



Updated version (08/09/2017 – UM) see: www.travelhealth.be

ZIKAVIRUS

The zika virus is an “arbovirosis” (arbovirosis = arthropodborne infectious viral disease transmitted by insects); dengue and chikungunya are other examples of arbovirosis. This virus is primarily transferred from human to human through bites of the *Aedes* mosquito that **bites during daytime**.

Dengue, chikungunya and zika viruses cause very similar complaints and are not symptomatically distinguished from each other. Furthermore these 3 viruses occur in overlapping regions.

WHERE DOES ZIKA FEVER OCCUR?

In 2007 there was a zika virus epidemic in Micronesia, in 2003 in French Polynesia and since 2015 in South-Amerika, Central-America, the Caribbean, the United States, some countries in Asia, Africa and some islands in the Pacific Ocean. There are also other regions where the zika virus circulates, but where there is no actual epidemic.

For more information about the regions where the zika virus occurs – see:

ECDC zika map: http://ecdc.europa.eu/en/healthtopics/zika_virus_infection/zika-outbreak/Pages/Zika-countries-with-transmission.aspx

PAHO zika map: http://ais.paho.org/hip/viz/ed_zika_countrymap.asp

TRANSMISSION

The zika virus is primarily transferred from human to human through bites of the *Aedes* mosquito that bites during daytime. The disease can also be transmitted during pregnancy to the unborn child, through sexual contact and through blood transfusion.

SYMPTOMS OF ZIKA FEVER

In 80% of the cases a zika infection occurs asymptotically. In the other 20%, complaints start 3 to 12 days after contagion and are characterized by fever, headache, muscle and joint pain, rash, fatigue and red eyes. Most of the time the disease is mild. Neurological complications (like Guillain-Barré) are rare as with other viral infections.

PREVENTION

There is no vaccine against zika at the moment. Protective measures against mosquito bites are the cornerstone of prevention. The transmitting *Aedes* mosquito tends to bite in the morning (i.e. from 9 to 11 a.m.), and during the afternoon until just before sunset (i.e. from 13.00 to 17.00). More information can be found at: <http://www.reisgeneeskunde.be/itg/Uploads/MedServ/EMAATREGELLEN.pdf>

TESTING

Couples from whom the woman is pregnant or with a pregnancy wish who have traveled to a Zika outbreak area can be tested. If one of them is or has been ill, the test should be performed as quickly as possible. If there have been no complaints, the best moment is 3 weeks after return. Consult your doctor, the department of infectious diseases or a travel clinic for more information.

ZIKA AND PREGNANCY

The Zika virus can also be transmitted during pregnancy to the unborn child. The Zika virus can cause anomalies in the unborn child like growth retardation, eye disorder, hearing disorders, neurological disorders like microcephaly (too small skull), arthrogryposis (joint disorders) and might even lead to a miscarriage. Because of association between Zika fever during pregnancy and these anomalies in unborn children, traveling to a country with Zika outbreak is not recommended for pregnant women or those wanting to become pregnant during the journey or immediately afterwards. If a trip to these areas cannot be postponed, rigorous measures against mosquito bites during daytime are recommended and it is important that you inform your obstetrician or gynecologist upon your return about your stay in an area where the Zika virus is epidemic.