



**LAC DPH Health Alert
Surge in West Nile Virus Activity in the South Bay**

July 12, 2013

This message has been sent to Emergency Department Directors, Infectious Disease Directors, and Infection Control Staff. Please distribute as appropriate.

- West Nile Virus (WNV) has been detected in bird and mosquito sentinels in unprecedented levels in the South Bay area. WNV activity has been found in lower levels across Los Angeles County (LAC).
- Be alert for possible WNV infection in human patients; cases in LAC occur from May through November.
- WNV should be suspected in patients presenting with aseptic meningitis, encephalitis, acute flaccid paralysis, and/or febrile illness.
- Serum serologic testing for WNV IgM antibodies is the preferred diagnostic test for all forms of symptomatic WNV infection. Testing is widely available at commercial laboratories.
- Report all cases of encephalitis and meningitis to LAC Department of Public Health, including those pending definitive diagnosis.
- To date, no human WNV cases have been detected in LAC.

West Nile virus has been detected in 45 dead birds this year in Los Angeles County (LAC) with over 50% reported during the end of June. Over 75% of all positive dead birds have been located in the South Bay area. This is the highest level of WNV infection in dead birds documented in the South Bay since LAC began bird surveillance in 2004. Fifty mosquito pools, with nearly half detected in the South Bay area, and five sentinel chickens in the South Bay and Antelope Valley have been found positive for WNV in LAC this year. WNV infected dead birds have been shown to be a good predictor of human WNV risk. The number of WNV-positive birds tends to start increasing about 1 month prior to the appearance of human cases. Only one case of WNV has been documented in the State of California, a resident of Sacramento County.

Physicians are encouraged to test all patients with aseptic meningitis, encephalitis and febrile illness consistent with West Nile virus fever for WNV. Persons older than 50 years and immunocompromised individuals are at especially high risk for clinical WNV infection.

California regulations require physicians and laboratories to report all positive laboratory tests for WNV and any other arbovirus infection to the patient's local public health department within one working day (California Code of Regulations, sections 2500 and 2505). WNV fever, WNV neuroinvasive disease (meningitis, encephalitis, and acute flaccid paralysis), and asymptomatic WNV positive blood donors are reportable. In addition, all cases of acute encephalitis and meningitis (including those pending definitive diagnosis or suspected to be of viral, bacterial, fungal, or parasitic etiologies) are reportable. To file a report of a suspect human case, a completed Confidential Morbidity Report (CMR), available at <http://publichealth.lacounty.gov/acd/reports/cmr-h-794.pdf>, can be faxed to the DPH Morbidity Unit at (888) 397-3778. You may also report cases by telephone during normal business hours from 8:00 a.m. to 5:00 p.m. to (888) 397-3993.

For cases living in Long Beach, fax the completed CMR to the Long Beach Department of Health and Human Services, Epidemiology Program at (562) 570-4374, or by telephone at (562) 570-4302.

For cases living in Pasadena, fax the completed CMR to the city of Pasadena Public Health Department, at (626) 744-6115, or by telephone at (626) 744-6043.

More information:

- For medical consultation regarding WNV infection in humans, WNV surveillance activities, and test interpretation, contact ACDC at (213) 240-7941 during normal business hours. Critical after-hours consultation is available by contacting doctor on call at (213) 974-1234.
- Information on West Nile Virus, including current case counts, is available on the web at <http://westnile.ca.gov/> or <http://publichealth.lacounty.gov/acd/VectorWestNile.htm>.