

Reported WNV disease cases

To date, 450 human WNV disease cases have been reported from 225 counties in 34 states [Table 1]. Dates of illness onset for cases ranged from March–August [Figure 2].

Of these, 269 (60%) were classified as neuroinvasive disease (such as meningitis or encephalitis) and 181 (40%) were classified as non-neuroinvasive disease [Figure 3].

Presumptive viremic donors (PVDs)

Overall, 91 WNV PVDs have been reported from 27 states [Table 1].

Table 1. West Nile virus infections in humans reported to ArboNET, 2017

State	Human disease cases reported to CDC*			Deaths	Presumptive viremic blood donors
	Neuroinvasive	Non-neuroinvasive	Total		
Alabama	1	0	1	0	0
Arizona	32	5	37	2	7
Arkansas	3	3	6	1	4
California	44	15	59	0	10
Colorado	5	2	7	0	2
Georgia	16	1	17	3	3
Idaho	1	1	2	0	0
Illinois	1	3	4	0	0
Indiana	3	1	4	0	2
Iowa	3	1	4	0	4
Kansas	2	3	5	0	1
Kentucky	3	1	4	0	0
Louisiana	15	5	20	2	1
Michigan	0	0	0	0	5
Minnesota	4	8	12	0	14
Mississippi	33	8	41	2	3
Missouri	6	2	8	0	0
Montana	1	4	5	0	1
Nebraska	7	17	24	0	9
Nevada	9	10	19	1	2
New Mexico	7	0	7	1	1
New York	2	2	4	0	1
North Dakota	10	24	34	0	1
Ohio	1	3	4	0	2
Oklahoma	6	4	10	0	2
Oregon	0	1	1	0	1
Pennsylvania	2	2	4	1	0
South Carolina	3	2	5	0	1
South Dakota	13	22	35	1	2
Tennessee	7	4	11	0	2
Texas	23	25	48	2	6
Virginia	4	0	4	0	0
Washington	0	1	1	0	1
Wisconsin	2	0	2	0	3
Wyoming	0	1	1	0	0
Totals	269	181	450	16	91

*Includes confirmed and probable cases



Figure 2. West Nile virus disease cases reported to ArboNET, by month of onset — United States, 2017 (As of August 29, 2017)

