



Mayaro Virus (MV)

General Information

Mayaro virus is an arbovirus member of the *Alphavirus* genus and *Togaviridae* family. It is an enveloped, single-stranded RNA virus with a complex transmission cycle involving mosquitoes and animals. It is spherical and has icosahedral symmetry. Mayaro virus infections are common in human populations living in rural areas in northern South America and the Amazon Basin.

Host Range

Humans, non-human primates, birds, rodents

Incubation Period

Usually 6-12 days

Survival Outside Host

Unknown; less than one day in culture medium at 37°C.

Laboratory Hazards

Parenteral inoculation, non-intact skin exposure, mucous membrane exposure, aerosols. No evidence of person-to-person transmission.

Symptoms of Exposure

Mayaro virus infection causes acute febrile illness that persists 3-5 days. The most common symptoms are fever and headaches. Myalgias, arthralgias, maculopapular rash, chills, nausea, photophobia, epigastric pain, nausea, and vertigo are less frequently reported. The joint pain may persist for several months.

Lab Acquired Infections (LAIs)

At least 6 cases of lab-acquired infection with the Mayaro virus have been reported, with one suspected to have occurred by airborne transmission.

Personal Protective Equipment



Disinfection & Inactivation

Mayaro virus is susceptible to 70% ethanol, 1% sodium hypochlorite, 2% glutaraldehyde, and lipid solvents. MV is sensitive to moist heat, dry heat, and drying.

Waste Management

Refer to [USC's Biological and Infectious Waste Management Plan](#).

Lab Containment

[Biosafety Level 2 \(BSL-2\)](#) for activities with materials and cultures known or reasonably expected to contain Mayaro virus.

Animal Containment

[Animal Biosafety Level 2 \(ABSL-2\)](#) for activities with experimentally infected animals.

Medical Surveillance/Treatment

Surveillance: Infection can be confirmed using serological tests, PCR analysis, or viral isolation in tissue culture.

Prophylaxis: None

Vaccines: None approved

Treatment: Supportive care such as non-steroidal anti-inflammatory drugs for pain relief.

Spill Procedures

See [USC Biological Spill Procedures](#)

Exposure Procedures

See [USC Protocol for Post Exposure Evaluation and Follow-up](#). Use of sharps should be strictly limited. A biosafety cabinet should be used when there is a potential to create aerosols or droplets.

References

R. B. Tesh, D. M. Watts, K. L. Russell, et. al., "Mayaro Virus Disease: An Emerging Mosquito-Borne Zoonosis in Tropical South America," *Clinical Infection Diseases*, vol. 28, no. 1, pp. 67-73, 1999.

E.-Y. Caicedo, K. Charniga, A. Rueda, et. al., "The epidemiology of Mayaro virus in the Americas: A systematic review and key parameter estimates for outbreak modelling," *PLOS Neglected Tropical Diseases*, vol. 15, no. 6, 2021.

Public Health Agency of Canada. Pathogen Safety Data Sheets: Infectious Substances – Mayaro Virus

C. T. Diagne, M. Bengue, V. Choumet, R. Hamel, J. Pompon and D. Missé, "Mayaro Virus Pathogenesis and Transmission Mechanisms," *Pathogens*, vol. 9, no. 9, p. 738, 2020.

P. Pedrosa and T. Cardoso, "Viral infections in workers in hospital and research laboratory settings: a comparative review of infection modes and respective biosafety aspects," *Int J Infect Dis*, vol. 15, no. 6, pp. e366-e376, 2011.