

Zika Virus: Epidemiological Background

MARCIA CASTRO

mcastro@hsph.harvard.edu



HARVARD
T.H. CHAN

SCHOOL OF PUBLIC HEALTH

Department of Global Health
and Population

Brief history

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1948 – Virus isolated from *Ae. africanus*



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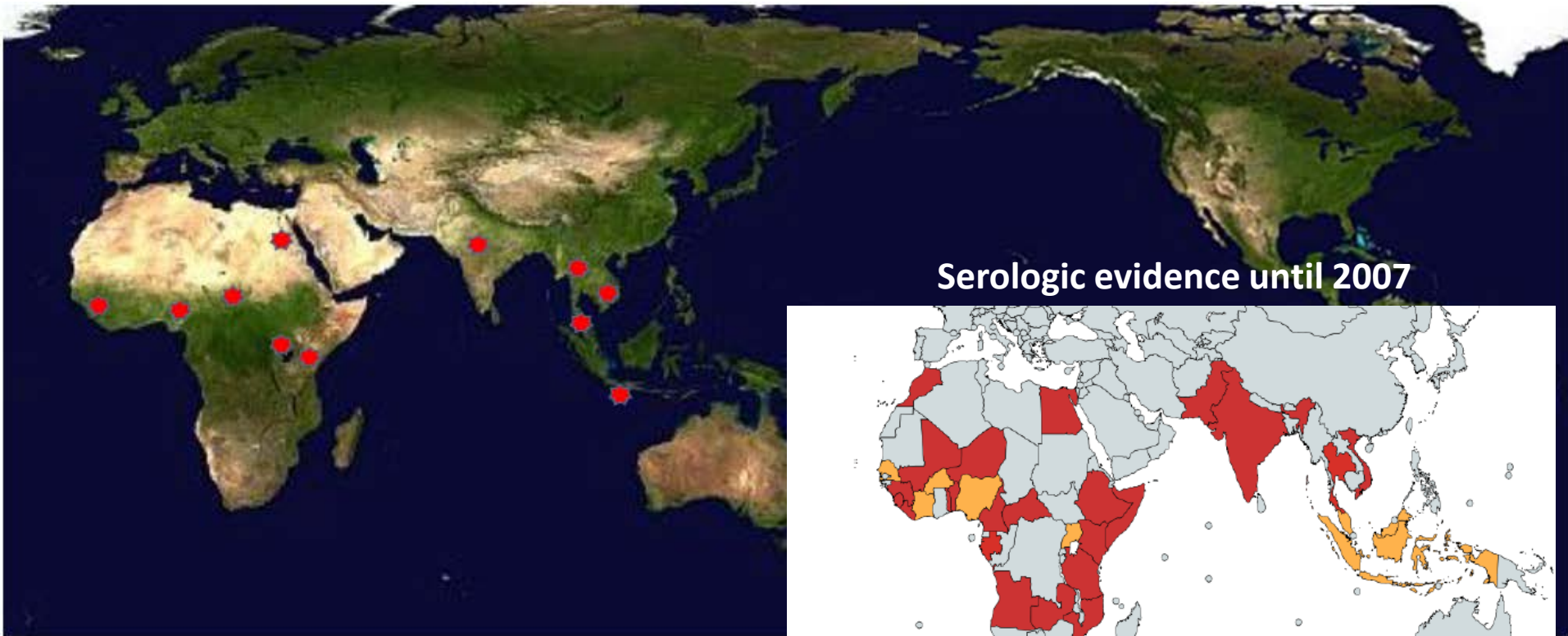


