Dear Colleagues in Higher Education:

Thank you for your continued partnership with the Virginia Department of Health on multiple efforts related to protecting the health of your students and improving the health of your communities. Because spring break is right around the corner, I want to take this opportunity to provide an update about Zika virus, which has been spreading across the Americas, including Puerto Rico and several Caribbean countries. We hope this background information about Zika and these recommendations will help you, your staff, and your students to understand Zika and to ensure safe travel to Zika-affected areas.

**Background**

- Since the Zika virus disease (Zika) outbreak began in Brazil in May 2015, the virus has spread to more than 20 countries. A list of affected areas is available at the CDC website (http://www.cdc.gov/zika/geo/index.html).
- Zika virus is not currently circulating in the continental United States, but cases have been reported in returning travelers. As of February 17th, three (3) Virginia residents have been identified as having Zika. The number of Zika cases in Virginia and the United States will increase as travelers continue to visit and return from Zika-affected areas.
- Zika virus is spread mainly by mosquitoes. Because the mosquitoes that can spread Zika virus (*Aedes aegypti* and *Aedes albopictus*) are here in Virginia, there is potential for local mosquitoes to become infected and spread the virus to humans.
- It is not currently mosquito season and the current risk of mosquitoes spreading Zika infection within Virginia is low. In preparation for the start of mosquito season in April, we are working with our partners now to enhance mosquito control efforts and surveillance across the Commonwealth.
- Less commonly, Zika virus can spread from an infected woman to her baby (during pregnancy or during birth) and from an infected man to a woman during sexual contact.
- Zika is usually a mild illness. An estimated 4 out of 5 people who are infected do not become sick and do not even know they have been infected. For those who do become sick, commonly reported symptoms are fever, rash, joint pain and red eyes which typically last a few days to a week.
• There are important things about Zika virus that we do not fully understand, but are being investigated by scientists.
  o Although not yet scientifically proven, there appears to be a link between Zika infection during pregnancy and a birth defect called microcephaly. Microcephaly is a term to describe a smaller than normal head or brain.
  o In addition, Zika might be associated with other neurological disorders (such as Guillain-Barre syndrome).

Recommendations

• If you and your staff have any questions about Zika and VDH’s response, please visit our website (http://www.vdh.virginia.gov/epidemiology/Zika/index.htm). This resource center contains the most updated information about Zika and Virginia, including fact sheets, clinical resources for your student health facilities, and links for additional information.

• Reach out to your local health district director to discuss your specific higher education community and specific concerns related to Zika (http://www.vdh.virginia.gov/LHD/index.htm).

Please share the following recommendations with students, faculty and staff that may be planning travel to Zika-affected areas of the world.

• **Before travel**, particularly to the Caribbean, Mexico, Central America or South America, check to see if Zika virus is impacting the destination area (http://www.cdc.gov/zika/geo/index.html).
  o **This is especially important for pregnant women (in any trimester) or women who are trying to become pregnant.** They are advised to consider postponing travel to any area where Zika virus is spreading.

• **During travel**, all travelers, particularly pregnant women, should take steps to avoid mosquito bites. These include taking the following actions:
  o Choose an EPA-registered insect repellent and use according to the product label. Use the repellent day and night because the mosquito species that transmit Zika virus are daytime biters that will also enter buildings and bite at night.
  o Use permethrin-treated clothing.
  o Cover exposed skin by wearing long sleeves, long pants, and hats.
  o Sleep indoors in rooms with screened windows or air-conditioning, or use a bed net if you sleep in a room that is exposed to the outdoors.
• **After travel**, if you develop signs or symptoms consistent with Zika (e.g., fever, rash, joint pain, or red eyes), contact your healthcare provider and tell him or her about your travel. If a clinician suspects Zika infection, he or she should report this to the local health department (http://www.vdh.virginia.gov/LHD/index.htm).
  
  o If you have fever or pain, take medicine such as acetaminophen (Tylenol®) to relieve your symptoms. Do not take aspirin or other non-steroidal inflammatory drugs such as ibuprofen.
  
  o Get lots of rest and drink plenty of liquids.
  
  o People with Zika should also stay indoors or wear protective clothing and mosquito repellent for the first week after they begin to feel sick. These measures will help prevent local mosquitoes from biting them and potentially spreading the virus to others in the community.
  
  o Pregnant women who have a male partner who lives in or has returned from an area where Zika virus is spreading should abstain from sex or use condoms consistently and correctly for the duration of the pregnancy.

Thank you again for your dedication to protecting the health of your students, your community of higher education and the citizens of the Commonwealth of Virginia.

Sincerely,

Marissa J. Levine, MD, MPH, FAAFP
State Health Commissioner