Infectious Disease Clinician Update#3 - Zika Virus Outbreak

May 10, 2016

Dear Colleague,

I appreciate your ongoing work and partnership with the Tennessee Department of Health (TDH) and the communities you serve in protecting the health of your individual patients and our public. I write to update you on the current status of what we know and our response activities in Tennessee. Be assured, the attention of the Tennessee clinical community to the growing international Zika virus epidemic remains critically important and, as we continue to learn more about the disease every day, we are committed to sharing up-to-date information with you.

In the continental US there have been 472 travel related cases as of May 4, 2016. None of these have been due to local transmission by mosquitos, 44 have been in pregnant woman and 10 sexually transmitted. In US territories, the situation is quite different, with 658 of the 661 cases locally acquired, 59 in pregnant woman. In Tennessee, we have had two cases, both resulting from travel to affected countries. As mosquito season approaches and vacation travel increases, we expect to see additional cases. Your role in educating patients about risks and PREVENTION MEASURES is requested. Our three main messages in Tennessee at this time are “Fight the bite”, “Drain and cover” and “Protect pregnant women”. Please consider the following additional details, recommendations and updates to assist you in patient education and management.

- Recommendations to avoid mosquitoes are of paramount importance for preventing infection in travelers, as well as eliminating risk of local transmission following importation of a case. Extensive information regarding mosquito avoidance is available from CDC at http://www.cdc.gov/zika/prevention/index.html, including resources for patient and community education.

- Recommendations should include reviewing travel warnings, regular use of insect repellants, and control of mosquitoes inside and outside the home. Programs to encourage the latter include “Fight the Bite”, “Tip-and-Toss” (eliminating water from containers within 200 yards of homes), and “Drain and Cover” of potential water-collecting containers. The Appendix may be used to educate patients. More information is available at http://tn.gov/health/topic/zika-virus.
• Recommendations for prevention of sexual transmission of Zika virus infection are critical. While primarily a mosquito-borne disease, the virus can also be transmitted sexually from an infected male to their partner. The duration of infectivity is currently unknown. Men returning from travel to affected countries should abstain from sex or use condoms consistently from start to finish **throughout a partner’s pregnancy**. It is also recommended that condoms be used with any partner for at least 6 months.

Although Zika virus infection is usually asymptomatic or causes a very mild illness (characterized by transient fever, conjunctivitis, arthralgias and rash within two weeks of infection), severe outcomes such as Guillian Barre syndrome and Microcephaly remain a primary TDH concern. Because pregnant women and their fetus are at risk for severe complications, we are implementing new surveillance activities and making prevention education and response high priorities. We are providing the following information to assist in your **MANAGEMENT OF PREGNANT PATIENTS** and questions regarding Zika complications, including Microcephaly risk.

• Educate patients about risks during pregnancy. **Microcephaly appears to affect at least 1% of Zika virus infections during pregnancy, especially following exposure during the first trimester.** Other reported complications in infants include defects of the eye, hearing loss, and impaired growth. Travel to affected countries during pregnancy is strongly discouraged. If a woman has been potentially exposed while pregnant, the CDC has extensive guidance on testing and clinical management, both during and after pregnancy, at [http://www.cdc.gov/zika/hc-providers/clinical-guidance.html](http://www.cdc.gov/zika/hc-providers/clinical-guidance.html).

• Report Microcephaly. Microcephaly is a newly reportable condition in Tennessee. While we see 40-60 cases per year at baseline, identifying cases potentially associated with Zika virus is important for disease surveillance and to ensure appropriate follow up. All identified cases should be reported to public health authorities for further follow up, at [https://tdhrc.health.tn.gov/redcap/surveys/?s=TDEYPYCHET](https://tdhrc.health.tn.gov/redcap/surveys/?s=TDEYPYCHET).

• For pregnant women who are tested for Zika virus, we are implementing the US Zika Pregnancy Registry, [http://www.cdc.gov/zika/hc-providers/registry.html](http://www.cdc.gov/zika/hc-providers/registry.html). For your pregnant patients with positive or inconclusive lab results, the TDH Maternal and Child Healthcare program will be in touch with you regarding the collection of data at periodic intervals during pregnancy and through the baby’s first year of life.

**LABORATORY TESTING** for acute Zika virus infection remains available at the TDH State Laboratory. For consultation regarding testing, please contact your local health department ([http://tn.gov/health/topic/localdepartments](http://tn.gov/health/topic/localdepartments)) immediately regarding symptomatic patients within two weeks of recent travel to an affected area, or other suspect cases. New testing information and options for medical professionals have recently been released.

• FDA has recently approved a test for Zika virus available via commercial laboratories, [http://www.fda.gov/downloads/MedicalDevices/Safety/EmergencySituations/UCM498275.pdf](http://www.fda.gov/downloads/MedicalDevices/Safety/EmergencySituations/UCM498275.pdf)
The strength of our public health system relies on our partnership with you and the rest of our medical provider community. We are committed to partnering with you to facilitate you BEING A RESOURCE IN YOUR COMMUNITY. The following information may help in community engagement.

- Use the extensive resources and updates for clinicians, patients and the public on the TDH website, https://www.tn.gov/health/topic/zika-virus. Check the website frequently for the latest updates.
- Engage in your community. During the last month, we have conducted seven regional meetings to educate local officials about Zika virus and measures they can take to reduce risk in their communities. Some of you may have attended or heard about these regional meetings. We ask you to engage with your local public health officials and continue to be a public health resource for communities and governments across Tennessee.

Thank you in advance for your continuing contributions to public health in our state, and assistance in this response to Zika virus. I am personally grateful for the overwhelming number of Tennessee clinicians who work in so many ways to protect, promote and improve the health of our population and I thank you for doing your part for the health and prosperity of people in Tennessee. As you know, we value our local relationships and communication opportunities highly, so if you have additional questions, please reach out when you can to your local or regional health departments. To facilitate this, a list of local and regional health department addresses, along with telephone numbers, may be found at https://www.tn.gov/health/topic/localdepartments. You may also, as always, reach our state health department staff 24/7 for urgent matters, at (615) 741-7247.

Sincerely,

John J. Dreyzehner, MD, MPH, FACOEM
Commissioner
JJD/TJ/tls
Attachments (2)