Zika Virus, IbH 30656

Catalog No. NR-50066

For research use only. Not for human use.

Contributor:
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Manufacturer:
BEI Resources

Product Description:

- **Strain/Isolate:** IbH 30656
- **Species:** Zika virus
- **Original Source:** Zika virus (ZIKV), IbH 30656 was isolated from the blood of a human in Ibadan, Nigeria, on September 9, 1968. The complete coding sequence of ZIKV, IbH 30656 was previously determined (GenBank: HQ234500). The complete coding sequence of NR-50066, Lot No. 63856751 has also been determined (GenBank: KU963574).

ZIKV is a member of the Spondweni serocomplex of mosquito-borne flaviviruses. ZIKV is vectored primarily by *Aedes* spp., but has also been isolated from *Anopheles*, *Eretmapodites*, and *Mansonia* mosquitoes. Phylogenetic analyses indicated that there are two major lineages of ZIKV, African and Asian. A third lineage circulating in West Africa was recently described.

The first human infections with ZIKV were reported in Nigeria in 1954. Only sporadic infections were seen until 2007, when a large outbreak occurred in Yap State, Federated States of Micronesia. There was another large outbreak in 1964. Only sporadic infections were seen until 2007, when a large outbreak occurred in Yap State, Federated States of Micronesia. There was another large outbreak in 1964.

The first human infections with ZIKV were confirmed in infants with microcephaly, outbreaks in one or more Pacific Island countries. The outbreak in the Americas has become the most widespread in history. Updates on areas with ongoing ZIKV transmission are available online from the Centers for Disease Control and Prevention. An estimated 80% of human ZIKV infections are asymptomatic, and symptomatic disease is generally mild and characterized by fever, maculopapular rash, arthralgia, and nonpurulent conjunctivitis. However, ZIKV infections were confirmed in infants with microcephaly, and sufficient evidence has since accumulated to infer a causative relationship between prenatal ZIKV infection and microcephaly and other severe brain anomalies. The full teratogenic potential of ZIKV, the absolute and relative risks among infants exposed to ZIKV *in utero*, and factors that may modify these risks remain to be determined.

Material Provided:
Each vial contains approximately 1 mL of cell lysate and supernatant from *Cercopithecus aethiops* kidney epithelial cells (Vero; ATCC® CCL-81™) infected with ZIKV, IbH 30656.

Note: If homogeneity is required for your intended use, please purify prior to initiating work.

Packaging/Storage:
NR-50066 was packaged aseptically in screw-capped plastic cryovials. The product is provided frozen and should be stored at -60°C or colder immediately upon arrival. For long-term storage, the vapor phase of a liquid nitrogen freezer is recommended. Freeze-thaw cycles should be avoided.

Growth Conditions:

- **Host:** Vero cells (ATCC® CCL-81™)
- **Growth Medium:** Eagle’s Minimum Essential Medium containing Earle’s Balanced Salt Solution, non-essential amino acids, 2 mM L-glutamine and 1 mM sodium pyruvate supplemented with 2% fetal bovine serum, or equivalent.
- **Infection:** Cells should be 70% to 90% confluent; thaw virus rapidly in a 37°C water bath; adsorb diluted virus to cells for one hour at 37°C.
- **Incubation:** 2 to 8 days at 37°C and 5% CO₂.
- **Cytopathic Effect:** Cell rounding and detachment.

Citation:
Acknowledgment for publications should read “The following reagent was obtained through BEI Resources, NIAID, NIH, as part of the WRCEVA program: Zika Virus, IBH 30656, NR-50066.”

Biosafety Level: 2


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References:
1. Tesh, R. B., Personal Communication.
3. Shabman, R., et al. J. Craig Venter Institute, 9704 Medical Center Drive, Rockville, Maryland 20850, USA. Direct submission.
18. CDC. “CDC Health Advisory: Recognizing, Managing, and Reporting Zika Virus Infections in Travelers Returning from Central America, South America, the Caribbean and Mexico.” Atlanta, Georgia: US Department of Health and Human Services, CDC. 2016. http://emergency.cdc.gov/han/han00385.asp

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