

ADVISORY

ZIKA VIRUS

Key facts

- Zika virus infection is a vector-borne disease caused by a flavivirus. This occurs in tropical countries with large mosquito population.

Transmission

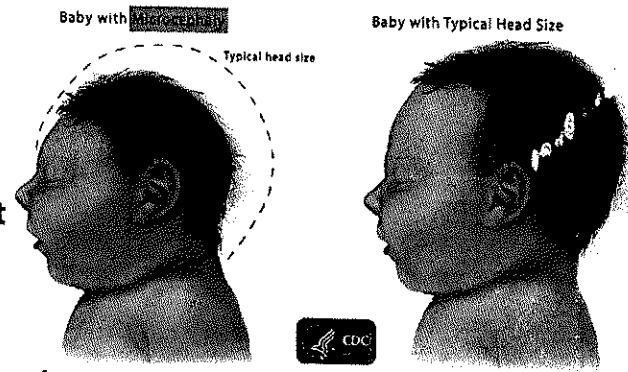
- Zika virus is transmitted to people through the bite of an infected mosquito from the Aedes genus, mainly Aedes aegypti in tropical regions.
- Mosquitoes that spread Zika bite aggressively during the day.
- This is the same mosquito that transmits Dengue and Chikungunya.

Signs and Symptoms

- Common symptoms include fever, rash, joint pain, or conjunctivitis.
- Other symptoms include muscle pain, headache, pain behind the eyes, and vomiting.
- The illness is usually mild with symptoms lasting for 2-7 days.

Complication

- The baby inside the womb of a pregnant mother may develop abnormality in the size of its head due to incomplete brain development called *microcephaly*.

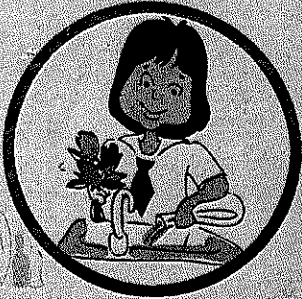


Prevention and Treatment

- Avoid infection by preventing mosquito bites.
 - Use insect repellants.
 - Use window and door screens.
 - Wear long-sleeved shirts and long pants or permethrin-treated clothing.
 - Once a week, empty and scrub, turn over, cover, or throw out items that hold water, such as tires, buckets, planters, toys, or trash containers.
- People sick with Zika virus should get plenty of rest, drink enough fluids, and treat pain and fever with common medicines.
- If symptoms worsen, they should seek medical care and advice immediately to the nearest health facility.

How is

ZIKA, CHIKUNGUNYA & DENGUE infection prevented?



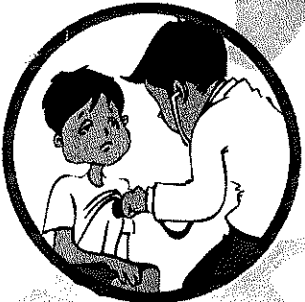
SEARCH & DESTROY

- Cover the drums, pails, and other waste containers at all times
- Clean and replace the water in flower vases once a week
- Cover the holes around the house with soil or sand
- Remove or pierce old tires that are being used as roof support, also those tires placed around the house that might hold water.
- Flip-over empty bottles, jars, tin cans and other items that can collect and hold water
- Clean and remove water on dish racks and other household items that can hold water



SELF-PROTECTION MEASURES

- Use mosquito repellants to avoid mosquito bites
- Use mosquito nets when sleeping at daytime
- Wear long sleeves or clothes that will protect your skin from mosquito bites



SEEK EARLY CONSULTATION

- Seek and consult with the nearest health facility if you already have fever for two days



SAY "YES" TO FOGGING

ONLY DURING OUTBREAKS

- Fogging should be done when there is an impending and during outbreaks

Go to the nearest health center if you have fever for 2 days.



