



## Employee Briefing / Update: Zika Virus

### **Situational Update 25 January 2016**

Zika Virus (ZIKV) is a mosquito-borne viral disease that usually causes a mild illness. It has been present for years in parts of Africa, Southeast Asia and Pacific Islands, and has spread geographically over the last 10 months to more regions within the South and Central Americas, including the Caribbean. The virus may well spread to all countries within the Americas, except Canada and continental Chile.

Though the disease is not considered to be life-threatening, there are evolving concerns of birth defects for the babies of women who become infected while pregnant. There also appears to be an association with the neurological complication “Guillain-Barré Syndrome”.

The situation is rapidly evolving and International SOS is monitoring closely. Updates are available in the medical alerts and the Health Threats sections of International SOS country guides.

So far cases in the USA (except Puerto Rico) have been “imported” – i.e. persons were mosquito-bitten and contracted Zika while outside the country.

As of January 24, 2016: CDC Zika-affected countries, CDC Travel Health Alert Level 2, include (22):

Americas (20): Barbados, Bolivia, Brazil, Colombia, Ecuador, El Salvador, French Guiana, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Martinique, Mexico, Panama, Paraguay, Puerto Rico, Saint Martin, Suriname, Venezuela

Africa and Oceania / Pacific Islands (2): Samoa, Cape Verde

CDC Link: <http://www.cdc.gov/zika/geo/index.html>

Note that Zika virus is also present in other areas and travelers have been infected in other countries in the past two years.

Contact the International SOS Assistance center prior to travel to ensure you have the latest information.



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### What is my risk?

The risk of contracting Zika disease is present wherever there are infected mosquitoes, and probably higher where there is a documented active outbreak in people.

### What are the symptoms?

Most people have no symptoms. If symptoms occur they are typically fever, rash, conjunctivitis (red eyes), muscle and joint pains. The symptoms are similar to many other illnesses such as dengue, and are generally not severe, nor life-threatening. No specific medication is available to treat Zika. Most people make a full recovery within a week. If symptomatic relief is required, avoid aspirin and ibuprofen (and other non-steroidal anti-inflammatory medications) unless dengue fever has been excluded and your doctor has advised you to take them.

The major concern with Zika appears to be for pregnant women who, if infected, may deliver infants with microcephaly (small heads) and/or other abnormalities, and may have an increased risk of early delivery and other poor outcomes.

No vaccination is available. Thus, strict bite protection is recommended.

### What if I've been bitten?

If you are in a Zika-affected area, and have been bitten by a mosquito, stay calm. First, not all mosquitoes carry Zika, even in areas where there is an outbreak. Second, only one out of 5 people who are bitten by a Zika-infected mosquito develop symptoms.

Monitor your health for two weeks. Seek medical advice if symptoms develop.

### What if I have symptoms?

If symptoms do evolve, they typically will occur within 2 to 10 days. If ill, seek medical attention, ensuring you advise the doctor of your travel. This is especially important if you are, might be, or are planning to fall pregnant. You may be tested for Zika, and may have your pregnancy monitored.

### May I travel?

The WHO recommends travel can continue to Zika affected countries. However if you are (or plan to become) pregnant, or are otherwise concerned for your welfare please review the CDC travel recommendations [below](#). If you decide to delay business related travel to a Zika affected country, please advise your manager of your change in itinerary. Management is advised to accommodate such changes without requiring that you provide your reason. It is expected that recommendations may change, so monitoring of the situation is recommended.

### Advice for pregnant women travelers to affected areas



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The CDC recommends that pregnant women consider postponing travel. It is expected that travel recommendations may change, so, review prior to any travel.

#### **Advice for women of childbearing age traveling to affected areas**

The CDC recommends that women of childbearing age, particularly those seeking to become pregnant, should seek medical advice prior to travel to assess their risks. It is expected that recommendations may change, so monitoring of the situation is recommended.

#### **Advice for those returning from affected areas**

For those returning from affected countries, it is recommended that they monitor their health for 14 days. If symptoms of Zika develop, seek medical attention. It is expected that recommendations may change, so monitoring of the situation is recommended.

