

West Virginia Biweekly Vector-Borne Surveillance Report

January 1, 2022 – October 6, 2022

Introduction

The purpose of this report is to share descriptive surveillance data related to vector-borne disease activity with public health partners in West Virginia. All information in this report is considered provisional. For questions or comments, visit <u>oeps.wv.gov/arboviral/pages/default.aspx</u> or contact Eric Dotseth, State Public Health Entomologist, or Kimberly Dailey, Vector-Borne Epidemiologist @ (304) 558-5358, extension 2.

Tick Surveillance

The following areas were West Virginia Tick Surveillance Program sites as of October 6, 2022. Below shows the density/1000 m² of Ixodes scapularis (Blacklegged deer tick) and Amblyomma americanum (Lone Star tick). Ixodes scapularis is the species responsible for the majority of tickborne disease (TBD) in West Virginia, including Lyme disease, anaplasmosis, and babesiosis. Lone star tick is the vector for Spotted Fever Group Rickettsioses (SFGR), ehrlichiosis, Southern Tick Associate Rash Illness (STARI), tularemia, and alpha-gal syndrome. Ixodes scapularis nymphs

Tickborne Disease

Human Surveillance

Through October 6, 2022, 1,030 confirmed and probable cases of TBDs were reported in West Virginia. The majority of cases were Lyme disease cases. Spotted fever group rickettsioses (SFGRs), Ehrlichiosis, and Anaplasmosis cases were also reported.

Table 1. Summary of human cases of tickborne diseases through October 6, 2022.

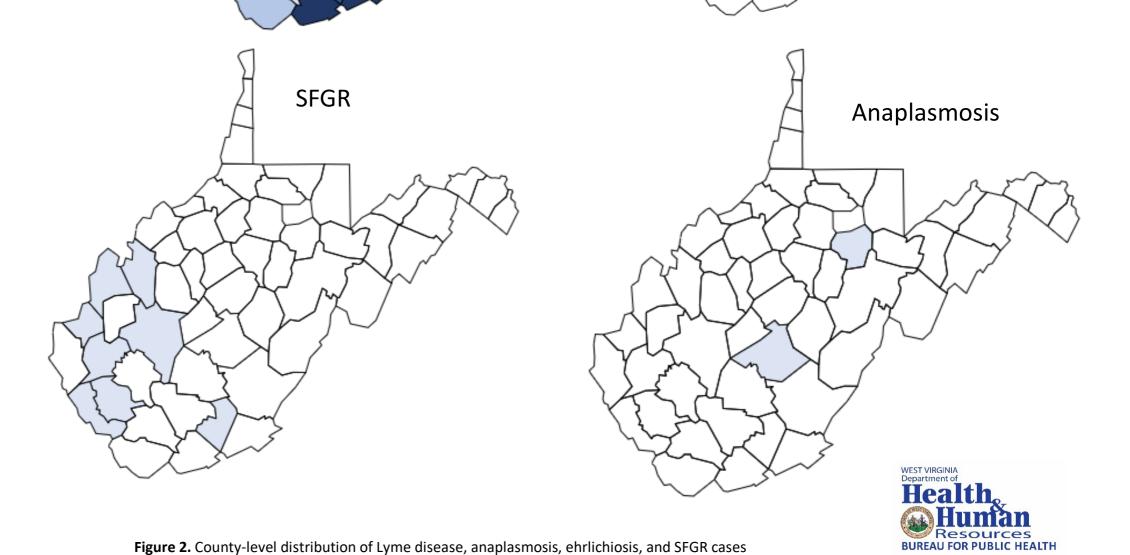
| Spotted Fever Group Rickettsioses (SFGR), ehrlichiosis, Southern Tick Associate Rash | | Tickborne Disease | Cases through 10-6-2022 |
|---|--|---|---|
| Illness (STARI), tularemia, and alpha-gal syndrome. <i>Ixodes scapularis</i> nymphs | Amblyomma americanum nymphs | Lyme Disease | 1,009 |
| o 💥 | 0 | Ehrlichiosis | 9 |
| 0.01-4.00 4.01-8.00 | 0.01-10.00 🕌 | Spotted Fever Rickettsiosis | 8 |
| 8.01-12.00 | 20.01-30.00 ** >30.00 ** | Anaplasmosis | 3 |
| >12.00 | | Q Fever | 1 |
| | | Total | 1,030 |
| | | Table includes only confirmed or probable cases that have been review | ewed and closed by the Vector-borne Disease Epidemiologist. |
| | Lymo | e | Ehrlichiosis |
| Figure 1. Density of <i>Ixodes scapularis</i> and <i>Amblyomma americanum</i> per 1000 m ² | | | |

Distribution of TBD

At County Level

Number of Cases

- Not Reported
- O < 5
- 5-9
- 0 10 19
- 20 29
- >30



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Mosquito Borne Disease

Human Surveillance

Surveillance for these diseases in West Virginia focuses on four endemic mosquito transmitted diseases—La Crosse virus (LAC), West Nile virus (WNV), St. Louis encephalitis virus (SLE), and eastern equine encephalitis virus (EEE) and travel-associated, or imported diseases, such as chikungunya, dengue fever, malaria, and Zika virus (ZIK).

As of **October 6, 2022,** aside from the three travel related Malaria cases earlier this year, there have been no reported human cases of arboviral disease in WV. However, West Nile Virus infection was detected in a horse in Jefferson Co on 8/30.

Table 2. Summary of human cases of mosquito borne diseases through October 6, 2022.

| Mosquito Borne Disease | Cases through 10-6-2022 | |
|---------------------------|-------------------------|--|
| La Crosse encephalitis | 0 | |
| West Nile Virus infection | 0 | |
| Malaria | 3 | |
| Total | 3 | |

Table includes only confirmed or probable cases that have been reviewed and closed by the Vector-borne Disease Epidemiologist.

Mosquito Surveillance

During the period of **January 1** to **October 6**, **2022**, 7 locations in the following 5 counties have served as mosquito surveillance sites and provided sample testing for mosquito borne diseases. As of 10/6, West Nile virus (WNV) was detected in 4 Culex mosquito samples from Parkersburg (collected 8/25 - 8/26) and 1 Culex mosquito sample from MacArthur (collected 8/22 - 8/23).

