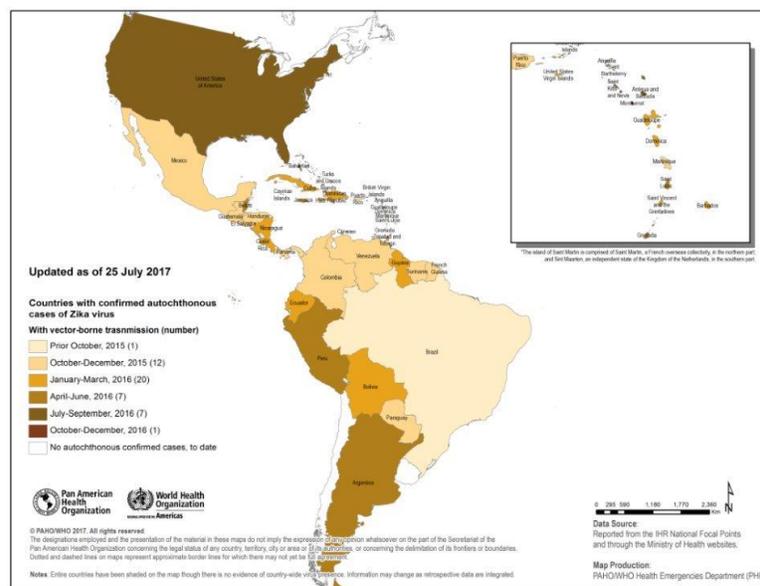


Situation summary in the Americas

Since epidemiological week (EW) 44 of 2016, no additional countries or territories of the Americas have confirmed autochthonous, vector-borne transmission of Zika virus disease. To date, 48 countries and territories in the Americas have confirmed autochthonous, vector-borne transmission of Zika virus disease,¹ while five countries have reported sexually transmitted Zika cases (**Figure 1**).²

Figure 1. Countries and territories in the Americas with confirmed autochthonous (vector-borne) Zika virus cases, 2015 - 2017.



The following is a summary of the epidemiological situation by sub-regions.

¹ Anguilla, Antigua and Barbuda, Argentina, Aruba, the Bahamas, Barbados, Belize, Bolivia, Bonaire, Sint Eustatius, and Saba, Brazil, the British Virgin Islands, Cayman Islands, Colombia, Costa Rica, Cuba, Curaçao, Dominica, the Dominican Republic, Ecuador, El Salvador, French Guiana, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Jamaica, Martinique, Mexico, Montserrat, Nicaragua, Panama, Paraguay, Peru, Puerto Rico, Saint Barthélemy, Saint Kitts and Nevis, Saint Lucia, Saint Martin, Saint Vincent and the Grenadines, Sint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos, the United States of America, the United States Virgin Islands, and Venezuela.

² Argentina, Canada, Chile, Peru, and the United States of America.

North America³

In the United States of America, the Florida Department of Health reported that Florida no longer has any identified areas with active Zika transmission, and cases of local transmission have not been reported in 2017.⁴ Similarly, cases of local transmission have not been reported in Texas during 2017.⁵

In Mexico, although confirmed cases continue to be reported, the trend has been declining since EW 40 of 2016. In EW 27 of 2017, local transmission of Zika virus was confirmed in Mexico State.⁶

Central America⁷

The trend of reported cases in Central America remains stable with a weekly average of 70 suspected and confirmed cases between EW 15 and EW 25 of 2017 (**Figure 2**), with the exception of Costa Rica, where an increase in the number of suspected and confirmed Zika cases was observed between EW 16 and EW 26 of 2017.

Caribbean⁸

In countries/territories of this sub region, sporadic cases continue to be reported, with a weekly average of 291 suspected and confirmed cases reported between EW 15 and EW 25 of 2017. In Puerto Rico, the trend of cases observed in the last 8 weeks is decreasing.⁹

South America¹⁰

From EW 1 to EW 14 of 2017, an increasing trend of suspected and confirmed cases was observed in South America, mainly due to increases in the number of reported cases in Argentina, Bolivia (Plurinational State of), Brazil, Ecuador, and Peru (**Figure 3**). Between EW 15 and EW 25 of 2017, an average of 863 suspected and confirmed cases were reported per week in this sub-region.

In Argentina, an increase in suspected and confirmed cases was observed between EW 1 and EW 16 of 2017; this increase was related to outbreaks in the provinces of Formosa, Salta, and Chaco.¹¹ In these latter two provinces, the date of symptom onset of the last confirmed cases was EW 20 and EW 16 of 2017, respectively.¹²

³ Canada, Mexico, and the United States of America.

⁴ Read the [complete information](#).

⁵ Read the [complete information](#).

⁶ Read the [full report](#).

⁷ Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama.

