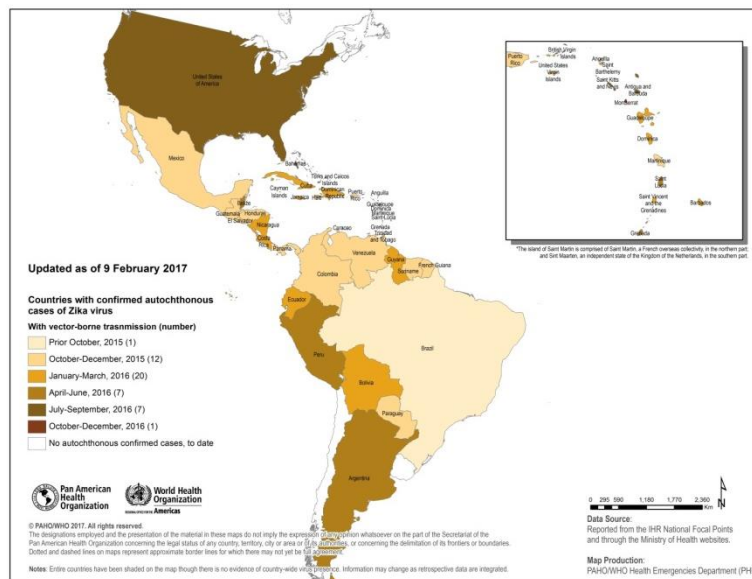


Note: The Epidemiological Update publication schedule is being changed from bi-weekly to monthly until further notice. Accordingly, the next Zika-Epidemiological Update is scheduled for 9 March 2017.

Situation summary in the Americas

Since epidemiological week (EW) 44 of 2016, no additional countries or territories of the Americas have confirmed autochthonous, vector-borne transmission of Zika virus disease. To date, 48 countries and territories in the Americas have confirmed autochthonous, vector-borne transmission of Zika virus disease since 2015 (**Figure 1**).¹ In addition, five countries in the Americas have reported sexually transmitted Zika cases.²

Figure 1. Countries and territories in the Americas with confirmed autochthonous (vector-borne) Zika virus cases, 2015 - 2017.



¹ [1] Anguilla; Antigua and Barbuda; Argentina; Aruba; the Bahamas; Barbados; Belize; Bolivia (Plurinational State of); Bonaire, Sint Eustatius, and Saba; Brazil; the British Virgin Islands; Cayman Islands; Colombia; Costa Rica; Cuba; Curaçao; Dominica; the Dominican Republic; Ecuador; El Salvador; French Guiana; Grenada; Guadeloupe; Guatemala; Guyana; Haiti; Honduras; Jamaica; Martinique; Mexico; Montserrat; Nicaragua; Panama; Paraguay; Peru; Puerto Rico; Saint Barthélemy; Saint Kitts and Nevis; Saint Lucia; Saint Martin; Saint Vincent and the Grenadines; Sint Maarten; Suriname; Trinidad and Tobago; Turks and Caicos Islands; the United States of America; the United States Virgin Islands; and Venezuela (Bolivarian Republic of).

² Argentina, Canada, Chile, Peru, and the United States of America.

Highlighted below is a summary of the epidemiological situation by sub-regions.

North America³

In the United States of America, the Florida Department of Health continues to report isolated local transmission cases.⁴

In Mexico, there has been a decreasing trend since EW 39 of 2016, with a weekly average of 9 confirmed cases in the last four weeks.

Central America⁵

The number of reported cases in Central America remains consistent, with a weekly average of 369 cases, 317 suspected, and 52 confirmed, in the last four weeks.

In Panama, the growing trend of suspected and confirmed cases between EW 30 of 2016 to EW 1 of 2017 was maintained.⁶

Caribbean⁷

In Montserrat, there is an increasing trend in the number of suspected and confirmed cases between EW 49 and EW 51 of 2016.

While other countries and territories in the Caribbean continue to report cases, the trend remains stable, with a weekly average of 651 cases (164 suspected and 487 confirmed) in the last four weeks.

South America⁸

In South America, the number of cases reported remains stable with a weekly average of 6,601 suspected and confirmed cases in the last four weeks, of which 6,164 were reported in Brazil.

In Paraguay, the trend of suspected cases increased between EW 42 of 2016 and EW 3 of 2017.

In Peru, there was an increase in the number of cases reported between EW 1 and EW 3 of 2017; the increase is related to an outbreak occurring in the department of Loreto.⁹

³ Canada, Mexico, and the United States of America.

⁴ Read the [full report](#).

⁵ Belize, Costa Rica, El Salvador, Guatemala, Honduras, Nicaragua, and Panama.

⁶ Read the [full report](#).

⁷ Anguilla, Antigua and Barbuda, Aruba, the Bahamas, Barbados, Bonaire, Saint Eustatius and Saba, Curacao, Cayman Islands, Cuba, Dominica, Dominican Republic, Grenada, Guadeloupe, Haiti, Jamaica, Martinique, Puerto Rico, Saint Barthélemy, Saint Lucia, Saint Martin, Sint Maarten, Saint Vincent and the Grenadines, Trinidad and Tobago, Turks and Caicos Islands, the U.K. Virgin Islands, and the U.S. Virgin Islands.

