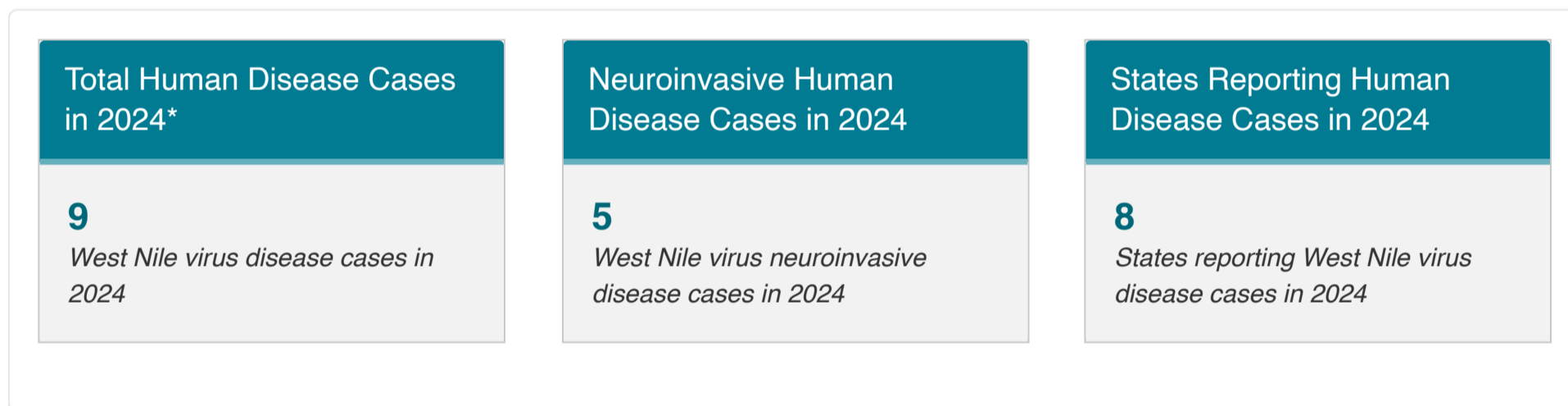## CDC West Nile Virus

JUNE 25, 2024

Current Year Data (2024)

KEY POINTS

- ArboNET is a national arboviral surveillance system managed by CDC and state health departments.

- These data are preliminary and subject to change.

- Current season data are updated every one to two weeks during June through December.

- Due to delays in reporting, state, territorial, and local health departments may have more up-to-date information than what is presented here.


View the data for West Nile

Data are current as of _June 25, 2024_.

Total Human Disease Cases in 2024*	Neuroinvasive Human Disease Cases in 2024	States Reporting Human Disease Cases in 2024
9	**5**	**8**
West Nile virus disease cases in 2024	_West Nile virus neuroinvasive disease cases in 2024_	_States reporting West Nile virus disease cases in 2024_

*Total human disease cases includes neuroinvasive and non-neuroinvasive disease cases.

