



The Centers for Disease Control and Prevention (CDC) has released [updated interim guidance](#) for pregnant women with possible Zika virus exposure. These updates will help to reduce misinterpretation of Zika virus test results for pregnant women.

Emerging data show that Zika virus antibodies can persist for more than 12 weeks in some pregnant women. Because of this, antibody tests cannot identify when the infection occurred, so the test results may not provide useful information about whether the pregnancy is at risk of Zika virus infection.

All pregnant women in the United States and U.S. territories should be asked about possible Zika virus exposure before and during the current pregnancy, at every prenatal visit. Health care providers should consider Zika virus exposure both *before* and *during* pregnancy to appropriately interpret testing for Zika antibodies and counsel patients.

The CDC made new recommendations for two distinct groups of pregnant women:

- Pregnant women with possible Zika virus exposure who also have symptoms of Zika virus disease.
  - CDC recommends two types of Zika test (one that looks for Zika RNA and one that looks for Zika antibodies) be conducted concurrently. Previously, CDC recommended sequential testing.
  - The timeframe for Zika RNA testing has been extended from the previous recommendations of up to 2 weeks to the new recommendation of up to 12 weeks after symptom onset. However, it is best to test as soon as possible after symptom onset.
- Asymptomatic pregnant women who had recent exposure to Zika virus.
  - CDC is no longer recommending routine Zika testing for pregnant women who were recently exposed to the virus, but do not have ongoing exposure because there is an increased likelihood of false-positive results due to the decline of Zika virus in the Americas. Instead, testing should be considered according to patient preferences and clinical judgment.

Despite this change, the Vermont Department of Health is continuing to recommend and encourage testing for asymptomatic pregnant women population. This decision is based on recent data from Brazil and New York City indicating that 57% of the mothers of infants with congenital Zika syndrome were asymptomatic throughout their pregnancy. This highlights the importance of identifying women with asymptomatic infection. Therefore, the Health Department recommends testing for asymptomatic pregnant women be performed in accordance with the same guidelines for symptomatic pregnant women.

The new CDC guidance does not recommend any changes in testing for men and non-pregnant women. These populations are only recommended for Zika virus testing if symptoms of Zika infection (fever, rash, headache, joint pain, red eyes, or muscle pain) develop following recent exposure (travel to an [area with risk of Zika](#) virus or sex without a condom with a person who lives in or traveled to an area with risk of Zika.)

Zika virus testing continues to be offered through the Vermont Department of Health Laboratory. Please contact VDH Infectious Disease - Epidemiology at 802-863-7240 (available 24/7) for consultation prior to specimen submission. Specimen collection guidance is available on the [VDH website](#).