquitoes have not been identified in the United States, although the potential for local transmission exists, as *Aedes* mosquitoes (the mosquitoes that transmit Zika) are present in many states. In late December 2015, the NJDOH identified New Jersey's first laboratory-confirmed case of Zika in a Bergen county woman exposed in Colombia. While there is no local public health risk associated with this travel-related case of Zika, the NJDOH informed local health departments (LHDs) and health care providers to increase awareness of the risk of Zika in travelers to South and Central America and the Caribbean.

Why has the CDC issued a travel alert for Zika if there is no transmission in the US?

Zika virus can be spread from a pregnant woman to her unborn baby. There have been reports of a serious birth defect of the brain called microcephaly and other poor pregnancy outcomes in babies of mothers who were infected with Zika virus while pregnant. Knowledge of the link between Zika and these outcomes is evolving, but until more is known, CDC recommends special precautions for the following groups:

Women who are pregnant (in any trimester):

- Consider postponing travel to any area where Zika virus transmission is ongoing.
- If you must travel to one of these areas, talk to your doctor first and strictly follow steps to prevent mosquito bites during your trip.

Women who are trying to become pregnant:

- Before you travel, talk to your doctor about your plans to become pregnant and the risk of Zika virus infection.
- Strictly follow steps to prevent mosquito bites during your trip.

What can we expect in the near future?

Specific areas where Zika virus transmission is ongoing are often difficult to determine and are likely to change over time. As more information becomes available, travel notices will be updated.

Is the U.S. at risk of a widespread outbreak?

While areas in the south and southcentral U.S. are home to the type of mosquito that transmits Zika virus, a widespread outbreak is not expected. If U.S. mosquitoes become infected with the virus, it will likely result in localized outbreaks which can be controlled through good surveillance and mosquito control efforts. Additionally, in the U.S there is widespread use of window screens and air conditioning which reduce exposure to mosquitoes. The CDC's assumption is based on studies of other mosquito-borne diseases, such as dengue and Chikungunya, that had localized transmission in the U.S but did not expand to large, uncontrollable outbreaks.

What is Guillain-Barré syndrome (GBS)?

Guillain-Barré syndrome (GBS) is an uncommon sickness of the nervous system in which a person's own immune system damages the nerve cells, causing muscle weakness, and sometimes, paralysis. About 3,000 to 6,000 people develop GBS each year in the U.S. GBS symptoms include weakness of the arms and legs that is usually the same on both sides of the body. These symptoms can last a few weeks or several months. Most people fully recover from GBS, but some people have permanent damage, and in 1 out of 20 cases people have died.

Most cases of GBS tend to occur for no known reason. Researchers do not fully understand what causes GBS. Most people with GBS report an infection before they have GBS symptoms. Rarely, vaccination has also been associated with the onset of GBS.

Does Zika virus infection cause GBS?

Currently, it is not known if there is a connection between Guillain-Barré syndrome (GBS) and Zika virus infection. It is difficult to determine if any particular pathogen or germ plays a role in developing GBS. The Brazil Ministry of Health has reported an increased number of people who have been infected with Zika virus who also have GBS. The CDC is working with Brazil to study a possible link between Zika and GBS.

Is there a link between pesticides and microcephaly?

Several media reports in February 2016 suggested that a pesticide called pyriproxyfen might be linked with microcephaly. Pyriproxyfen is a registered pesticide in Brazil and other countries that has been used for decades and is added to drinking water in Brazil. Pyriproxyfen has not been linked to microcephaly and the World Health Organization (WHO) has approved the use of pyriproxyfen for the control of disease-carrying mosquitoes.

ZIKA TESTING

Who should be tested for Zika virus?

- Pregnant women, **both symptomatic and asymptomatic**, with a history of travel to an area with ongoing Zika transmission
 - Priority will be given to pregnant women who had symptoms compatible with Zika virus disease, which includes **two or more** of the following:
 - Fever
 - Maculopapular rash
 - Joint pain (arthralgia)
 - Red eyes (conjunctivitis)
 - For asymptomatic pregnant women, testing will be approved if offered between 2 and 12 weeks after travel.