West Nile virus human disease cases reported by state of residence, 2024
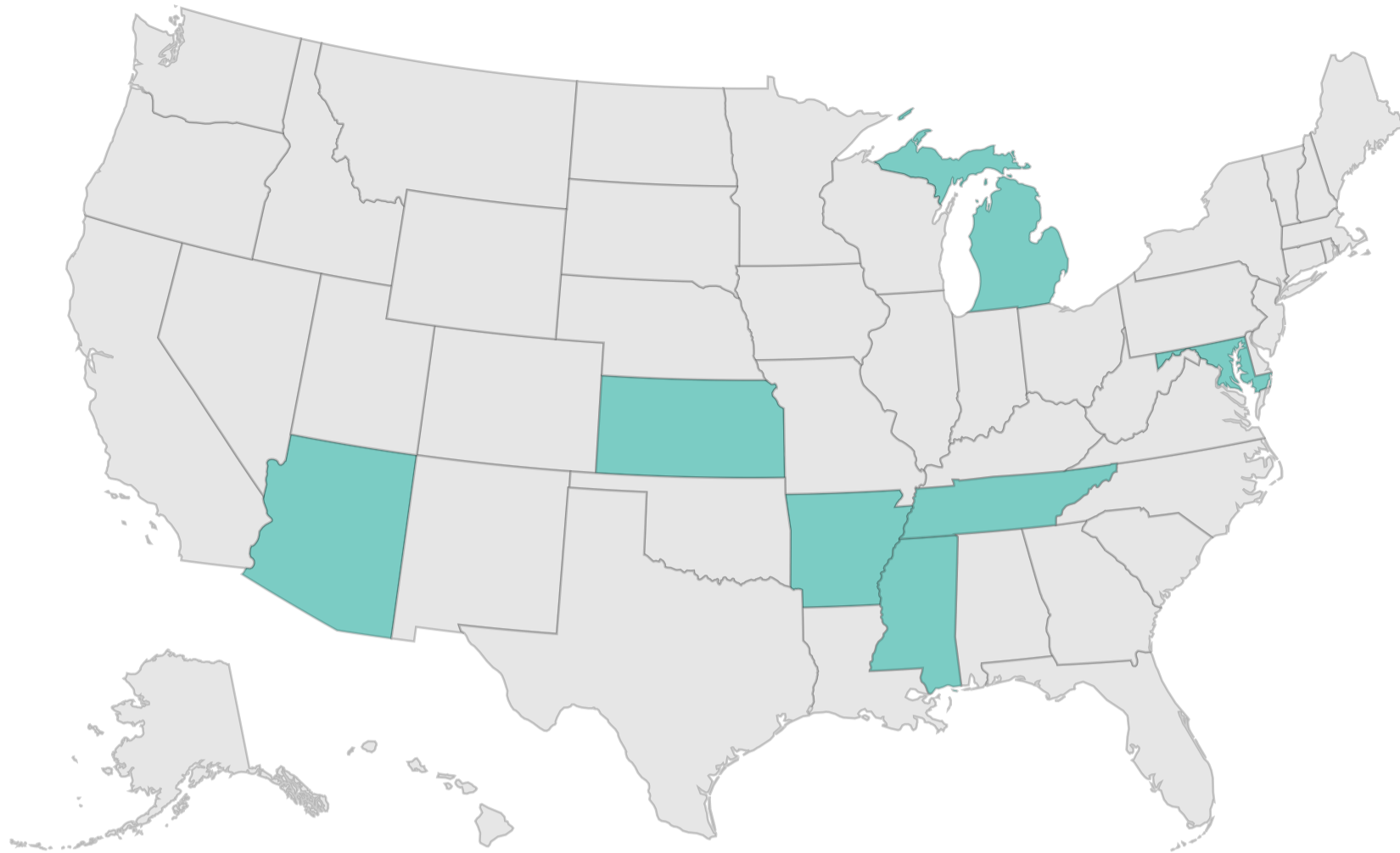
1 to 5　　6 to 8　　9 to 25　　>25

Data Table - West Nile virus human disease cases reported by state of residence, 2024	−

State	Reported Disease Cases
Arizona	1
Arkansas	1
Kansas	2
Maryland	1
Michigan	1
Mississippi	1
Tennessee	2

