# COUNSELING PREGNANT TRAVELERS ABOUT ZIKA

## For Pregnant Women Who Are Considering Travel to Areas with Risk of Zika

This guide describes recommendations providers can use to counsel pregnant women who are considering travel to areas with a Zika outbreak (as indicated by red areas on the Zika map) or other areas with risk of Zika (as indicated by purple areas on the Zika map). This material includes recommendations from CDC’s interim guidance\(^1\) and talking points to cover while discussing recommendations.

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Key Issues</th>
<th>Talking Points</th>
</tr>
</thead>
</table>
| Ask pregnant women about the location of planned travel | Travel destination | * CDC has identified areas with risk of Zika that travelers should be aware of.  
* Discuss whether the area of planned travel is an area with risk of Zika. |
| Advise pregnant women not to travel to areas with a Zika outbreak (red areas on Zika map) and carefully consider the risks of travel to other areas with risk of Zika (purple areas on Zika map). | Traveling to areas with risk of Zika increases a pregnant woman's chances of being exposed to Zika | Inform patients that Zika primarily spreads through the bite of an infected mosquito, which is why CDC recommends that pregnant women not travel to areas with a Zika outbreak. Inform patients of the risks and possible consequences of travel to other areas with risk of Zika. Zika can also spread through sex from a person who has Zika to his or her partners.  
CDC does not have accurate information on the current level of risk in other areas with risk of Zika. There may be delays in detecting and reporting new outbreaks.  
Let patients know that there is no vaccine to prevent or medicine to treat Zika. The only way to completely prevent Zika virus infection during pregnancy is to not travel to areas with risk of Zika and to use precautions or avoid sex with someone who has recently traveled to an area with risk of Zika. |
| Inform pregnant women about the risks of Zika infection during pregnancy | Infection with Zika virus during pregnancy may harm her fetus | Inform patients about the risks and possible consequences of travel to areas with risk of Zika. If infected, Zika virus can be passed from a woman to her fetus during pregnancy or at delivery. Zika infection during pregnancy can cause severe birth defects and other brain abnormalities, such as microcephaly, and is linked to a pattern of birth defects known as congenital Zika syndrome.  
Children with microcephaly often have serious problems with development and can have other neurologic problems, such as seizures.  
Zika may be associated with early or late pregnancy loss. Among fetuses and infants infected with Zika before birth, Zika may be associated with defects of the eye, hearing deficits, and impaired growth. Some health problems may not be present at birth. |
| Ask pregnant women if they must travel | Discuss Zika prevention during the trip | Ask if there is any way to postpone the trip until after the baby is born. If pregnant women must travel to an area with risk of Zika, they should strictly follow steps to prevent mosquito bites and they should use condoms or not have sex while traveling. |

<table>
<thead>
<tr>
<th>Recommendation</th>
<th>Key Issues</th>
<th>Talking Points</th>
</tr>
</thead>
<tbody>
<tr>
<td>Discuss Zika prevention steps to follow during the trip</td>
<td>Environment and Zika prevention</td>
<td>Discuss environment in which patient will be staying. Advise traveler to stay in hotel rooms or other accommodations that are air-conditioned or have good window and door screens to keep mosquitoes outside. Discuss mosquito bite prevention, including insect repellent, clothing (including permethrin-treated items), and bed net use. Discuss how to prevent sexual transmission during and after the trip.</td>
</tr>
<tr>
<td>Discuss next steps for pregnant travelers once they return from an area with risk of Zika</td>
<td>Pregnant women who return from travel to areas with risk of Zika</td>
<td>• Advise patients that pregnant women who have traveled to areas with risk of Zika should be tested if they have symptoms during or after travel, or if you find fetal abnormalities on ultrasound that might be related to Zika infection¹. • If asked about testing asymptomatic patients, advise that routine testing is not recommended for pregnant women who have traveled to these areas and who do not have symptoms. However, testing may be considered according to patient preferences and clinical judgement and in line with the state or local area recommendations¹.</td>
</tr>
<tr>
<td>Ask the patient about her male sexual partner’s travel plans</td>
<td>Preventing Zika transmission from partners</td>
<td>If a pregnant woman’s partner traveled to an area with risk of Zika, the couple should use condoms from start to finish every time they have sex (oral, vaginal, or anal sex and the sharing of sex toys) or not have sex during the pregnancy. A man’s semen can carry Zika for months after infection, even if he doesn’t have symptoms. He could transmit Zika through sex to his pregnant partner and her fetus.</td>
</tr>
<tr>
<td>Discuss Zika infection</td>
<td>Signs and symptoms of Zika virus disease</td>
<td>Many people infected with Zika won’t have symptoms or will have only mild symptoms. The most common symptoms of Zika are fever, rash, headache, joint pain, conjunctivitis (red eyes), and muscle pain. Illness usually lasts about a week. Pregnant women who have possibly been exposed should talk to a doctor or other healthcare provider after travel even if they don’t feel sick. After returning from an area with risk of Zika, people should take steps to prevent mosquito bites for 3 weeks, even if they do not feel sick. Mosquitoes become infected when they bite a person infected with the virus. Infected mosquitoes can then spread the virus to other people through bites.</td>
</tr>
</tbody>
</table>

**Related websites:**


**References:**