



Philadelphia Department of Public Health
Division of Disease Control

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Health Advisory

Human West Nile Virus Case Confirmed in Philadelphia October 23, 2006

The Division of Disease Control (DDC), Philadelphia Department of Public Health has confirmed a case of meningoencephalitis due to West Nile Virus (WNV) in a 54-year-old man from West Philadelphia. The individual, who was hospitalized on October 2nd 2006, ultimately recovered without medical sequelae. The diagnosis of WNV was confirmed at the Pennsylvania Department of Health Bureau of Laboratories on October 20th by detection of IgM antibody in CSF. This is the first human case of WNV infection in a Philadelphia resident this year.

On August 31st 2006, a single mosquito pool from southwest Philadelphia tested positive for WNV. The Philadelphia Department of Public Health responded by spraying the area to eradicate adult mosquitoes, and enhancing mosquito vector surveillance activities in the area. This was the only WNV-positive pool identified from among 834 mosquito pools that had been collected in Philadelphia in 2006. There have been no birds in Philadelphia testing positive for WNV this year.

A total of 9 human cases of WNV infection have been identified in Pennsylvania this year, including 2 fatalities. Nationwide, 3,498 cases have been confirmed in 2006. One thousand one hundred and ninety-nine (1199) were neuroinvasive cases; there were 108 fatalities. Idaho has reported the most cases of any state (824 cases).

PDPH's WNV surveillance and control program includes clinical surveillance for meningitis and encephalitis, collection and testing of mosquito pools throughout the city, surveillance and testing of dead birds, and mosquito control activities (larviciding and adulticiding).

As warm weather and mosquito activity persist into the fall months, clinicians are urged to test for West Nile Virus in patients with unexplained febrile illness and in patients with suspected meningitis or encephalitis, particularly those with fever and any of the following signs or symptoms:

- Acutely altered mental status (e.g., disorientation, obtundation, stupor, or coma);
- Other acute signs of central or peripheral neurologic dysfunction (e.g., paresis or paralysis, nerve palsies, sensory deficits, abnormal reflexes, generalized convulsions, or abnormal movements);
- Pleocytosis (increased white blood cell concentration in cerebrospinal fluid [CSF]) associated with illness clinically compatible with meningitis (e.g., headache or stiff neck).

Please contact the Division of Disease Control (DDC) at 215-685-6740 to report a case of suspected or confirmed WNV or to obtain additional information. All suspected cases should be confirmed by specific testing for WNV at the Pennsylvania Dep't of Health Bureau of Laboratories. DDC staff can advise on specimen submission for laboratory testing, as necessary. Additional information is also available at www.phila.gov/health and at www.cdc.gov.