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Los Angeles County Health Alert Network

LAC DPH Health Advisory:
Raccoon Roundworm Cases Prompt New Reporting Requirement

September 8, 2026

County of Los Angeles
Public Health

This message is intended for emergency medicine, primary care, urgent care, internal medicine, pediatric, neurology, ophthalmology, and infectious disease providers. Please distribute as appropriate.

Key Messages

- A fatal human case of *Baylisascaris procyonis* (raccoon roundworm) has been reported in Los Angeles County—the third reported case since 2024.
- This rare but serious infection can cause neurologic and ocular disease in humans, when they ingest parasite eggs in infected raccoon feces.
- Human infection with *B. procyonis* is now a reportable disease in LA County. Providers must report any suspected or confirmed case to the LA County Department of Public Health within 1 working day.
- Raccoons are the primary host, and the parasite is common in raccoon populations. Exposure typically occurs through contact with soil or surfaces contaminated with raccoon feces, especially near raccoon latrines.
- Healthcare providers should consider baylisascariasis in patients, especially children, with neurologic (meningitis/encephalitis) or ocular (neuroretinitis) involvement accompanied by eosinophilia. A history of raccoon or environmental exposure is highly suggestive but not necessary.
- Serum and CSF specimens should be submitted to the Public Health Laboratory for testing at CDC. Call the Acute Communicable Disease Control (ACDC) program to coordinate testing (Weekdays 8:30 am—5pm: 213-240-7941).

Situation

The Los Angeles County Department of Public Health (LAC DPH) is investigating a fatal case of *Baylisascaris procyonis* (raccoon roundworm) in a child residing in the South Bay area of Los Angeles County. The child was likely exposed to raccoon feces in their neighborhood.

Human baylisascariasis is rare, with fewer than 10 cases reported in California since 1993. However, the parasite is prevalent in raccoons in the United States, with one study reporting 80% *B. procyonis* prevalence among sampled California raccoons.

This is the third human case of *B. procyonis* reported in LA County in the past two years, all occurring in children. Of the two cases identified in September 2024, one child continues to experience long-term neurologic sequelae, while the other has fully

recovered.

While the risk to the public is low, the high prevalence of *B. procyonis* in raccoons, frequent raccoon activity in close proximity to humans, and the potential for severe disease are concerning. Baylisascaris infections cannot be transmitted from person-to-person.

Given the increase in cases and the high potential for severe morbidity and mortality, human infection with *Baylisascaris procyonis* is now locally reportable per Los Angeles County Health Officer Order.

Background

Humans become infected after ingesting infective eggs from the environment (see *B. procyonis* life cycle). Children and individuals with severe developmental disabilities or pica/geophagia are at greatest risk of infection. Infections can be severe and even fatal, especially if the parasite invades the central nervous system.

Prompt treatment is critical. Early administration of an antiparasitic agent, such as albendazole, concurrent with corticosteroids helps reduce the inflammatory reaction.

For more detailed information, see CDC Raccoon Roundworm (Baylisascaris Infection).

Actions Requested of Providers

- **Suspect:** Consider *B. procyonis* infection in patients, particularly children, with neurologic (meningitis/encephalitis) or ocular involvement and eosinophilia. A history of exposure to raccoons or raccoon feces is highly suggestive but not necessary.
- **Treat:** Initiate treatment immediately if baylisascariasis is suspected. Use albendazole (25-50 mg/kg daily for 10-20 days). Do not wait for confirmatory testing. If albendazole is not immediately available, mebendazole or ivermectin may be used in the interim. Concurrent corticosteroids are recommended to help reduce the inflammatory reaction.
- **Test:** Submit serum and CSF specimens to the LAC DPH Public Health Laboratory (PHL) for testing at CDC. Call the Acute Communicable Disease Control (ACDC) program to coordinate testing (Weekdays 8:30 am—5pm: 213-240-7941). Submit specimens only after approval from ACDC.
- **Report**: Any suspected or confirmed human case of *B. procyonis* infection to LAC DPH within 1 working day. For cases identified as residents of Long Beach or Pasadena, see Reporting below.
- **Prophylaxis:** Start post-exposure prophylaxis with albendazole (25-50 mg/kg daily for 10 days) as soon as possible after ingestion of raccoon feces or contaminated soil, ideally within three days. If albendazole is not immediately available, mebendazole or ivermectin may be used in the interim.

- **Prevent:** Counsel patients and families on proper hand hygiene and on reducing raccoon activity around the home. Provide guidance on avoiding exposure, including discouraging raccoon presence, safely removing and cleaning raccoon feces, and washing hands thoroughly after outdoor activities and before eating. Resources for the public are available on the LAC DPH ACDC and Veterinary Public Health Raccoon Roundworm (*Baylisascaris procyonis)* websites including "Tips to Prevent Raccoon Roundworm Disease" in English | Spanish.

See CDC Clinical Overview and Clinical Treatment for more detailed clinical guidance.

Reporting

***Los Angeles County Department of Public Health*:**
Report any suspected or confirmed human case of *Baylisascaris procyonis* infection within 1 working day.

- Report via the CalREDIE Provider Portal* (preferred method), or
- Send a Confidential Morbidity Report Form (CMR) by secure email to RPU@ph.lacounty.gov or by fax to 888-397-3778 or 213-482-5508, or
- Call 888-397-3993 weekdays 8:00 am–4:30 pm.
- Mail a CMR to Report Processing Unit, 313 N. Figueroa St., Room 117, Los Angeles, CA 90012

Consultation is available Weekdays 8:30 am–5 pm: call 213-240-7941.

*For information about the provider portal and to make an account for LA DPH, visit http://publichealth.lacounty.gov/clinicians/report/ProviderPortal.htm.

Long Beach Health and Human Services
Report any suspect case of human *Baylisascaris procyonis* infection immediately.

- Weekdays 8 am-5 pm: call 562-570-4302.
- After hours: call the duty officer at 562-500-5537.

Pasadena Public Health Department
Report any suspect case of human *Baylisascaris procyonis infection* within 1 working day.

- Weekdays 8am-5pm: call 626-744-6089.
- After hours: Providers may call the emergency reporting line at 626-744-6043.

This message was sent by Dr. Sharon Balter, Director of Acute Communicable Disease Control Program, Los Angeles County Department of Public Health.

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