Brief history

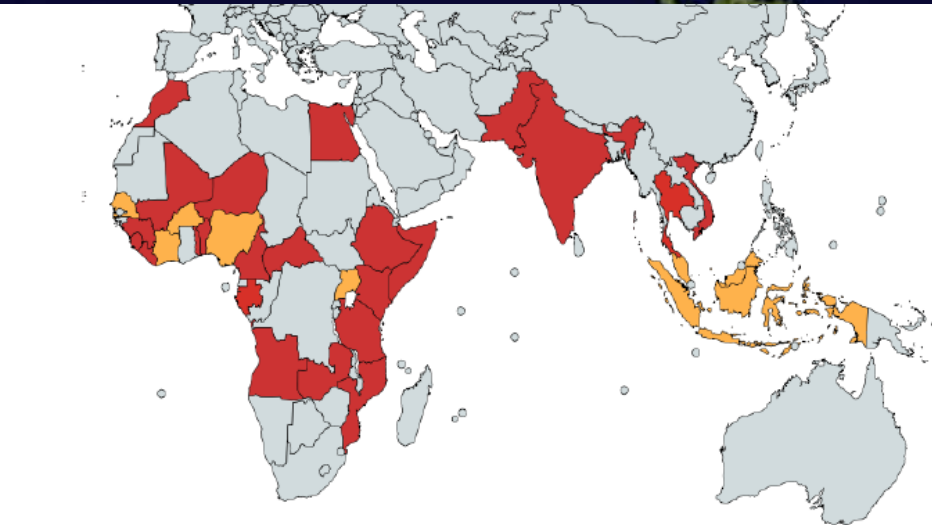
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Serologic evidence until 2007



■ Serologic evidence
■ Virus detection or confirmed human case

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2015 – 1st cases in the Americas (arrival of
the virus could have been in 2013)

Active Zika Virus Transmission



<http://www.cdc.gov/zika/geo/active-countries.html>

Zika virus

- Flavivirus
 - Dengue, West Nile, Japanese encephalitis, Yellow fever
- Primarily transmitted through the bite of an infected *Aedes* mosquito
 - Other modes: sexual transmission (importance?)
- Most common symptoms (usually mild): fever, rash, joint pain, conjunctivitis
- ~ 1 in 5 people infected with Zika virus present symptoms

Zika virus

- Treatment: there is no medicine to treat ZIKV
- Prevention:
 - There is no vaccine to prevent ZIKV
 - Reduce exposure to vector (repellent)
 - Vector control
 - Extremely unlikely to be successful without the provision of sanitation, regular access to piped water, and regular waste collection