⁸ Anguilla, Antigua and Barbuda, Aruba, the Bahamas, Barbados, Bonaire, Saint Eustatius and Saba, Curacao, Cayman Islands, Cuba, Dominica, the Dominican Republic, Grenada, Guadeloupe, Haiti, Jamaica, Martinique, Monsterrat, Puerto Rico, Saint Barthélemy, Saint Kitts and Nevis, Saint Lucia, Saint Martin, Sint Maarten, Saint Vincent and the Grenadines, Trinidad and Tobago, Turks and Caicos, the U.K. Virgin Islands, and the U.S. Virgin Islands.

⁹ Read the [full report](#).

¹⁰ Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Paraguay, Peru, Suriname, and Venezuela.

¹¹ Read the [full report](#).

¹² Read the [full report](#).

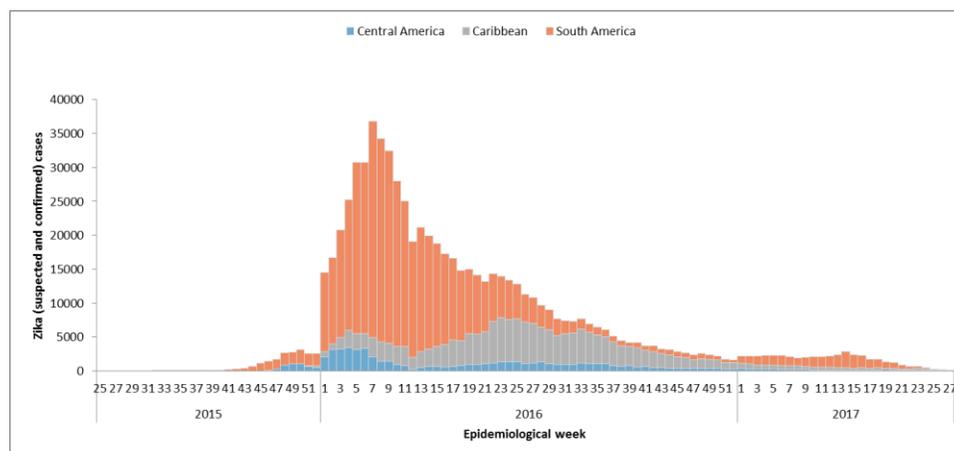
In Bolivia (Plurinational State of), from EW 1 of 2017, an increasing trend in the number of suspected and confirmed cases was observed, with a peak in EW 10 of 2017, similar to what was observed with dengue during the same period in the country. In the first 28 weeks of 2017, the majority of the confirmed Zika cases came from the departments of Beni (59%; n=348) and Santa Cruz (28%; n=169).¹³

In Brazil, there was a slight increase in reported Zika cases between EW 1 and EW 6 of 2017; subsequently, the reported cases decreased up to EW 22 of 2017 – similar to what was observed with chikungunya during the same period in the country.¹⁴

In Ecuador, since EW 5 of 2017, there was an upward trend in the number of suspected and confirmed cases, with a peak in EW 16 of 2017. Of the cases laboratory-confirmed in the first 27 weeks of 2017, 60% (770) and 16% (211) are from the provinces of Guayas and Manabí, respectively.¹⁵

In Peru, the increase observed between EW 39 of 2016 and EW 3 of 2017 is primarily due the ongoing outbreak in the department of Loreto.¹⁶ From EW 10 of 2017, an upward trend in the number of suspected and confirmed cases has been observed, with a peak in EW 14 of 2017 due to ongoing outbreaks in the departments of Cajamarca, Ica, La Libertad, Lima, Piura, and Tumbes. These departments have also reported outbreaks of chikungunya and dengue (Piura) during 2017.¹⁷

Figure 2. Distribution of suspected and confirmed Zika cases by EW and sub-region. Region of the Americas, 2015 – 2017 (as of EW 27).¹⁸



Source: Data provided by countries and territories and reproduced by PAHO/WHO

¹³ Read the [full report](#).

¹⁴ Read the [full report](#).