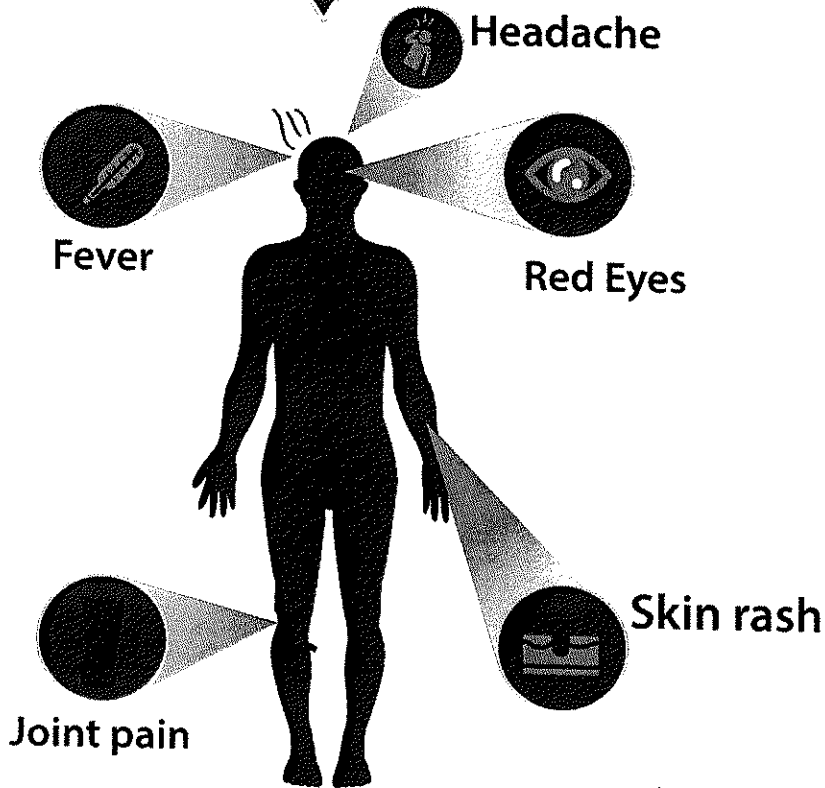




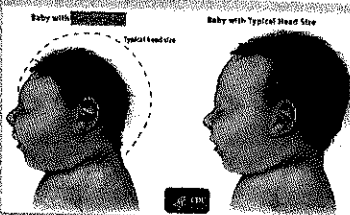
ZIKA VIRUS

What is Zika?

Zika virus is transmitted by Aedes mosquitoes which also transmit Dengue and Chikungunya.

Zika can cause:



 <p>2-7 days</p> <p>Onset of symptoms is usually 2-7 days after the mosquito bite</p>	 <p>1 in 4 people with Zika infection develops symptom</p>	 <p>Complication: The baby inside the womb of a pregnant mother may develop abnormality in the size of its head due to incomplete brain development called microcephaly.</p>
<p>Go to the nearest health center if you have fever for 2 days.</p>		





Republic of the Philippines
Department of Health
DISEASE PREVENTION AND CONTROL BUREAU

“Inter-Agency Meeting on Zika Virus”

February 5, 2016
Bayview Park Hotel, Manila

Attendance:

Dir. Lyndon Lee Suy	DPCB
Mr. Aldrin Reyes	DPCB
Mr. Nelson Mendoza	DPCB
Ms. Alexandre Bernardo	DPCB
Dr. Vito Roque Jr.	EB
Maria Lovelle Rago	HEMB
Mr. Carlo Fabros Junio	HPCS
Ms. Rowena Capistrano	RITM
Dr. Ferchito Avelino	BOQ
Dr. Alexander Oba	BOQ
Ms. Patricia Milla	DFA
Ms. Mary Sol Dela Cruz	DOLE
Mr. Allen Leonard Morden	DOLE
Ms. Maria Olivine Contreras	DILG
Ms. Licer Jesus Plaza	DILG
Dr. Alfredo Cunanan	BI
Mr. Jose Tomas Octavio	OWWA
Dir. Nini Lanto	POEA

DISCUSSION & AGREEMENTS

- **Welcome remarks done Dir. Lyndon Lee Suy**
- **Updates on Zika Virus (see attached ppt. presentation)**
 - DFA: No confirmed case of Zika among Filipinos abroad
 - In the Philippines, we have one documented case of Zika in 2012 specifically in Cebu
 - We only have 1000 testing kits for Zika
 - There is 1 reported case in Taiwan and 1 in Thailand
 - We already have Sub-National Laboratories (*San Lazaro Hospital, Lung Center of the Philippines Baguio General Hospital and Medical Center for Luzon; Vicente Sotto Memorial Medical Center for Visayas; and Southern Philippine Medical Center for Mindanao*) and Research Institute for Tropical Medicine will validate and confirm the results.
 - No directly flight to Brazil only in Singapore and Thailand
 - No travel advise for our athletes
 - Possible transmission: mosquito bites, blood transfusion and sexual contact

- **Inter-Agency Initiatives**

- Bureau of Quarantine:
 - In airports: there is an on-going monitoring of arriving travelers
 - Points of entry all over the country:
 - There is a vector-control program and the main focus of this is the intervention is starting from the larval stage.
 - Continuously mapping out of all the terminals, NAIA, CEBU and other international airports
 - Weekly setting up of larvicidal traps to monitor and minimize the growth of mosquitoes.
 - Spraying of larvicides from month of January up to the present
 - Since the Dengue outbreak: heightened their surveillance and the vector control is still in place
 - Informed all the medical groups in NAIA to heighten surveillance
 - Conducted briefing of terminal managers on information dissemination
 - Come up with IEC materials to be posted in arrival, check-in, departure areas and airline offices.
- Health Promotion and Communication Service
 - Released an advisory on Zika in two major broad sheets and tabloid
 - Creative team developed IEC materials
 - Released DM with regards to all the materials and prototype shall be forwarded to regional level through regional HEPO
 - To come up with another DM about all the IEC materials and advisories shall be posted in the different communities, regional offices and hospitals
- Department of the Interior and Local Government
 - Facilitate the conduct of ABKD program in the barangay level
- Disease Prevention and Control Bureau in collaboration with DOH attached agencies and special societies
 - There is an ongoing meeting regarding the guidelines
 - Parallel testing: P 9,000/test (*dengue, chikungunya and zika*):
 - Who to test for Zika?: with travel abroad from the affecting countries with on-going transmission of Zika and especially the pregnant women
 - For now RITM has only 1000 kits for testing available since last year
 - We have no existing testing for Zika that can test the antibody. We only have PCR (*test the current illness*) on the onset of illness up to the 5th day of an illness