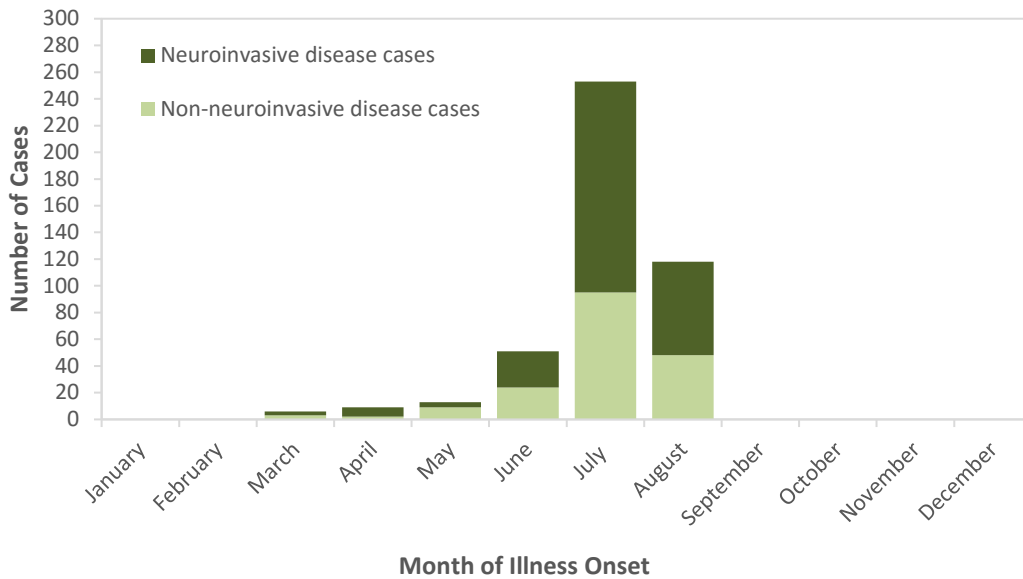
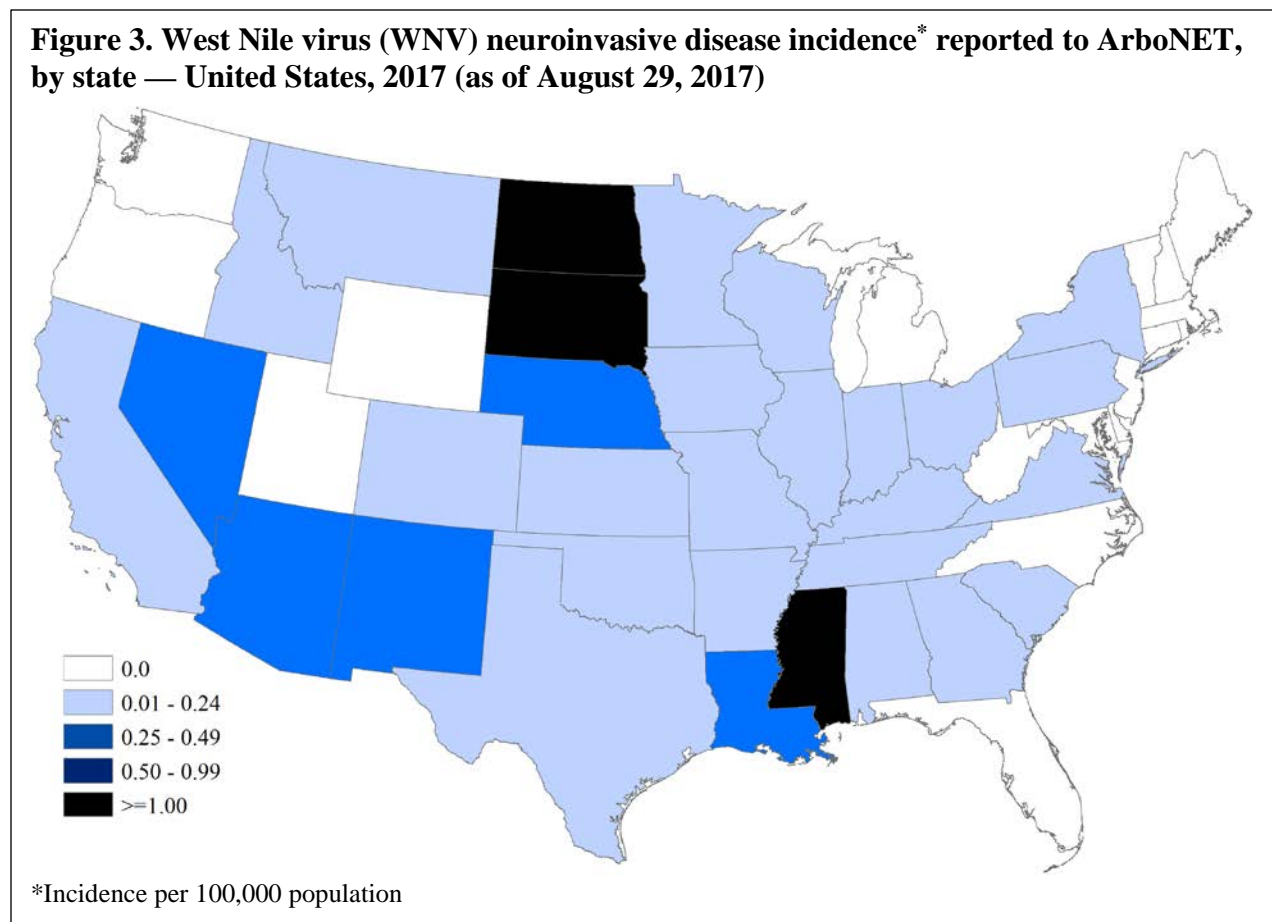


