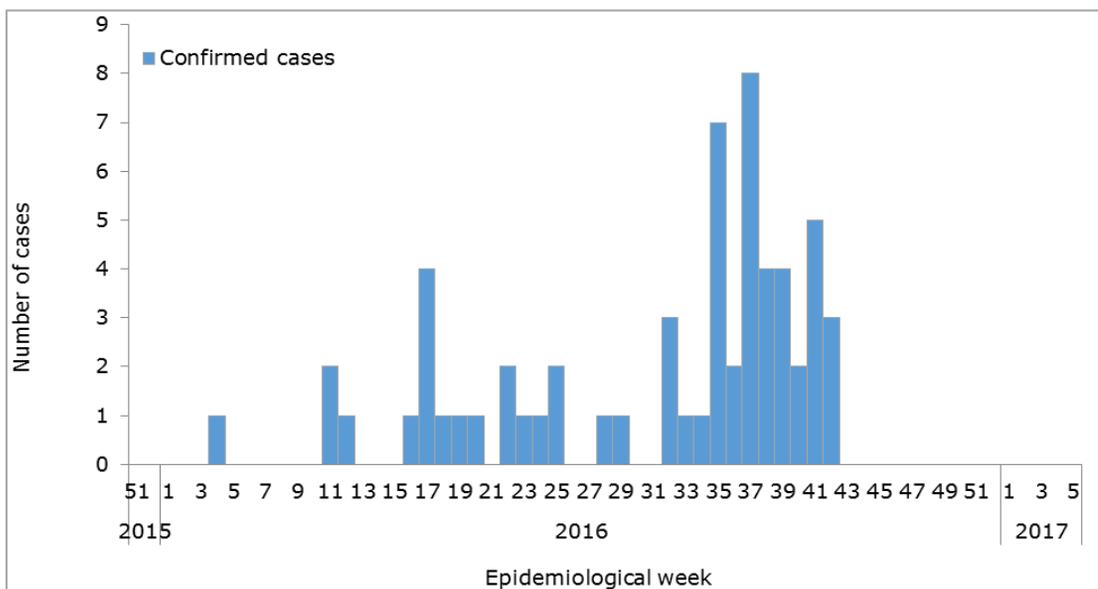


Zika-Epidemiological Report

Bonaire, Sint Eustatius, and Saba

2 March 2017

Figure 1. Confirmed Zika cases. Bonaire, Sint Eustatius, and Saba. EW 51 of 2015 to EW 5 of 2017.



Source: Data provided by the Netherlands IHR NFP¹

FIRST AUTOCHTHONOUS VECTOR-BORNE CASES

In epidemiological week (EW) 7 of 2016, the Netherlands International Health Regulations (IHR) National Focal Point (NFP) notified PAHO/WHO of the first autochthonous Zika cases in Bonaire; in EW 26 of 2016, the first autochthonous case in Sint Eustatius; and, in EW 28 of 2016, the first autochthonous case in Saba.²

¹ Reported to PAHO/WHO by the Netherlands IHR NFP on 27 October 2016.

² Reported to WHO by the Netherlands IHR NFP via the European Commission (EC) Early Warning response System (EWRS) on 15 July 2016.

ZIKA COMPLICATIONS

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

As of EW 5 of 2017, no cases of Zika-virus-associated Guillain-Barré syndrome (GBS) or other neurological syndromes have been reported by health authorities in Bonaire, Sint Eustatius, and Saba.

CONGENITAL SYNDROME ASSOCIATED WITH ZIKA VIRUS INFECTION

As of EW 5 of 2017, no cases of congenital syndrome associated with Zika virus infection have been reported by health authorities in Bonaire, Sint Eustatius, and Saba.

DEATHS AMONG ZIKA CASES

As of EW 5 of 2017, no deaths among cases of Zika virus infection have been reported by health authorities in Bonaire, Sint Eustatius, and Saba.

NATIONAL ZIKA SURVEILLANCE GUIDELINES

No information is available on guidelines for Zika virus surveillance.

INFORMATION-SHARING

Information on Zika virus in Bonaire, Sint Eustatius, and Saba is provided by the Netherlands IHR NFP and shared with PAHO/WHO. At the time of this report, the latest information provided by the Netherlands IHR NFP was from EW 2 of 2017.