- Pregnant women with travel to a country with current Zika transmission who have a fetal ultrasound suggestive of microcephaly or intracranial calcifications
- Infants with microcephaly or intracranial calcifications detected prenatally or at birth, and whose mother traveled to or resided in an area with Zika transmission while pregnant
- Infants born to mothers who had a confirmed positive or inconclusive test result for Zika following travel to, or residence in, an area with Zika while pregnant
- Non-pregnant individuals currently symptomatic with two or more of the following symptoms and travel within the past two weeks to country with Zika transmission, or non-pregnant individuals with Guillain-Barre Syndrome and travel to a country with Zika transmission
 - Acute onset of fever
 - Rash
 - Joint pain (arthralgia)
 - Red eyes (conjunctivitis)

Considerations for follow up: Asymptomatic pregnant women with a history of travel to an area of Zika transmission while pregnant, regardless of past symptoms, should consult with their health care providers. Providers may refer to the CDC MMWR Interim Guidelines for Pregnant Women During a Zika Virus Outbreak:

<http://www.cdc.gov/mmwr/volumes/65/wr/mm6502e1er.htm>.

Testing is not indicated for women without a recent travel history to an area with Zika transmission, or for pregnant women who traveled before becoming pregnant.

Can a pregnant woman be tested for Zika weeks or months after being in a country with Zika?

Testing for asymptomatic pregnant women with travel to a country with current Zika transmission should be offered between 2 and 12 weeks after pregnant women return from travel to areas with ongoing Zika virus transmission.

Can a man's semen be tested for Zika virus?

At this time, testing of men for the purpose of assessing risk for sexual transmission is not recommended; although this may change as we learn more. There are tests to detect Zika virus in semen, but they are not widely available and the test results are difficult to interpret. As more is learned, recommendations for the prevention and treatment of Zika virus through sexual transmission will be updated.

ZIKA SIGNS / SYMPTOMS / SEVERITY

What are the signs and symptoms of this virus in people?

The most common symptoms of Zika include:

- Fever
- Rash
- Joint pain (arthralgia)
- Conjunctivitis (red eyes)

Other common symptoms include:

- Muscle pain
- Headache

How severe is illness associated with Zika?

Most people do not develop symptoms. In the 20% of people who do get symptoms, the illness is usually mild. The biggest concern is the chance for a serious birth defect if a pregnant woman becomes infected.

Rash Type and Distribution

At this point in time, the type of rash commonly seen with Zika is still being defined. While maculopapular rash is reported most often, pruritic rashes have been described as well. Additionally, rash on the trunk and face have been described, but we cannot rule out the possibility rash will distribute differently. CDC would like providers to document all rash information so we can learn more about this symptom.

ZIKA VIRUS TRANSMISSION / INFECTIVITY

Is Zika contagious? How does it spread?

Most people who are infected were bitten by an infected mosquito. There has been one report of possible spread of the virus through blood transfusion. Spread of the virus through sexual contact has been reported and is being investigated.

What is the incubation period for Zika?

Symptoms usually begin 2-7 days after being bitten by an infected mosquito and last several days to a week.

Who is at highest risk for getting infected with Zika?

Anyone who is living in or traveling to an area where Zika virus is found, who has not already been infected with Zika virus, is at risk for infection.

Are you immune for life once infected?

Once a person has been infected, he or she is likely to be protected from future infections.

Can mothers pass Zika on to babies?

Zika virus can be passed from mother to her baby during pregnancy. This mode of transmission is being investigated. To date, there are no reports of infants getting Zika through breastfeeding, although the virus has been identified in breast milk. Because the benefits of breastfeeding outweigh the risk of acquiring Zika, mothers are encouraged to breastfeed, even in areas where Zika virus is found.

Can Zika be spread during breastfeeding?

To date, there are no reports of infants getting Zika through breastfeeding. Because of the benefits of breastfeeding, mothers are encouraged to breastfeed even in areas where Zika virus is found. Mothers who are breastfeeding in areas where Zika virus is found should practice mosquito prevention measures such as using insect repellent.

Can Zika be sexually transmitted?

Spread of the virus through sexual contact has been reported and is being investigated. The primary method of transmitting Zika is through the bite of an infected mosquito. The risk for sexual transmission of Zika virus can be eliminated by abstinence and reduced by correct and consistent use of condoms. Given the potential risks of maternal Zika virus infection, pregnant women whose male partners have or are at risk for Zika virus infection should consider using condoms or abstaining from sexual intercourse.

What are the recommendations about the sexual transmission of Zika virus for men and their pregnant partners?

