Cumulative Zika suspected and confirmed cases reported by countries and territories in the Americas, 2015-2017. PAHO/WHO

After retrospective review by Ecuador Ministry of Public Health, only laboratory-confirmed cases are of 18 August; Data is non-standing observed with the second se

ary 2017, the number of confirmed cases were changed from 37,488 to 37,417 based on the modification by the Puerto Rico Department of Health.

⁴Brazil Ministry of Health case definition for confirmed cases of congenital syndrome associated with Zika virus infection includes confirmed and probable cases per PAHO's case definition. As of EW 52 of 2016, 697 cases were confirmed for Zika virus by laboratory criteria. s of 11 November, suspected Zika cases were adjusted by the Brazil Ministry of Public Health after retrospective review.

¹ Per the Cire Antilles Guyane Builetin the epidemiological situation is classified in four level phases: Level 1 absence of autochthonous circulation; Level 2 initial autochthonous transmission; Level 3 epidemic; Level 4 end of epidemic and results. In the instance that a territory reaches Level 3, the data on all confirmed cases is no longer included in the epidemiological builetin. Martinique was classified as Level 3 and available as Level 3 french Guiana were classified as Level 3 on 22 January 2016. Bandeloupe was classified as Level 3 and 2 April 2016. ⁸On 17 February 2017, in a joint publication in the U.S. Centers for Disease Control and Prevention (CDC). Morbidity and Mortality Weekly Report (MMWR) between the National Laboratory of Public Health of Haiti, Directorate of Epidemiology, Laboratory and Research of Haiti, be U.S. CDC in Haiti and Tanzania, the Division of Global Health Protection of the U.S. CDC, and the National Malaria Control Program of Haiti, a total of 3,017 suspected cases and 19 confirmed cases of Zika were reported between 12 October 2015 and 10 Septembe

¹On 9 December a joint publication between the National Institute of Health of Colombia, the US-CDC National Center on Birth Defects and Developmental Disabilities and the Colombia Ministry of Health reported that between 31 January and 12 November 2016, a total of 47 microceptaly cases in fetus and infants had laboratory evidence of Zika virus infection by real-time reverse transcription-polymerase chain reaction (RT-PCR) or immunohistochemistry.

As of 11 November, suspected Zika cases were adjusted by the Brazil Ministry of Public Health after retrospective review.
⁴³ as of 21 Secember 2015, two cases of compenial synchrome nothers acquired the Zika infection in Bolivia, were initially classified as confirmed cases by the Argentina Ministry of Health and then reclassified as probable cases.
http://www.mal.pob.ar/mages/toine/bolienes/bolienim/setago Auginal, N338 548,pdf
⁴³ as of 22 Secember 2015, the cases of compenial synchrome nothers acquired the Zika infection in Bolivia, were initially classified as confirmed cases by the Argentina Ministry of Health and then reclassified as probable cases.
http://www.mal.pob.ar/mages/toine/bolienes/boli

n American ealth nization

World Health

Country/Territory

orth America Bermuda

osta Rici Salvade

icaragua anama⁵

ench Gu uadelou

uerto Rico

Saint Bartnei Saint Martin

ndean Area Bolivia (Plurinational State of) Colombia¹⁰

enezuela (Bolivarian Republic of)

uad eru1

Brazil¹ Argentina¹⁵

Paraguay¹ ruguay

on-Latin C Anguilla Antigua and Barbud Aruba hama naire, St Eustatius and Saba¹ Cayman Islands

iracao ominica enada¹⁸

uyana amaica Iontserrat

aint Lucia

int Kitts and Nevis

uriname rinidad and Tobago urks and Caicos Islands irgin Islands (UK)

irgin Islands (US)

SOURCE: Cases r

0n 20 Ian

aint Vincent and the Grenadines nt Maarten (Dutch part)¹⁹

TOTAL

ases reported by the IHK Nation ta is shared in an effort to transp

http://www.mspas.gob.gt/index.php/en/gue-es-zika.html

the IHR National Focal I

Incidence rate (autochthonous suspected + autochthonous confirmed) / 100.000 pop.

