



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

In reply, please refer to:
File:

April 27, 2016

MEDICAL ADVISORY UPDATE: CLINICIAN GUIDANCE ON
TESTING FOR ZIKA VIRUS AND PATIENT CARE AND COUNSELING

Dear Healthcare Provider,

Although the mosquitoes (i.e., day-biting *Aedes* species) capable of transmitting Zika virus are found throughout the state and imported cases of Zika infection have been identified, there have been NO locally acquired cases of Zika virus infection in our state. However, all clinicians should be vigilant and *immediately* report to DOH any patients with suspected Zika infection—laboratory reporting does NOT replace clinician reporting.

Infected persons may suffer acute symptoms of fever, diffuse maculopapular and potentially pruritic rash, arthralgia/arthritis, and/or mild nonpurulent conjunctivitis. Symptoms usually self-resolve in several days to a week. Severe disease requiring hospitalization and fatalities are rare. Guillain-Barré syndrome following Zika infection has been reported.

Zika Virus Testing in Hawaii

RT-PCR testing and IgM ELISA testing is performed at the State Laboratories Division. Further antibody testing is performed at the Centers for Disease Control and Prevention (CDC). All testing requires DOH review and approval.

According to recent CDC guidance,¹ the following persons should be tested:

- Men and non-pregnant women who have had possible Zika virus exposure (defined as either travel to a region with active Zika transmission² or unprotected sexual intercourse with a male who traveled to a region with active Zika transmission) AND who develop signs and/or symptoms consistent with Zika virus infection within 2 weeks of potential exposure
- Pregnant women, with/without symptoms, who have had possible Zika virus exposure (i.e., traveled during pregnancy to region with active Zika transmission OR had unprotected sexual intercourse with man having either confirmed Zika infection or possible Zika exposure AND clinical symptoms consistent with Zika virus infection)

¹Petersen EE, Polen KN, Meaney-Delman D, et al. Update: Interim Guidance for Health Care Providers Caring for Women of Reproductive Age with Possible Zika Virus Exposure—United States, 2016. MMWR Morb Mortal Wkly Rep 2016;65:315–322.

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

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A pregnant woman who has had unprotected sexual intercourse with an *asymptomatic* man who traveled to a region with active Zika transmission should be tested if she develops at least one symptom consistent with Zika virus infection.

Asymptomatic men or non-pregnant women should NOT be tested for Zika virus infection (see below for other specific recommendations).

Care of Pregnant Women

An ultrasound to evaluate for fetal abnormalities suggesting Zika virus congenital infection should be performed on pregnant women with any possible exposure to Zika virus. Serial ultrasounds should be considered for women with positive or inconclusive Zika testing results. A negative IgM test collected 2–12 weeks after known exposure would suggest Zika virus infection has not occurred. Pregnant women with negative Zika testing but abnormalities on fetal ultrasound without other explicative etiology should undergo repeat Zika testing.

Patient Counseling to Prevent Sexual Transmission of Zika

The following is recommended to prevent sexual transmission of Zika³ as well as guide individuals planning to conceive in the context of possible Zika virus exposure:¹

- Pregnant couples in which the man has had possible Zika virus exposure should use condoms correctly during sex or abstain from sex for the duration of the pregnancy.
- Men
 - Who have had confirmed Zika virus infection or possible Zika exposure with subsequent signs and/or symptoms consistent with Zika infection should use condoms correctly or abstain from sex for at least 6 months after onset of illness.
 - Who have a possible Zika virus exposure, are asymptomatic, and do not have pregnant sex partners should use condoms correctly or abstain from sex for at least 8 weeks after last exposure date
- Non-pregnant women with Zika virus infection or possible Zika virus exposure should ensure their partner(s) use condoms correctly or abstain from sex for at least 8 weeks after symptom onset or last exposure date.

As with any mosquito-borne infection, individuals suspected to have Zika virus infection should be advised to stay indoors and avoid mosquito bites during their first week of illness. Travelers to affected areas should use mosquito repellents containing 20–30% DEET and wear long sleeves and pants when possible.

Other Resources

Further information and resources can be found at

³Oster AM, Russell K, Stryker JE, et al. Update: Interim Guidance for Prevention of Sexual Transmission of Zika Virus—United States, 2016. MMWR Morb Mortal Wkly Rep 2016;65:323–325.

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http://health.hawaii.gov/docd/dib/disease/zika_virus/ and <http://www.cdc.gov/zika/>, as well as <http://wwwnc.cdc.gov/travel/notices> for specific travel advisories.

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

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)

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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