Sexual transmission of Zika virus is possible, and is of particular concern during pregnancy. The CDC recommends that men who live in or have traveled to an area where Zika is found and who have a pregnant partner should abstain from sexual activity or consistently and correctly use condoms during sex (i.e., vaginal intercourse, anal intercourse, or oral sex) throughout the entire pregnancy. Pregnant women should talk to their health care provider about their male partner's possible exposures to mosquitoes and history of Zika-like illness.

What are the recommendations about the sexual transmission of Zika virus for men and their non-pregnant partners?

CDC recommends that men who live in or have traveled to an area where Zika is found and who have non-pregnant sex partners who are concerned about sexual transmission of Zika might

consider abstaining from sexual activity or using condoms consistently and correctly during sex. All persons living in or traveling to areas with Zika virus should take steps to prevent Zika virus infection through prevention of mosquito bites.

Can a previous Zika virus infection cause someone who later becomes pregnant to have an infant with microcephaly?

We do not know the exact risk to the baby if a woman is infected with Zika virus while she is pregnant. However, Zika virus infection does not pose a risk of birth defects for future pregnancies. Zika virus usually remains in the blood of an infected person for about a week. Zika virus has been found in semen for at least two weeks after symptoms of infection began in one report. Another report found the virus in semen at least 62 days after symptoms of infection began. It is not known how long Zika virus can stay in semen. There is no evidence that the virus will cause infections in a baby that is conceived after the virus is cleared from the blood.

If a woman who is not pregnant is bitten by a mosquito and infected with Zika virus, will her future pregnancies be at risk?

If infected, Zika virus usually remains in the blood of an infected person for about a week. There is currently no evidence to suggest that Zika virus infection poses a risk of birth defects in future pregnancies.

I was in a place with Zika recently—how long do I need to wait after returning to get pregnant?

We do not know the risk to a baby if a woman is infected with Zika virus while she is pregnant. Zika virus usually remains in the blood of an infected person about one week. Zika virus has been found in semen for at least two weeks after symptoms of infection began in one report. Another report found the virus in semen at least 62 days after symptoms of infection began. It is not known how long Zika virus can stay in semen. There is currently no evidence to suggest that Zika virus infection poses a risk of birth defects in future pregnancies. A woman who is planning a pregnancy, who has recently traveled to an area with local Zika transmission, should talk to her healthcare provider after returning.

If a woman has traveled to an area with Zika transmission, should she wait to get pregnant?

We do not know the risk to a baby if a woman is infected with Zika virus while she is pregnant. Zika virus usually remains in the blood of an infected person for up to a week. Zika virus has been found in semen for up to two weeks. There is currently no evidence that Zika virus infection poses a risk of birth defects in future pregnancies. A woman thinking about pregnancy, who has recently traveled to an area with local Zika transmission, should talk to her healthcare provider after returning.

Can Zika be spread through blood transfusions?

There is a strong possibility that Zika virus can be spread through blood transfusions. Since most people (80%) infected with Zika do not show symptoms, they may not know they have been infected. It is not known how long Zika virus can stay in blood, but scientists and researchers

believe it is less than 28 days. To date, there have not been any confirmed cases of blood transfusion transmission in the U.S. Multiple reports of Zika being spread through transfusions in Brazil are being investigated.

I was in a place with Zika recently—can I donate blood?

The American Red Cross is closely monitoring the spread of Zika virus. As a precaution, the Red Cross will be working as quickly as possible to implement a self-deferral for blood donors who have traveled to Mexico, the Caribbean, or Central or South America within 28 days prior to presenting to donate. The Red Cross also asks that if a donor does donate and subsequently develops symptoms consistent with Zika virus infection within 14 days of that donation, that he or she immediately notify the Red Cross so that they can quarantine the product.

In areas without active Zika virus transmission, the U.S. Food and Drug Administration (FDA) recommends that donors at risk for Zika virus infection be deferred for four weeks.

Individuals considered to be at risk include:

- Those who have had symptoms suggestive of Zika virus infection during the past four weeks
- Those who have had sexual contact with a person who has traveled to, or resided in, an area with active Zika virus transmission during the prior three months
- Those who have traveled to areas with active transmission of Zika virus during the past four weeks

In areas with active Zika virus transmission, the FDA recommends that Whole Blood and blood components for transfusion be obtained from areas of the U.S. without active transmission.

Can Zika be spread through kissing?

