



Emergencies

Zika virus infection: India

2 November 2018

On 21 September 2018, the Ministry of Health and Family Welfare-Government of India (MoHFW) reported a confirmed case of Zika virus infection in a 78 year-old woman in Jaipur, Rajasthan state, India. State health authorities initiated a broad response and central teams were subsequently deployed to support surveillance and control efforts, particularly in and around a 3 km radius of the Shastri Nagar area. A high level Joint Monitoring Group of Technical Experts was organized to monitor preparedness and response measures and a control room was activated at the National Centre for Disease Control (NCDC) to provide regular monitoring and oversight. As of 2 November 2018, 157 cases have been identified, including 63 pregnant women; all cases have been laboratory-confirmed by RT-PCR.

Extensive state and national response efforts have been implemented by the MoHFW. Suspected cases in the area are being tested, including viral sequence analysis. Pregnant women are being screened and provided information on Zika virus infection and prevention. Pregnant women with evidence of infection are being followed by routine antenatal care and ultrasound examination. To date, no cases of microcephaly or congenital Zika syndrome have been reported. Extensive surveillance and vector control measures have been initiated in the Shastri Nagar area, including house-to-house surveys. Community-based programs are underway to increase public awareness, advance measures to mitigate mosquito breeding sites, and promote personal protection measures against mosquito vectors. Routine surveillance outside the Shastri Nagar area is ongoing.

The government of India maintains a laboratory-based Zika surveillance system, involving 34 laboratories to detect Zika virus infection in patients with febrile illness, developed as part of the National Zika Action plan. Routine vector surveillance is also ongoing.

WHO risk assessment

This report describes an outbreak of confirmed Zika virus infections in Rajasthan state, India. Prior to this outbreak, India reported four confirmed cases of Zika virus infection in 2017, three cases in Ahmedabad Gujarat and one case in Krishnagiri District of Tamil Nadu.¹

These findings suggest ongoing transmission of Zika virus in Rajasthan

State, India, and new cases may occur in the future. Zika virus is known to be circulating in the South East Asia Region and these findings do not change the global risk assessment. WHO does not recommend any travel or trade restriction to India based on the current information. WHO encourages Member States to report similar findings to better understand the global epidemiology of Zika virus transmission and its associated complications.

The risk of further spread of Zika virus to areas where the competent vectors, *Aedes* mosquitoes, are present is significant given the wide geographical distribution of these mosquitoes in various regions of the world. WHO continues to monitor the epidemiological situation and conduct risk assessment based on the latest available information.

¹[World Health Organization. Zika Virus Infection – India, Disease Outbreak News, 26 May 2017.](#)

Zika virus infection »

This page links all WHO technical and general information on Zika virus disease.

Zika virus infection: India (26 May 2017)

On 15 May 2017, the Ministry of Health and Family Welfare-Government of India (MoHFW) reported three laboratory-confirmed cases of Zika virus disease in Bapunagar area, Ahmedabad District, Gujarat, State, India.

[Read the disease outbreak news story](#)

Zika fact sheet



WHO/Y. Shimizu

Zika virus disease is caused by a virus transmitted primarily by *Aedes* mosquitoes, which bite during the day. An increased risk of neurologic

complications is associated with Zika virus infection in adults and children, including Guillain-Barré syndrome, neuropathy and myelitis.

[Read the fact sheet](#)

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