Zika-Epidemiological Report
Argentina

Figure 1. Suspected and confirmed Zika cases by epidemiological week (EW). Argentina. EW 49 of 2015 to EW 32 of 2017.

Source: Data provided by the Argentina Ministry of Health to PAHO/WHO

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 confirmed case of autochthonous vector-borne transmission of Zika in Tucuman Province, Northwestern Argentina.

GEOGRAPHIC DISTRIBUTION

As of EW 34 of 2017, confirmed and probable vector-borne Zika cases have been registered in four of Argentina’s 24 provinces: Chaco, Formosa, Salta, and Tucuman. Additionally, one case of sexual transmission was reported in Cordoba province in 2016.

TREND

In 2016, low numbers of Zika cases were reported in Argentina, with an average of three suspected and confirmed cases per week. Starting on EW 1 of 2017, increasingly higher numbers of cases were reported, with a peak being observed during EW 14 (n=102 cases) and transmission reported

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1 Reported to PAHO/WHO from the Argentina International Health Regulation (IHR) National Focal Point (NFP) on 24 August 2017.

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in three provinces. Since EW 15, which coincided with a period of lower vector-borne disease transmission, weekly numbers of suspected cases have gradually decreased. In the last 8 weeks (EW 25 to EW 32 of 2017), an average of 6 suspected and confirmed Zika cases per week has been reported.

CIRCULATION OF OTHER ARBOVIRUSES

Between EW 1 and EW 34 of 2017, a total of 253 confirmed and 305 probable dengue cases have been reported. Localized DEN-1 outbreaks have been reported in Buenos Aires, and the provinces of Chaco, Corrientes, Formosa, and Santa Fe. In 2016, as of EW 51, Argentina health authorities reported a total of 79,235 probable dengue cases, including 41,210 confirmed cases.

With regard to chikungunya, no autochthonous cases have been reported in 2017. However, in 2016, Argentina health authorities reported 3,394 suspected and 322 confirmed chikungunya cases.

ZIKA VIRUS DISEASE IN PREGNANT WOMEN

As of EW 32 of 2017, five confirmed Zika cases among pregnant women have been reported by the Argentina health authorities to PAHO/WHO.

ZIKA COMPLICATIONS

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

As of EW 35 of 2017, no cases of Zika-virus-associated Guillain-Barré syndrome (GBS) or other neurological syndromes have been reported by the Argentina health authorities to PAHO/WHO.

CONGENITAL SYNDROME ASSOCIATED WITH ZIKA VIRUS INFECTION

As of EW 34 of 2017, the Argentina Ministry of Health has reported five cases of congenital syndrome associated with Zika virus infection. Of these, two were classified as autochthonous, while the remaining three as imported.

DEATHS AMONG ZIKA CASES

As of EW 35 of 2017, no deaths among Zika virus disease cases have been reported by the Argentina health authorities to PAHO/WHO.

NATIONAL ZIKA SURVEILLANCE GUIDELINES

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


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

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I Maiztegui” (INEHV), where the capacity for both molecular (RT-PCR) and serology (ELISA IgM and PRNT) is fully established.

INFORMATION-SHARING

The Argentina Ministry of Health publishes a periodic epidemiological bulletin with information on Zika virus. At the time of this report, the latest information shared with PAHO/WHO was from EW 32 of 2017, while the latest epidemiological bulletin by the Argentina Ministry of Health was from EW 34 of 2017.