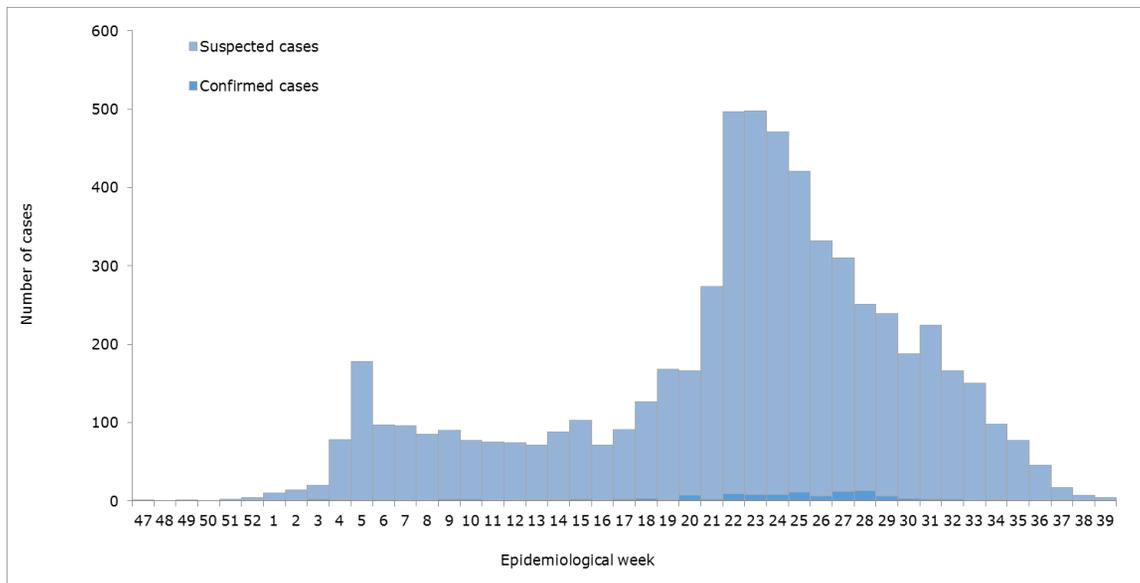


Zika-Epidemiological Report

Jamaica

2 November 2016

Figure 1. Suspected and confirmed Zika cases by epidemiological week (EW). Jamaica. EW 47 of 2015 to EW 39 of 2016.



Source: Data provided by the Jamaica Ministry of Health and reproduced by PAHO/WHO¹

FIRST AUTOCHTHONOUS VECTOR-BORNE CASES

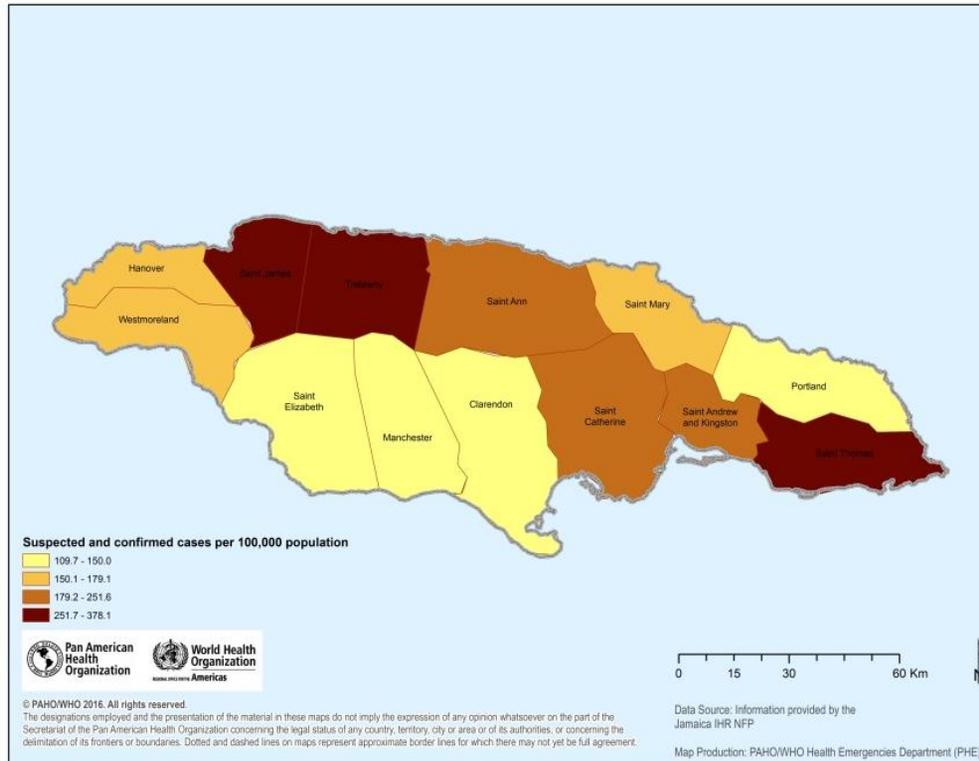
In epidemiological week (EW) 4 of 2016, the detection of the first autochthonous vector-borne transmission of Zika virus was reported in Jamaica. The first confirmed Zika cases were reported in the city of Greater Portmore, Southern Jamaica.

