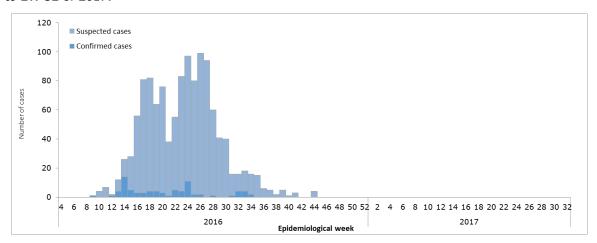




Zika-Epidemiological Report **Dominica**

25 September 2017

Figure 1. Suspected and confirmed Zika cases by epidemiological week. Dominica. EW 4 of 2016 to EW 32 of 2017.



Source: Data provided by the Dominica Ministry of Health to PAHO/WHO¹

FIRST AUTOCHTHONOUS VECTOR-BORNE CASES

The first cases of local transmission of Zika in Dominica were reported to PAHO/WHO in epidemiological week (EW) 11 of 2016.

GEOGRAPHIC DISTRIBUTION

As of EW 16 of 2017, confirmed Zika cases have been detected in all seven health districts.

TREND

While surveillance activity continues, no new suspected or confirmed cases have been reported since EW 44 of 2016 up to EW 32 of 2017. Since the confirmation of the first case in EW 9 of 2016, an increasing trend was observed, reaching a peak in EW 18. A second peak occurred in EW 26, after which a decline in number of cases is observed from EW 28 to EW 44 of 2016. Between EW 37 and EW 44 of 2016, an average of 3 suspected cases per week was reported. The epidemic curve of suspected and confirmed Zika cases by EW is presented in **Figure 1**¹.

Higher rate of Zika cases per 100,000 population was observed in females than males in every age-group except for the \geq 65 age-group where the incidence rate is higher in males (**Figure 2**)². The highest rate for females was observed in the 25-29 years age-group, and the highest rate for males was observed in the 10-14 years age group. No data for Zika cases by sex is available for 2017 yet.

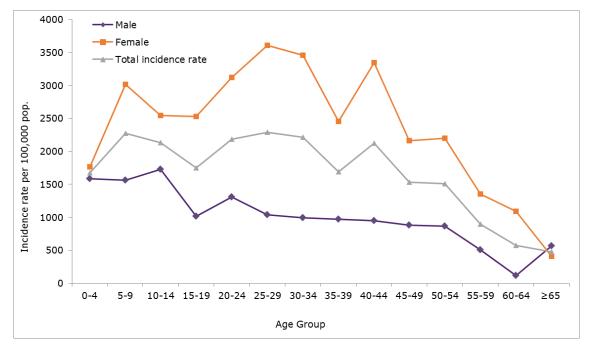
Suggested citation: Pan American Health Organization / World Health Organization. Zika - Epidemiological Report Dominica. September 2017. Washington, D.C.: PAHO/WHO; 2017

¹ Reported to PAHO/WHO from Dominica International Health Regulation (IHR) National Focal Point (NFP) on 15 August 2017.





Figure 2. Incidence rate of Zika virus by sex and group of age per 100,000 population. Dominica. As of EW 41 of 2016.²



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

CIRCULATION OF OTHER ARBOVIRUSES

As of EW 28 of 2017, 31 probable cases of dengue (42 cases per 100,000 population) have been reported. In 2016, Dominica health authorities reported a total of 351 probable cases of dengue (474 cases per 100,000), including 6 laboratory-confirmed cases (8 cases per 100,000) up to EW 48 of 2016³. This figure is higher compared to the cases reported in 2015 and 2014 when 38 suspected cases (51 cases per 100,000) and 184 suspected cases (259 cases per 100,000) of dengue were reported respectively for the entire year.

Chikungunya was first detected in February 2014, when a large outbreak occurred. Up to EW 24 of 2016, a cumulative 269 suspected cases of chikungunya (366 per 100,000) including two confirmed cases were reported. In 2017, no information regarding chikungunya cases is available.⁴

ZIKA VIRUS DISEASE IN PREGNANT WOMEN

As of EW 38 of 2016, ten confirmed and three suspected cases of Zika virus disease in pregnant women have been reported by Dominica. As of EW 21 of 2017, six of the Zika positive pregnant

Suggested citation: Pan American Health Organization / World Health Organization. Zika - Epidemiological Report Dominica. September 2017. Washington, D.C.: PAHO/WHO; 2017

² Reported to PAHO/WHO from Dominica International Health Regulation (IHR) National Focal Point (NFP) on 11 October 2016

³ PAHO/WHO. Dengue – Number of Reported Cases of Dengue and Severe Dengue (SD) in the Americas, by Country – Available at: http://www.paho.org/hg/index.php?option=com topics&view=rdmore&cid=6290&Itemid=40734

⁴ PAHO/WHO. Chikungunya – Number of Reported Cases of Chikungunya Fever in the Americas, by Country –Available at: http://www.paho.org/hg/index.php?option=com topics&view=readall&cid=5927&Itemid=40931&lang=en





women have given birth. Four babies were healthy with no abnormalities, one died at 24 weeks of gestation and no information was available for one case.⁵ The baby who died at 24 weeks of gestation was due to premature rupture of the mother's membranes at 24 weeks.¹

ZIKA COMPLICATIONS

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

As of EW 16 of 2016, two suspected Guillain-Barré syndrome (GBS) cases associated with the Zika virus have been reported by the Dominica Ministry of Health.¹

CONGENITAL SYNDROME ASSOCIATED WITH ZIKA VIRUS INFECTION

As of EW 35 of 2017, no cases of congenital syndrome associated with Zika virus infection have been reported by the Dominica Ministry of Health to PAHO/WHO.¹

DEATHS AMONG ZIKA CASES

As of EW 35 of 2017, no deaths among Zika cases have been reported by the Dominica Ministry of Health to PAHO/WHO.¹

NATIONAL ZIKA SURVEILLANCE GUIDELINES

The surveillance system for acute infectious diseases is based on surveillance of syndromes. In addition, when a new pathogen is detected, case investigation forms are distributed. Guidelines for Zika virus surveillance are not available on the Ministry of Health website.

LABORATORY CAPACITY

Samples from suspected Zika cases are sent to Caribbean Public Health Agency (CARPHA) for laboratory molecular conformation (real time RT-PCR).

INFORMATION-SHARING

At the time of this report, the latest available Zika information shared by the Dominica International Health Regulations (IHR) National Focal Point (NFP) was from EW 32 of 2017.

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⁵ Reported to PAHO/WHO from Dominica International Health Regulation (IHR) National Focal Point (NFP) on 23 May 2017