

Zika Virus

What is Zika virus?

- Zika virus causes infection in humans and is transmitted by mosquitoes found in South and Central America, the Caribbean and in southern parts of North America, as well as many tropical and sub-tropical areas around the world.
- The virus was originally only found in Africa and Asia, and first reported in the Western Hemisphere in 2015.
- The infection is usually mild and lasts for a week or less.
- People usually don't get sick enough to go to the hospital, and they very rarely die of Zika.

How is Zika virus spread?

- Zika is spread mainly through the bite of infected *Aedes* mosquitoes, the same mosquitoes that spread dengue and chikungunya viruses. **These mosquitoes are not found in Canada.**
- The virus can be spread from a pregnant mother to her baby during pregnancy or around the time of birth.
- In rare cases, transmission has occurred through blood transfusion. Returning travellers will not be allowed to donate blood for 21 days after return from travel to a risk area.
- There are reports of Zika virus being sexually transmitted. This is of particular concern during pregnancy.

What are the consequences of Zika virus infection?

- Zika virus infection during pregnancy has been linked to birth defects such as microcephaly (abnormal smallness of the head and brain).
- Zika virus infection has also been linked to Guillain-Barré syndrome – a rare condition where the body's immune system attacks the nervous system causing weakness or paralysis of the muscles.

What are the symptoms of Zika virus?

- Approximately 80% of people with Zika virus infection may not be aware that they have been infected.
- If symptoms occur, they may include fever, rash, joint pain and conjunctivitis (red eyes).

Who is at risk of being infected with Zika virus?

- Anyone who lives in or travels to areas where Zika virus is found and has not already been infected can get it from mosquito bites.
- The virus has rapidly spread in many countries in the Americas where the *Aedes* mosquitoes are present. There have also been outbreaks in tropical Africa, Southeast Asia and the Pacific Islands.
- Because there is a link to birth defects such as microcephaly in babies, Zika virus infection is of particular concern in women who are pregnant, those who are planning to become pregnant and their sexual partners.

How is Zika virus diagnosed?

- Zika virus infection can be diagnosed by testing blood or urine samples.
- Interpretation of the test results are not straight forward because having had certain other infections or vaccinations may cause false positive results.

Who should be tested?

- The recommendations for testing may change as the situation evolves.
- Testing **may be considered** for individuals with a history of travel to an area where Zika is found AND one or both of the following criteria:
 - Is pregnant
 - Presents with a clinical illness compatible with Zika virus infection

Talk to your family physician or obstetrician about your risk for Zika virus infection if you have a history of travel to an area where the virus is circulating.

How is Zika treated?

- There is no specific treatment or vaccine for Zika virus infection at this time.
- Individuals with Zika virus infection can treat the symptoms by getting plenty of rest and drinking plenty of fluids.
- Fever reducing medications can be taken in consultation with your health care provider. Do not take aspirin or non-steroidal anti-inflammatory medications.

What will decrease my risk of getting Zika?

- All travelers to countries where Zika virus is present should take precautions against getting bitten by mosquitoes, day and night.
- Seek information on risk areas by referring to updated websites.
- Wear light-coloured, long-sleeved, loose fitting, tucked-in shirts, long pants, shoes or boots (not sandals).
- Use insect repellents containing DEET or Icaridin as directed by the manufacturer on exposed skin.
- If you need to apply both sunscreen and repellent with DEET, apply the sunscreen first and let it soak into the skin for about 15 minutes, then apply the repellent.
- Stay in a well-screened or completely enclosed air-conditioned room.
- Sleep under a bed net, preferably treated with insecticide.
- Apply a permethrin-based insecticide to clothing and other travel gear for greater protection.

In addition to the insect precautions, the following recommendations apply to pregnant women, women of reproductive age and their sexual partners:

- Pregnant women should avoid travel to areas where Zika virus is circulating, and if travel cannot be avoided, prevention measures should be strictly followed.
- Pregnant women should use barrier methods consistently and correctly with all sexual partners (men and women) for the duration of their pregnancy.
- Women wishing to become pregnant should **wait at least two months** after their return from an affected area before trying to conceive.
- Men who have travelled to an area where Zika virus is circulating should consider abstaining from sex or using condoms correctly and consistently for six months with any partner who could become pregnant.
- Men will not be eligible to donate sperm for six months after returning from an affected country.
- There is a small risk of sexual transmission from women to their sexual partners. This risk is reduced by using barrier methods (male or female condoms) for at least eight weeks after onset of illness or after leaving a Zika-affected area.

For more information contact your physician, nurse practitioner, or HealthLine at 811.

References: US CDC (Mar 11, 2016); BCCDC (Jan 29, 2016); Public Health Ontario (Feb 9, 2016), Committee to Advise on Tropical Medicine and Travel (Feb 8, 2016).

Additional resources:

<http://www.cdc.gov/zika/fs-posters/index.html>

<http://www.cdc.gov/zika/disease-qa.html>

<http://travel.gc.ca/travelling/health-safety/insect-bite>