



STATE OF HAWAII
DEPARTMENT OF HEALTH
P. O. BOX 3378
HONOLULU, HI 96801-3378

In reply, please refer to:
File:

August 02, 2016

MEDICAL ADVISORY: UPDATED ZIKA TESTING AND PREVENTION GUIDELINES

Dear Healthcare Provider:

There continue to be NO locally-acquired cases of Zika virus infection in Hawaii. However, the risk of travel-associated infection and possible introduction in Hawaii persists and is highlighted now by the identification of locally acquired infected persons in Florida. All clinicians should be vigilant and *immediately* report any patients with suspected Zika or other mosquito-borne infection. We provide the following updated recommendations based on new guidelines from the Centers for Disease Control and Prevention (CDC)¹ to facilitate care of your patients—these guidelines expand the testing of pregnant women.

Travel Recommendations

Pregnant women should not to travel to an area with active Zika virus transmission. In addition to the countries and U.S. territories listed on the CDC website,² this recommendation now applies for travel to the affected area in Miami-Dade County, Florida.³ All pregnant women should be assessed for possible Zika virus exposure at each prenatal visit—i.e., travel history or unprotected sex with someone with travel history. All persons who travel should be advised regarding measures to avoid mosquito bites,⁴ and persons who become ill within 2 weeks of return should be assessed for possible travel-related illness.

Zika Testing

Pregnant women, who have had possible Zika virus exposure (i.e., traveled during pregnancy to an area with active Zika transmission OR had unprotected sex with someone who traveled to an area with active Zika transmission) should be tested for Zika virus.

- Symptomatic,⁵ <2 wks after symptom onset: serum and urine Zika, chikungunya, and dengue rRT-PCR;⁶ if negative, serum Zika, chikungunya, and dengue IgM
- Symptomatic, 2–12 wks from symptom onset: serum Zika, chikungunya, and dengue IgM; if positive or equivocal Zika IgM, serum and urine rRT-PCR
- Asymptomatic, <2 wks after exposure: serum and urine Zika rRT-PCR; if negative, return 2–12 wks from exposure for serum Zika IgM
- Asymptomatic, 2–12 wks from exposure: serum Zika IgM; if positive or equivocal, serum and urine rRT-PCR
- Any pregnant woman, >12 wks after symptom onset or exposure: serum Zika IgM may be considered; if fetal abnormalities present, maternal serum and urine rRT-PCR; consider serial fetal ultrasounds every 3–4 wks regardless of results

¹http://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm?s_cid=mm6529e1_e

²<http://wwwnc.cdc.gov/travel/page/zika-travel-information>

³<http://www.floridahealth.gov/newsroom/2016/08/080116-zika-update.html>

⁴ i.e., use mosquito repellents containing 20–30% DEET, wear long sleeves and pants when possible

⁵ Symptoms consistent with Zika virus infection include acute onset of fever, rash, arthralgia or conjunctivitis. In Hawaii, differential diagnosis in a symptomatic patient should include also dengue and chikungunya.

⁶ A positive rRT-PCR result is considered confirmatory.

**** This message contains privileged communication between the Department of Health and clinicians and should not be shared with or forwarded to those not included among the original recipients. ****

Pregnant women with confirmed or possible Zika infection should undergo serial fetal ultrasounds every 3–4 wks and monitored frequently. All infants, stillbirths, and fetal losses of such women should undergo Zika virus testing.

Guidelines for testing symptomatic men or non-pregnant women remains as advised in the [June 7, 2016, Medical Advisory](#). Asymptomatic men or non-pregnant women should NOT be tested for Zika virus.

All testing should be coordinated with the Department of Health (DOH). Both rRT-PCR and IgM testing can be performed by the State Laboratories Division. Any positive IgM result requires follow up testing by plaque reduction neutralization test (PRNT), currently only available through DOH at CDC.

Prevention of Sexual Transmission

- Symptomatic men with Zika virus infection should use condoms correctly or abstain from sex for at least 6 months after symptom onset and wait until after that period to attempt conception.
- Symptomatic women with Zika virus infection should use condoms correctly or abstain from sex for at least 8 weeks and wait until after that period to attempt conception.
- Asymptomatic women or men with history of possible Zika virus exposure should use condoms correctly or abstain from sex for at least 8 weeks also and wait until after that period to attempt conception.
- Women and men who have had possible Zika virus exposure and have a pregnant sex partner should use condoms correctly during sex or abstain from sex for the duration of the pregnancy.

As with any mosquito-borne infection, individuals suspected to have Zika virus infection should be advised to stay indoors and avoid being bitten during their first week of illness by the *Aedes* day-biting mosquitoes, which are prevalent throughout our state.

Other Resources

Further information can be found at http://health.hawaii.gov/docd/dib/disease/zika_virus/ and <http://www.cdc.gov/zika/>.

Zika virus infection is an URGENT CATEGORY NOTIFIABLE CONDITION and must be reported by phone:

- Oahu (Disease Reporting Line).....(808) 586-4586
- Maui District Health Office.....(808) 984-8213
- Kauai District Health Office.....(808) 241-3563
- Big Island District Health Office (Hilo).....(808) 933-0912
- Big Island District Health Office (Kona).....(808) 322-4877
- After hours on Oahu.....(808) 566-5049
- After hours on neighbor islands.....(800) 360-2575 (toll free)

Thank you for your assistance in protecting the health of our residents and visitors.

Sincerely,



Sarah Y. Park, MD, FAAP
State Epidemiologist
Hawaii Department of Health

**** This message contains privileged communication between the Department of Health and clinicians and should not be shared with or forwarded to those not included among the original recipients. ****