



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

In reply, please refer to:
File:

February 17, 2016

MEDICAL ADVISORY: CLINICAL UPDATES ON ZIKA VIRUS

Dear Healthcare Provider,

The Department of Health (DOH) advises clinicians to be aware of areas where Zika virus is circulating.¹ This viral infection is transmitted by the day-biting *Aedes* species mosquitoes, which can also transmit viruses like dengue and can be found throughout the state. An infected traveler therefore poses a threat to our community's health. All clinicians should watch for and report *immediately* to DOH all patients who present with symptoms compatible with Zika infection within 2 weeks of returning from affected areas. Infected persons may suffer an acute mild dengue-like illness with fever, maculopapular rash, arthralgia, and/or nonpurulent conjunctivitis. Some may also have myalgia and headache. Symptoms usually self-resolve in several days to a week. Severe disease requiring hospitalization is uncommon, and fatalities are rare. Guillain-Barré syndrome has been reported in some following Zika infection. RT-PCR testing for Zika RNA can be performed at the State Laboratories Division in the first week of illness, while antibody testing to determine earlier illness is performed at the Centers for Disease Control and Prevention (CDC). Delayed clinician reporting will delay appropriate testing and public health response.

Obstetric Concerns

There is limited information regarding the association between Zika virus infection and congenital microcephaly. However, because of the potential risk, clinicians should advise pregnant women to consider postponing travel to affected areas. If travel cannot be postponed, she should strictly follow steps to prevent mosquito bites during the trip. Pregnant women with male partners who travel to affected areas should consider abstaining from sexual intercourse or using condoms during their pregnancy. CDC has issued interim guidelines for the management of exposed pregnant women in various circumstances. Clinicians should refer to <http://www.cdc.gov/zika/hc-providers/qa-pregnant-women.html> and may consult with one of the Disease Outbreak Control Division (DOCD) physicians. Zika infection and its resolution in women who are not pregnant do not pose a risk for future pregnancies.

Pediatric Concerns

Microcephaly and disrupted brain growth as well as intracranial calcifications, abnormal eye findings, ventriculomegaly, and neuronal migration disorders have been reported in some infants with suspected or confirmed Zika virus infection. Investigations are ongoing to better understand the association with Zika virus and the pathogenesis of congenital infection. Microcephaly is often defined as head (occipitofrontal) circumference greater than 2 standard deviations below the mean or less than the 3rd percentile on standard growth charts. The extent

¹ Clinicians may refer to <http://www.cdc.gov/zika/geo/index.html> as well as <http://www.pphsn.net/> (specifically, the link for "Map of Epidemic and emerging disease alerts in the Pacific" in Google Chrome browsers).

of brain disruption rather than the actual measurement will determine long term sequelae which may include seizures, vision or hearing deficits, and developmental disabilities. Transmission through breastfeeding has not been documented; the benefits of breastfeeding outweigh any theoretical risk of infection. Clinicians should refer to CDC's interim recommendations for the management of congenitally exposed and infected infants (<http://www.cdc.gov/zika/hc-providers/qa-pediatrician.html>) and may consult with one of the DOCD physicians as needed.

Sexual Transmission

There is evidence Zika virus can be transmitted by a man to his sex partners, and virus may be present in semen longer than in blood. Those whose male sex partners have traveled to or lived in an area with active Zika transmission should take precautions to prevent potential sexual transmission of the virus by using condoms correctly. Women who are pregnant or planning to become pregnant should be advised to consult with their clinicians, who may refer to CDC's interim recommendations at <http://www.cdc.gov/zika/hc-providers/qa-sexual-transmission.html>.

For further information please refer to <http://www.cdc.gov/zika/index.html> as well as <http://wwwnc.cdc.gov/travel/notices> for specific travel advisories.

Please note Zika virus infection is an URGENT CATEGORY NOTIFIABLE CONDITION and must be reported by phone as soon as a working diagnosis is made:

- Oahu (Disease Investigation Branch) (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)

As our understanding of Zika infection evolves, we will provide clinicians with updates. However, please continue to refer to the CDC websites noted above. 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

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