GEOGRAPHIC DISTRIBUTION

Cases of Zika have been reported throughout Jamaica. As of EW 39 of 2016, a total of 6,449 suspected and 122 confirmed cases have been reported (**Figure 2**)¹. The highest rates of incidence have been registered in the parishes of Saint Thomas (378 cases per 100,000 population), Trelawny (270 cases per 100,000), Saint James (256 cases per 100,000), and Kingston and Saint Andrew (252 cases per 100,000).¹

¹ Reported to PAHO/WHO by the Jamaica Ministry of Health on 22 October 2016.

Figure 2. Cumulative suspected Zika cases per 100,000 population by parish. Jamaica. 2015 to 2016 (up to EW 39).



Source: Data provided by the Jamaica Ministry of Health and reproduced by PAHO/WHO¹

TREND

Following the emergence of Zika in late 2015, weekly numbers of cases increased steadily in Jamaica up to EW 22 of 2016, after which a decreasing trend has been observed (**Figure 1**).¹

CIRCULATION OF OTHER ARBOVIRUSES

From EW 1 to EW 35 of 2016, a total of 1,570 probable cases of dengue (56 cases per 100,000), including 102 laboratory-confirmed cases, were detected in Jamaica. In 2015, 88 probable cases (3 cases per 100,000), including 14 laboratory-confirmed cases, were identified. In 2014, 928 probable cases (34 cases per 100,000), including 74 laboratory-confirmed cases, were reported.²

In regard to chikungunya, in 2016, one confirmed and 204 suspected cases of chikungunya (total incidence rate of 7 cases per 100,000) were identified up to EW 24. In 2015, a total of 299 suspected cases of chikungunya (11 cases per 100,000) were reported up to EW 6. In 2014, 1,420 suspected and 89 confirmed cases of chikungunya (54 cases per 100,000) were reported.³

² PAHO/WHO. Data, Maps and Statistics. Number of reported cases of Dengue and Severe Dengue (SD) in the Americas. Available at: http://www.paho.org/hq/index.php?option=com_topics&view=rdmore&cid=6290&Itemid=40734

³ PAHO/WHO. Chikungunya: Statistic Data. Number of reported cases of Chikungunya Fever in the Americas. Available at: http://www.paho.org/hq/index.php?option=com_topics&view=readall&cid=5927&Itemid=40931&lang=en

