



NEW YORK CITY DEPARTMENT OF

HEALTH AND MENTAL HYGIENE

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Commissioner

## 2017 DOHMH Advisory 37: Updated Guidance for the Evaluation and Management of Pregnant Women and Infants with Possible Zika Virus Exposure

*Please share with your colleagues in Obstetrics/Gynecology, Maternal/Fetal Medicine, Pediatrics, Neonatology, Family Medicine, Internal Medicine, Infectious Disease, and Neurology*

- **Zika virus testing is no longer routinely recommended for:**
  - **Asymptomatic pregnant women who have possible Zika virus exposure.**
  - **Well-appearing infants born to mothers with possible Zika virus exposure, but without laboratory evidence of Zika virus infection.**
- **Evaluation of infants born to mothers with laboratory evidence of Zika infection during pregnancy should include comprehensive ophthalmologic exam and hearing screening by automated auditory brainstem response, in addition to other testing.**

October 23, 2017

Dear Colleagues,

The Centers for Disease Control and Prevention has recently updated their guidance for the diagnosis, evaluation, and management of infants and pregnant women with possible Zika virus exposure. Owing to the declining prevalence of Zika virus disease in the Americas and the end of the summer travel season, the New York City Department of Health and Mental Hygiene (NYC DOHMH) advises prenatal and pediatric providers to adhere to these updated recommendations. Please note the following pertinent points and key changes:

### **UPDATED GUIDANCE FOR THE TESTING OF PREGNANT WOMEN**

- Zika virus testing (i.e., Zika virus nucleic acid amplification-based testing and IgM testing) is **no longer** routinely recommended for **asymptomatic** pregnant women with possible Zika virus exposure (*new*)
- Zika virus testing is still recommended for **symptomatic** pregnant women with possible exposure

Providers are reminded to ask all pregnant women about possible Zika virus exposure before and during the current pregnancy. The new CDC guidance document is available online at <https://www.cdc.gov/mmwr/volumes/66/wr/pdfs/mm6629e1.pdf> and contains additional recommendations for pregnant women with ongoing Zika virus exposure (e.g., living in or recurrent travel to an area with ongoing transmission).

### **UPDATED GUIDANCE FOR THE EVALUATION AND MANAGEMENT OF INFANTS**

- For well-appearing infants born to mothers with possible Zika virus exposure and without laboratory evidence of Zika virus infection (i.e., women who were never tested or who had negative results from testing outside a 12-week window from exposure):
  - Zika virus testing is **not** routinely recommended (*new*)

- For infants born to mothers with laboratory evidence of Zika virus infection during pregnancy, the recommendations include:
  - Zika virus testing
  - Cranial ultrasound
  - Comprehensive ophthalmologic exam performed by age 1 month (*new*)
  - Automated auditory brainstem response by age 1 month (*new*)
- For infants with clinical findings consistent with congenital Zika virus infection (e.g., microcephaly, intracranial abnormalities) born to mothers with possible Zika virus exposure (regardless of maternal test results), recommendations include:
  - Zika virus testing
  - Cranial ultrasound
  - Comprehensive ophthalmologic exam performed by age 1 month
  - Automated auditory brainstem response by age 1 month
  - Consider referrals to multi-disciplinary specialists and early intervention

The revised infant guidance document is available online at <https://www.cdc.gov/mmwr/volumes/66/wr/pdfs/mm6641a1.pdf>

The number of newly diagnosed Zika virus infections among NYC residents, including pregnant women, continues to decline (Figure). In 2016, 998 cases of Zika virus were reported to NYC DOHMH (335 in pregnant women). In 2017, 117 cases were reported (72 in pregnant women); however, the majority of those were reported early in 2017, with only 20 cases (6 in pregnant women) since July 1, 2017. From January 2016 to early 2017, 20 infants with birth defects consistent with congenital Zika virus infection and 22 infants with laboratory evidence of Zika virus infection have been identified.

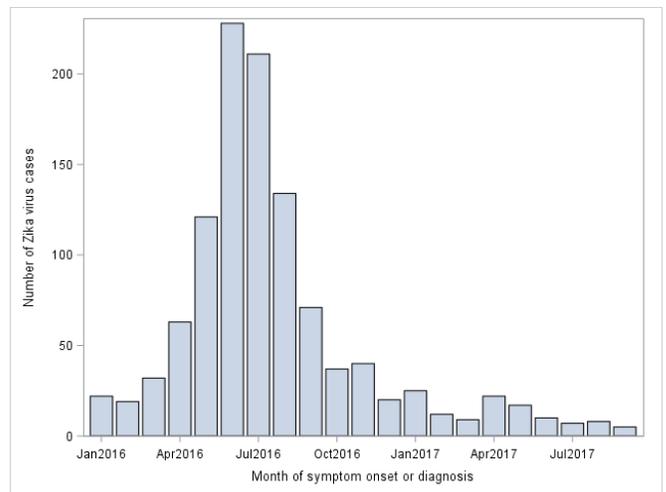


Figure: Zika virus cases by month, January 2016—September 2017, New York City

Please continue to request Zika virus testing through the NYC Public Health Laboratory for infants born to women with laboratory evidence of Zika virus infection during pregnancy or with findings concerning for possible congenital Zika virus infection. For consultation or to request Zika virus testing, please call the DOHMH Provider Access Line at 1-866-692-3641. For provider references, please visit the DOHMH Zika webpage at [www.nyc.gov/zika/provider](http://www.nyc.gov/zika/provider).

We appreciate your continued diligence and collaboration in the response to Zika virus in NYC.

Sincerely,

*Demetre Daskalakis*

Demetre Daskalakis, MD

Deputy Commissioner, Disease Control