

# Zika Virus

With the outbreak and spread of the Zika infection worldwide, we would like to share our recommendations. These are presented in more detail on the Center for Disease Control website ([www.cdc.gov/zika](http://www.cdc.gov/zika)). Keep in mind the CDC only tracks transmission within the United States, so the information for other countries may not be accurate. Most countries in a warm climate are indicated as a continued potential risk. This is especially important if you are pregnant or attempting conception. If you are infected with this virus in pregnancy, your baby may have abnormal brain development. There is no vaccine or treatment for this infection.

1. Men who have confirmed Zika virus disease should wait at least 3 months after onset of illness to attempt reproduction. For women with confirmed Zika disease, the CDC recommends waiting 8 weeks while the WHO suggests a more conservative approach of waiting 6 months to attempt pregnancy. The temporal relationship between the presence of viral RNA and infectivity is not known definitively and, thus, the absolute duration of time to wait before attempting pregnancy is unknown.
2. If you travel to a country with Zika virus, but do not have any Zika symptoms, you should wait 8 weeks for women and 3 months for men to conceive. Alternatively, you may consider testing for Zika infection.
3. Woman and men with possible exposure to Zika virus but without clinical illness consistent with Zika virus disease should consider testing for Zika viral RNA within 2 weeks of suspected exposure and wait at least 8 weeks after the last date of exposure before being re-tested. They then should consider attempting pregnancy only if the test is negative. Ideally, if the rPT-PCR results were negative one would obtain antibody testing if and when available. This testing paradigm will not necessarily guarantee lack of Zika virus infectivity.
4. Women and men who reside in areas of active Zika virus transmission should talk with their health care providers about attempting reproduction and avoid exposure to mosquito bites. Patients desiring pregnancy should be counseled about the risks of infection during pregnancy and methods to avoid infections. Ideally, these patients would delay attempts at pregnancy until the risk of infection during pregnancy is minimal.
5. Currently, there is no evidence that Zika virus will cause congenital infection in pregnancies initiated after the resolution of maternal Zika viremia.
6. Providing preconception counseling is challenging because currently available data are limited. Discussions about pregnancy timing should be individualized and should include information about the signs and symptoms of Zika virus disease and the potential adverse outcomes

associated with Zika virus infection in pregnancy. If the male or female partner of a pregnancy woman becomes infected or tests positive for Zika virus, he or she should avoid intimate sexual contact as described above or use condoms for the duration of the pregnancy.

**How is the virus spread?**

Usually it is spread by a bite from an infected mosquito, but not all mosquitoes carry the disease. It can also be spread by vaginal, oral or anal intercourse, and blood transfusions.

**What are the symptoms?**

Fever with rash, joint pains, muscle aches and headaches, but only 20% of people have these symptoms; most people have none.

**Once I get back from my trip, how long until I can test for the virus?**

2-12 weeks from your return to the U.S.

**How long is a person infectious?**

Only as long as the virus is circulating in your body, typically only about a week.

**If I am infected, how long should I wait to attempt pregnancy?**

At least 3 months after onset of illness for men and at least 8 weeks for women.

**If I was infected in the past, can my baby be affected?**

No, we do not think so.