Zika Virus in Traumatic Patients

Zika virus infection is the present big concern in public health. This infectious disease has multimodal transmission methods and it can affect patients at any age-group. The disease can cause acute febrile illness and can result in several complications including to neurological complications as well as teratogenic effect. The disease is seen in several tropical countries around the world and already imported to several non-tropical countries. The infection is the present disease under surveillance and the research to find the knowledge on this disease is still needed.

In trauma and emergency medicine, the concern on Zika virus infection should be mentioned. In fact, any patients can be affected by the Zika virus infection. The traumatic patients might also get the Zika virus infection. The first consideration is the asymptomatic Zika infection, which is not uncommon [1]. The asymptomatic infection among traumatic patients is possible and might be the possible source of further local transmission. Although the transmission of Zika virus via blood contact has never been confirmed, it is still required the universal precautions against this new infection. Without any sufficient data, it cannot guarantee that there will be no transmission of Zika virus via blood contact.

Nevertheless, there is a great concern on the risk of traumatic patients to get Zika virus by blood transfusion, which is commonly indicated among these traumatic patients. The transmission of Zika virus via the blood transfusion is possible [2]. The safety of blood product in the remote area where the facilities for screening for Zika virus in blood product is the present challenge in management of traumatic patients [3,4]. Finally, when the traumatic patients is admitted to the hospital, if there is no good infection control and mosquito control, the patients who have limitation of movement due to trauma can easily get bitten by the mosquito vector. This can be a big problem in any settings where the mosquito vectors exist. The good example is the report from Ecuador of a “patient who developed symptoms on postoperative day 5 from an orthopedic procedure [5]”.

As a big public health problem, Zika virus infection should also be kept as an important consideration in management of traumatic patients. The good clinical practice according to universal precautions, infection control and vector control principles are required.

Conflict of Interest
None

References
