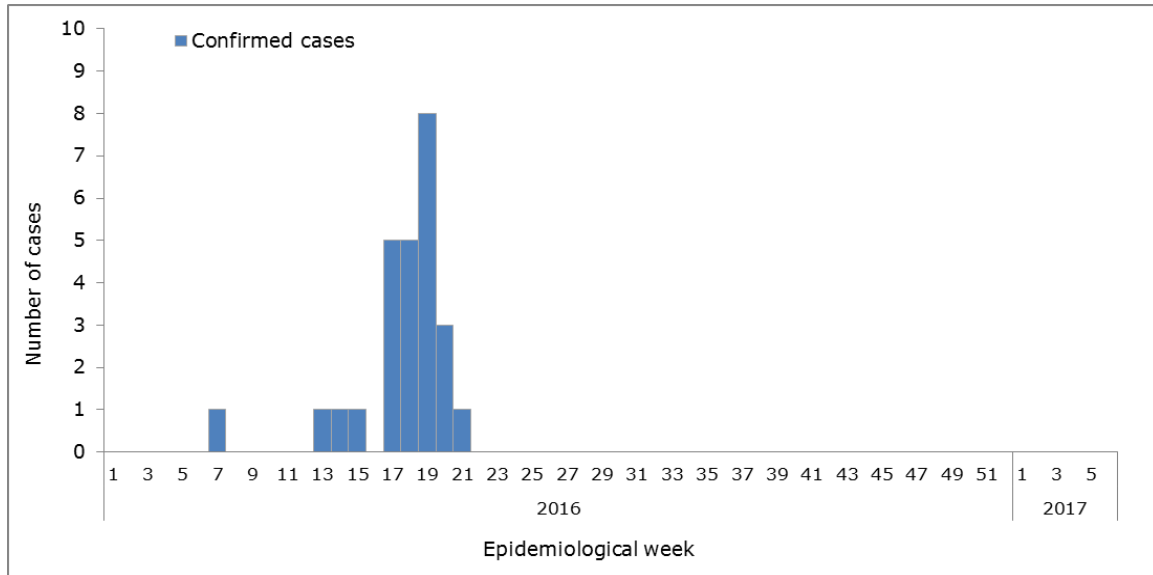


Zika-Epidemiological Report Argentina

2 March 2017

Figure 1. Confirmed Zika cases. Argentina. EW 1 of 2016 to EW 6 of 2017.



Source: Data reported by the Argentina Ministry of Health to PAHO/WHO¹

FIRST AUTOCHTHONOUS VECTOR-BORNE CASES

In epidemiological week (EW) 20 of 2016, the Argentina International Health Regulations (IHR) National Focal Point (NFP) notified PAHO/WHO of the detection of the first laboratory-confirmed autochthonous case of Zika virus disease.

GEOGRAPHIC DISTRIBUTION

The first confirmed vector-borne cases were reported in Tucuman Province in Northwestern Argentina. As of EW 6 of 2017, confirmed Zika cases have been reported in two of Argentina's 24 provinces, Tucuman and Cordoba.² Confirmed autochthonous vector-borne cases were reported in Tucuman Province while one case of sexual transmission was reported in Cordoba Province.²

¹ Reported to PAHO/WHO from Argentina International Health Regulation (IHR) National Focal Point (NFP) on 13 February 2017.

² Argentina Ministry of Health. Integrated Surveillance Bulletin. EW 6 of 2017. Available at: http://www.msal.gob.ar/images/stories/boletines/boletin_integrado_vigilancia_N347-SE6.pdf

TREND

The highest concentration of cases occurred between EW 13 and EW 21 of 2016. During this period, a peak in cases was observed in EW 19, with eight cases being reported. Since EW 21 of 2016, no new confirmed cases have been reported.¹

CIRCULATION OF OTHER ARBOVIRUSES

Before the introduction of Zika virus in Argentina, dengue had been circulating in the country. In 2016, the Argentina health authorities reported a cumulative total of 79,455 probable cases (188 cases per 100,000 population), including 41,211 confirmed cases, of dengue serotypes 1 and 4.³ As of EW 6 of 2017, 2,320 probable cases (6 cases per 100,000 population) and 20 confirmed cases of dengue have been reported.

The first autochthonous case of chikungunya virus in Argentina was confirmed in EW 8 of 2016 in the provinces of Salta and Jujuy.² In 2016, 338 confirmed cases of chikungunya were reported in Argentina with a majority of the cases being reported in Salta (329 cases) and the remaining cases reported in Jujuy (9 cases). As of EW 5 of 2017, no confirmed cases of chikungunya have been reported.

ZIKA VIRUS DISEASE IN PREGNANT WOMEN

In 2016, the Argentina Ministry of Health reported seven confirmed cases of Zika among pregnant women. In the first five weeks of 2017 there has been no active circulation of Zika virus in Argentina according to the Argentina Ministry of Health.²

ZIKA COMPLICATIONS

ZIKA-VIRUS-ASSOCIATED GUILLAIN-BARRÉ SYNDROME (GBS)

As of EW 6 of 2017, no cases of Zika-virus-associated Guillain-Barré syndrome (GBS) or other neurological syndromes have been reported by the Argentina health authorities.

CONGENITAL SYNDROME ASSOCIATED WITH ZIKA VIRUS INFECTION

As of EW 6 of 2017, the Argentina Ministry of Health reported two cases of congenital syndrome associated with Zika virus infection.² The first case was reported in Tucuman province and is related to the outbreak reported in San Miguel of Tucuman.¹

DEATHS AMONG ZIKA CASES

As of EW 6 of 2017, no deaths among Zika virus disease cases have been reported by the Argentina health authorities.¹

NATIONAL ZIKA SURVEILLANCE GUIDELINES

The Argentina Ministry of Health national surveillance guidelines for Zika and its complications are available at:

<http://www.msal.gob.ar/images/stories/epidemiologia/vigilancia/sivila/tutoriales/2016-zika-tutorial-notificacion-snvs.pdf>

³ PAHO/WHO. Data, Maps and Statistics. Number of reported cases of Dengue and Severe Dengue (SD) in the Americas by Country. EW 52 of 2016. Available at:

http://www.paho.org/hq/index.php?option=com_topics&view=readall&cid=3273&Itemid=40734&lang=en

LABORATORY CAPACITY

The diagnosis and laboratory surveillance of Zika virus is performed through the National Network of Public Health Laboratories, where molecular detection and differential diagnosis are carried out. The National Reference Laboratory is the *Instituto Nacional de Enfermedades Virales Humanas "Dr. Julio I Maiztegui"* (INEHV), where the capacity for both molecular (RT-PCR) and serology (ELISA IgM and PRNT) is fully established.

INFORMATION-SHARING

Official preliminary data were shared by the Argentina International Health Regulations (IHR) National Focal Point (NFP) in EW 20 of 2016. At the time of this report, the latest information shared with PAHO/WHO was from EW 21 of 2016, while the latest available information published online by the Argentina Ministry of Health was from EW 6 of 2017.