Zika virus has been found in saliva (spit). It is unknown if Zika can be spread through kissing and this is being investigated. Remember that Zika is a mosquito-borne disease and most people who are infected were bitten by an infected mosquito.

TREATMENT

What is the treatment for people with Zika?

There is no specific treatment for Zika. Symptoms are treated by getting rest, drinking fluids to prevent dehydration and taking medicines such as acetaminophen or paracetamol 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 increased bleeding.

Is there a vaccine for Zika?

No, there is currently no vaccine to prevent Zika.

What is New Jersey doing in response to this situation?

The NJ Department of Health is communicating with local health departments and health care providers through health alert messages and conference calls to increase their awareness. Updated information will be posted to the NJDOH website as updates become available.

What would we do if there was a case of Zika in New Jersey?

Travel related cases at this time of year are not a risk to the public since mosquitoes are not active in NJ during the winter months. However, if someone becomes infected while visiting another country in the months when mosquitoes are active in NJ, it will be important for the Zika-infected traveler to avoid mosquito bites during the first week of illness. This will help prevent the mosquitoes here in NJ from getting infected by the traveler. While a widespread Zika outbreak in the U.S. is not expected, anyone infected with Zika should avoid mosquito bites for the first week of illness to help prevent others from getting sick.

ZIKA TRAVEL ISSUES AND CONCERNS

Can I travel to countries affected by the outbreak?

Since Zika is spread by mosquitoes, CDC recommends that travelers to areas with ongoing transmission protect themselves from mosquito bites:

- Cover exposed skin by wearing long-sleeved shirts and long pants.
- Use EPA-registered insect repellents containing DEET, picaridin, or IR3535. Always use as directed. Oil of lemon eucalyptus was removed-safety in pregnant women is unknown.
- Pregnant and breastfeeding women can use all EPA-registered insect repellents, including DEET, according to the product label.
- Most repellents, including DEET, can be used on children aged >2 months.
- Use permethrin-treated clothing and gear (such as boots, pants, socks, and tents). You can buy pre-treated clothing and gear or treat them yourself.
- Stay and sleep in screened-in or air-conditioned rooms.

Women who are pregnant (in any trimester) should consider postponing travel to any area where Zika virus transmission is ongoing. If you are pregnant and must travel to one of these areas, talk to your doctor first and strictly follow steps to prevent mosquito bites during your trip. Women who are trying to become pregnant should talk to their doctor about plans to

become pregnant and the risk of Zika virus infection before travel and strictly follow steps to prevent mosquito bites during travel. All women of child bearing age who choose to travel should follow steps to prevent mosquito bites in the event of an unplanned pregnancy.

Is it safe to get pregnant after traveling to a country with Zika virus?

We do not know the risk to a baby if a woman is infected with Zika virus while she is pregnant. Zika virus usually remains in the blood of an infected person for up to a week. Zika virus has been found in semen for at least two weeks after symptoms of infection began in one report. Another report found the virus in semen at least 62 days after symptoms of infection began. It is not known how long Zika virus can stay in semen. There is currently no evidence that Zika virus infection poses a risk of birth defects in future pregnancies. A woman thinking about pregnancy, who has recently traveled to an area with local Zika transmission, should talk to her healthcare provider after returning.

Should I avoid contact with people that have recently traveled to affected countries?

Zika is not an airborne disease and cannot be spread by coughing, sneezing or talking. However, Zika virus has been found in semen and person-to-person sexual transmission has been documented.

What if I am elderly or have a chronic illness and have plans to travel?

There is currently no evidence that Zika causes more serious illness in the elderly or people with chronic illnesses. It is recommended that **all** travelers consult with their healthcare providers to be sure they are well enough to travel. In most cases, Zika virus causes a mild illness. Providers should consider the patient’s ability to withstand all vector-borne diseases, including but not limited to dengue, Chikungunya, and malaria, which can cause severe illness. Other travel-related illness, such as diarrhea, should also be considered. If a person chooses to travel, they should take steps to avoid mosquito bites, (read the steps from the first question in this section).

ADDITIONAL ZIKA INFORMATION/RESOURCES

Where can I learn more?

The CDC website has additional information about Zika and the current outbreak.

The web address is: <http://www.cdc.gov/zika/index.html>

The web address for CDC travel health notices is: <http://wwwnc.cdc.gov/travel/notices>

For NJ information, go to: <http://www.nj.gov/health/cd/izdp/vbi.shtml>