ZIKA VIRUS: QUESTIONS AND ANSWERS

What is ZIKA virus disease?
Zika virus has caused outbreaks of mild illness from time to time since its discovery in Africa in 1947.

What countries currently have outbreaks of ZIKA virus?
In late 2015, Zika virus was reported for the first time in a number of countries in Central and South America and, more recently, local transmission has been identified in other countries including the Caribbean, South Asia, and Western Pacific Islands. The Public Health Agency of Canada has an up to date list of affected nations: http://www.healthycanadians.gc.ca/diseases-conditions-maladies-affections/disease-maladie/zika-virus/risks-countries-pays-risques-eng.php

Have there been any cases in Canada?
Yes, a small number of Canadian travel-related cases have occurred, with more expected. A single case has been seen that is believed to be the result of sexual contact with an infected person.

How is it spread?
Zika virus is transmitted by the Aedes mosquito, which also spreads the dengue and Chikungunya viruses. It is a day-biting mosquito with highest activity in the hours just after sunrise and just before sunset. This mosquito is not suited to a northern climate therefore local transmission in Canada is highly unlikely.

The Zika virus can spread through sexual contact so condoms are recommended to reduce the chances of spreading the virus between sexual partners. The virus can also be passed from a mother to a baby during the course of a pregnancy.

Though it is unlikely that the Zika virus will infect Canada’s blood supply, Canadian Blood Services has asked potential donors to donate prior to leaving to the country or wait one month after returning to Canada if they have travelled to a country with Zika virus.

Who is at risk?
Anyone who is living in or traveling to an area where Zika virus is found (including Mexico, the Caribbean, and many parts of Central and South America, South Asia, and Western Pacific Islands) who has not already been infected with Zika virus is at risk for infection.

What are the symptoms?
The most common symptoms of Zika virus disease are fever, rash, joint pain, or conjunctivitis (red eyes). In very rare cases, individuals infected with Zika Virus could develop Guillain Barré Syndrome which is condition that impacts the nervous system that can lead to muscle weakness or paralysis.

Only about 20% of people who get infected with Zika will actually get sick and the illness is usually mild. As a result, many people might not realize they have been infected.

How is it diagnosed?
Anyone who develops symptoms of Zika virus infection within 2 weeks of travel to an affected area should seek medical care and report their travel history to their health care professional. This is especially true for pregnant women.

Infection with Zika virus is diagnosed by symptoms, travel history and laboratory tests. Blood and urine tests can be used to diagnose infection. As well, it is important to get tested for other viral diseases, namely dengue and Chikungunya.
Is there a treatment or vaccine for ZIKA virus?
There is no specific vaccine or medication to treat Zika virus infection. Treat the symptoms by resting, drinking plenty of fluids, and taking acetaminophen for fever and pain. Aspirin or other non-steroidal anti-inflammatory medications such as ibuprofen should be avoided until one is sure that it is not dengue virus infection, this will help to avoid the risk of bleeding.

What can be done to treat or prevent infection with ZIKA virus?
There is no vaccine and no specific antiviral treatment for Zika virus, therefore prevention is very important. Travelers are advised to use appropriate measures to protect against mosquito bites. This includes use of repellants, protective clothing, and bed nets.

Due to the risk of infant microcephaly (a condition in which the baby’s head is smaller than expected), pregnant females as well as those trying to become pregnant are recommended to avoid travel to affected nations, if possible (See link on first page). If travel cannot be avoided, consult your doctor in advance and make sure steps are taken to avoid mosquito bites and sexual transmission.

To reduce Zika virus infections due to sexual contact with an infected person, the proper use of condoms is an effective approach by creating a barrier to prevent the mixing of bodily fluids. After returning from an area with local Zika virus transmission:
- Women should wait at least 2 months before trying to conceive, if they have traveled with their partner they should wait 6 months.
- Men travelers should use condoms for 6 months after their return with a partner who could become pregnant.
- Men travelers should consider using a condom with any partner for 6 months after return.
- Condom use is recommended for the duration of an established pregnancy.
- Men should postpone semen donations for 6 months.

How does ZIKA infection affect pregnant women and newborns?
There have been reports of an increase in some birth defects in newborns and other poor pregnancy outcomes in women who have been infected with Zika virus during their pregnancy. One of these conditions is a rare but serious birth defect of the brain called microcephaly. The link between Zika virus and microcephaly has been established with a scientific consensus according to the World Health Organization and research about how Zika causes microcephaly is continuing.

At this time there is nothing to suggest that pregnant women are more susceptible or suffer more severe symptoms than other individuals.

Further information on prevention of mosquito bites can be found at: http://travel.gc.ca/travelling/health-safety/insect-bite.

For further information:

- Public Health Agency of Canada, Canadian Recommendations on the Prevention and Treatment of Zika Virus

- Countries with Zika virus transmission