GLOBAL RESPONSE: On 1 FEB 2016, WHO declared the recent cluster of microcephaly cases and other neurologic disorders reported in Brazil, which followed a similar cluster in French Polynesia in 2014, constitutes a Public Health Emergency of International Concern (PHEIC). The clusters have been temporally associated with Zika virus (ZIKV) transmission in some settings, but a causal link has not been established. WHO made its declaration and related recommendations based on the advice of the first meeting of the Emergency Committee on Zika virus and observed increases in neurological disorders and neonatal malformations convened by the Director-General under the International Health Regulations (2005).

CASE REPORT: From 1 MAY 2015 to 3 FEB 2016, confirmed autochthonous transmission of Zika virus (ZIKV) has been reported in 26 (+4) countries and territories in the Western Hemisphere: Barbados, Bolivia, Brazil, Colombia, Costa Rica, Curacao, Dominican Republic, Ecuador, El Salvador, French Guiana, Guatemala, Guadeloupe, Guyana, Haiti, Honduras, Jamaica, Martinique, Mexico, Nicaragua, Panama, Paraguay, Puerto Rico, Saint Martin, Suriname, U.S. Virgin Islands, and Venezuela. PAHO believes ZIKV will continue to spread in the hemisphere and could reach all countries and territories where Aedes mosquitoes are found (this only excludes Canada and continental Chile). U.S. health authorities say limited outbreaks are possible but widespread outbreaks or epidemics in the continental U.S. are unlikely. As of 2 FEB, Puerto Rico is reporting 21 ZIKV infections, none in pregnant women; the governor has declared a state of emergency. Outside of the Western Hemisphere, recent ZIKV transmission has been reported from American Samoa, Samoa, Cape Verde, Tonga, and Thailand. Past outbreaks have been reported from other areas of Africa, Southeast Asia, and the Pacific Islands.

On 2 FEB, Dallas, TX, health officials reported a case of sexually-transmitted ZIKV infection. At least 39 imported Zika cases have been identified in the mainland U.S. since MAY 2015, including one case of microcephaly in Hawaii associated with travel to Brazil. More imported ZIKV infections among travelers from areas of ongoing transmission are expected. Several European countries, Canada, Australia, and Israel have reported imported ZIKV infections following travel to affected areas of the Americas.

ZIKV AND PREGNANCY: CDC has issued guidance for advising and caring for pregnant women and for evaluating and testing infants with possible congenital ZIKV infection. On 12 JAN 2016, Brazil’s Ministry of Health (MOH) presented evidence to support a biological link between ZIKV infection during pregnancy and subsequent congenital neurological malformations, such as microcephaly. However, the MOH said that more investigations are needed to further substantiate this linkage. Laboratory results, including PCR and tissue sample testing performed by CDC, confirmed the presence of ZIKV RNA in four malformations. At least 3,670 suspected cases of microcephaly. A potential association between ZIKV infection and neurological syndromes, such as Guillian-Barré syndrome (GBS), has been reported in the Americas and is being investigated. CDC is expected to release new recommendations for preventing sexual transmission and updated guidance for pregnant women by the end of this week.

DoD IMPACT: No cases of Zika or Zika-associated congenital neurological malformations have been reported in DoD personnel or beneficiaries. ZIKV infection is not a reportable medical event (RME) in DoD but became a notifiable disease in the U.S. on 29 JAN. Military healthcare providers, however, should consider ZIKV infection in beneficiaries presenting with an undifferentiated febrile illness and a history of travel to areas with ongoing transmission. Providers should consult CDC guidance on evaluating and testing women reporting travel during pregnancy to areas with ZIKV transmission and newborns. Confirmed cases should be reported in DRSi as “Any Other Unusual Condition Not Listed,” with “Zika” entered in the comment field along with pertinent travel history and pregnancy status for females. Testing is available through the CDC and several state health departments, including Hawaii and Florida. DoD clinical laboratories should contact their state or local health department to arrange for testing. There are currently no commercially available diagnostic tests.

TRAVEL ADVISORY: Based on the possible association between ZIKV infections and congenital neurologic malformations CDC has issued Alert Level 2, Practice Enhanced Precautions travel notices for the Caribbean, Puerto Rico, Mexico, Central America, South America, the Pacific Islands, and Cape Verde. CDC is advising women who are pregnant or trying to become pregnant to defer travel to areas of ZIKV transmission, if possible.

Text updated from the previous report will be printed in red; items in (+xx) represent the change in number from the previous AFHSB summary (27 JAN 2016). All information has been verified unless noted otherwise. Sources include: NCMI, CDC, ECDC, Brazil MOH, PAHO, The Lancet, and Hawaii DOH. For questions or comments, please contact: gna.ncri.health-surr.list.afhs-ib-alert-response@mail.mil

Approved for Public Release
Zika Web Sites
• CDC
  • Zika home page
  • Information for health care providers
  • Zika virus disease Q & A
  • Travel notices
  • Zika and pregnancy
• PAHO Zika Page
• ECDC
• WHO
• Agencia Brasil (official government news agency)

Information and News
• Red Cross to Implement Blood Donor Self-Deferral Over Zika Concerns (American Red Cross, 3 FEB)
• DCHHS reports first case of Zika virus through sexual transmission (Dallas County Health and Human Services, 2 FEB)
• WHO statement on the first meeting of the International Health Regulations (2005) (IHR 2005) Emergency Committee on Zika virus and observed increase in neurological disorders and neonatal malformations (WHO, 1 FEB)
• Possible association between Zika virus infection and microcephaly — Brazil, 2015 (CDC, MMWR, 19 JAN)
• Interim guidelines for the evaluation and testing of infants with possible congenital Zika virus infection — United States, 2016 (CDC, MMWR, 29 JAN)
• Interim guidelines for pregnant women during a Zika Virus outbreak — United States, 2016 (CDC MMWR, 22 JAN)
• Updated rapid risk assessment on Zika virus in the Americas and potential complications (ECDC, 22 JAN)
• Recognizing, managing, and reporting Zika virus infections in travelers returning from Central America, South America, the Caribbean, and Mexico (CDC, 15 JAN)

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