May 11, 2016

Dear Colleagues,

We want to update you on several important Zika virus-related issues.

1. Commercial Availability of Zika Virus Testing

In addition to Zika testing available at the DHMH Laboratories Administration, limited Zika testing is now available via Quest Diagnostics. Under a US Food and Drug Administration (FDA) Emergency Use Authorization (EUA), Quest Diagnostics is now offering Zika Virus RNA Qualitative Real-Time PCR testing of serum. Of note, at this time, Quest Diagnostics is offering only PCR testing – and only on serum. Quest Diagnostics is not currently offering IgM testing.

Clinicians should be aware of some limitations of PCR testing. Per the Centers for Disease Control and Prevention (CDC), viral RNA can often be identified in serum during the first 7 days after symptom onset; however, viremia decreases over time, and a negative RT-PCR on serum collected 5-7 days after symptom onset does not preclude Zika virus infection. RT-PCR testing is also not appropriate for use in asymptomatic persons, including asymptomatic pregnant women. Therefore, CDC recommends that serologic testing should be performed in such situations. The DHMH Laboratories Administration continues to perform Zika IgM antibody testing as well as RT-PCR on blood, urine, and potentially other specimens.

More information about Zika virus testing is available at the following DHMH and CDC websites:


2. Reporting of Possible Zika Cases, including Children Born to Women Potentially Infected with Zika Virus

We want to remind you that, per Maryland statutes and regulations, clinicians are required to report suspected Zika infections and certain birth defects, including microcephaly, to the health department. The health department will be collecting a range of demographic, clinical, and diagnostic data on pregnant women possibly infected with Zika virus as part of a national public health effort (including what is being referred to as the “pregnancy registry”). In addition, in accordance with Maryland statutes and regulations, the health department will be collecting data about all infants born to women suspected of having Zika virus infection. We appreciate your cooperation with this effort.
3. Counseling Patients on Prevention of Mosquito Bites

As we enter into active mosquito season, in addition to continuing to counsel your patients on preventing sexual transmission of Zika virus and avoiding travel to areas with ongoing Zika virus transmission during pregnancy, we encourage you to counsel your patients on how to avoid mosquito bites locally. The following materials may be useful in your counseling efforts:


We would also encourage you to educate Maryland residents on ways to reduce mosquito populations around their homes, as outlined in the following materials from CDC and Maryland Department of Agriculture:

https://www.youtube.com/watch?v=us3deawRVM


4. Reporting of Rash Illness Clusters Possibly Due to Locally Transmitted Zika Virus Infection

Though we have not seen local transmission of dengue virus or chikungunya in Maryland; given the presence of mosquitoes in Maryland that have the potential to transmit Zika virus, we ask for your assistance in helping identify possible local transmission of Zika virus in Maryland. Please be on the lookout for unexplained clusters of rash illness, especially if some patients present with additional symptoms, including acute fever, arthralgia, or conjunctivitis, or if the cluster involves adults or another group where rash illness is less common, as these could represent clusters of locally transmitted Zika virus. Such cases should be reported to your local health department or to DHMH, with an accompanying request to conduct Zika virus testing.

Sincerely,

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