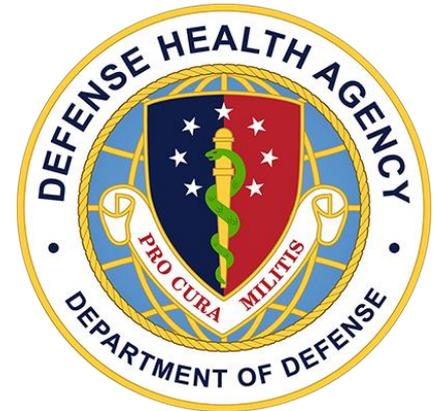


Department of Defense  
Armed Forces Health Surveillance Branch  
Global Zika Virus Surveillance Summary  
(13 JUL 2016)



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*For questions or comments, please contact:*

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# DEPARTMENT OF DEFENSE (AFHSB)

## Global Zika Virus Surveillance Summary #26

13 JUL 2016 (next report 20 JUL 2016)



**DoD SURVEILLANCE:** On 17 MAY, AFHSB issued [updated guidance](#) for detecting and reporting DoD cases of acute Zika virus disease that includes changes to clinical criteria, case definitions, and laboratory testing, as well as a list of DoD laboratory POCs. Confirmed and probable cases should be reported in DRSi as “Any Other Unusual Condition Not Listed,” with “Zika” entered in the comment field along with pertinent travel history and pregnancy status.

The CDC Zika IgM MAC-ELISA and CDC Zika Triplex rRT-PCR are available under an [Emergency Use Authorization \(EUA\)](#) at DoD laboratories. The IgM is available at three labs (NIDDL, BAMC, and USAFSAM). The Triplex EUA assay is available at 15 DoD labs (BAMC, CRDAMC, EAMC, LRMC, USAMRIID, WBAMC, MAMC, Brian Allgood ACH, NHRC, USAFSAM, WAMC, NAMRU-3, TAMC, WRNMMC, and NIDDL).

[Strategy for Control of Zika Virus Transmitting Mosquitoes on Military Installations](#) is available from the [Armed Forces Pest Management Board](#). The Armed Services Blood Program Office implemented the American Association of Blood Banks’ guidance for reducing the risk of Zika, dengue, and chikungunya virus transmission through blood products on 12 FEB.

**CASE REPORT:** From 1 MAY 2015 to 13 JUL 2016, confirmed autochthonous vector-borne transmission of Zika virus (ZIKV) has been reported in 41 (+1, **St. Eustatius**) [countries and territories](#) in the Western Hemisphere. In PACOM, American Samoa, Samoa, Fiji, Kosrae (Federated States of Micronesia), Marshall Islands, New Caledonia, Papua New Guinea, and Tonga are reporting active ZIKV transmission. As of 30 JUN, an epi-curve published by PAHO showed a downward trend in suspected and confirmed cases reported since early FEB 2016 in the countries where the ZIKV outbreak started in the fall of 2015. **However, Costa Rica, French Guiana, Guadeloupe, Guatemala, Jamaica, Mexico, Puerto Rico, Saint Barthelemy, and Saint Martin have reported increasing incidence over the last four weeks.** CDC has issued Alert Level 2, Practice Enhanced Precautions travel notices for 49 of these [areas](#) and for travelers to the [2016 Summer Olympics and Paralympics](#) in Rio de Janeiro. According to CDC, locations above 6,500 feet elevation in these countries and territories present minimal transmission risk. Past vector-borne outbreaks have been reported from other areas of Africa, Southeast Asia, and the Pacific Islands, where sporadic transmission may continue to occur. Guinea-Bissau reported three ZIKV cases on 1 JUL; serological evidence of likely ZIKV transmission has previously been reported. Eleven countries have reported person-to-person transmission, most likely through sexual contact.

As of 6 JUL, CDC (ArboNet) and state health departments report 1,119 (+197) travel-related cases, 14 (+1) sexually transmitted cases, and one laboratory acquired case in 46 states and the District of Columbia since MAY 2015; no autochthonous vector-borne cases have been reported. **On 8 JUL, the Salt Lake County (UT) DOH reported the death of an elderly patient who tested positive for ZIKV and had an underlying medical condition; the extent to which the ZIKV infection contributed to the patient’s death has not been determined.** As of 23 JUN, Puerto Rico DOH reports 3,101 (+714) confirmed cases (1 death), with 476 (+137) cases in pregnant women. The U.S. Virgin Islands DOH reported 32 (+3) confirmed cases as of 5 JUL. American Samoa DOH reported 32 (+3) confirmed cases, including 15 (+1) cases in pregnant women, as of 30 JUN.