ZIKA VIRUS DISEASE IN PREGNANT WOMEN

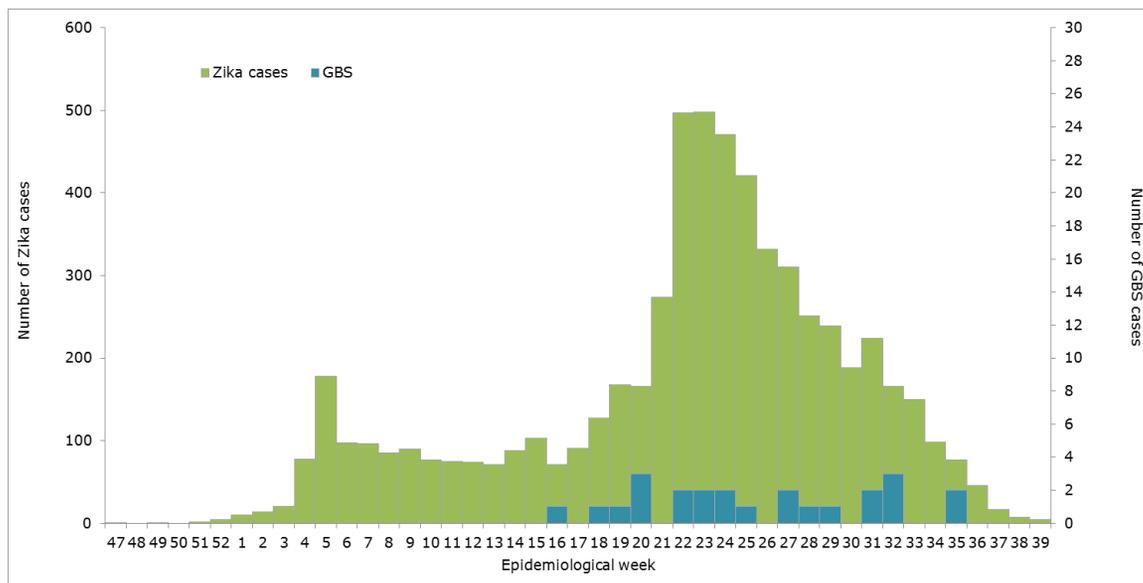
Since the beginning of the epidemic up to EW 39 of 2016, there have been 585 suspected cases of Zika virus disease in pregnant women, 49 of which have been confirmed. Of the 49 confirmed cases, one experienced intra-uterine death discovered during a routine ultrasound at 20 weeks gestation.¹

ZIKA COMPLICATIONS

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

As of EW 39 of 2016, the Jamaica Ministry of Health has reported 135 cases of possible Guillain-Barré Syndrome (GBS). Of the possible GBS cases, 26 were classified as suspected GBS based on the Brighton Criteria (1 to 3), and seven were clinically diagnosed as GBS based on clinical signs, symptoms, and investigation results. Three cases were laboratory confirmed for Zika; one case was Zika PCR positive and two cases were IgM positive for Zika (**Figure 3**).¹

Figure 3. Zika and GBS cases by EW. Jamaica. EW 47 of 2015 to EW 39 of 2016.



Source: Data provided by the Jamaica Ministry of Health and reproduced by PAHO/WHO

CONGENITAL SYNDROME ASSOCIATED WITH ZIKA VIRUS INFECTION

As of EW 39 of 2016, no cases of congenital syndrome associated with Zika virus infection have been reported by the Jamaica Ministry of Health.¹

DEATHS AMONG ZIKA CASES

As of EW 39 of 2016, no deaths among Zika cases have been reported by the Jamaica Ministry of Health.¹

NATIONAL ZIKA SURVEILLANCE GUIDELINES

No information is available on the national guidelines for Zika surveillance.

LABORATORY CAPACITY

Laboratory confirmation is performed by molecular detection (real time RT-PCR) at the Virology laboratory, West Indies University. The serological diagnosis for Zika and dengue is performed at the National Public Health Laboratory by ELISA (IgM).

INFORMATION-SHARING

Information on Zika is provided by the Jamaica IHR NFP to PAHO/WHO on a weekly basis. At the time of this report, the latest received information was from EW 39 of 2016.