Date: October 5, 2017
To: Health Care Providers
From: Alvaro Garza, MD, MPH, Health Officer

Health Advisory
Coccidioidomycosis in San Joaquin County

The number of reported cases of Coccidioidomycosis (Valley Fever or Cocci) in San Joaquin County tripled between 2013 and 2016, and this trend seems to be continuing. In 2017, 128 cases have been reported through October 4, 2017.

ACTIONS REQUESTED OF CLINICIANS:

**Suspect:** cocci if a patient presents with symptoms similar to the flu, including fatigue, cough, fever, shortness of breath, headache, night sweats, muscle aches or joint pain, rash on upper body or legs, and or pneumonia.

**Test:** for IgM and IgG antibodies. Other methods include culture and microscopy.

**Treat:** for many people, symptoms will resolve within a few months without treatment. Healthcare providers prescribe antifungal medication for some people to try to reduce the severity of symptoms or prevent the infection from getting worse. Antifungal medication is typically given to people who are at higher risk for developing severe disease (see below).

**Prevent:** to decrease the risk of infection, advise persons who live, work or travel in cocci endemic areas, especially those at increased risk for disseminated disease (below), to limit their exposure to outdoor dust as much as possible, including staying inside and keeping windows and doors closed when it is windy and the air is dusty.

**Report:** suspected cases to PHS Communicable Disease Program, phone 209.468.3822, fax 209.468.8222.
Background:

Coccidioidomycosis (Valley Fever) results from directly inhaling spores of the dimorphic fungus Coccidioides spp. (Coccidioides immitis and Coccidioides posadasii) from soil or airborne dust.

Coccidioidomycosis is not transmitted directly from person to person. Although Coccidioides grows in localized areas of the southwest United States, the southern San Joaquin Valley and Central Coast are the major endemic regions in California.

Of those infected with coccidioidomycosis, approximately 60 percent may be asymptomatic. Following an incubation period of 1 to 3 weeks, clinical manifestations occur in 40 percent of infected persons and range from influenza-like illness, such as cough, fever, or difficulty breathing, to severe pneumonia, and rarely, disseminated disease.

Disseminated infection, which can be fatal, most commonly involves skin and soft tissues, bones, and the central nervous system. Persons at increased risk for severe disease include African Americans, Filipinos, Latinos, pregnant women, adults of older age groups, and people with weakened immune systems.

Additional Information:

CA Department of Public Health:


https://cdph.ca.gov/Programs/CID/DCDC/Pages/Coccidioidomycosis.aspx

CDC:

https://www.cdc.gov/fungal/diseases/coccidioidomycosis/index.html