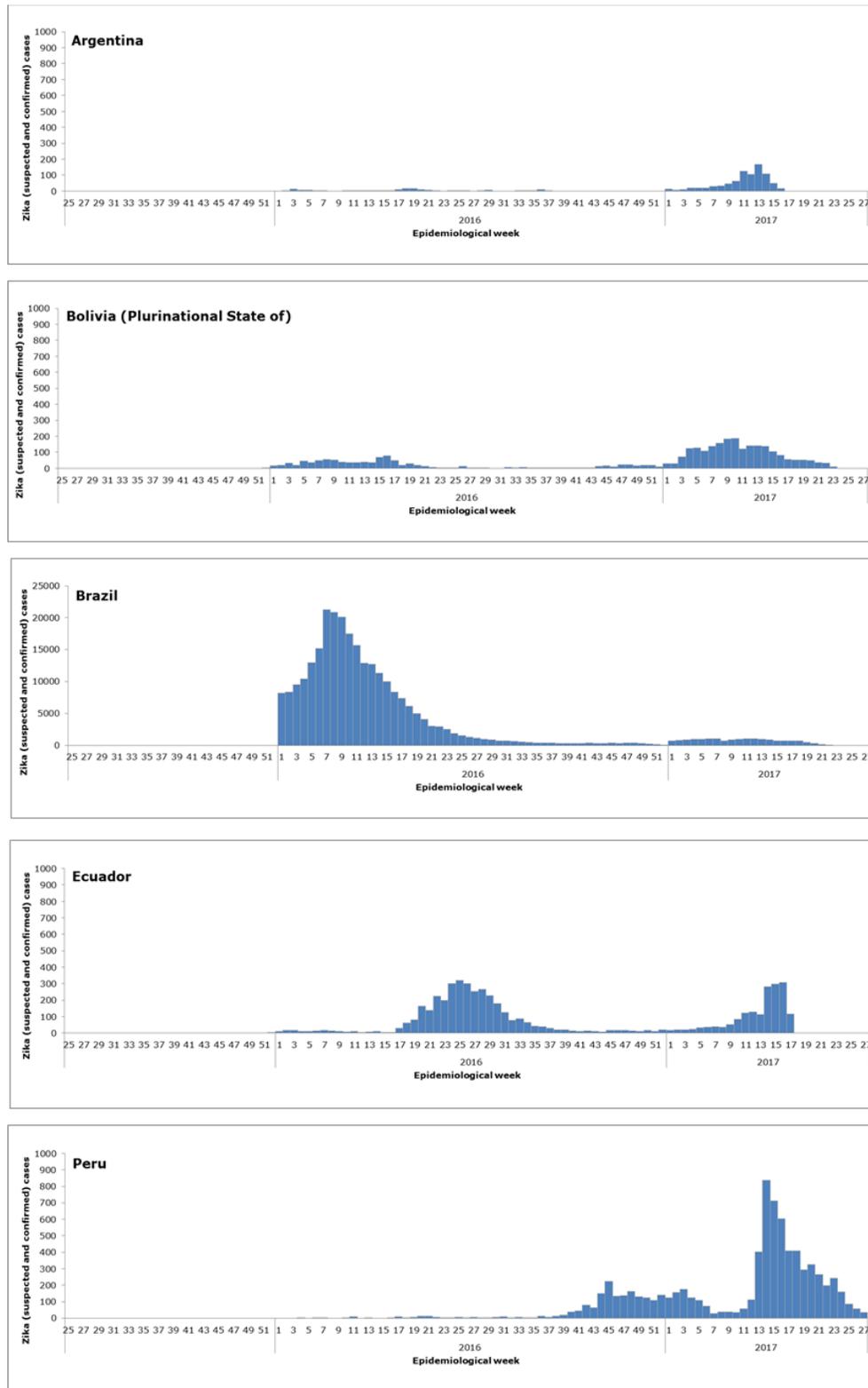
¹⁵ Read the [full report](#).

¹⁶ Read the [full report](#).

¹⁷ Read the [full report](#).

¹⁸ Countries and territories for which information on the distribution of cases by epidemiological week is available and that were included in Figure 2: Anguilla, Antigua and Barbuda, Argentina, Aruba, Barbados, Belize, Bolivia, Bonaire, Saint Eustatius, and Saba, Brazil, Cayman Islands, Colombia, Costa Rica, Curaçao, Dominica, the Dominican Republic, Ecuador, El Salvador, French Guyana, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Jamaica, Martinique, Montserrat, Panama, Paraguay, Peru, Puerto Rico, Saint Barthelemy, Saint Kitts and Nevis, Saint Martin, Saint Vincent and the Grenadines, Sint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos, Venezuela, U.K. Virgin Islands.

Figure 3. Distribution of suspected and confirmed Zika cases by EW. Argentina, Bolivia, Brazil, Ecuador, and Peru, EW 25 of 2015 to EW 27 of 2017.



Source: Data provided by the Ministries of Health of Argentina, Bolivia (Plurinational State of), Brazil, Ecuador, and Peru and reproduced by PAHO/WHO

Congenital syndrome associated with Zika virus infection¹⁹

Since October 2015, a total of 26 countries and territories in the Americas have reported confirmed cases of congenital syndrome associated with Zika virus infection. Since [last epidemiological update](#), no countries or territories have reported for the first time confirmed cases of congenital syndrome associated with Zika virus infection. In the last eight weeks (EW 22 to EW 29 of 2017), Brazil, Colombia, Costa Rica, Ecuador, Guadeloupe, Guatemala, French Guiana, Martinique,²⁰ Mexico, Panama, Puerto Rico, Saint Martin, and the United States of America updated their number of cases of congenital syndrome associated with Zika virus infection.