As of 6 JUL, the CDC’s U.S. [pregnancy registry](#) has recorded 320 (+33) pregnant women with laboratory evidence of a ZIKV infection in the 50 states and the District of Columbia. Seven infants were born with birth defects, and there were five fetal deaths due to birth defects. CDC is tracking an additional 279 (+29) pregnant women in the U.S. territories, with one fetal death due to birth defects.

Text updated from the previous report will be printed in red; items in (+xx) represent the change in number from the previous AFHSB summary (6 JUL 2016).

All information has been verified unless noted otherwise. Additional sources include: Pacific Public Health Surveillance Network, Salt Lake City Tribune.

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**CASE REPORT (cont'): ZIKA AND MICROCEPHALY:** As of **12 JUL**, Brazil (**1,656 (+18)**) cases), Cape Verde (11 cases), Colombia (**18 (+5)**) cases), French Polynesia (8 cases), the Marshall Islands (1 case), Martinique (6 cases), El Salvador (1 case), French Guiana (1 case), Panama (5 cases), and Puerto Rico (1 case) have reported microcephaly and other fetal malformations potentially associated with ZIKV infection or suggestive of a congenital infection. The U.S. (12), Spain (2), and Slovenia (1) have reported travel associated microcephaly cases. [NEJM published](#) a preliminary analysis of the ZIKV outbreak in Colombia, with the main finding that infection during the third trimester of pregnancy is not linked to structural abnormalities in the fetus. [CDC has said](#), “a causal relationship exists between prenatal Zika virus infection and microcephaly and other serious brain anomalies.” On 29 JUN, The Lancet published a study of the first 1,501 live births in Brazil with suspected congenital ZIKV syndrome.

**ZIKA AND GUILLAIN-BARRÉ SYNDROME:** According to [WHO on 6 JUL](#), **15 (+1, Jamaica)** countries (**14** in the Western Hemisphere and French Polynesia) have reported Guillain-Barré syndrome (GBS) cases that may be associated with the introduction of ZIKV. There have been **five (+1)** GBS cases linked to ZIKV reported in the continental U.S. and **17 (+1)** cases in Puerto Rico.

**USG RESPONSE:** On **13 JUL**, CDC published a [model of risk of ZIKV importation resulting from travel to the 2016 Olympic and Paralympic Games](#), which explains that travel associated with the Olympics “does not pose a unique or substantive risk for mosquito-borne transmission of ZIKV in excess of that posed by non-Games travel” for most countries. CDC published a presentation, [Zika Virus: Information for Clinicians](#), on 23 JUN. On 17 JUN, the agency [published guidance](#) for Americans living in areas with ongoing ZIKV transmission. On 14 JUN, CDC issued its draft [interim plan for response activities](#) that would occur after locally acquired ZIKA transmission has been identified in the continental United States and Hawaii. CDC published [interim guidance for interpretation of ZIKV antibody test results](#) in its 3 JUN MMWR. ZIKV disease is a [notifiable disease](#) in the U.S. Additional data, guidance, and information from CDC is available on its [ZIKV](#) web pages.

**GLOBAL RESPONSE:** WHO issued a revised [Strategic Response Plan](#) on 17 JUN that places a greater focus on preventing and managing medical complications caused by ZIKV infection. Following the third meeting of the [WHO Emergency Committee](#) concerning ZIKV and observed increases in neurological disorders and neonatal malformations on 14 JUN, WHO said that the clusters of microcephaly cases and other neurological disorders continue to constitute a Public Health Emergency of International Concern (PHEIC). The Committee found the risk of further international spread of ZIKV from the Olympic and Paralympic games is very low and reaffirmed its previous advice that there should be no general restrictions on travel and trade with countries, areas, and/or territories with ZIKV transmission. The Committee provided additional advice to the Director-General on controlling ZIKV during mass gatherings. WHO updated its [interim guidance for preventing sexual transmission](#) on 7 JUN.

PAHO has created a [searchable database](#) of published primary research and protocols. WHO Regional Office in Europe [assessed](#) the risk of ZIKV spread in Europe during late spring and summer to be low to moderate. For additional information, visit the [WHO](#) and [PAHO](#) Zika web pages.