West Nile virus human and non-human activity by county of residence, 2024*

View the total number of human infections reported by county by hovering over the shaded counties below
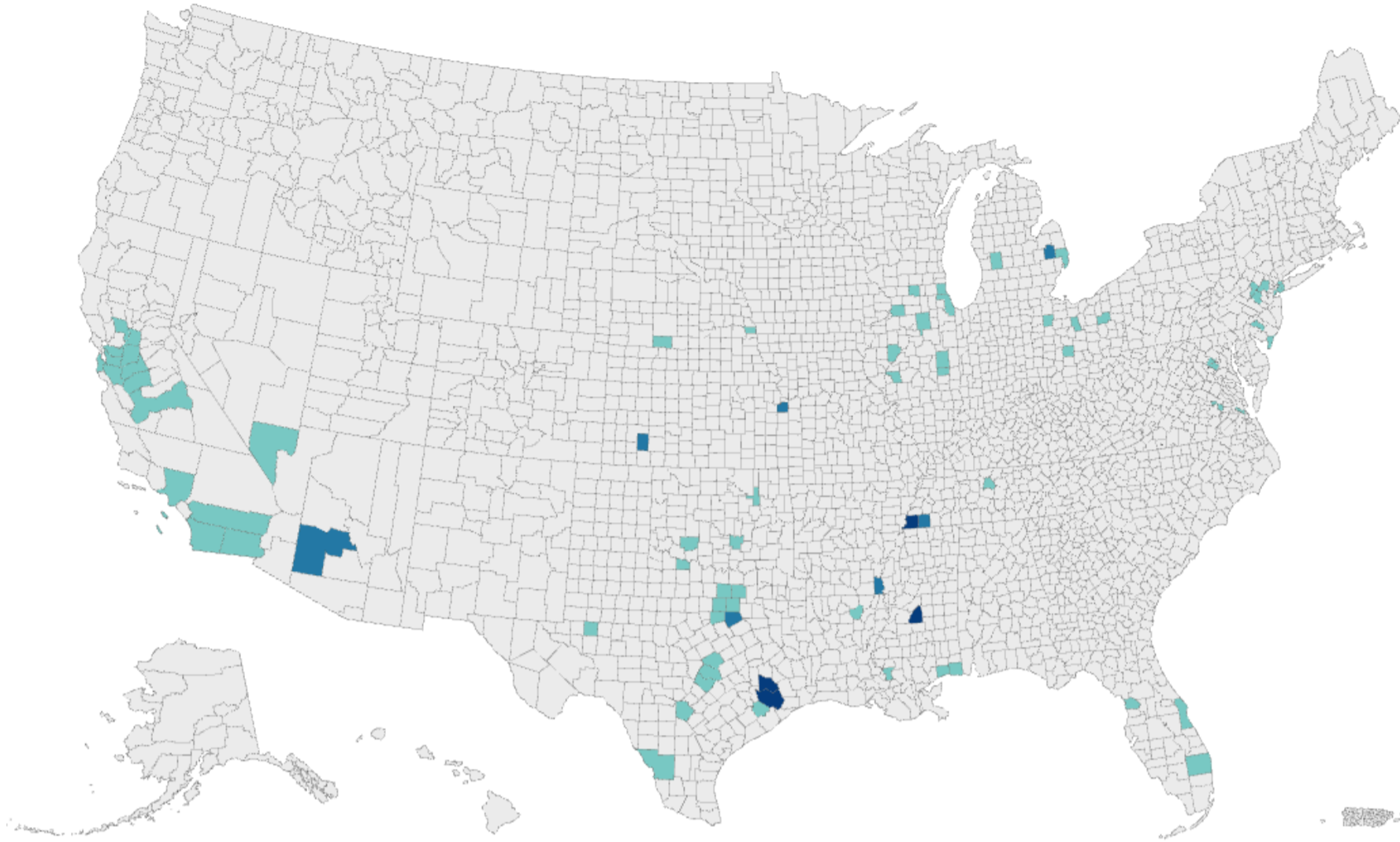
○ Non-human activity ● Human infections ● Human infections and non-human activity

Maryland reports state level data only; South Carolina reports state level data only for human infections

About this map:
Non-human activity: *Indicates that veterinary disease cases or infections in mosquitoes, birds, or sentinel animals have been reported to CDC.*
Human infections: *Indicates that human disease cases or infections in blood donors have been reported to CDC.*
Human infections and non-human activity: *Indicates that both human infections and non-human infections have been reported to CDC.*

[Download Data (CSV)](#)

Data Table - West Nile virus human and non-human activity by county of residence, 2024* ⊟

State, County ▲	Activity	Total human disease cases	Neuroinvasive disease cases	**Presumptive viremic blood donors
● AZ, Maricopa	Human infections	1	1	0
● AR, Chicot	Human infections	1	0	0
○ CA, Alameda	Non-human activity	0	0	0
○ CA, Contra Costa	Non-human activity	0	0	0
○ CA, Fresno	Non-human activity	0	0	0
○ CA, Imperial	Non-human activity	0	0	0
○ CA, Los Angeles	Non-human activity	0	0	0
○ CA, Merced	Non-human activity	0	0	0
○ CA, Riverside	Non-human activity	0	0	0
○ CA, Sacramento	Non-human activity	0	0	0
○ CA, San Diego	Non-human activity	0	0	0
○ CA, San Joaquin	Non-human activity	0	0	0
○ CA, San Mateo	Non-human activity	0	0	0
○ CA, Santa Clara	Non-human activity	0	0	0
○ CA, Stanislaus	Non-human activity	0	0	0
○ CA, Yolo	Non-human activity	0	0	0
○ FL, Brevard	Non-human activity	0	0	0
○ FL, Citrus	Non-human activity	0	0	0
○ FL, Palm Beach	Non-human activity	0	0	0
○ IL, Champaign	Non-human activity	0	0	0
○ IL, Cook	Non-human activity	0	0	0
○ IL, Douglas	Non-human activity	0	0	0
○ IL, Fulton	Non-human activity	0	0	0
○ IL, Lake	Non-human activity	0	0	0
○ IL, La Salle	Non-human activity	0	0	0
○ IL, Morgan	Non-human activity	0	0	0
○ IL, Whiteside	Non-human activity	0	0	0
○ IL, Winnebago	Non-human activity	0	0	0
● KS, Gray	Human infections	1	0	0
● KS, Johnson	Human infections	1	1	0
○ LA, East Baton Rouge Parish	Non-human activity	0	0	0
○ LA, Ouachita Parish	Non-human activity	0	0	0
○ MI, Kent	Non-human activity	0	0	0
● MI, Lapeer	Human infections	1	1	0

