

Epidemiology

Zika virus infection (ZIKV) is a vector-borne disease that is transmitted from the bite of an infected mosquito (*Aedes aegypti*). Sexual transmission has also been documented. The most common symptoms include fever, headache, conjunctivitis, rash and muscle and joint pain. Symptoms are usually mild and last for a few days. The incubation period for Zika ranges from 3-12 days. The virus can cause microcephaly and other birth defects¹ and has been linked to Guillain-Barré syndrome (GBS).²

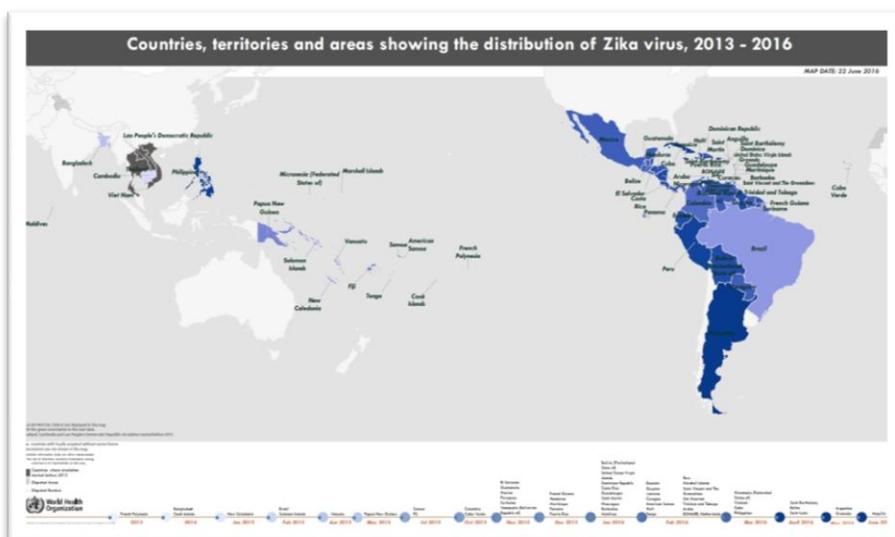
Where is transmission occurring?

Virus transmission has been documented in 67 countries with 14 countries reporting microcephaly and other CNS malformations and 15 countries reporting an increase in GBS.³ As of July 20th, there have been 162 cases of ZIKV infection confirmed in Canada (one of these sexually-transmitted locally). No deaths or severe clinical outcomes have been reported. The cases are associated with travel, mainly to countries in Central America, South America, and the Caribbean. Recently the South of Florida (including Miami) has reported local transmission of ZIKV. The Olympics (August 5-21st) are being held in Brazil where active ZIKV transmission is occurring.

Recommendations

Travelers to the affected regions should protect themselves from mosquito bites with protective clothing and appropriate insect repellent.

It is recommended that pregnant women and those considering becoming pregnant postpone travel to areas where the ZIKV is circulating. Additionally women should avoid becoming pregnant for 2 months after returning from a risk area. Male partners (returning from a risk area) of pregnant women should use condoms for the duration of pregnancy. It is not known how long the ZIKV is present in the semen/ejaculate of men who have had ZIKV. **Men should use condoms with any partner who could become pregnant for 6 months after their return.**⁴ There has also been documentation of sexual transmission from female to female but this is currently under investigation.



Physicians should consider ZIKV as a differential if patients present with appropriate symptoms and have a history of travel to the affected areas. There is no specific antiviral treatment; however certain medications can provide symptom relief. Laboratory testing is done at the National Microbiology Laboratory with a 1-2 week turnaround time. Please mark travel and request for Dengue, Chikungunya, or Zika virus. If a patient is pregnant and presents with a fever and rash, consultation with an infectious diseases or tropical medicine expert is also suggested. Testing criteria include:

- A. Any patient traveling from a Zika endemic area who has or had Zika related symptoms (fever or rash or conjunctivitis)
- B. Any pregnant patient who has traveled to a Zika endemic area
- C. Any male or female who is undergoing consultations for in vitro fertilization testing (Name of Consultant needs to be attached)

For additional information regarding ZIKV please see:

[Canadian Recommendations on the Prevention and Treatment of Zika Virus](#)
[PHAC Zika Virus Infection Travel Health Notice](#)

¹ <http://www.cdc.gov/media/releases/2016/s0413-zika-microcephaly.html>

² World Health Organization. Zika Virus Microcephaly and Guillain-Barré Syndrome Situation Report, 7 April 2016

³ <http://apps.who.int/iris/bitstream/10665/246261/1/zikasitrep28Jul2016-eng.pdf?ua=1>

⁴ <http://www.phac-aspc.gc.ca/tmp-pmv/notices-avis/notices-avis-eng.php?id=152>