**MEDICAL COUNTERMEASURES:** According to a study published in Nature on 28 JUN, two vaccine candidates, including one developed at the Walter Reed Army Institute of Research (WRAIR), protected 100% of tested mice from ZIKV infection four and eight weeks after a single injection. WRAIR will co-develop its vaccine with Sanofi Pasteur.

Text updated from the previous report will be printed in red; items in (+xx) represent the change in number from the previous AFHSB summary (6 JUL 2016).

All information has been verified unless noted otherwise. Additional sources include: Sanofi Pasteur, Puerto Rico DOH, USVI DOH, Gov't of Am. Samoa, Brazil MOH, Colombia MOH, and Spain MOH.

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# DEPARTMENT OF DEFENSE (AFHSB)

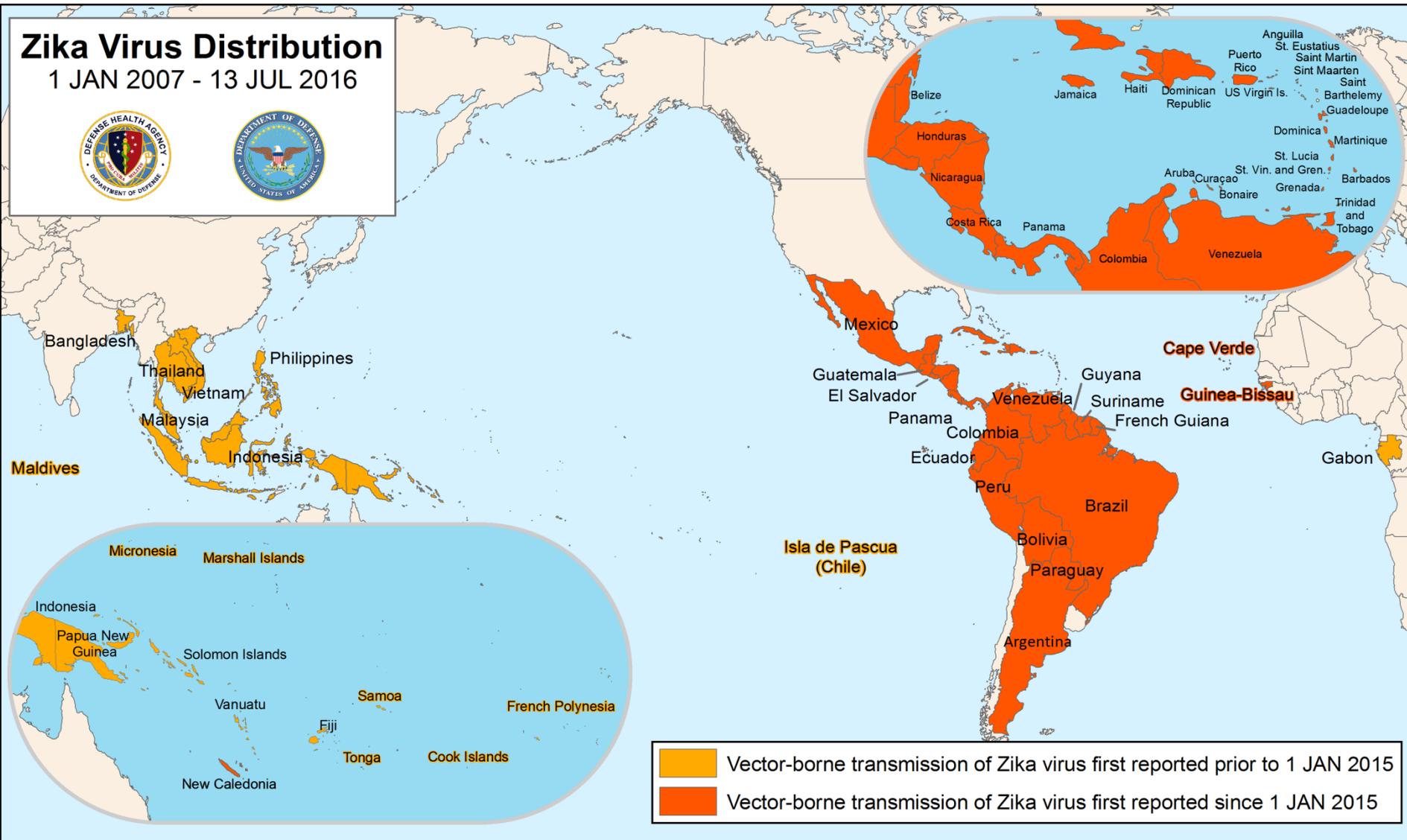
## Global Zika Virus Surveillance Summary #26