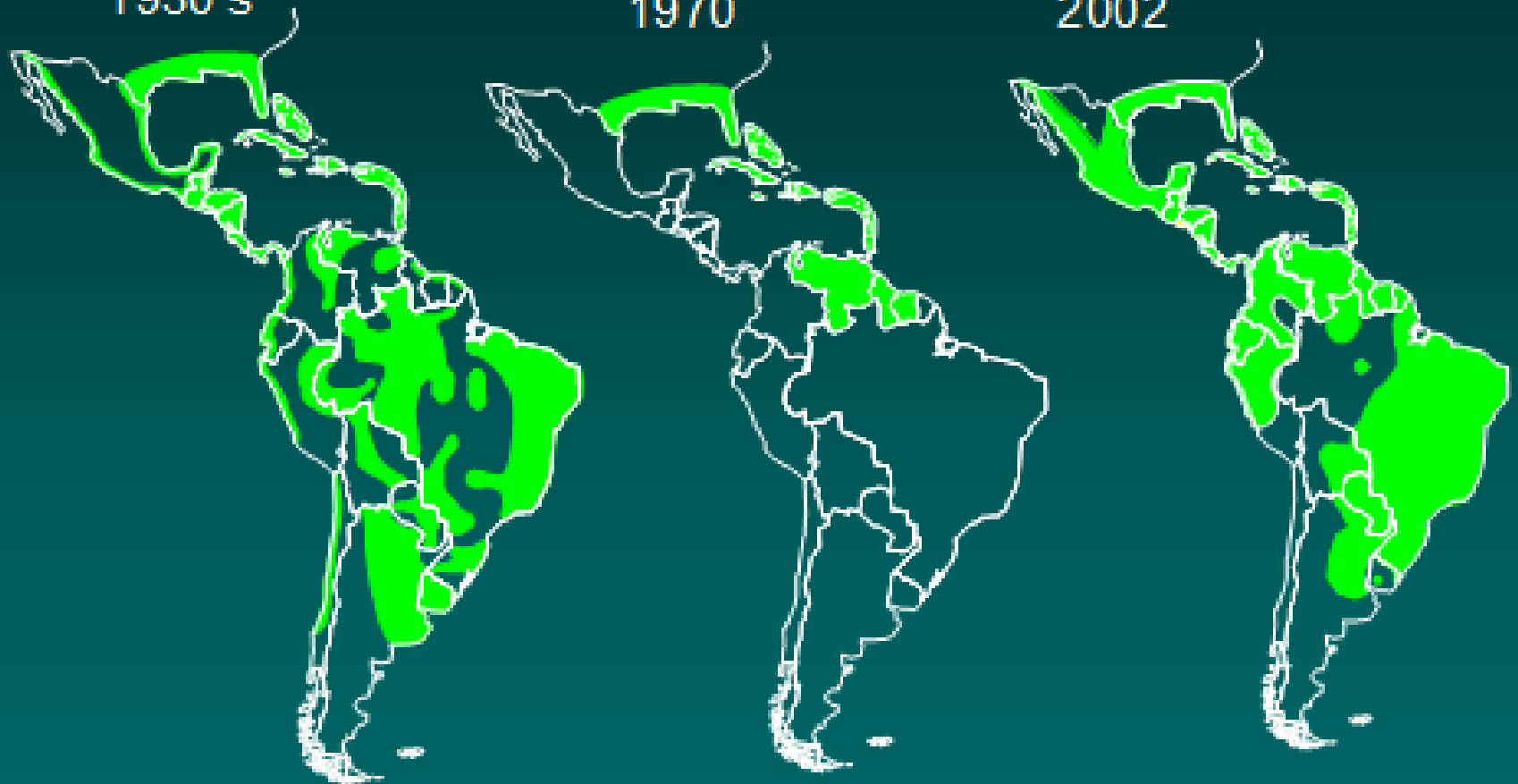
A note on vector control

Aedes aegypti Distribution in the Americas

1930's

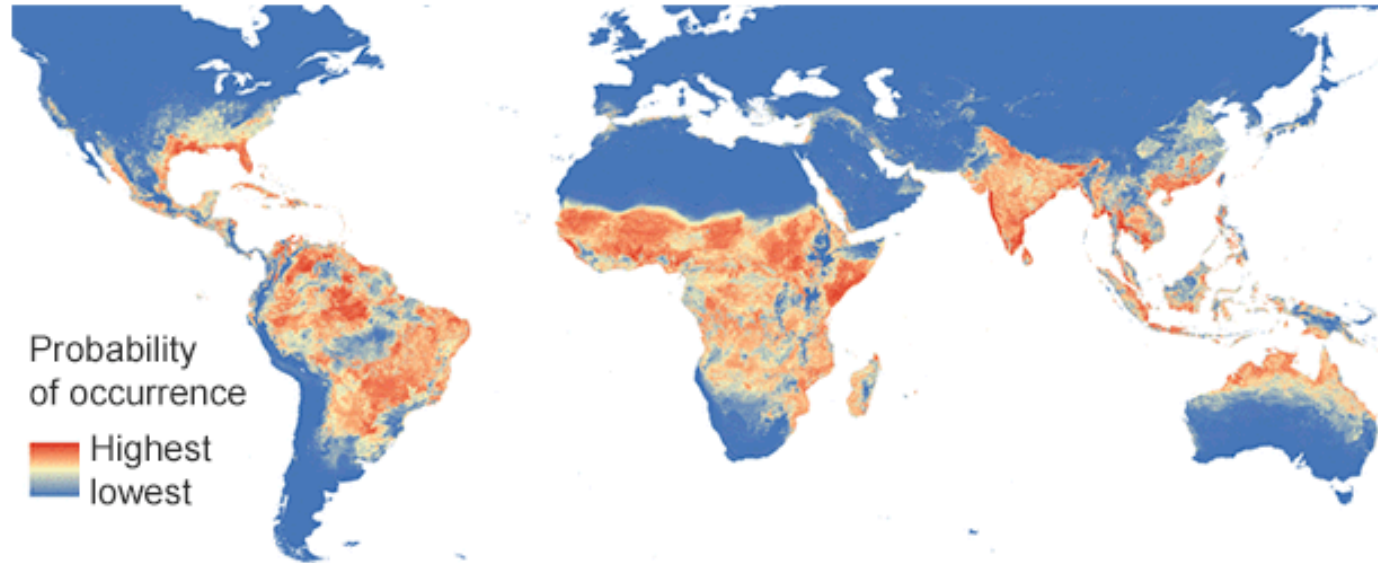
1970

2002

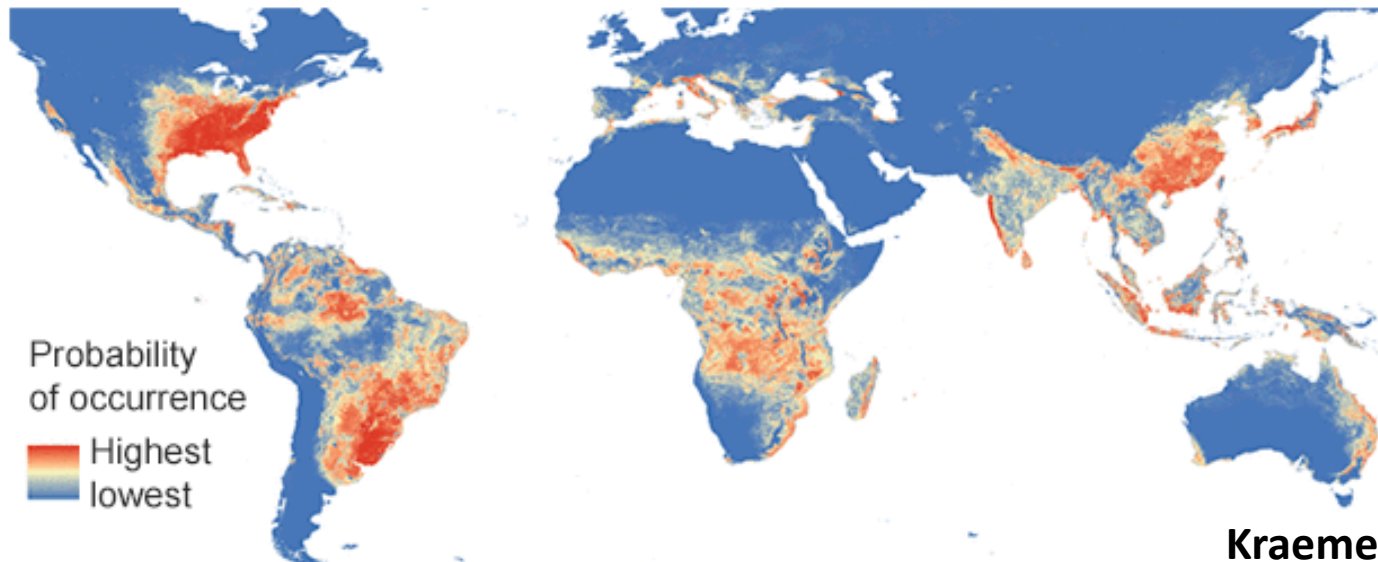


Global Distribution of *Aedes* Mosquitoes

Aedes aegypti mosquito



Aedes albopictus mosquito



Zika virus & complications

- Guillain-Barré syndrome (GBS)
 - Uncommon sickness of the nervous system
 - Evidence of a link between Zika virus infection and GBS in Brazil and French Polynesia

Guillain-Barré Syndrome outbreak associated with Zika virus infection in French Polynesia: a case-control study

Van-Mai Cao-Lormeau, Alexandre Blake*, Sandrine Mons, Stéphane Lastère, Claudine Roche, Jessica Vanhomwegen, Timothée Dub, Laure Baudouin, Anita Teissier, Philippe Larre, Anne-Laure Vial, Christophe Decam, Valérie Choumet, Susan K Halstead, Hugh J Willison, Lucile Musset, Jean-Claude Manuguerra, Philippe Despres, Emmanuel Fournier, Henri-Pierre Mallet, Didier Musso, Arnaud Fontanet*, Jean Neil*, Frédéric Ghawché**

Guillain-Barré syndrome associated with the Zika virus outbreak in Brazil

Síndrome de Guillain-Barré associada ao surto de infecção por vírus Zika no Brasil