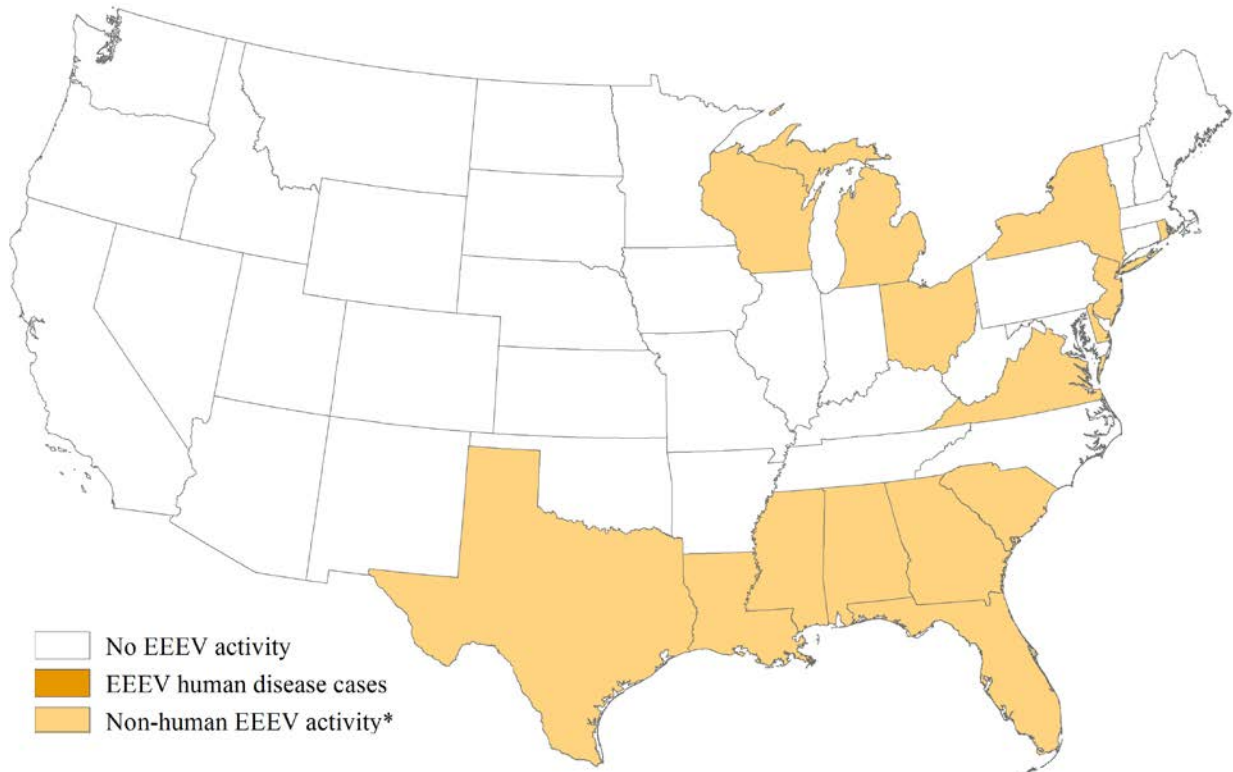
Figure 3. West Nile virus (WNV) neuroinvasive disease incidence* reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)



Eastern equine encephalitis virus (EEEV) activity in 2017

As of August 29th, 35 counties in 15 states reported EEEV activity in non-human species to ArboNET for 2017 [Figure 4]. To date, no human cases of EEEV disease have been reported.

Figure 4. Eastern equine encephalitis virus (EEEV) activity reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)



*EEEV veterinary disease cases, or infections in mosquitoes, birds, or sentinel animals

Jamestown Canyon virus (JCV) activity in 2017

As of August 29th, 20 counties in five states have reported human cases of JCV disease to ArboNET for 2017 [Figure 5 and Table 2]. Seven counties in Connecticut reported JCV activity in non-human species only.