### 13 JUL 2016



### Zika Virus Distribution

1 JAN 2007 - 13 JUL 2016



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# DEPARTMENT OF DEFENSE (AFHSB)

## Global Zika Virus Surveillance Summary #26

### 13 JUL 2016



#### Western Hemisphere Countries and Territories with Autochthonous Transmission of Zika Virus: 01 JAN 2015 – 07 JUL 2016

	Confirmed	Suspected	Microcephaly Cases*	Reporting GBS†
<b>Total</b>	<b>82,856</b>	<b>416,688</b>	<b>1,688</b>	<b>14 Countries</b>

Country/Territory	Confirmed	Suspected	Microcephaly Cases*	Reporting GBS†
Anguilla	1	0		
Argentina	23	1,696		
Aruba	21	0		
Barbados	18	770		
Belize	5	0		
Bolivia	126	0		
Bonaire and St. Eustatius	8	0		
Brazil	64,311	161,241	1,656**	Yes
Colombia	8,506	87,844	18**	Yes
Costa Rica	159	722		
Cuba	1	0		
Curaçao	208	0		
Dominica	57	611		
Dominican Republic	101	3,771		Yes
Ecuador	635	1,348		
El Salvador	46	10,684	1	Yes
French Guiana	483	8,715	1	Yes
Grenada	2	0		
Guadeloupe	379	20,070		Yes
Guatemala	408	1,853		

Country/Territory	Confirmed	Suspected	Microcephaly Cases*	Reporting GBS†
Guyana	6	0		
Haiti	5	2,125		Yes
Honduras	46	25,568		Yes
Jamaica	26	2,183		Yes
Martinique	12	32,400	6	Yes
Mexico	667	0		
Nicaragua	385	0		
Panama	292	1,196	5††	Yes
Paraguay	8	275		
Peru	93	0		
Puerto Rico	3,101	0	1	Yes
Saint Barthelemy	27	130		
Saint Lucia	13	306		
Saint Martin	200	1,260		
Saint Vincent and the Grenadines	8	0		
Sint Maarten	25	0		
Suriname	697	2,530		Yes
Trinidad and Tobago	83	0		
U.S. Virgin Islands	32	56		
Venezuela	1,632	49,334		Yes

\* Number of microcephaly and/or CNS malformation cases suggestive of congenital infections or potentially associated with ZIKV infection

\*\*Brazil is currently investigating 3,130 suspected microcephaly cases as of 2 JUL; Colombia is currently investigating 112 suspected microcephaly cases as of 2 JUL.

† Reported increase in GBS cases associated with the introduction of ZIKV and/or GBS case(s) linked to ZIKV infection

†† [WHO reports](#) that it "is not possible to establish a link between" ZIKV infection and microcephaly in one of the cases due to a lack of information, specifically trimester of infection.

Sources: Zika cases reported to PAHO as of 7 JUL, and Zika cases reported by the health departments in Puerto Rico as of 23 JUN and USVI as of 5 JUL; and GBS cases and microcephaly cases reported to WHO as of 7 JUL, except for microcephaly cases reported by the MOHs of Brazil as of 2 JUL and Colombia as of 2 JUL.

