

Session: EP072A Late-breaker: what else is being discussed out there?

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Diagnosis, Management and Follow-Up of Pregnant Women with Zika Virus Infection in Two Municipalities of Risaralda, Colombia: Second Report of the ZIKERNCOL cohort study

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Background: Zika virus infection (ZIKV) has emerged as a significant threat for the health of pregnant women and newborns in populations living or visiting Latin America since the epidemic began (2015). We previously reported a preliminary analysis in Sucre, Colombia, as the first group of pregnant women with RT-PCR confirmed ZIKV (*ZIKa en Embarazadas y Recién Nacidos en COlombia*, ZIKERNCOL).

Material/methods: In this second report, findings of the first 86 pregnant women from La Virginia (40) and Dosquebradas (46) (municipalities), Risaralda, Colombia, confirmed ZIKV, by RT-PCR, are reported. Clinical, demographical and obstetrical findings are described.

Results: From them, all reported ZIKV symptoms during pregnancy, 79.1% presented rash, 55.8% fever, 48.8% arthralgias, 23.3% anemia, 14% conjunctivitis, among others. In addition to ZIKV, RT-PCR was positive for dengue in 18.6%; 45.3% Dengue IgM+; 5.8% RT-PCR positive for chikungunya; 3.6% Chikungunya IgM+. Infection occurred during the first trimester in 20.2%, 28.6% during second. STORCH: 11.6% IgG+ anti-*Toxoplasma gondii*, 6% IgG+ anti-rubella, 4.7% IgG+ CMV, rest all negative. Mean age: 24 y-old (± 5.5). Gestational mean age: 22.9 weeks (± 10.1), 46.5% were primigravidae, 16.3% had previous miscarriages, 46.5% had C-sections. In 23.3% pregnancy outcome was known, 2.4% newborns with head circumference < 33.0 cms, no calcifications or other CNS alterations detected. One newborn with palatine cleft and one with bilateral renal ectopy.

Conclusions: Microcephaly rate was consistent with literature. Pregnant women in endemic areas should be followed and test according protocols, but also asymptomatic should be considered. Long-term follow-up of children is required in the congenital Zika syndrome assessment.