Figure 5. Jamestown Canyon virus (JCV) activity reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)

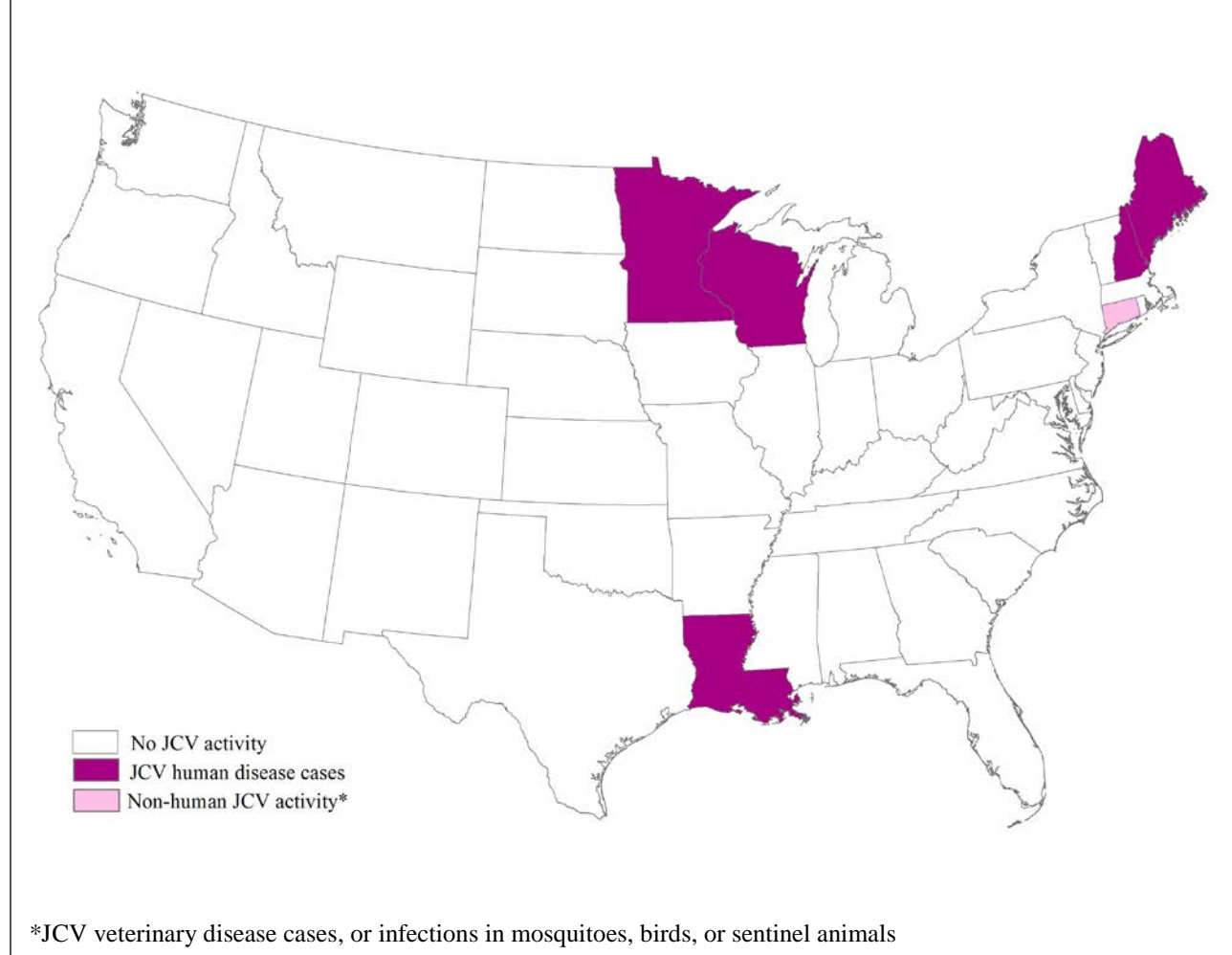


Table 2. Jamestown canyon virus human disease cases reported to ArboNET, United States, 2017

	Neuroinvasive disease cases	Non-neuroinvasive disease cases	Total cases*	Deaths
Louisiana	1	0	1	0
Maine	1	1	2	0
Minnesota	6	4	10	0
New Hampshire	0	1	1	0
Wisconsin	4	4	8	0
Totals	12	10	22	0

*Includes confirmed and probable cases.

