Zika virus infection can occur as a result of mosquito-borne or sexual transmission of the virus. Infection during pregnancy is a cause of fetal brain abnormalities and other serious birth defects (1,2). CDC has updated the interim guidance for men with possible Zika virus exposure who 1) are planning to conceive with their partner, or 2) want to prevent sexual transmission of Zika virus at any time (3). CDC now recommends that men with possible Zika virus exposure who are planning to conceive with their partner wait for at least 3 months after symptom onset (if symptomatic) or their last possible Zika virus exposure (if asymptomatic) before engaging in unprotected sex. CDC now also recommends that for couples who are not trying to conceive, men can consider using condoms or abstaining from sex for at least 3 months after symptom onset (if symptomatic) or their last possible Zika virus exposure (if asymptomatic) to minimize their risk for sexual transmission of Zika virus. All other guidance for Zika virus remains unchanged. The definition of possible Zika virus exposure remains unchanged and includes travel to or residence in an area with risk for Zika virus transmission (https://wwwnc.cdc.gov/travel/page/world-map-areas-with-zika) or sex without a condom with a partner who traveled to or lives in an area with risk for Zika virus transmission. CDC will continue to update recommendations as new information becomes available.

**Review of Evidence**

Primarily transmitted through the bite of an infected *Aedes aegypti* mosquito, Zika virus can also be transmitted through unprotected sex (i.e., without correct and consistent use of a condom) with an infected partner. As of July 3, 2018, 52 cases of confirmed sexual transmission of Zika virus infection have been reported in the United States since 2015 (https://www.cdc.gov/zika/reporting/case-counts.html). Most documented reports of sexual transmission have involved transmission from a man to a woman (4); however, transmission also has been reported from a man to another man (5) and from a woman to a man (6).

Despite their limited generalizability to humans, preliminary data from animal studies suggest that sexual transmission of Zika virus during pregnancy might pose a higher risk to the fetus than mosquito-borne transmission. In female rhesus macaques, vaginal inoculation (as a model for sexual transmission) of Zika virus appeared to enhance viral dissemination to the female reproductive tract, compared with subcutaneous inoculation (7). In an immunodeficient mouse model, poorer maternal outcomes and higher fetal viral titers were observed when exposure was through sexual transmission rather than subcutaneous or intravaginal infection (8). Prevention of sexual transmission of Zika virus during pregnancy can reduce the risk for maternal infection and the potential for congenital Zika syndrome.

The risk for congenital Zika syndrome associated with maternal Zika virus infection during the periconceptional period is not known. Maternal infection with other viruses (e.g., rubella) during the periconceptional period have been associated with infection in the fetus and adverse pregnancy outcomes; although in some cases, the timing of infection relative to conception was uncertain (9–13). To date, there are no published data definitively linking Zika virus infection around the time of conception to adverse pregnancy outcomes.

Since the last update of this guidance on October 7, 2016 (3), additional evidence relevant to the assessment of risk for sexual transmission of Zika virus infection has been reported. A literature search of PubMed was performed to identify new human studies and data published in English since October 2016.
Zika virus RNA from semen was 54 days (14), the estimated mean time to clearance of after illness onset, semen of ≤7% of participants had detectable Zika virus RNA. The longest period after symptom onset (if symptomatic) or their last possible Zika virus exposure before engaging in unprotected sex. This updated timeframe also applies to prevent sexual transmission of Zika virus.

What are the implications for public health practice?

These recommendations provide couples planning pregnancy with updated timeframes expected to reduce the risk for fetal Zika virus infection. tiers for patients and providers to make decisions about timeframes to wait before trying to conceive after possible Zika virus exposure (if asymptomatic) to minimize their risk for sexual transmission of Zika virus. Recommendations for men with possible Zika virus exposure whose partner is pregnant remain unchanged; these couples should be advised to consistently and correctly use condoms during sex or abstain from sex for the duration of the pregnancy.

CDC now recommends that men with possible Zika virus exposure who are planning to conceive with their partner wait for at least 3 months after symptom onset (if symptomatic) or their last possible Zika virus exposure (if asymptomatic) before trying to conceive with their partner (3). New data published since then support an update to that interim guidance. CDC now recommends that men with possible Zika virus exposure who are planning to conceive with their partner wait for at least 3 months after symptom onset (if symptomatic) or their last possible Zika virus exposure (if asymptomatic) before engaging in unprotected sex. CDC now also recommends that for couples who are not trying to conceive, men can consider using condoms or abstaining from sex for at least 3 months after symptom onset (if symptomatic) or their last possible Zika virus exposure (if asymptomatic) to reduce the risk for sexual transmission of Zika virus. Recommendations for men with possible Zika virus exposure whose partner is pregnant remain unchanged; these couples should be advised to consistently and correctly use condoms during sex or abstain from sex for the duration of the pregnancy. Recommendations for men with possible Zika virus exposure whose partner is pregnant remain unchanged; these couples should be advised to consistently and correctly use condoms during sex or abstain from sex for the duration of the pregnancy.
TABLE. CDC recommendations for preconception counseling and prevention of sexual transmission of Zika virus among persons with possible Zika virus exposure — United States, August 2018

| Exposure scenario                                      | Recommendations (update status)                                                                 |
|-------------------------------------------------------|-----------------------------------------------------------------------------------------------|
| Only the male partner travels to an area with risk for Zika virus transmission and couple planning to conceive | The couple should use condoms or abstain from sex for at least 3 months after the male partner’s symptom onset (if symptomatic) or last possible Zika virus exposure (if asymptomatic). (Updated recommendation) |
| Only the female partner travels to an area with risk for Zika virus transmission and couple planning to conceive | The couple should use condoms or abstain from sex for at least 2 months after the female partner’s symptom onset (if symptomatic) or last possible Zika virus exposure (if asymptomatic). (No change in recommendation)* |
| Both partners travel to an area with risk for Zika virus transmission and couple planning to conceive | The couple should use condoms or abstain from sex for at least 3 months from the male partner’s symptom onset (if symptomatic) or last possible Zika virus exposure (if asymptomatic). (Updated recommendation) |
| One or both partners have ongoing exposure (i.e., live in or frequently travel to an area with risk for Zika virus transmission) and couple planning to conceive | The couple should talk with their health care provider about their plans for pregnancy, their risk for Zika virus infection, the possible health effects of Zika virus infection on a baby, and ways to protect themselves from Zika. If either partner develops symptoms of Zika virus infection or tests positive for Zika virus infection, the couple should follow the suggested timeframes listed above before trying to conceive. (No change in recommendation)* |
| Men with possible Zika virus exposure whose partner is pregnant | The couple should use condoms or abstain from sex for the duration of the pregnancy. (No change in recommendation)* |

* Petersen EE, Meaney-Delman D, Nebblett-Fanfair R, et al. Update: interim guidance for preconception counseling and prevention of sexual transmission of Zika virus for persons with possible Zika virus exposure—United States, September 2016. MMWR Morb Mortal Wkly Rep 2016;65:1077–81.

Conflicts of Interest

No conflicts of interest were reported.

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