#### **Advice for pregnant women returning from affected areas**

For pregnant women returning from affected countries, they should monitor their health for 14 days. If symptoms develop they should seek medical attention, ensuring their doctor is aware of their travel status. Further testing and monitoring may be recommended by your local doctor or your local health authorities. It is expected that recommendations may change, so monitoring of the situation is recommended.

#### **Advice for those living/working in affected areas**

For those living / working in Zika-affected locations, it is recommended that strict bite protection be maintained.

Some local authorities have made additional recommendations for women who are contemplating pregnancy, such as delaying pregnancy. It is expected that recommendations may change, so monitoring of the situation is recommended.

Mosquito control programs must be implemented in living areas to eradicate breeding sites and prevent mosquito bites.

#### **Advice for pregnant women living/working in Affected areas**

For pregnant women in locations where a Zika outbreak is active, strict bite protection is recommended, contact your HR manager to discuss other options. It is expected that recommendations may change, so monitoring of the situation is recommended.



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### What is It?

Zika disease is a mosquito-borne illness which causes mild to moderate symptoms which is rarely fatal. Zika virus (ZIKV) belongs to a group of viruses called flaviviruses. The group also includes dengue, chikungunya, and West Nile virus. The main concern with the disease is the growing evidence to suggest that ZIKV infection may cause microcephaly (small head circumference associated with developmental problems) in babies of women bitten while pregnant.

### History

The Zika virus was first identified in Uganda in 1947 in rhesus monkeys. It was subsequently identified in humans in 1952 in Uganda and the United Republic of Tanzania. In 2013, the virus spread across the Pacific to French Polynesia, then to Easter Island and in 2015 to South America, Central America, and the Caribbean. In May 2015, the World Health Organization reported the first local transmission of Zika virus in the Western Hemisphere, with locally acquired cases identified in Brazil. Currently, outbreaks are occurring in many countries in the Americas. This also includes the identification of Zika virus in several cases in United States.

### How is it transmitted?

The virus is carried by the *Aedes aegypti* mosquito, which also can carry Dengue Fever and the Yellow Fever viruses. The mosquito passes it to people through its bite.

### What are the signs and symptoms?

Generally 1 in 5 people infected with Zika virus become symptomatic. The most common symptoms are fever, rash, joint pain, or conjunctivitis. Other common symptoms include muscle pain and headache. The illness is usually mild with symptoms normally lasting 2-7 days. Severe disease is uncommon, however there appears to be an increasing link with the neurological condition Guillain Barré Syndrome.

### How is the diagnosis made?

Zika virus is diagnosed through RT PCR (reverse transcriptase polymerase chain reaction) and virus isolation from blood samples. Not all locations are able to test for the disease.

### Incubation Period

The incubation period is not well defined but is likely to be 2-10 days after the mosquito bite.

### Prevention

It can be prevented by following strict mosquito-bite prevention measures. The mosquitos bite both indoors and out, and although they prefer to bite during the day they can also bite at night, especially in areas that are illuminated. Bite prevention recommendations from the CDC include:



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- Prevent infection by preventing mosquito bites.
- Use an effective EPA-registered insect repellent that contains DEET, Picaridin, PMD, or IR3535.
- When outdoors, wear clothing that covers most of your body (long sleeves, long pants, socks).
- Ensure windows are covered with fly-wire.
- Consider using an insecticide-treated bed net.
- Use "knock-down" insect spray to kill mosquitoes in your room.
- Choose air conditioned accommodation if possible.
- Using permethrin-treated clothing and gear;

Insect repellents containing DEET, Picaridin and IR3535 are safe for pregnant women.

#### **What is the treatment?**

No specific treatment is available, only supportive measures and symptomatic care with analgesics and antipyretics. Aspirin and other non-steroidal anti-inflammatory drugs (NSAIDs), like ibuprofen and naproxen, should not be given until a dengue diagnosis (which has similar clinical picture) is ruled out due to risk of hemorrhage.

A Vaccine is not presently available.