

STATEMENT TO PARLIAMENT
BY
MINISTER OF HEALTH
DR. THE HON. CHRISTOPHER TUFTON
TUESDAY, JULY 19, 2016

Introduction

Mr. Speaker, the Ministry of Health has been continuously updating the country on our efforts to reduce the impact of the zika virus on the population, in particular pregnant women and their babies. We know that this is a new disease which cannot be precisely predicted so we have been monitoring very closely and putting several measures in place out of an abundance of caution.

Zika Virus in Jamaica

Mr. Speaker, at present we have a total of forty four (44) laboratory confirmed cases of zika. As of July 18, 2016 the Ministry of Health received reports of three thousand seven hundred and forty six (3,746) notifications for Zika. Two thousand five hundred and twenty four (2,524) or 67 percent of these fit the case definition and were classified as “Suspected Zika fever”. Among these were two hundred and thirty one (231) pregnant women all of whom have been tested, Seven (7) were confirmed zika positive and have been informed.

Microcephaly and Zika Virus

Mr. Speaker based on research and experience from other countries the assumption is that 10 percent of pregnant women exposed to the zika virus may have a child with microcephaly. I want to stress that at this stage this is an assumption as we really do not know what the outcome will be. Despite that we have been putting measures in place to monitor all pregnant women. The difficulty is that even if we know that you have a positive result, we will not know until late in the pregnancy or after birth whether the child has microcephaly. There is presently no intervention to counter that possibility, while we continue to provide supportive care throughout the pregnancy to ensure the best possible outcome.

It means Mr. Speaker, that even if we were to test every pregnant woman, there isn't much we can do by way of preventing the outcome and there is still a lot of Zika virus related research to be done internationally. We continue to be guided by the WHO/PAHO and CDC guidelines which are continually being updated. At this time, pregnant women with any symptom suggestive of Zika virus infection are tested. Mr. Speaker, Jamaica has an excellent track record in managing high risk pregnant women through the Prevention of Mother to Child Transmission programme – and has in place a platform in which public health nurses and midwives are placed strategically at all the major high risk clinics including St. Ann's Bay, Victoria Jubilee, Cornwall Regional, Spanish Town hospitals and the University Hospital of the West Indies among others. The group has been briefed and trained recently to follow and monitor pregnant women exposed to Zika. They along with Obstetricians, midwives and other staff at the high risk and general antenatal clinics are being trained to form the team to manage these pregnant women and their infants. The list of those suspected and confirmed to have Zika is passed to this team of nurses who will provide support to these women ensuring the requisite monitoring is carried out throughout the pregnancy.

Mr. Speaker, some have suggested a centralised high risk clinic but that would be against the integrated approach to health care delivery which speaks to the provision of services close to the community where patients reside. We already have high risk clinics across the island and would not want to separate mothers from their babies or have them travel long distances every day to get to a central facility.

World leaders in this area are coming to Jamaica at the end of October to establish the necessary research to be done. Professor Celia Christie of the University of the West Indies is the leader of the group of Jamaican physicians and scientists in this endeavour. She has been working closely with us at the Ministry of Health.

We continue to advise all pregnant women to seek antenatal care as early as possible especially those who are found to be Zika positive. Also, as difficult as it may be, we ask that pregnant women and their families take every possible measure to protect themselves from mosquito bites.

Health Sector Preparations for Pregnant Women and their Babies

Mr. Speaker, we have been taking other measures to prepare the health sector with respect to the management of pregnant women and for any increase in cases of microcephaly.

- All pregnant women attending public antenatal clinics have been receiving mosquito nets
- We have started the training for the vector control workers and they will also assist us to monitor and provide education on zika and its related issues to pregnant women.
- Over five hundred public and private healthcare providers were trained between June and July 2016 and made aware of the clinical guidelines including those specific to pregnant women. These and others are available on our website.
- We have been preparing our Intensive Care Units and High Dependency areas at hospitals. Just recently we received some equipment at the Mandeville Regional hospital through PROMAC which is designed to improve maternal and new-born health.
- Outside of that we have also procured additional ventilators and continue to make repairs to existing ones to put them back to use.
- We have been providing counselling and psychosocial support to pregnant women and their families who are affected by zika and will continue to make this service available to all those who may need it regardless of their zika status.
- We maintain and continue to advise that women and their partners delay pregnancy for at least another year.

Laboratory Strengthening

Mr. Speaker, we have been increasing the capacity of the virology lab at the University of the West Indies to facilitate zika testing.

- An additional PCR Machine dedicated to Zika Virus testing has been ordered by the Ministry for the UHWI Virology Lab.
- Additional staff have been deployed and others are being recruited to assist at the UHWI Virology Lab
- Discussions of a shift system for increased Zika Virus testing are ongoing.

Mr. Speaker, I want to announce that through working with PAHO we have trained staff and established the capacity to do ELISA testing. This Mr. Speaker will allow us to tell whether pregnant women ever had zika versus whether they are having zika. This will eliminate the three to five day window allowing us more flexibility to diagnose zika infection. Mr. Speaker, we are discussing with PAHO the possibility of widely introducing this test as the cost to test 40,000 pregnant women at the current price of US\$20 per test would be US\$800,000.

Mr. Speaker, we have put in place a register at our hospitals which will capture the head circumference of babies. This is used to detect microcephaly and so will be able to diagnose any such outcome in any of our facilities and make the necessary referral to early stimulation and provide the necessary support to the mother.

We are setting up a Phase III group of experts to specifically address complications of Zika infection including GBS cases with resulting neurological complications, mothers of children with Microcephaly and children with Microcephaly or other neurological complications.

The team will consist of:

1. Dr. Roxanne Melbourne-Chambers - Paediatric Neurologist UWI
2. Dr. Amza Ali - Neurologist KPH
3. Dr. Maureen Samms-Vaughan - Behavioural Paediatrician UWI
4. Dr. Gillian Lowe - Child and Adolescent Psychiatrist -UWI
5. Dr. Ganesh Shetty - Child and AdoLescent Psychiatrist -MOH
6. Dr. Michelle-Ann Richards Dawson - Paediatrician, SMO BHC
7. Dr. Audrey Pottinger - Clinical Psycholigist UWI
8. An early Childhood Stimulation representative from the Ministry of Education
9. and a representative from our Mental Health Unit

Zika Virus Vaccine Clinical Trial

The National Institute of Health has fast tracked clinical trials for the development of a zika vaccine. Jamaica has accepted an invitation to participate in this process and will continue dialogue about this very important aspect of addressing the zika virus.

Conclusion

Mr. Speaker, we must all come together to fight this threat. We have to start at the source and that is getting rid of mosquito breeding sites around our homes and in our communities. One small bite from the *Aedes aegypti* mosquito which spreads the zika virus has the potential to change someone's life forever. We have the power to protect ourselves.

We must all take responsibility and support the work of the Government as we cannot do it alone. I thank everyone – private and public sector as well as communities and individuals - who have been onboard with us as we all work together to secure the health of our families and this nation.

Thank you.