- **Suggestions and agreements**

- PUI will be subjected for testing to confirm if she/ he is infected with Zika Virus and can detect if the PUI have history of travel to Latin American within the past 30 days. We can catch all the information in health declaration checklist.
- BOQ to partner agencies to inform OFWs and foreign passengers to fill up the health declaration checklist truthfully
- To include the filling up of health declaration checklist during the conduct of PDOS c/o OWWA and PEOS c/o POEA to remind and call the attention of returning OFWs the right attitude

- To integrate the importance of health declaration checklist filling-up and health issues to PEOS
- Every vessel and company must have their own pest control program and to monitor if the companies will comply with the sanitation certificate that the WHO want to issue
- To get the names of unruly passengers and forward it to POEA to know if they are OFWs and to call their attention (*Write an official communication letter to POEA to address the issue*)
- To come up with a memo on collaboration between inter-agency and airport personnel
- If the employer can fund the lab test as part of their health maintenance benefits (*PEOA needs basis or legal document on whatever circular pertaining to health for them to come up with their own policy in support to the DOH*)
- BHERTS to screen who's new in the community or returning OFW (*coordinate with league of city mayors and governors*)

• **Roles of Inter-Agency on Zika, Dengue and Chikungunya Screening**

Community		Port of Entry/ Exit		Abroad	
Agency	Roles	Agency	Roles	Agency	Roles
DILG	Popularize ABKD, BHERTs and 4 o'clock habit	BI		DFA	Airport formalities joint effort of OWWA and POEA) Orient the travelers
DOH	Case management, guidelines, surveillance and IEC/ health advisories)	BOQ		POLOs	
RITM	Parallel testing				
DOT	Inform the tourist				
POEA and OWWA	Dissemination of information through PDOS and PEOS, reporting and monitoring Include in their module enviving the values of airport formalities				

- **Action Points/ Areas for Collaboration**

- Advisory in seaports and airports and reiterate the health declaration checklist
- RITM has a small joint project with CDC and they can fund some activities like training for BHERTS.
- DOH will be conducting one simulation exercise involving 1 region and 1 province to prepare us when there is an outbreak
- Steps of inter-agency in line with the Zika:
 - DOH-EB has extensive interaction with the DFA through Malaria and Ebola (*to reinforce it again*)
 - CIQS is making sure that the people coming in are safe and healthy.
 - Custom, immigration, quarantine and services: interaction and advocacy materials
 - DILG: insecticide treated screens in schools
 - Coordinate with each other in area of policy regarding funding and logistics, process flow regards to referral, reporting and steps of coordination
 - PDOS should not focus only on the health declaration checklist let them know that there are airport formalities that needs to be complied/ observed in leaving the country
 - In terms of coordination:
 - In the DOH: HEMB will be the communication hub and they will refer the report to EB
 - BOQ will report directly to HEMB
 - With regards to reports from different agency: EB will be the reporting hub
 - HEMB- OPCEN is working or established linkage with DILG through 117 for any reported cases in the community
 - Communication linkage of other agencies to DOH through OPCEN (*central hub for referral*)
 - What to report?: Name of the caller, reporter, surrounding issue, location, , type of assistance and the action points of DOH
 - if any suspected case: we also have regional numbers of the regional counterparts of each agencies
 - EB to come up with case definition on what to report or give matrix for circulation to our partners
 - Any reports or information will be course to DPCB
 - In terms of monitoring:
 - To require manning agencies to report and all the reports will be course to OWWA and POEA
 - POEA to have very close and tight coordination with their respective employers in checking the health conditions of their workers, to consolidate and send the reports regularly
 - All phone in reports will be course to HEMB
 - All formal written reports course to EB
 - Both EB and HEMB will inform the program or the hospitals or whatever agencies will be required to respond to the reported formal case.
 - In terms of advocacy:
 - To disseminate information, fill up the health declaration checklist righteously and truthfully
 - To create a materials/ FAQs to be disseminate especially to travelers
 - Provide handouts to be distributed to travelers

- HPCS to come up with a prototype of IEC materials or unified communication message where we can share with the different agencies
- DOH through HPCS to come up with fact sheets on a particular disease
- To schedule again another inter-agency meeting if there's any updates
- To invite National Barangay Operations Office headed by Dir. Trovela on the next meeting

The meeting was adjourned at 1:00