

CDC releases new guidance on caring for infants with congenital Zika

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Children with congenital Zika virus infection could have an array of difficulties and will need careful evaluation and follow-up, according to federal health officials.

The Centers for Disease Control and Prevention (CDC) has released crucial new guidance for pediatricians and other pediatric clinicians that was developed in consultation with the Academy and other experts.

“We felt there was an urgent need to develop guidance for pediatric health care providers on how to evaluate and manage babies born with congenital Zika virus infection (in order) to give those kids the best chance to reach their full potential,” said co-author Sonja A. Rasmussen, M.D., M.S., FAAP, a pediatrician and clinical geneticist at the CDC.

Zika virus is spread primarily through infected *Aedes aegypti* and *Aedes albopictus* mosquitoes.

The report “Update: Interim Guidance for the Evaluation and Management of Infants with Possible Congenital Zika Virus Infection – United States, August 2016” was published Friday in the *Morbidity and Mortality Weekly Report*.



This guidance comes just one week after the U.S. declared a public health emergency in Puerto Rico where 10,690 people have become infected with the mosquito-borne virus including 1,035 pregnant women, according to the U.S. Department of Health and Human Services. In U.S. states, 2,260 cases have been reported, including 529 pregnant women, according to the CDC.

Experts from around the country [gathered at the CDC](#) in July to discuss how to evaluate and care for infants with congenital Zika virus infection, which can cause [microcephaly](#) and other issues such as vision and hearing difficulties, contractures and developmental delay.

“Developmental screening and expeditious referral to early intervention when indicated are critical,” said Fan Tait, M.D., FAAP, AAP associate executive director and director of the Department of Child Health and Wellness. “Following the diagnosis, families will need both emotional and psychosocial support.”

The new guidance calls for all infants whose mothers were infected with Zika during pregnancy to have a comprehensive physical exam, neurologic assessment, postnatal cranial ultrasound, standard hearing screen and [Zika testing](#).

Babies who are found to be infected also should have a comprehensive eye exam and hearing assessment by auditory brainstem response testing before 1 month of age regardless of whether abnormalities are apparent at birth.

If abnormalities are detected, infants will need to be evaluated by an infectious disease specialist, neurologist, endocrinologist, ophthalmologist and geneticist. The primary care pediatrician and these specialists will need to provide coordinated ongoing examinations that are [detailed in the guidance](#).

“We really emphasized in this guidance some of the ... AAP tenets that these babies need a medical home, they need someone to help them coordinate their care,” Dr. Rasmussen said.

Those who are not born with obvious, identifiable abnormalities will need careful monitoring for any that may present later in life such as those resulting in seizures or troubles with vision or hearing.

“It’s going to be important to follow those children for neurodevelopmental abnormalities as they would any child but probably with just more focused attention on the potential for developmental regression or development delays,” said Edwin Trevathan, M.D., M.P.H., FAAP, a member of the AAP Section on Neurology and a pediatric neurologist at Vanderbilt University Medical Center.

The CDC continues to encourage women with Zika infection to breastfeed their infants, saying the benefits outweigh any possible risks. The agency will continue to update guidance on caring for infants as experts learn more, and Dr. Trevathan emphasized the importance of pediatricians staying up to date.

“I think we will be better off as a pediatric community and our children will be better for it,” he said.

Pediatricians should report suspected congenital Zika cases to their state, local, tribal or territorial health officials and provide clinical information to the [U.S. Zika Pregnancy Registry](#) or [Puerto Rico Zika Active Pregnancy Surveillance System](#) so the CDC can monitor outcomes and adjust recommendations accordingly.

Resources

- [CDC Zika website](#)
- [AAP Zika website](#)
- [Information for clinicians](#)
- [Information for parents](#)
- [Confirmed Zika cases by state](#)