



Zika Virus Pandemic - Misconceptions and its Implications

Megha Sharma^{1*} and Kapil Yadav²

¹Medical College of Wisconsin, 8701 W Watertown Plank Rd, Milwaukee, WI, 53226, USA

²Tulane University School of Medicine, 1430 Tulane Avenue, #8548, New Orleans, LA, 70112, USA

*Corresponding author: Megha Sharma, Medical College of Wisconsin, 8701 W Watertown Plank Rd, Milwaukee, WI, 53226, USA, E-mail: msharma@mcw.edu

Received date: October 24, 2016; Accepted date: October 27, 2016; Published date: October 31, 2016

Copyright: © 2016 Sharma M. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Citation: Sharma M, Yadav K (2016) Zika Virus Pandemic – Misconceptions and its Implications. Clinics Mother Child Health 13: e109. doi: 10.4172/2090-7214.1000e109

Zika Virus- Editorial

The pandemic of Zika virus infection is a formidable threat to the American public health and is the fourth arboviral pandemic arriving to the western hemisphere in the past three decades after Dengue, West Nile virus and Chikungunya. This arbovirus was discovered in Uganda in 1947 in the course of rhesus primate surveillance. The arbovirus circulated predominantly in wild primates and rarely caused human infections. This makes its explosive pandemic re-emergence as truly fascinating, arriving from Africa to the Western hemisphere [1].

Zika is a threat to our goal of healthy mother-child entity. Microcephaly not uses causes lifelong disability in the child but wreaks an emotional havoc for the mother. Zika is a predominantly a mild dengue-like disease with some data showing neurological complications. The data from French Polynesia documented a concomitant epidemic of 73 cases of Guillain–Barré syndrome in a population of approximately 270,000, which may represent complications of Zika. More publicized and of greater concern is the epidemic of microcephaly in Brazil, manifested by an apparent 20-fold increase in incidence from 2014 to 2015, believed to be caused by Zika virus infection in pregnant women. CDC reported that over 4000 patients in US have been affected by it.

We are at the helm of this expanding pandemic, with no effective vaccine available. Lack of Proper scientific data and sudden emergence of virus has caused panic fueling conspiracy theories that ultimately hamper the preventive measures. Beside the algorithmic increase, the graphic media associated with the disease has caused rapid awareness about it in social media. We recently researched the misconceptions about Zika among Americans on Facebook [2]. We were surprised to find that conspiracy theories were far more popular than the posts dispersing accurate and relevant public health information about the disease. The difference in likes, views and shares of conspiracy theory over relevant information was staggering. It was very unsettling that during these times of pandemics, misinformation that might affect herd behavior.

It is critically important to spread accurate information that encourages public compliance to preventative guidelines or behaviors that decrease the spread of the pandemic. Beside, people believing Zika to be a pharma hoax are still travelling to affected areas with no specific preventive measures which is propagating the spread of the virus. Other important risk is inaccurate information that might cause panic, apprehension or encourages negligent behavior among masses. This misleading information needs to be identified and dispelled effectively. We propose better curation of social media posts on public health during the time health crises and pandemics.

References

- 1. Fauci AS, Morens DM (2016) Zika Virus in the Americas-Yet Another Arbovirus Threat. New Eng J Med 374: 601-604.
- Sharma M, Yadav K, Yadav N, Ferdinand KC (2016) Zika virus pandemicanalysis of Facebook as a social media health information platform. Am J Infect Control (In Press).