Zika Virus in Sint Eustatius

Warning - Level 3, Avoid Nonessential Travel
Alert - Level 2, Practice Enhanced Precautions
Watch - Level 1, Practice Usual Precautions

What is the current situation?

Local mosquito transmission of Zika virus infection (Zika) has been reported in Sint Eustatius. Local mosquito transmission means that mosquitoes in the area are infected with Zika virus and are spreading it to people.

Because Zika virus is primarily spread by mosquitoes, CDC recommends that travelers to Sint Eustatius protect themselves from mosquito bites.

Zika Virus in Pregnancy

A pregnant woman can pass Zika virus to her fetus. Infection during pregnancy can cause serious birth defects. CDC recommends special precautions for the following groups:

- Women who are pregnant:
  - Should not travel to Sint Eustatius.
  - If you must travel, talk to your doctor first and strictly follow steps to prevent mosquito bites during your trip.
  - If you have a male partner who lives in or has traveled to Sint Eustatius, either use condoms or do not have sex (vaginal, anal, or oral) during your pregnancy.

- Women who are trying to become pregnant:
  - Before you or your male partner travel, talk to your doctor about your plans to become pregnant and the risk of Zika virus infection.
  - See CDC guidance for how long you should wait to get pregnant after travel to Sint Eustatius.
  - You and your male partner should strictly follow steps to prevent mosquito bites.
• Men who have traveled to an area with Zika and have a pregnant partner should use condoms (http://www.cdc.gov/condomeffectiveness/male-condom-use.html) or not have sex (vaginal, anal, or oral) during the pregnancy.

Sexual transmission of Zika virus from a male partner is also possible, so travelers are also encouraged to use condoms or not have sex.

Many people infected with Zika virus do not get sick. Among those who do develop symptoms, sickness is usually mild, with symptoms that last for several days to a week. Guillain-Barré syndrome (GBS), a rare disorder that can cause muscle weakness and paralysis for a few weeks to several months, is very likely triggered by Zika in a small proportion of infections, much as it is after a variety of other infections. Most people fully recover from GBS, but some have permanent damage.

As more information becomes available, this travel notice will be updated. Please check back frequently for the most up-to-date recommendations.

What can travelers do to prevent Zika?

There is no vaccine or medicine for Zika. Travelers can protect themselves by preventing mosquito bites: (http://www.cdc.gov/zika/fs-posters/index.html)

• Cover exposed skin by wearing long-sleeved shirts and long pants.
• Use EPA-registered insect repellents containing DEET, picaridin, oil of lemon eucalyptus (OLE, also called para-menthane-diol [PMD]), or IR3535. Always use as directed.
  ◦ Pregnant and breastfeeding women can use all EPA-registered insect repellents, including DEET, according to the product label.
  ◦ Most repellents, including DEET, can be used on children older than 2 months. (OLE should not be used on children younger than 3 years.)
• Use permethrin-treated (http://npic.orst.edu/pest/mosquito/ptc.html) clothing and gear (such as boots, pants, socks, and tents). You can buy pre-treated clothing and gear or treat them yourself.
• Stay in places with air conditioning and window and door screens to keep mosquitoes outside.
• Sleep under a mosquito bed net if air conditioned or screened rooms are not available or if sleeping outdoors.
• Mosquito netting can be used to cover babies younger than 2 months old in carriers, strollers, or cribs to protect them from mosquito bites.
Sexual transmission of Zika virus from a man is possible. If you have sex (vaginal, anal, or oral [http://www.cdc.gov/zika/transmission/index.html]) with a man while traveling, you should use condoms [http://www.cdc.gov/condomeffectiveness/male-condom-use.html].

After travel:

Many people infected with Zika virus do not feel sick. If a mosquito bites an infected person while the virus is still in that person’s blood, it can spread the virus by biting another person. Even if they do not feel sick, travelers returning to the United States from an area with Zika should take steps to prevent mosquito bites for 3 weeks so that they do not spread Zika to uninfected mosquitos.

Men who have traveled to an area with Zika but don’t have symptoms should use condoms for 8 weeks to protect their sex partners. Men who have Zika symptoms or are diagnosed with Zika should use condoms for 6 months. If the man’s partner is pregnant, the couple should either use condoms or not have sex during the pregnancy.

Women who have traveled to an area with Zika but don’t have symptoms should wait 8 weeks after travel before trying to get pregnant. Women who also have Zika symptoms should wait at least 8 weeks after symptoms start before trying to get pregnant.

For more information, see Zika and Sexual Transmission [http://www.cdc.gov/zika/transmission/sexual-transmission.html].

If you feel sick and think you may have Zika:

- Talk to your doctor if you develop a fever with a rash, joint pain, or red eyes. Tell him or her about your travel.
- Take acetaminophen (paracetamol) to relieve fever and pain. Do not take aspirin, products containing aspirin, or other nonsteroidal anti-inflammatory drugs, such as ibuprofen.
- Get lots of rest and drink plenty of liquids.

If you are pregnant:

Pregnant travelers returning from Sint Eustatius can be tested for Zika virus infection.

- If you develop a fever with a rash, joint pain, or red eyes, talk to your doctor immediately and tell him or her about your travel.
- If you do not have symptoms, testing can be considered 2–12 weeks after you return from travel.

Clinician Information
Health care providers should be alert to pregnant patients returning from countries or territories with active Zika virus transmission. Clinicians should test pregnant women with symptoms of Zika during travel or within 2 weeks of travel. Asymptomatic pregnant women who have traveled to Sint Eustatius can also be offered testing.

- For pregnant women with symptoms of Zika, testing is recommended at the time of clinical illness.
- For asymptomatic pregnant women, testing can be offered 2–12 weeks after return from travel.

See [CDC's Updated Guidelines for Health Care Providers Caring for Pregnant Women and Women of Reproductive Age during Ongoing Zika Virus Transmission](http://www.cdc.gov/mmwr/volumes/65/wr/mm6505e2er.htm?_s_cid=mm6505e2er.htm_w) for additional recommendations related to Zika testing and follow-up care.

Guidelines for health care providers caring for infants whose mothers have possible Zika virus infection ([http://www.cdc.gov/mmwr/volumes/65/wr/mm6503e3.htm](http://www.cdc.gov/mmwr/volumes/65/wr/mm6503e3.htm)) are also available.

**Additional Resources**

**For Travelers:**
- [Zika Travel Information](http://www.cdc.gov/zika/travel/)
- [Insect Repellent Use and Safety](http://www.cdc.gov/westnile/faq/repellent.html)

**For Clinicians:**
- [Protection against Mosquitoes, Ticks, & Other Insects & Arthropods](http://www.cdc.gov/zika/vector/)

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