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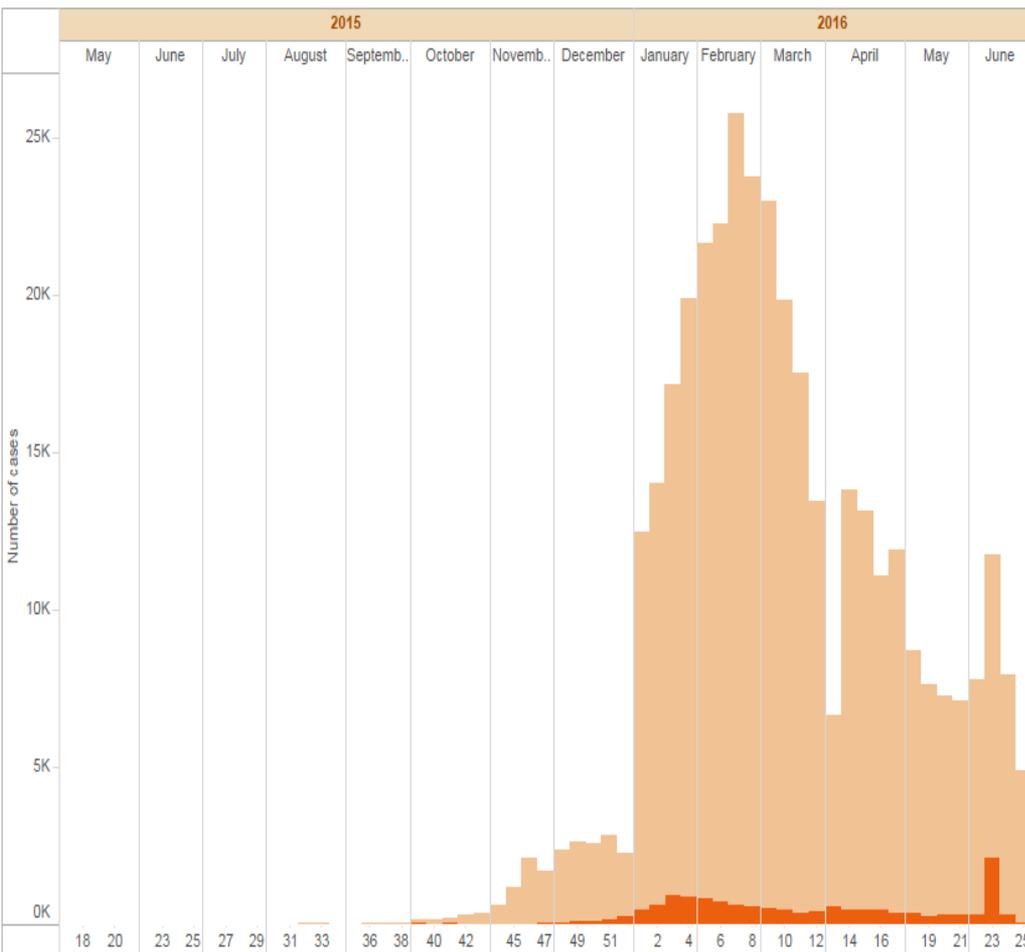
# DEPARTMENT OF DEFENSE (AFHSB)

## Global Zika Virus Surveillance Summary #26

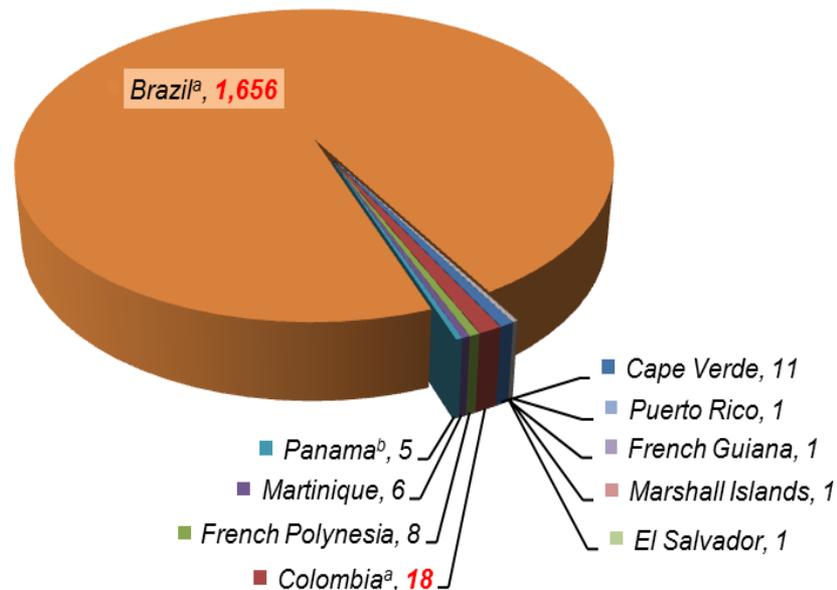
### 13 JUL 2016



**Suspected and confirmed ZIKV cases in the Americas by Epidemiological Week, 1 MAY 2015 – 30 JUN 2016**



**Countries and Territories reporting microcephaly and/or CNS malformation cases potentially associated with ZIKV infection as of 7 JUL 2016**



a) Brazil is currently investigating **3,130** suspected microcephaly cases as of **2 JUL**; Colombia is currently investigating **112** suspected microcephaly cases as of **2 JUL**.

b) [WHO reports](#) that it "is not possible to establish a link between" ZIKV infection and microcephaly in one of the reported Panama cases because of a lack of information and because the infection may have occurred too late in the pregnancy.

Source: PAHO

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