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In early February 2016, Zika virus (ZIKV) was declared as public health concern by World Health Organization due the increasing and stronger epidemiological and laboratorial evidence linking ZIKV infections and microcephaly and other neurological conditions in newborns. Still, little is known about the impact of those congenital abnormalities due to ZIKV in life expectancy of these children. Thus, we analyzed data of all suspected microcephaly cases reported in Salvador, Brazil, from October, 2015 to September, 2016. Survival was estimated by Kaplan Mayer and log rank test comparing CBA confirmed and discarded groups. Associations were performed through bivariate analysis of hazard ratios (HR) using Cox proportional hazards regression with 95% confidence intervals. Among all 581 cases reported, 170 (28,9%) were defined as congenital brain abnormality (CBA) confirmed cases based on neuroimaging exams and 223 (37,9%) reported cases underwent neuroimaging exams but no CBA was described, thus composing the CBA discarded group. We recorded overall 7 deaths (all among CBA confirmed cases), equivalent of 37.5 per 1000 person year of the total 186.55 person-year. The survival among CBA confirmed cases up to the first three months of life was 98%, and decreased to 97% in 6 months and to 96% one year after birth, whereas survival among CBA discarded cases was 100% throughout the study period. The HR for having arthrogyriposis was consistent with higher risk of death (HR=6.99; 95% IC 1.35; 36.13) and having calcification appeared inversely associated with death (HR= 0.05; 95% IC: 0.01; 0.25). Among the cases of CBA, who no having arthrogyriposis, hydrocephalus and who being born term/post term ( $p<0.01$ ) presented higher proportional survival cases of CBA with these abnormalities and being born pre term. Our studie presented the CBA cause a high and early mortality in newborns, However, our sample is small. Studies with greater power are necessary.

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