Zika Virus Disease and Prevention

Presentation to AU All Hands Meeting May 19, 2016

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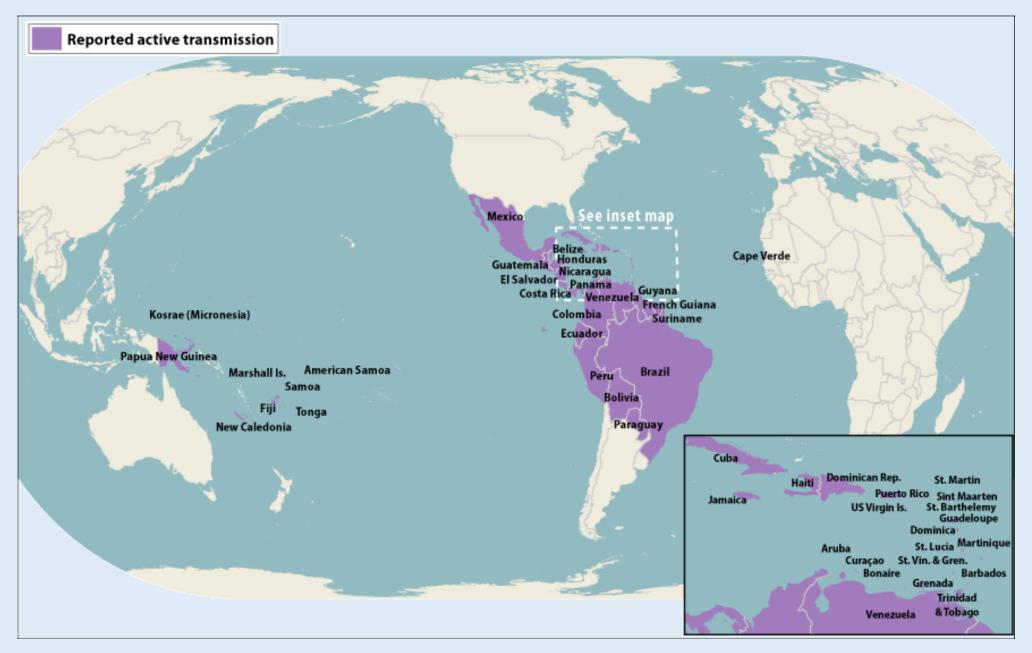
Aedes egypti mosquito







Countries and territories reporting active mosquito transmission of Zika virus as of May 9, 2016



Concern about Zika virus is rapidly evolving for four main reasons:

- 1. Association of infection with birth malformations and neurological syndromes;
- 2. Potential for further international spread, given the wide geographical distribution of the mosquito vector;
- 3. Lack of population immunity in newly affected areas; and
- 4. Absence of vaccines, specific treatments, and rapid diagnostic tests.

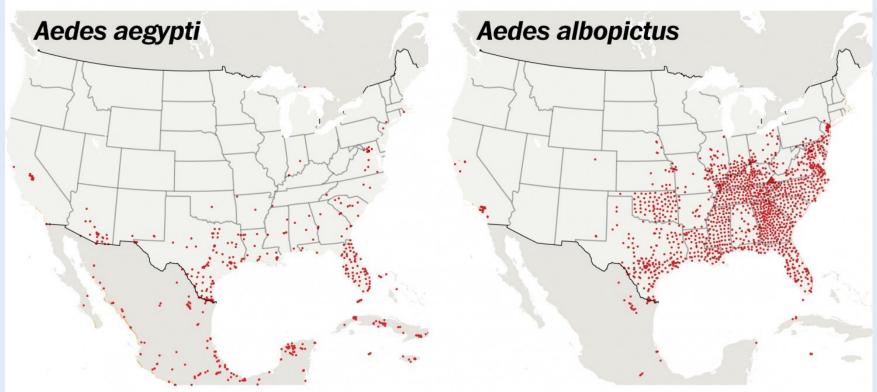




The mosquitoes behind the Zika virus

Aedes aegypti is considered the most important vector for Zika virus transmission to humans, but *Aedes albopictus* has been identified as a potential vector as well.

Known occurrences of Aedes aegypti and Aedes albopictus from 1960 to 2014.*





* Maps depict presence rather than abundance; Occurrence includes adults, pupae, larvae or eggs. Source: Kraemer, M. U. G. et al. The global compendium of *Aedes aegypti* and *Aedes albopictus* occurrence LARIS KARKLIS/THE WASHINGTON POST



Zika Virus Disease Symptoms

- 1 in 5 people infected with Zika virus become ill; 80% have NO symptoms.
- Most common symptoms of Zika are fever, rash, joint pain, or conjunctivitis (red eyes). Other symptoms include muscle pain and headache.
- The illness is usually mild with symptoms lasting for several days to a week.
 People usually do not get sick enough to go to the hospital, and they very rarely die of Zika.
- The incubation period (the time from exposure to symptoms) for Zika virus disease is not known, but is likely to be a few days to a week.
- Zika virus usually remains in the blood (urine, semen, and saliva) of an infected person for about a week, but it can be found longer in some people. Presence of virus does not mean it can infect others.





Zika Virus and Pregnancy

- Zika virus can be passed from a mother to her fetus during pregnancy.
- Congenital microcephaly (a birth defect in which the size of a baby's head is smaller than expected for age and sex).
- Defects of the eye; hearing deficits and impaired growth
- Women who are pregnant should not travel to areas with Zika.
- Pregnant women should take steps to prevent mosquito bites.
- Although the virus is found in breast milk, there are no recommendation against breast feeding.









Centers for Disease Control and Prevention Recommendations for Pregnant Women

- Pregnant women who have recently traveled to an area with Zika should talk to a healthcare provider about their travel even if they do not feel sick.
- It is especially important that pregnant women see a doctor if they develop a fever, rash, joint pain, or red eyes during their trip or within 2 weeks after traveling to a country where Zika has been reported.
- CDC has guidance to help doctors decide what tests are needed for pregnant women who may have been exposed to Zika.
- If you have a male partner who lives in, or has traveled to, an area where Zika transmission is ongoing, either abstain from sex or use condoms consistently and correctly for the duration of pregnancy.





Prevention of Zika Virus Disease

There is no vaccine or medicine for Zika.

The best way to prevent Zika is to prevent mosquito bites:

- Wear long-sleeved shirts and long pants.
- Use permethrin-treated clothing and gear (such as boots, pants, socks, and tents). Do NOT use permethrin products on skin.
- Stay in places with air conditioning or that use window and door screens to keep mosquitoes outside. Use mosquito netting over beds in Zika infested areas.
- Use insect repellents approved by the Environmental Protection Agency. Always follow the instructions on the label and reapply every few hours. (DEET, picaridin, IR3535, and oil of lemon eucalyptus or para-menthane-diol)



Eliminate mosquito breeding sites like containers with standing water.



For additional information go to:

http://www.cdc.gov/zika/