La Crosse encephalitis virus (LACV) activity in 2017

As of August 29th, 15 counties in three states have reported human cases of LACV disease to ArboNET for 2017 [Figure 6 and Table 3].

Figure 6. La Crosse encephalitis virus (LACV) activity reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)

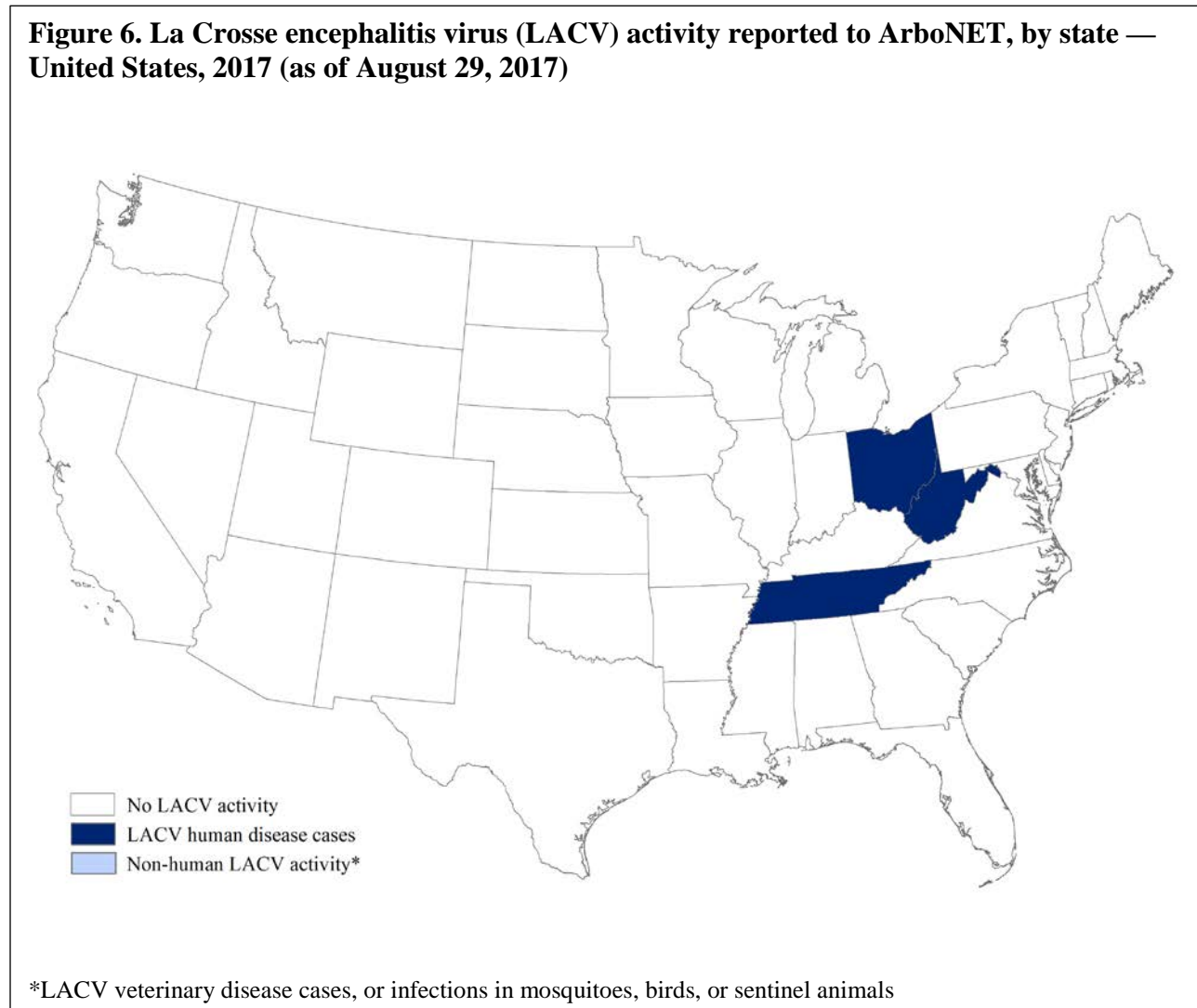


Table 3. La Crosse encephalitis virus human disease cases reported to ArboNET, United States, 2017