⁸ Argentina, Bolivia, Brazil, Colombia, Ecuador, French Guiana, Guyana, Paraguay, Peru, Suriname, and Venezuela.

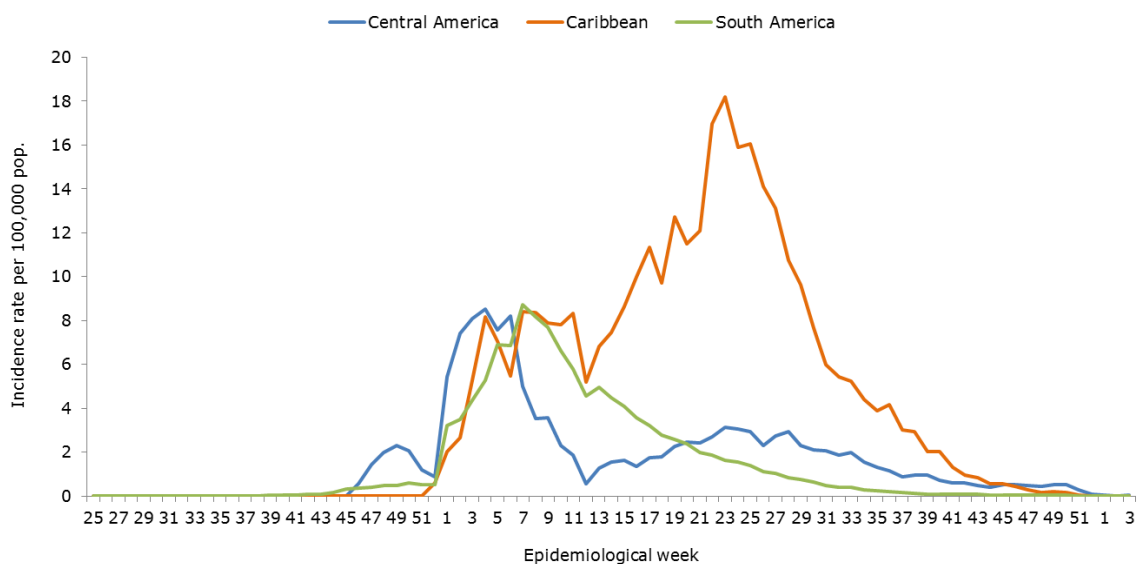
⁹ Read the [full report](#).

In the Bolivarian Republic of Venezuela, there was an increase in the number of cases reported between EW 1 and EW 4 of 2017.

Trend in the Caribbean, Central America, and South America

Figure 2 shows the trend of suspected and confirmed cases in the Caribbean, Central America, and South America. The peak in incidence is observed in EW 7 of 2016 for all three sub-regions; from that point onwards in Central America and South America a downward trend occurs. In contrast, in the Caribbean, a growing trend occurred with the peak of cases observed in EW 23 of 2016. Since EW 40 of 2016, the trend has remained stable in all three sub-regions.

Figure 2. Distribution of incidence rate by EW and sub-region. Americas 2016 – 2017 (up to EW 3)



Source: Data provided by countries and territories and reproduced by PAHO/WHO

Congenital syndrome associated with Zika virus infection¹⁰

To date, 23 countries and territories in the Americas have reported confirmed cases of congenital syndrome associated with Zika virus infection. In EW 5 of 2017, Mexico reported a confirmed case of congenital syndrome associated with Zika virus infection for the first time. In the last two weeks, Argentina, Colombia, the Dominican Republic, Guadeloupe, Guatemala, Martinique, and the United States of America, updated their number of cases of congenital syndrome associated with Zika virus infection.

As of 1 September 2016, the table with the number of confirmed cases of congenital syndrome is published on a weekly basis on the PAHO/WHO website and is available at: http://www.paho.org/hq/index.php?option=com_content&view=article&id=12390&Itemid=42090&lang=en

¹⁰ Read the [case definition](#).

Guillain-Barré syndrome (GBS) and other neurological disorders

Since December 2016, no additional countries or territories have reported cases of Guillain-Barré syndrome (GBS) associated with Zika virus infection.

The following is a list of countries and territories in the Americas reporting increased cases of Guillain-Barre syndrome (GBS) and/or laboratory confirmation of Zika virus in at least one GBS case.

Table 1. Countries and territories in the Americas with GBS in the context of Zika virus circulation.

Increase in GBS with Zika virus lab confirmation in at least one case of GBS	Zika virus infection laboratory confirmation in at least one case of GBS	Increase in GBS with no Zika virus lab confirmation in any of the cases
Brazil	Bolivia	Paraguay
Colombia	Costa Rica	Saint Vincent and the Grenadines
Dominican Republic	Grenada	
El Salvador	Haiti	
French Guiana	Mexico	
Guadeloupe	Panama	
Guatemala	San Martin	
Honduras		
Jamaica		
Martinique		
Puerto Rico		
Suriname		
Venezuela		