The table with the number of confirmed cases of congenital syndrome is published on a weekly basis on the PAHO/WHO website and is available at:

http://www.paho.org/hq/index.php?option=com_content&view=article&id=12390&Itemid=42090&lang=en.

Guillain-Barré syndrome (GBS) and other neurological disorders

Since the [last epidemiological update](#), Ecuador¹⁵ and the British Virgin Islands have reported for the first time, confirmed cases of Guillain-Barré syndrome (GBS) or other neurological syndromes associated with Zika virus infection.

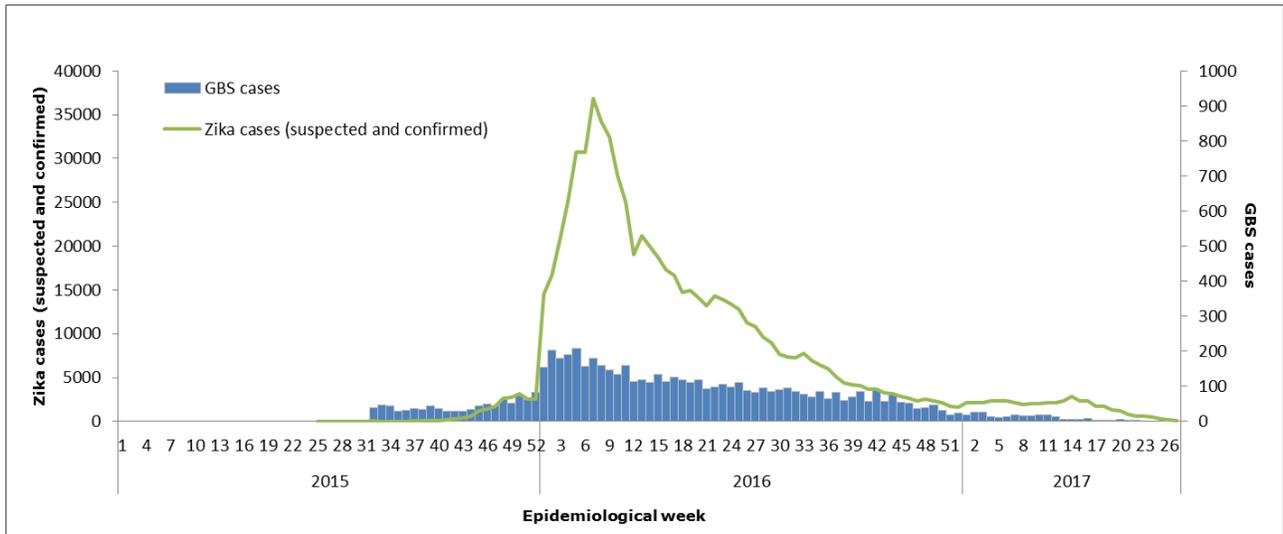
Figure 4 illustrates the trends in Zika and GBS cases.²¹ The downward trend in Zika cases in the region of the Americas is accompanied by a similar trend in GBS cases.

¹⁹ Read the [case definition](#).

²⁰ The case reported in Saint Martin, in the CIRE Antilles, corresponds to a fetus with cerebral malformation of a mother with Zika.

²¹ Countries and territories for which information on the distribution of cases by epidemiological week is available and that were included in Figure 4. **Zika cases:** Anguilla, Antigua and Barbuda, Argentina, Aruba, Barbados, Belize, Bolivia, Bonaire, Saint Eustatius, and Saba, Brazil, Cayman Islands, Colombia, Costa Rica, Curaçao, Dominica, Ecuador, El Salvador, Grenada, Guadeloupe, Guatemala, Guyana, Haiti, Honduras, Jamaica, Martinique, Montserrat, Panama, Paraguay, Peru, Puerto Rico, Saint Barthelemy, Saint Kitts and Nevis, Saint Martin, Saint Vincent and the Grenadines, Sint Maarten, Suriname, Trinidad and Tobago, Turks and Caicos, Venezuela, U.K. Virgin Islands. **GBS cases:** Argentina, Barbados, Belize, Bolivia, Brazil, Colombia, Curaçao, Dominica, Dominican Republic, Ecuador, El Salvador, Grenada, Guadeloupe, Guatemala, Honduras, Jamaica, Martinique, Mexico, Panama, Paraguay, Puerto Rico, Saint Vincent and the Grenadines, Suriname, Trinidad and Tobago, and Venezuela.

Figure 4. Distribution of suspected and confirmed cases of Zika and GBS by EW. Region of the Americas, 2015 – 2017 (as of EW 27).



Source: Data provided by the countries/territories of the Region of the Americas and reproduced by PAHO/WHO