

HEALTH ADVISORY



Public Health
Prevent. Promote. Protect.

REGION IV PUBLIC HEALTH

Clark, Cowlitz, Skamania, Wahkiakum
counties and Cowlitz Tribe

TO: Physicians and other Healthcare Providers

Please distribute a copy of this information to each provider in your organization.

Questions regarding this information may be directed to the following Region IV health officers:

Alan Melnick, MD, MPH, CPH

Clark County Public Health, (360) 397-8412

Skamania County Community Health, (509) 427-3850

Jennifer Vines, MD, MPH

Cowlitz County Health & Human Services, (360) 414-5599

Wahkiakum County Health & Human Services, (360) 795-6207

Alert categories:

Health Alert: conveys the highest level of importance; warrants immediate action or attention.

Health Advisory: provides important information for a specific incident or situation; may not require immediate action.

Health Update: provides updated information regarding an incident or situation; no immediate action necessary.

To subscribe or unsubscribe from this listserv, email: Tippy.Hartford@clark.wa.gov.

CDC updates guidance on interpretation of Zika testing results for pregnant women

On Friday, May 5, The Centers for Disease Control and Prevention (CDC) issued a Health Alert Notice with updated guidance for interpreting Zika test results for women who live in or frequently travel (daily or weekly) to areas with a [CDC Zika travel notice](#).

The CDC made this change because some flavivirus infections can result in prolonged IgM responses (>12 weeks) that make it difficult to determine the timing of infection, especially when testing asymptomatic people. Emerging epidemiologic and laboratory data indicate that Zika virus IgM can persist beyond 12 weeks in a subset of infected people. Therefore, detection of IgM may not always indicate a recent infection. Although IgM persistence could affect IgM test interpretation for all infected people, it would have the greatest effect on clinical management of pregnant women with a history of living in or traveling to areas with Zika virus transmission. Pregnant women who test positive for IgM antibody may have been infected with Zika virus and developed an IgM response before conception.

For asymptomatic pregnant women with a history of living in or traveling to areas with Zika virus transmission, CDC recommends Zika virus nucleic acid test (NAT) testing at least once per trimester, in addition to IgM testing as previously recommended. If positive, this may provide a more definitive diagnosis of recent Zika infection. However, a negative NAT does not rule out recent infection because viral ribonucleic acid (RNA) declines over time. Other diagnostic methods, such as NAT testing of amniocentesis specimens or serial ultrasounds, may provide additional information to help determine whether the IgM test results suggest a recent infection. Providers should counsel women on the limitations of all tests. In addition, providers may wish to consider IgM testing as part of pre-conception counseling to establish baseline IgM results before pregnancy; however, preconception negative IgM results might have limited value for women at ongoing risk of Zika infection. NAT testing should be performed for any pregnant woman who becomes symptomatic or who has a sexual partner who tests positive for Zika virus infection.

Specifically, CDC now recommends the following guidance for healthcare professionals evaluating asymptomatic pregnant women who had potential Zika exposure before conception—particularly women who lived in or frequently traveled (daily or weekly) to areas with [CDC Zika travel notices](#):

- Screen pregnant women for risk of Zika exposure and symptoms of Zika. Promptly test pregnant women with NAT if they develop symptoms at any point during pregnancy or if a sexual partner tests positive for Zika virus infection.
- Conduct NAT testing at least once during each trimester of pregnancy to detect evidence of Zika virus unless a previous test has been positive.*
- Consider testing specimens obtained during amniocentesis to detect evidence of Zika virus if amniocentesis is performed for other reasons.†
- Counsel all pregnant women each trimester about the limitations of IgM and NAT testing. For more information about Zika virus testing, see: https://www.cdc.gov/zika/pdfs/living_in.pdf. For more information about counseling before testing, see https://www.cdc.gov/zika/pdfs/pretestingcounselingscript_livingin.pdf.

- Consider IgM testing to determine baseline Zika virus IgM levels as part of preconception counseling. § For more information about preconception counseling, see: <https://www.cdc.gov/zika/pdfs/preconception-counseling.pdf>.

Recommendations for testing *symptomatic* pregnant women, remain unchanged (<https://www.cdc.gov/mmwr/volumes/65/wr/mm6529e1.htm>). However, if a symptomatic pregnant woman is IgM positive and NAT negative, and lived in or traveled to an area with a posted CDC Zika Travel Notice (<https://wwwnc.cdc.gov/travel/page/zika-information>), healthcare providers should recognize that the positive IgM result does not necessarily indicate recent infection.

Footnotes

* Birth defects have been reported in a higher proportion of fetuses or infants whose mothers were infected during the first trimester of pregnancy than in later trimesters. In pregnancies with symptom onset or exposure during the first trimester that were limited to those with laboratory-confirmed Zika virus infection, 15% of completed pregnancies had reported birth defects of the type seen with congenital Zika infection.

† Consideration of amniocentesis should be individualized, because data about its usefulness in diagnosing congenital Zika virus infection are limited. The presence of Zika virus RNA in the amniotic fluid might indicate fetal infection; however, a negative result does not exclude congenital Zika virus infection.

§ The CDC recommends preconceptional IgM testing to establish a baseline IgM level before pregnancy. However, given the limitations of interpreting IgM testing, the results of these tests should not be used to guide decisions about pregnancy timing for women living in areas with ongoing risk of transmission.

Thank you for your partnership.

LHJ	Phone	Fax
Clark County Public Health:	(360) 397-8182	(360) 397-8080
Cowlitz County Health Department:	(360) 414-5599	(360) 425-7531
Skamania County Community Health:	(509) 427-3850	(509) 427-0188
Wahkiakum County Health and Human Services:	(360) 795-6207	(360) 795-6143

To subscribe or unsubscribe from this listserv, email: Tippy.Hartford@clark.wa.gov.