



MotherToBaby

Medications & More During Pregnancy & Breastfeeding
Ask The Experts

Fact Sheet

by the **Organization of Teratology Information Specialists (OTIS)**

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Zika Virus and Pregnancy

This sheet talks about exposure to the Zika virus in pregnancy and while breastfeeding. This information should not take the place of medical care and advice from your healthcare provider.

What is Zika? How do people get it?

Zika is a virus that is usually spread by infected mosquitoes. Not all mosquitoes carry the Zika virus and not every person bitten by an infected mosquito will get Zika. People who have the highest risk of getting Zika virus are those who live in or travel to areas with active Zika transmission.

Other ways people can get Zika include sexual contact with an infected partner (vaginal, anal, or oral sex, or sharing of sex toys), from an infected pregnant woman to her fetus, and through blood transfusions with infected blood. Blood donations in the U.S. are screened for Zika virus. There is no evidence that Zika is spread through saliva or by coughing or sneezing.

What are the symptoms of Zika virus?

Four out of 5 people who are infected with Zika virus do not have symptoms. Those who do have symptoms usually have a mild flu-like illness with fever, rash, headache, joint and/or muscle pain, and conjunctivitis (“pink eye”). Symptoms can begin 3-7 days after being infected and can last for several days to a week. A person with Zika can treat the symptoms, but there is no cure or vaccine for Zika. Even if an infected person treats their symptoms, or even if they do not have symptoms, they can still pass the virus to others through sex or to a developing baby in pregnancy.

Does having Zika virus increase the chance for miscarriage?

Zika infection in pregnancy can increase the chance of miscarriage or stillbirth.

Does having Zika virus increase the chance of birth defects?

In every pregnancy, a woman starts out with a 3-5% chance of having a baby with a birth defect. This is called her background risk. If a woman gets Zika during pregnancy, the virus can pass to the developing baby. If this happens, the baby has an increased chance of certain birth defects and developmental problems known as “congenital Zika syndrome” (CZS). Babies who have CZS can have microcephaly (very small head and brain), severe brain defects, eye defects, hearing loss, seizures, and/or problems with joint and limb movement. A Zika infection can also affect the baby’s growth. Sometimes, a baby can be born with no apparent effects from Zika infection, but can later have slowed head and brain growth as a result of the infection (called postnatal microcephaly).

Studies looking at pregnant women with Zika virus infection in the U.S. and U.S. territories have found that about 5-14% of babies born to women with confirmed Zika virus infection during pregnancy have birth defects, neurodevelopmental problems (such as developmental delay, seizures, trouble swallowing), or both. Some of the neurodevelopmental problems seen in these babies were not obvious at birth but were found during the first year of life. Researchers are still working to learn more about the possible effects of Zika virus infection during pregnancy.

Would having Zika virus in the second or third trimester cause other pregnancy complications?

Zika infection any time in pregnancy increases the chance of birth defects and other problems related to CZS. Based on limited research, it is possible that infection early in pregnancy could have the greatest risk for the baby, but infection is still a risk even in the second and third trimesters.

I am pregnant. How can I protect myself from Zika virus?

You can avoid getting Zika by not traveling to areas where there is a risk of getting Zika (see the Zika map from the Centers for Disease Control and Prevention). If you have to travel to an area with a risk of Zika, help prevent mosquito bites by using insect repellent. MotherToBaby has fact sheets available for Insect Repellents and Pregnancy and DEET and Pregnancy. For information on effective repellents and other ways to prevent mosquito bites, visit the CDC webpage Prevent Mosquito Bites.

You can also avoid getting Zika by not having sex with a partner who might have the virus. If your partner lives in or travels to an area with Zika, the CDC recommends you do not have sex, or that you use barrier protection every time for vaginal, anal, or oral sex, for the rest of the pregnancy. See Pregnant Women & Zika.

How long do women and men need to wait after being in an area with Zika (or having sex with someone who might be infected) before trying to get pregnant?

Women who might have been exposed to Zika virus through travel (see the CDC Zika map) or through sex should wait at least 2 months before trying to get pregnant, even if they don't have symptoms of Zika. Men who might have been exposed to Zika virus through travel or sex should wait at least 3 months before trying to conceive a pregnancy, even if they do not have symptoms. During these wait times, men and women should use barrier methods (e.g. condoms) and effective birth control to prevent pregnancy, and to protect their sexual partners from the virus. Visit the CDC webpage Women & Their Partners Trying to Become Pregnant for more details.

I had Zika virus months ago. Is there a risk of birth defects for my future pregnancies?

Waiting at least 2 months (for women) or at least 3 months (for men) after having Zika allows time for the virus to clear from the body. After the virus is gone from the body, there is no increased risk of Zika-related problems in future pregnancies. Based on what we know about similar viruses, it is unlikely that someone could get Zika again after having it once.

Can I be tested for Zika virus?

Maybe, but not everyone who may have been exposed to Zika virus needs to be tested. Men and women who were possibly exposed to Zika and develop symptoms should talk to their healthcare providers about testing as soon as possible, up to 12 weeks after their possible exposure. Testing is not routinely recommended for people who do not have symptoms, even if they are pregnant. However, pregnant women who are concerned about Zika should talk to their healthcare providers to make joint decisions about testing. Local testing recommendations might be different in some areas. (For example, routine testing is recommended for pregnant women who travel regularly between the U.S. and Mexico.) For more information, see Patient Counseling.

Zika testing is not a good way for men to know if they could pass the virus to their partners through sex. At this time there is no way to test semen for Zika virus. Men with pregnant sex partners should use condoms for the rest of the pregnancy, and men planning pregnancy should wait at least 3 months, even if they receive a negative Zika blood test result. For more information, please see CDC's webpage on Testing & Diagnosis.

What happens if I tested positive for Zika during pregnancy or my test results are not clear?

If a woman tests positive for Zika in pregnancy, or her results are unclear, the CDC provides guidance to healthcare providers for following the baby's growth and development for the rest of the pregnancy (see Prenatal Care). This may include more frequent ultrasounds (called serial ultrasounds) every 3–4 weeks and tests to look for Zika infection in the baby. It is important to remember that just because a pregnant woman tests positive for Zika, it does not automatically mean her baby will have birth defects or neurodevelopmental problems.

What if I traveled to an area with Zika during pregnancy and was never tested?

All babies who may have been exposed to Zika virus during pregnancy should receive a physical examination at birth as part of routine prenatal care. Infants who are born with birth defects consistent with congenital Zika syndrome, and infants whose mothers tested positive for Zika during pregnancy, should receive additional testing. Please see CDC's Evaluation & Testing webpage for more information, and discuss testing options and recommendations with your baby's healthcare provider.

Where can I find a health care provider that specializes in treating babies affected by Zika?

Zika Care Connect (ZCC) is a helpful resource to find healthcare providers who care for patients affected by

Zika. These providers receive the latest medical information from the CDC that allows them to care for patients with Zika based on the most up-to-date information. The ZCC website allows you to search for specialists near you, and provides information about the insurance they accept.

Can I breastfeed if I have Zika virus?

Zika virus has been found in the breast milk of women infected with Zika, but there have not been any reported cases of infants getting Zika through breastfeeding. Researchers are learning more about any long-term effects that Zika could have on children and infants, but most infants and children who get Zika from mosquito bites either don't have symptoms or have only mild symptoms, similar to the infection in adults. Based on current information, experts believe that the benefits of breastfeeding outweigh any potential risks of Zika virus infection through breastfeeding. Be sure to talk to your healthcare provider about all your breastfeeding questions.

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