State, County ▲	Activity	Total human disease cases	Neuroinvasive disease cases	**Presumptive viremic blood donors
MI, St Clair	Non-human activity	0	0	0
MS, Harrison	Non-human activity	0	0	0
MS, Jackson	Non-human activity	0	0	0
MS, Rankin	Human infections and non-human activity	1	0	0
NE, Dawson	Non-human activity	0	0	0
NE, Douglas	Non-human activity	0	0	0
NV, Clark	Non-human activity	0	0	0
NJ, Cape May	Non-human activity	0	0	0
NJ, Gloucester	Non-human activity	0	0	0
NJ, Hunterdon	Non-human activity	0	0	0
NJ, Morris	Non-human activity	0	0	0
NJ, Warren	Non-human activity	0	0	0
NY, Bronx	Non-human activity	0	0	0
NY, Kings	Non-human activity	0	0	0
NY, Queens	Non-human activity	0	0	0
NY, Richmond	Non-human activity	0	0	0
OH, Franklin	Non-human activity	0	0	0
OH, Hancock	Non-human activity	0	0	0
OH, Richland	Non-human activity	0	0	0
OH, Stark	Non-human activity	0	0	0
OK, Comanche	Non-human activity	0	0	0
OK, Pontotoc	Non-human activity	0	0	0
OK, Tulsa	Non-human activity	0	0	0
TN, Davidson	Non-human activity	0	0	0
TN, Fayette	Human infections	1	0	0
TN, Shelby	Human infections and non-human activity	1	1	0
TX, Bell	Non-human activity	0	0	0
TX, Bexar	Non-human activity	0	0	0
TX, Collin	Non-human activity	0	0	0
TX, Dallas	Non-human activity	0	0	0
TX, Denton	Non-human activity	0	0	0
TX, Ellis	Human infections	0	0	1
TX, Fort Bend	Non-human activity	0	0	0
TX, Harris	Human infections and non-human activity	0	0	2
TX, Johnson	Non-human activity	0	0	0
TX, Midland	Non-human activity	0	0	0
TX, Montgomery	Human infections and non-human activity	0	0	5
TX, Tarrant	Non-human activity	0	0	0
TX, Travis	Non-human activity	0	0	0
TX, Webb	Non-human activity	0	0	0
TX, Wichita	Non-human activity	0	0	0
TX, Williamson	Non-human activity	0	0	0
VA, Fairfax	Non-human activity	0	0	0
VA, Henrico	Non-human activity	0	0	0
VA, York	Non-human activity	0	0	0
VA, Falls Church City	Non-human activity	0	0	0

**Presumptive viremic blood donors (PVD) are people who had no symptoms at the time of donating blood through a blood collection agency, but whose blood tested positive when screened for the presence of West Nile virus. Some PVDs develop symptoms after donation.

Limitations of ArboNET data

Surveillance data have several limitations that should be considered when using and interpreting the data.

1. Under-reporting is a limitation common to all surveillance systems that rely on healthcare providers to consider the disease as a possible diagnosis in a patient, obtain the appropriate laboratory test, and report confirmed to public health authorities.

2. Cases of mild illness (non-neuroinvasive disease) are more likely to be underreported compared to more severe disease (neuroinvasive) cases. The degree of underreporting varies by disease awareness and healthcare-seeking behavior in any area. Surveillance data for non-neuroinvasive disease should not be used to make comparisons of disease activity between different locations or over time.

3. Surveillance data are reported by county of residence, not the location (county or state) of exposure.

4. Non-human surveillance is conducted variably across the country. Absence of non-human activity reported to CDC should not be interpreted as no risk.

5. There is a lag in case reporting to CDC and states and territories may publish surveillance data on different schedules than CDC.

SOURCES

CONTENT SOURCE:
National Center for Emerging and Zoonotic Infectious Diseases (NCEZID)