

Zika Virus (ZIKV) – FAQs

****IMPORTANT DISCLAIMER:** The answers presented in this FAQ were developed with expert input from the SOGC Infectious Disease committee and are current as of **March 9th, 2020**. Please see the PHAC statement (published December 24th, 2019) for the most up to date information: <https://www.canada.ca/en/public-health/services/diseases/zika-virus.html>

1. What causes Zika virus (ZIKV) infection?

Zika virus (ZIKV) infection is caused by a flavivirus transmitted primarily through the bite of an infected Aedes mosquito, mainly *Aedes aegypti*.

2. How is ZIKV transmitted?

The mosquitoes associated with ZIKV can be active during the day and night, with biting activity often peaking in the morning and later in the afternoon. Sexual, blood products and mother to child transmission have been reported

ZIKV RNA has been detected in breast milk; however, there have not been any documented reports of transmission to infants through breastfeeding. (**NOTE:** WHO and CATMAT considers the benefits of breastfeeding outweigh any potential risk of ZIKV transmission through breast milk)

3. What are the recommendations for sexual practices for women and/or men who have traveled to ZIKV areas?

Abstinence or condom use for the remainder of pregnancy is recommended* for male partners of pregnant women who have travelled to areas in which ZIKV has been documented.

*Please refer to the Canadian recommendations for suggested timelines: <https://www.canada.ca/en/public-health/services/diseases/zika-virus.html>

4. How long should couples delay trying to conceive after travelling to ZIKV affected areas?

Based on current information on the incubation period, duration of virus in blood, urine and semen, and unknown but likely longer duration of virus in tissues, women planning a pregnancy should wait at least 2 months after their return from an area of risk before trying to conceive, as per current CDC and CATMAT recommendations; a more conservative wait period of 6 months is recommended by the WHO. For couples where the male partner has travelled to an area of risk, it is recommended to delay trying to conceive for 3 months.

5. What is the risk to travellers?

- For most infected travellers, ZIKV will have little or no health impact.
- For unborn children of women who become infected with ZIKV while pregnant, there could be very high impact.

6. What are the areas of risk?

There has been widespread transmission over much of South Asia, South Pacific Islands, the Caribbean, Central and South America, but not temperate areas of Argentina and Chile. Cases have also be reported in the south of France, Florida, Texas and in Mexico. While this information is still true, there is little evidence of current transmission or activity.

Up to date areas of risk can reviewed be reviewed on both the WHO website: <https://www.who.int/emergencies/diseases/zika/en/> and the CDC website: <https://www.cdc.gov/zika/index.html>.

7. Can women who are pregnant or planning a pregnancy, and who may have been exposed to the ZIKV virus receive serology testing? What is the process/protocol?

Serology and RNA –actual virus testing – should be offered to pregnant women where there is documented exposure (travel to risk area or known positive partner) AND symptoms. Any other testing to be considered after consultation with a specialist. Screening of asymptomatic pregnant women is not currently recommended, and should be discussed on a case-by-case basis between the woman and her health care provider. Screening should consist of serology, as well as fetal ultrasounds, at a frequency to be determined in consultation with the woman’s obstetrician.

At this time, serology and RNA testing in Canada is only available for symptomatic individuals and pregnant women. If testing outside the recommended population is to be considered, consultation with a local expert should be obtained and local laboratory services consulted. Patients need to understand that the decision to test is the responsibility of the laboratory, and some tests may be rejected if the laboratory feels they do not meet the criteria for testing. Clinicians must fill out all requisitions properly and include as much information as possible. It is important to note that the screening recommendations in Canada differ from those in the US.

8. Can men who have travelled to a country in which ZIKV has been confirmed undergo serology testing if they are symptomatic?

Yes. Only men who are symptomatic are eligible for serologic testing. Asymptomatic men are not eligible for testing, as test properties in this group are still not reliably known. However, male partners in couples wishing to become pregnant within 6 months after returning from ZIKV areas may be eligible for testing, but this would be determined on a case by case basis.

9. Does Canada monitor ZIKV and what surveillance is currently being done in Canada?

Yes, Canada monitors ZIKV. The National Microbiology Laboratory is able to detect the virus and offers testing support to provinces and territories. As part of their West Nile virus surveillance programs, several provinces and territories conduct mosquito surveillance activities. Canada is actively testing to detect if mosquito borne transmission is possible in Canada, and to date there is no evidence that mosquitoes in Canada carry the ZIKV.

There is no formal national surveillance at this time; currently reporting is being done at the regional level.

10. What is the risk to my baby if I get a ZIKV infection while pregnant?

The exact likelihood of a baby becoming infected if the mother is infected is still unknown. Recent studies have suggested that birth defects are possible if the mother is infected at any time during pregnancy. The likelihood of birth defects in these studies was less than 10% for infections in any of the three trimesters.

11. What is the risk to my baby if he/she gets a ZIKV infection after birth?

There is currently no evidence of harm to babies that get a ZIKV infection after birth.

12. What are the Recommendations for ZIKV?

See the CATMAT statement: <https://www.canada.ca/en/public-health/services/publications/diseases-conditions/zika-virus-prevention-treatment-recommendations.html> and the most recent updates from the Government of Canada: <https://travel.gc.ca/travelling/health-safety/travel-health-notice/152>.