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Kansas Insect Newsletter

For Agribusinesses, Applicators, Consultants, and Extension Personnel

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REPORTING OF HUMAN CASES OF WEST NILE VIRUS IN KANSAS:

Physicians, veterinarians, and general public are wondering about how the human cases of West Nile virus (WNV) are reported.

This is a complex issue because of the differences in testing procedures between labs, and the broad reporting guidelines issued by the Centers for Disease Control and Prevention (CDC).

Kansas Department of Health and Environment (KDHE) only counts and reports cases of severe West Nile Virus disease (i.e., meningitis or encephalitis). These cases have to be confirmed through the state laboratory or the CDC. For each confirmed severe case, it is likely that there are many other people infected who experience mild symptoms.

KDHE has been collecting information and processing laboratory specimens from individuals with **signs of meningitis or encephalitis**. These are usually very sick individuals who may benefit from receiving a definite diagnosis of West Nile Virus, since this information can guide the attending physicians to make important decisions about treatment. West Nile Virus infection can cause a variety of symptoms. Most people who are infected never become sick, and of those who are sick, only a few develop a severe disease that involves the central nervous system (i.e., meningitis or encephalitis).

In 2002, KDHE sent samples to CDC for any Kansan who experienced symptoms of West Nile Virus meningitis or West Nile Virus encephalitis, and they reported those cases to the public, recognizing there were other cases that could not be confirmed for a number of reasons including such mild symptoms that the cases were not reported to KDHE, or the need for additional testing had passed because the person was now healthy.

This year, KDHE reports human cases the same way as they did last year. The only difference from 2002 to 2003 is that KDHE is conducting the testing on human specimens at the state laboratory. At the same time, more testing is underway throughout the state in private laboratories. Tests available through commercial laboratories, while

helpful for the clinical management of individual patients, are not as accurate and standardized as those available at state public health laboratories and at the CDC. For this reason, **KDHE does not add private lab results to our state confirmed case list unless the tests are done on patients with meningitis or encephalitis and can be confirmed in the state laboratory.**

Kansans should take precautions regardless of whether or not there is a confirmed case in their community. The virus is likely in all parts of the state, or could be on any given day, as mosquitos and birds migrate to new areas.

For additional information on WNV, mosquitoes, and personal protection visit:

<http://www.oznet.ksu.edu/westnilevirus/>

The latest news release from K-State can be found at:

http://www.oznet.ksu.edu/news/sty/2003/westnile_sept.htm

Ludek Zurek

Insect Diagnostic Laboratory Weekly Report:

The following samples were submitted to the Insect Diagnostic Laboratory for the week of September 8 through September 12, 2003:

9-8-2003, Labette County: Bloodsucking Conenose in home.
9-8-2003, Reno County: Termites in home.
9-8-2003, Washington County: Tapeworm in bird bath.
9-9-2003, Sedgwick County: Fly puparia in home.
9-10-2003, Harvey County: Winged Ants in garden mulch.
9-11-2003, Cheyenne County: Wolf Spider in home.
9-11-2003, Bourbon County: Odd Beetle in building.
9-12-2003, Lyon County: Minute Pirate Bugs on porch.
9-12-2003, Ford County: Gall Mite damage to Walnut.
9-12-2003, Clay County: Orb Web Weaving spider from yard.
9-12-2003, Shawnee County: Pine Sawyer Beetle from fallen trees.

If there are any questions regarding these samples or about the identification of any arthropod please contact the Insect Diagnostician (Bobby Brown) at 785-532-6154 or at bbrown@oznet.ksu.edu .

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Sincerely,

Ludek Zurek
Medical and Veterinary Entomologist

Bobby Brown
Entomology Diagnostician

