

c Zika virus infection reported from Angola

On 21 November 2016, France notified the WHO of a confirmed case of imported Zika virus disease originating in Angola. The patient, a 41-year-old male who had received yellow fever vaccination, had spent a month in Angola, in Luanda and Benguela districts and returned to France on 5 September. Symptoms of headache, rash, arthralgia and myalgia began on 14 September. PCR tests for Zika virus (ZIKV), dengue, West Nile, Rift valley and chikungunya viruses were negative, but serology demonstrated IgM antibodies and seroconversion with detectable IgG antibodies after 14 days. A confirmatory plaque-reduction neutralisation assay was positive with a titre of 1:320. In addition, French authorities have conducted entomological investigations and failed to find ZIKV vectors (*Aedes* spp) in the city where the patient lives.

In a second incident, a 14-year-old Angolan child who had received yellow fever vaccine in April 2016, and who resided in Luanda-Viana district in Angola, and who had no travel history within the preceding three weeks, presented with fever, headache, muscle pain, vomiting and jaundice. PCR

for ZIKV was positive on 26 December 2016 and on 2 January 2017. Specimens have been sent to a reference laboratory for confirmation and sequencing.

The WHO has recommended that Angola determine if ZIKV is circulating in Luanda and Benguela and suggested the following actions:

- To test samples of urine and serum from persons residing in the region for the past four months.
- To conduct an entomological assessment of mosquito vectors in the area including mosquito species identification, mosquito population density assessments, and to test mosquitoes for ZIKV using RT-PCR.

Source: Centre for Emerging and Zoonotic Diseases, NICD-NHLS; (januszp@nicd.ac.za); WHO South Africa Office; Division of Public Health Surveillance and Response, NICD-NHLS