Lucas Masiêro Araujo¹, Maria Lucia Brito Ferreira², Osvaldo JM Nascimento¹

Zika virus & complications

- Acute Disseminated Encephalomyelitis (ADEM)
 - Autoimmune syndrome that attacks the brain and spinal cord
 - Results presented **April 10th** at the annual conference for the American Academy of Neurology in Vancouver

Brazilian scientists find new Zika-linked brain disorder in adults



JULIE STEENHUYSEN

Apr 10th 2016 4:20PM

Zika virus may cause broader range of brain disorders than previously believed

Study says five patients who tested positive for virus in Brazil reported difficulty with motor functioning while another had trouble with vision and memory

Zika virus & complications

Feb 1, 2016 – WHO declared clusters of birth defects suspected of being linked to Zika virus in the Americas as a Public Health Emergency of International Concern

■ Microcephaly

- Many cases have been reported:
 - Presence of the virus in the placenta, in the amniotic fluid, in the blood of newborns, and in the brain and several organs of microcephalic fetus
 - Asymptomatic Zika virus infections during pregnancy were also associated with fetal malformations
 - Zika virus can cross the placental barrier at any time during the gestational period

Zika virus & complications

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Zika virus impairs growth in human neurospheres and brain organoids

Cell Biology

Developmental Biology

Neuroscience

Patricia P Garcez^{1,2}, Erick C Loiola^{*2}, Rodrigo F Madeiro da Silva¹, Pablo Trindade², Rodrigo Delvecchio³, Juliana M Nascimento², Almicar Tanuri³, Stevens K Rehen^{1,2}

March 13, 2016

REPORT

Zika virus impairs growth in human neurospheres and brain organoids

Patricia P. Garcez^{1,2,*}, Erick Correia Loiola^{2,†}, Rodrigo Madeiro da Costa^{2,†}, Luiza M. Higa^{3,†}, Pablo Trindade^{2,†}, Rodrigo Delvecchio³, Juliana Minardi Nascimento^{2,4}, Rodrigo Brindeiro³, Almicar Tanuri³, Stevens K. Rehen^{2,4,*}

+ Author Affiliations

*Corresponding author. Email: ppgarcez@icb.ufrj.br (P.P.G.); srehen@lance-ufrj.org (S.K.R.)

† These authors contributed equally to this work.

Science 10 Apr 2016:

DOI: 10.1126/science.aaf6116



Brief Report

Zika Virus Infects Human Cortical Neural Progenitors and Attenuates Their Growth

Hengli Tang,^{1,11,*} Christy Hammack,^{1,11} Sarah C. Ogden,^{1,11} Zhexing Wen,^{2,3,11} Xuyi Qian,^{2,4,11} Yujing Li,⁹ Bing Yao,⁹ Jaehoon Shin,^{2,5} Feiran Zhang,⁹ Emily M. Lee,¹ Kimberly M. Christian,^{2,3} Ruth A. Didier,¹⁰ Peng Jin,⁹ Hongjun Song,^{2,3,5,6,7,*} and Guo-li Ming^{2,3,5,6,7,8,*}

Zika Virus Infection of the Central Nervous System of Mice

By

T. M. BELL, E. J. FIELD, and H. K. NARANG

Medical Research Council, Demyelinating Diseases Unit, Newcastle General Hospital,
Newcastle upon Tyne, England

With 8 Figures

Received February 10, 1971

Pressing questions (a sample)

- If a pregnant woman is infected with Zika virus and the baby is not born with microcephaly, will the child present with developmental problems later in childhood? Does the answer vary if the infection was asymptomatic?
- What is the risk of having a baby with microcephaly, after a Zika virus infection, considering when during the gestational period the infection took place? Does the risk vary if the infection was asymptomatic?
- Are there individual- or contextual-level factors that modify these risks? Does a previous infection with another pathogen (e.g., dengue), or a co-infection, increase the severity of Zika virus?

Zika and Health Systems

- Screening criteria
- Medical attention to children with microcephaly
- Reproductive health and rights
- Understanding and communicating the risk of microcephaly
- Vector control

