

Legislation Text

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Zika Update - Pfister

As of May 11, 2016, 503 travel-associated Zika virus disease cases, including 10 sexually transmitted cases, were reported in the US. Of those, 48 were pregnant and 1 had Guillain-Barré syndrome (GBS). There have been no locally acquired vector-borne cases to date in the continental US. In addition, US Territories have reported 701 cases including 698 locally acquired cases; 65 were pregnant and five had GBS.

In Illinois, approximately 1,100 reports have been received and 17 cases confirmed. In Lake County, 75 suspect Zika reports have been investigated resulting in one confirmed case. The remaining 74 did not meet the case definition. The confirmed case was a Lake County resident with a history of travel in San Salvador.

World-wide, health officials suspected for months that Zika was linked to a surge in cases of microcephaly in babies born in Brazil. In a study published April 13, 2016, scientists confirmed the virus can indeed cause microcephaly, a birth defect that is a sign of incomplete brain development, and possibly other problems such as miscarriage and stillbirth.

The CDC published updated guidance and recommendations to prevent Zika virus transmission and associated adverse health outcomes for women and men who have been diagnosed with Zika virus or who have symptoms of Zika. For men and women without symptoms of Zika virus but who had possible exposure to Zika from recent travel or sexual contact and for men and women without symptoms of Zika virus who live in an area with active Zika transmission, updated interim guidance included recommendations for preventing sexual transmission of Zika.

In addition, CDC is conducting a study of Zika and GBS in Puerto Rico. With GBS, a person's immune system damages peripheral nerve cells, causing muscle weakness and paralysis. The evidence is mounting that Zika is a trigger for GBS but more research is needed, including identification of why some people infected with Zika develop GBS while many do not. It is likely a combination of factors, including pre-existing immune system problems.

LCHD/CHC has developed and is implementing a Zika preparedness plan. Recently, IDPH developed the draft Illinois Zika Action Plan and forwarded it to local health departments for comments. We submitted comments to the Northern Illinois Public Health Consortium (NIPHC) for a unified and coordinated response to IDPH. While the joint NIPHC response reflects that the proposed document is a good draft that, the Consortium raised major concerns about insufficient funding. Specifically, the funds received to date cover a mere fraction of the services rendered. No additional appropriations have been made for IDPH's much needed supports such as the Clinical and Environmental Public Health Laboratory Services. The lack of state appropriations in the current fiscal crisis in Illinois is truly weakening local health department's (LHD) capacity to handle additional Zika Virus cases especially as the summer months approach. Additional resources are crucial to ensure that LHDs can meet ongoing and future demands. NIPHC has advocated for federal Zika funding and suggested IDPH explore possible joint advocacy in order to secure additional state funding.

As a reminder, the main mosquito that transmits Zika virus, *Aedes aegypti*, has never been found in Lake or surrounding counties as it cannot survive freezing temperatures. The Health Department conducts mosquito surveillance throughout Lake County and utilizes traps which target *Culex* mosquitoes, common carriers of West Nile Virus and traps to target *Aedes* mosquitoes that carry Zika virus.

To reduce mosquito breeding and potential exposures to mosquitos in Lake County, we are providing the attached flyer to our partners, such as Townships, to distribute to their residents.

None, for information only.