	Neuroinvasive disease cases	Non-neuroinvasive disease cases	Total cases*	Deaths
Ohio	7	0	7	0
Tennessee	9	0	9	0
West Virginia	2	0	2	0
Totals	18	0	18	0

*Includes confirmed and probable cases.

Powassan virus (POWV) activity in 2017

As of August 29th, 12 counties in nine states have reported human cases of POWV disease to ArboNET for 2017 [Figure 7 and Table 4].

Figure 7. Powassan virus (POWV) activity reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)

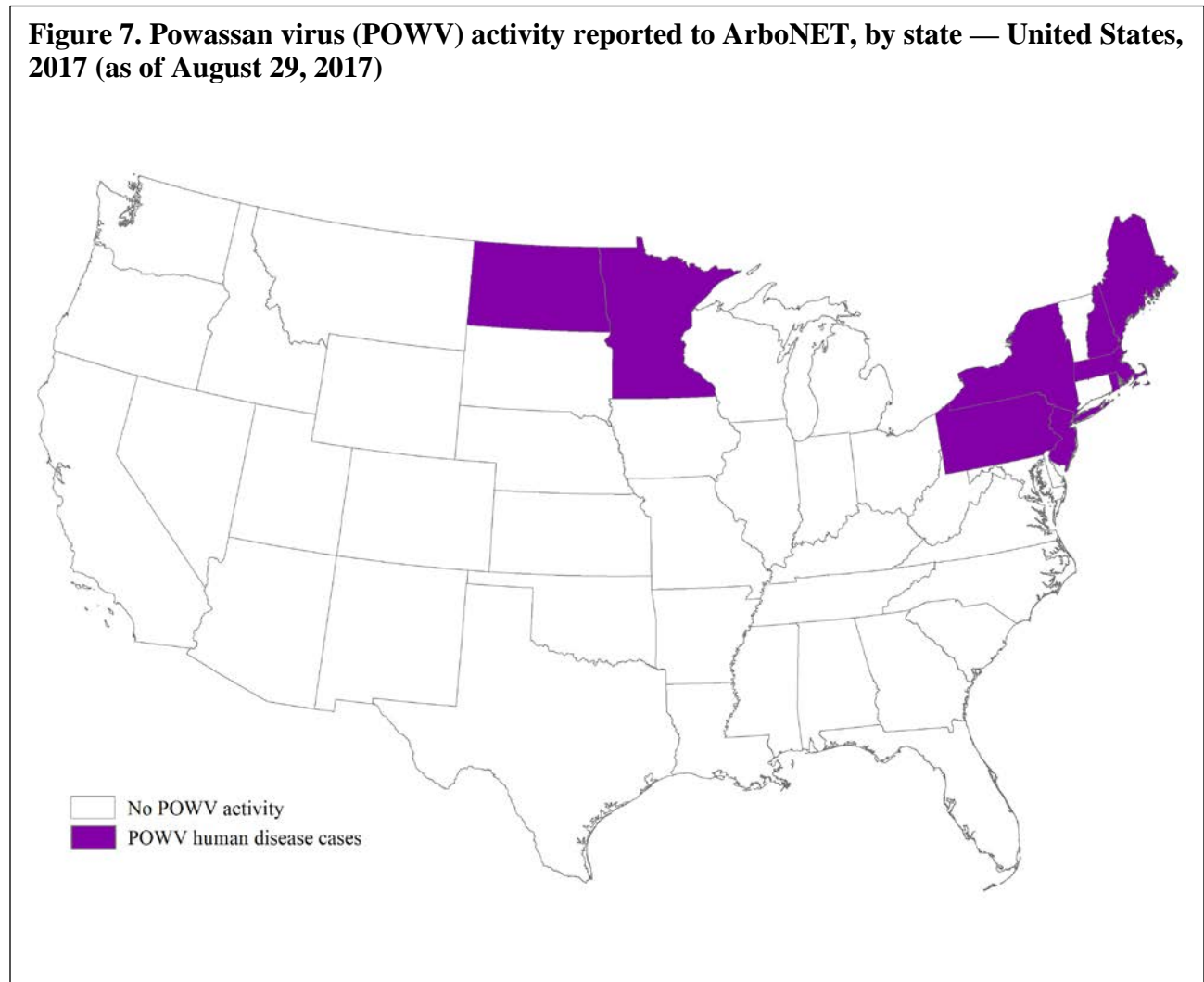


Table 4. Powassan virus human disease cases reported to ArboNET, United States, 2017

	Neuroinvasive disease cases	Non-neuroinvasive disease cases	Total cases*	Deaths
Maine	3	0	3	0
Massachusetts	1	0	1	0
Minnesota	5	1	6	0
New Hampshire	1	0	1	0
New Jersey	1	0	1	0
New York	2	1	3	1
North Dakota	1	0	1	0
Pennsylvania	1	0	1	0
Rhode Island	1	0	1	1
Totals	16	2	18	2

*Includes confirmed and probable cases.

St. Louis encephalitis virus (SLEV) activity in 2017

As of August 29th, two counties in Arizona have reported human cases of SLEV disease to ArboNET for 2017 [Figure 8 and Table 5]. Additionally, 18 counties in five other states reported SLEV activity in non-human species only.

Figure 8. St. Louis encephalitis virus (SLEV) activity reported to ArboNET, by state — United States, 2017 (as of August 29, 2017)

