

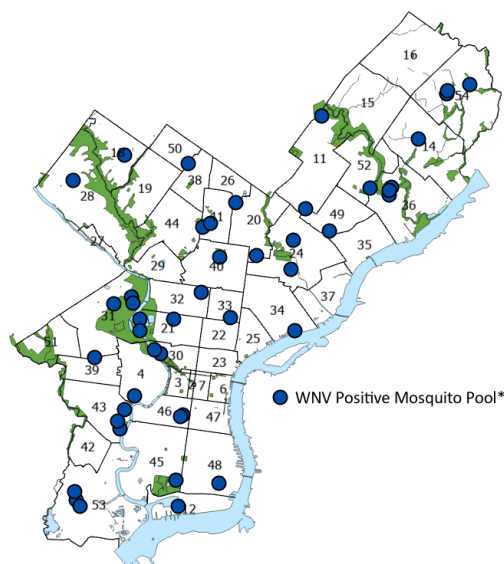
## 2025 Philadelphia West Nile Virus Activity Report August 29, 2025

The Philadelphia Department of Public Health (PDPH) identified the first symptomatic West Nile virus (WNV) infection for the 2025 season in an adult resident who developed WNV fever symptoms in late June or early July. Potential exposures occurred outside of Philadelphia.

The WNV pool positivity in 2025 is higher than the year-to-date historic median rate from 2001-2024 (19% vs 8%) and similar to rates observed in 2010, 2018, and 2022 (19%-46%), peak WNV activity seasons in Philadelphia. Increased risk for human infection will continue in Philadelphia until the first hard frost occurs.

From May through October, PDPH, in collaboration with the PA Department of Environmental Protection, conducts mosquito management activities throughout Philadelphia, which entails surveillance and identification of mosquito pools, testing pools for WNV, and control activities (eliminating breeding sites, larviciding catch basins, ground spraying, etc.). Since May 2025, 63 mosquito larvicide treatment events have been conducted across Philadelphia and five locations were treated to control adult mosquito populations.

### West Nile Virus Mosquito and Human Case Surveillance, Philadelphia PA, Morbidity Week 33 and Cumulative 2025 Season Update



\*25 locations had 2-5 mosquito pools test positive

	Week 33 (8/10-8/16)	2025 Season (5/1-8/16)
Mosquito Pools Tested <sup>A</sup>	41	454
WNV Positive Pools	15	85
Human WNV Cases	0	1
Neuroinvasive WNV	0	0
WNV Fever	0	1
Human WNV Deaths	0	0
Presumptive Viremic Donors	0	0

<sup>A</sup>454 mosquito pools at 88 different mosquito trapping sites  
 State and National WNV Activity Reports

- [Pennsylvania Department of Health](https://www.health.pa.gov/topics/disease/prevention-and-control/west-nile-virus/Pages/default.aspx)
- [Centers for Disease Control and Prevention](https://www.cdc.gov/westnilevirus/)

### WNV Testing and Reporting Requirements for Human Surveillance in Philadelphia:

- Collect serum and CSF for patients with unexplained encephalitis or meningitis. Absence of detectable antibodies in serum within 8 days does not exclude possible WNV.
- Report suspected and confirmed WNV infections and encephalitis cases to PDPH by telephone at 215-685-6741 during business hours or 215-686-4514 (press 1 for Unified Dispatch and ask for DDC on-call staff) after-hours, or fax at 215-238-6947.

### Advise your patients to:

- Use insect repellent that contains DEET (≥20% to also prevent tick bites) or another [EPA-approved repellent](https://www.epa.gov/pesticide-registration/epa-approved-repellent) and reapply as directed.
- Regularly check and remove standing water outside their home (e.g., unused pools, tires).
- Keep well-fitted screens on windows and doors.
- Report mosquito problems and dead bird sightings to the PDPH Vector Control Program's Mosquito Complaint hotline at 215-685-9000.