aiti⁸ Martinique

in Caribbe

ominican Republic

oupe⁷

nited States of America¹

atin America and the Caribbeau

icas

Autochth

11,53 3,464 32,10

58.013

4.900

99(

97.58

2,901

18

10.96

nts to the WHO IHR Re

550,721

Subtotal

Subtotal

Confirmed

1 743

5.984

48

39.52

9.802

14,334

49

14

Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, World Population Prospects: The 2015 Revision, http://esa.un.org/unpd/wppindec.htm. July 2015; Porcessed and revised by PAHO. Population by Sex and Age range for Countries and Territories of Americas 2017. http://www.paho.org/data/index.phg/en/indicators/demographics-core/106-cat-data-en/336-poblacion-reg-en.html?showall=&/imitiatari Accessed on January 26, 2017. http://www.paho.org/data/index.phg/en/indicators/demographics-core/106-cat-data-en/336-poblacion-reg-en.html?showall=&/imitiatari Accessed on January 26, 2017. http://www.paho.org/data/index.phg/en/indicators/demographics-core/106-cat-data-en/336-poblacion-reg-en.html?showall=&/imitiatari Accessed on January 26, 2017. Population source for Saint Bathelemy and Saint Marin available for 2016 (updated 31 December 2018) available at Journal official of la Republicage Francese. http://www.placo.org/data/index.phg/en/indicator/demographics-core/10-Cat-data-en/336-poblacion-reg-en.html?showall=&/imitiatari Accessed on January 26, 2017. Population source for Saint Bathelemy and Saint Marin available for 2016 (updated 31 December 2016) available at Journal official of la Republicage Francese. http://www.legifrance.govu.fr/jo.pdf.do?id=JORTEXT000033748679 Accessed on January 26, 2017. Population source for Saint Bathelemy and Saint Marin available for 2016 (updated 31 December 2016) available at Journal official of La Republicage Francese. http://www.legifrance.govu.fr/jo.pdf.do?id=JORTEXT000033748679 Accessed on January 26, 2017. Population source for Saint Bathelemy and Saint Advantaria and Catalace Larbich Vederlandhebetkingsontowikeling potont, settler gathelem and Saint Advantaria avaintaria at Journal of 1016. To Host Test Saint Saint Mark Journal Jo

Confirmed congenital syndrome associated with Zika virus infection case definition: Live newborn who meets the criteria for a suspected case of congenital syndrome associated with Zika virus infection was detected in specimens of the newborn, regardless of detection of other pathogens. Case definitions for congenital syndrome associated with Zika virus infection is available at http://www.paho.org/nq/index.php?option=com_content8xiew=article8xid=111178themid=115328thang=en

5.759

Zika cases and congenital syndrome associated with Zika virus reported by countries and territories in the Americas, 2015 - 2017

Cumulative cases

Data as of 16 March 2017 2:00 PM EST

Incidence Rate^b

161.3

137.81

48 98

3914.1

6615.8

346.08

220.74

126.99

0.00

4.08

427.

1660.8

1098.1

528.48

938.10

384.6

338 6

on and analysis of this data should consider differences in surveillance systems and reporting requirements. Information may

Imported cases

4,842 5,326

205

33

66

Deaths among Zika cases^c

congenital syndror ed with Zika virus

145

Population X 1000^{e,f}

36.28

61,651

4.881

618

46.437

11.39

10.70

3,681

37,887

48.6

139,615

44,060 18,131

72,360

2,80

16

10

548

1 36

7.382

is and through the M

Deaths among Zika cases do not include deaths related to Guillain-Barré syndrome (GBS) or congenital malformations associated with Zika virus infection. As of 12 May 2016, previously reported deaths related to GBS were removed from this total.

Utime Lease reported by the init National recar involuts to the who link keybonia Lontact vion to the Americas and through the Ministry of Health Westberger, 2016-11 TBST Data is shared in an effort to transperity dissemilate and wallbei information reported by Member States. Any subsequent interpretation and analysis of this data should consider differe nange as Member States review and integrate retrospective data. ANO/MMC Case definitions for suspected and confirmed Zika cases is available at: http://www.paho.org/hq/index.php?option=com_contentBxiew=article&id=111178/temid=415328/tang=en

recountries and territories which reported their first Zika case in 2015, the population is based on the average between 2015-2017. For countries and territories which did not reported their first Zika case in 2016, the population is based on the average between 2015-2017. For countries and territories which did not report Zika case in 2016, the population is based on the average between 2015-2017.

As of 7 March 2017, the number of confirmed congenital syndrome associated with Zika virus infection cases has decreased from 59 to 54, based on clinical review and later modifications done by the Dominican Republic Ministry of Public Health. http://digepisalud.gob.do/docs/Boletines%20epidemio%C3%83gicos/Boletines%20semanales/2017/Bolet%C3%ADm%20Semanal%2003-2017.pdf

rospective review, laboratory-confirmed cases were re-classified as imported cases by the Panama Ministry of Health as of 25 August 2016.

Confirmed cases in the United States of America includes one laboratory acquired case. Available at: http://www.cdc.gov/zika/geo/united-states.html http://www.gob.mv/salud/prensa/050-primer-caso-de-microcefalia-asociado-con-zika After retrospective review, laboratory-confirmed cases was adjusted by the El Salvador IHR National Focal Point as of 25 August 2016.