

# ZIKA VIRUS advice for pregnant women

## Information for NSW General Practitioners

Please distribute this information to all staff



Health

### Key Points for General Practitioners:

1. Australian guidelines have been issued for screening pregnant women who have travelled to regions with Zika virus outbreaks
2. Travel warnings remain in place for pregnant women to reconsider travel to areas with active Zika virus transmission

### Background

Zika virus (ZIKV) is a mosquito-borne flavivirus transmitted primarily by *Aedes aegypti* mosquitoes. Many countries in the Americas have reported the recent introduction of ZIKV infection with on-going local transmission. ZIKV outbreaks are also ongoing in Samoa and Tonga. The list of countries with active transmission is at: <http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-zika-countries.htm>

Increased incidence of microcephaly with a temporal relationship to ZIKV outbreaks in Brazil and French Polynesia has been observed. Case reports have found evidence of ZIKV in women and infants/fetuses affected by microcephaly, however the evidence of a causal link remains inconclusive

### Interim recommendations for screening pregnant women

- Australian guidance has been developed to screen women who travelled to regions with active ZIKV transmission during their pregnancy  
<http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-zika.htm>
- Depending on the time since potential exposure and symptoms, PCR and/or serology are used to assess the likelihood of ZIKV infection and referral to specialist obstetric services
- Testing for ZIKV is available at CIDMLS-ICPMR – Pathology West. Consult with your local pathology provider regarding appropriate tests and specimens.
- A positive test for ZIKV does not mean the fetus will be affected – seek expert infectious disease, pathology and obstetric advice.
- Guidance on reducing sexual transmission of ZIKV has also been [issued](#)
- Be aware that a range of other travel-related communicable diseases (such as malaria) pose risks for pregnant women and may present with similar clinical features to ZIKV

### Symptoms and signs

- Most ZIKV infections are asymptomatic
- Symptomatic disease is generally mild and characterised by acute onset of fever with maculopapular rash, headache, arthralgia, non-purulent conjunctivitis and asthenia
- Symptoms develop 3 – 12 days after a bite from an infected mosquito and last up to one week

### Low risk of local transmission

- The *Aedes aegypti* mosquitoes responsible for transmission of ZIKV are not found in NSW

### Travel advice

Women who are pregnant or who are considering pregnancy should consider delaying their travel to areas with active outbreaks of Zika. If they choose to travel to ZIKV-affected areas they should be meticulous with measures to avoid being bitten by mosquitoes. For further advice see *Mosquitoes are a Health Hazard* factsheet: [www.health.nsw.gov.au/Infectious/factsheets/Pages/mosquito.aspx](http://www.health.nsw.gov.au/Infectious/factsheets/Pages/mosquito.aspx)

### Further Information:

- NSW Zika virus website: [www.health.nsw.gov.au/Infectious/diseases/Pages/Zika-virus.aspx](http://www.health.nsw.gov.au/Infectious/diseases/Pages/Zika-virus.aspx)

Yours sincerely

A handwritten signature in black ink, appearing to read 'V. Sheppeard'.

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A handwritten signature in black ink, appearing to read 'M. Nicholl'.

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