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- **Zika Virus**

**FROM:**

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**Key Points:**

- The Public Health Agency of Canada (PHAC) and Ontario Ministry of Health and Long Term Care confirmed Canada's first positive case of sexual transmission of Zika virus on April 25, 2016
- Pregnant women and those planning a pregnancy should avoid travel to countries with ongoing Zika virus outbreaks.
- If travel to these areas cannot be avoided, strict mosquito bite prevention measures should be taken during travel.
- On returning from travel, additional measures around pregnancy should be considered as outlined in this document.

**Diagnosis**

- Cross reactivity can occur with the Zika virus and dengue fever.
- Testing is only for patients who are symptomatic with a travel history to a location where Zika is prevalent.

**Zika virus serologic testing requirements:**

- Blood and urine samples can be tested.
- Ensure the laboratory requisition indicates:
  - Zika virus testing,
  - onset date, country of travel, date of return from travel, date specimen was collected and if the patient is pregnant.

- Zika virus is a mosquito-borne flavivirus transmitted by the *Aedes aegypti* mosquito.
- Zika virus is endemic in Africa, Asia and the Oceanic Pacific region.
- In 2015, Zika virus was reported in Central and South America, and Mexico.
- Travel-related cases of Zika virus infection have been reported in Ontario.
- The Ontario case is suspected to have contracted the virus from a sexual partner who was diagnosed with Zika virus after travelling to an affected country.

**Clinical presentation**

Symptomatic disease is generally mild. Symptoms include acute onset of fever, maculopapular rash, arthralgia, and non-purulent conjunctivitis.

- Symptoms appear 3 to 12 days after infection and last several days to one week.
- There is scientific consensus that Zika is a cause of both microcephaly in babies of mothers who were infected with Zika virus during pregnancy and of Guillain-Barre Syndrome.

**Prevention and Treatment**

No vaccine or treatment exists for Zika virus infection.

- Treatment is supportive.
- Taking aspirin should be avoided until infection with dengue virus has been excluded.
- Counsel patients to use a DEET containing mosquito repellent.

**Recommendations for pregnant women considering travel:**

PHAC recommends that pregnant women and those considering becoming pregnant:

- discuss travel plans with their health care provider and consider postponing travel to areas where the Zika virus is circulating
- if travel cannot be postponed then strict mosquito bite prevention measures should be followed.

**For travellers returning from countries with ongoing Zika outbreaks:**

**Women planning a pregnancy:** it is strongly recommended these travellers wait at least 2 months after their return before trying to conceive.

**Male travellers:** it is strongly recommended that:

- if they have a pregnant partner, condoms be used for **duration of the pregnancy**,
- they and their partner wait to conceive for six months after return and use a condom,
- they consider using a condoms with **any** partner for six months after their return.

**References:**

1. Government of Canada, April 16, 2016, Statement from the Chief Public Health Officer of Canada and Ontario's Chief Medical Officer of Health on the first positive case of sexually transmitted disease. <http://news.gc.ca/web/article-en.do?nid=1056379&tp=980>