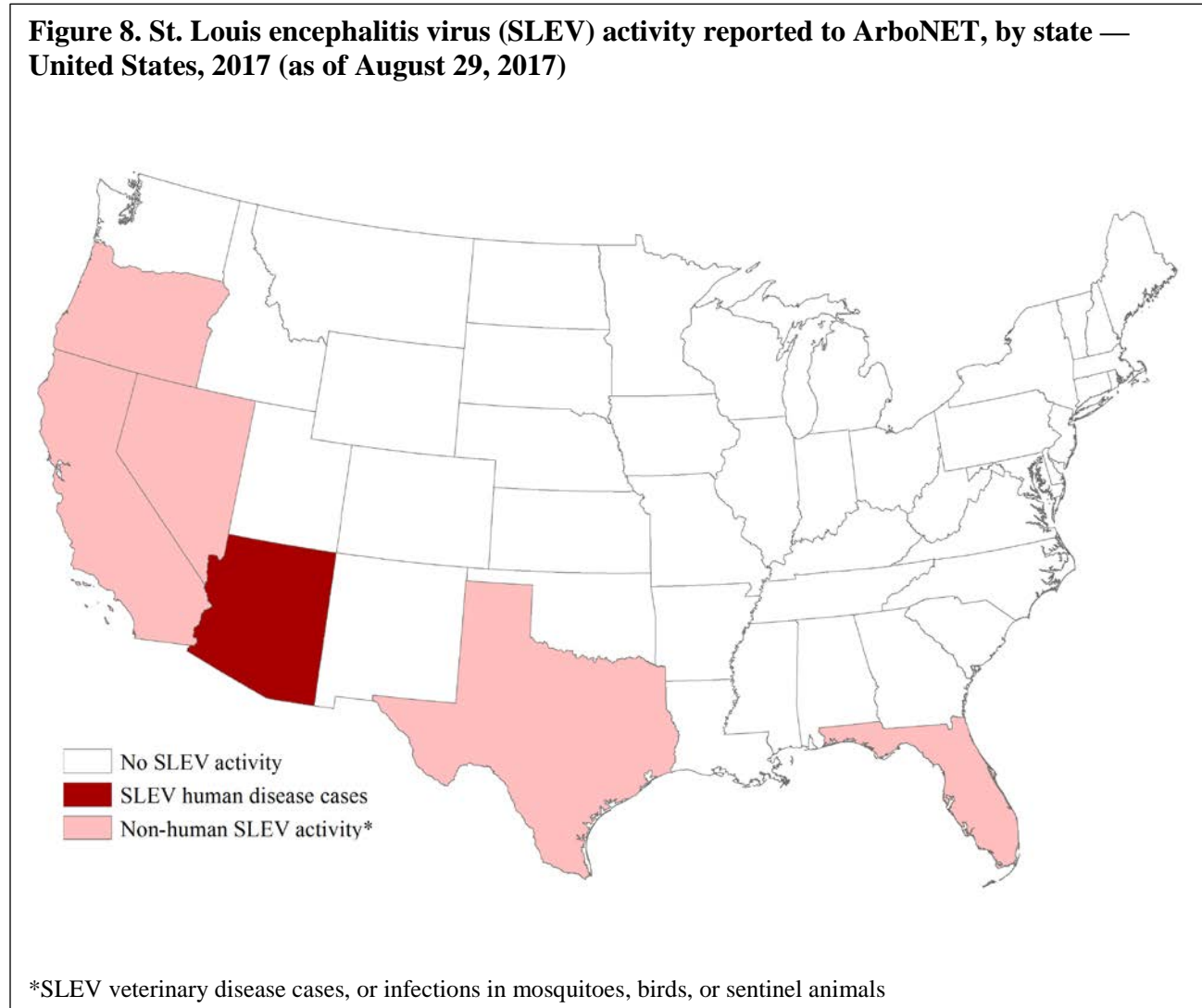


Table 5. St. Louis encephalitis virus human disease cases reported to ArboNET, United States, 2017

	Neuroinvasive disease cases	Non-neuroinvasive disease cases	Total cases*	Deaths
Arizona	1	1	2	0
Totals	1	1	2	0

*Includes confirmed and probable cases.



About ArboNET

ArboNET is a national arboviral surveillance system managed by CDC and state health departments. In addition to human disease, ArboNET maintains data on arboviral infections among presumptive viremic blood donors (PVDs), veterinary disease cases, mosquitoes, dead birds, and sentinel animals. As with other national surveillance data, ArboNET data has several limitations that should be considered in analysis, interpretation, and reporting [**Box**].

Box: Limitations of ArboNET data

The following should be considered in the analysis, interpretation, and reporting of ArboNET data:

1. ArboNET is a passive surveillance system. It is dependent on clinicians considering the diagnosis of an arboviral disease and obtaining the appropriate diagnostic test, and reporting of laboratory-confirmed cases to public health authorities. Diagnosis and reporting are incomplete, and the incidence of arboviral diseases is underestimated.
2. Reported neuroinvasive disease cases are considered the most accurate indicator of arboviral activity in humans because of the substantial associated morbidity. In contrast, reported cases of nonneuroinvasive arboviral disease are more likely to be affected by disease awareness and healthcare-seeking behavior in different communities and by the availability and specificity of laboratory tests performed. Surveillance data for nonneuroinvasive disease should be interpreted with caution and generally should not be used to make comparisons between geographic areas or over time.

Additional resources

For additional arboviral disease information and data, please visit the following websites:

- CDC's Division of Vector-Borne Diseases:
<http://www.cdc.gov/ncezid/dvbd/>
- National Notifiable Diseases Surveillance System:
<http://wwwn.cdc.gov/nndss/conditions/arboviral-diseases-neuroinvasive-and-non-neuroinvasive/case-definition/2015/>
- U.S. Geological Survey (USGS):
<http://diseasemaps.usgs.gov/mapviewer/>
- AABB (American Association of Blood Banks):
www.aabb.org/programs/biovigilance/Pages/wnv.aspx