

Public Health Service

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Based on the current global epidemiology of dengue and Zika viruses, CDC recommends that state, territorial and local health departments and laboratories review and update their Zika virus testing practices. Routine serological testing for Zika virus is no longer recommended; further details are provided below.

Since the Zika virus outbreaks of 2016, reported Zika cases in the Americas have declined by 30-70 fold and are now <u>outnumbered by reported dengue cases</u> by a ratio of approximately 200:1. The last RT-PCR confirmed case of locally-acquired Zika in the continental United States was in March 2018. Similarly, there have been no RT-PCR positive cases in any of the U.S. territories since May 2018. Dengue virus is also causing large outbreaks in other areas of the world with low to no Zika virus transmission being reported globally.

CDC recently issued diagnostic testing guidelines for patients with a clinically compatible illness who live in or recently traveled to an area where there is risk for infection with both dengue and Zika viruses. These guidelines emphasize that nucleic acid amplification tests (NAATs) are the preferred method of diagnosis for both viruses and highlight the challenge in interpreting serological results given cross-reactivity between viruses and the prolonged detectability of flavivirus IgM antibodies after infection. The guidelines also note that during a dengue outbreak, jurisdictions might forego Zika virus testing in nonpregnant persons completely and limit testing in pregnant persons to NAATs (Zika and dengue virus) and dengue virus serology. Given the overlapping symptomatology for Zika and dengue viruses and the implications of Zika virus infection during pregnancy, the guidelines also recommend NAAT testing for both dengue and Zika virus be performed on samples from symptomatic individuals.

Because of the changing epidemiology of Zika and dengue, CDC does not currently recommend conducting routine Zika IgM testing for symptomatic persons. CDC also does not recommend routine Zika virus testing (NAAT or IgM) for asymptomatic pregnant women living or traveling in the U.S. and its territories. NAAT testing may still be considered for asymptomatic pregnant women who travel to an <u>area with risk of Zika</u> (purple areas) outside of the U.S. and its territories. <u>Guidance for testing of infants</u> with possible congenital Zika virus infection is unchanged.

Guidelines are being revisited and will continue to be updated as needed. Please refer to CDC's <u>website on Zika virus</u> for additional information on epidemiology, testing guidance, and prevention measures.

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