WEST NILE VIRUS
SAFETY TIPS

FACTS
• The West Nile virus causes inflammation in the brain which can be fatal if not treated.
• Migrating birds spread the virus to mosquitoes which in turn spread the virus to livestock, poultry, and humans.
• The West Nile virus cannot be transmitted directly from person to person, animal to animal, or from animal to person.
• Proper cooking kills the virus, so there is no danger associated with eating thoroughly cooked wild game that might be infected.
• In the United States during the year 2006, a total of 4,269 human cases of West Nile virus were reported; 177 of these cases resulted in fatalities.
• By the end of 2006, there were 215 cases reported in Illinois, the sixth highest in the nation; of these cases, 10 were fatal.
• Less than one percent of mosquitoes in an infected area actually carry the virus.
• Twenty percent of those who become infected will show only mild symptoms.
• One in 150 persons infected will develop a more severe form of the disease; of those who develop severe illness, fatality rates range from three to fifteen percent.
• In areas where West Nile virus has been identified, everyone is at risk for contracting the virus. Those most at risk for developing more severe symptoms if infected include persons over 50 years of age and individuals whose immune systems may be compromised (HIV, cancer patients, critically ill, etc.).

PREVENTION
• The best way to prevent infection is to prevent mosquito bites by keeping them away.
• Use mosquito repellant containing 25 to 35 percent DEET when you are outside.
• Remove all stagnant water, including ponds, wading pools, tires, and birdbaths as these sites become primary breeding grounds for mosquitoes.

WARNING SIGNS AND TREATMENT
• Most people will develop no symptoms or only slight flu-like symptoms that will resolve on their own.
• Signs typically occur three to 15 days after infection.
• Signs may include high fever, disorientation, muscle weakness, headaches,
body aches, rash, and paralysis.
A blood sample is sent to the state lab from an individual suspected of infection.

- There is no cure or specific treatment regimen established and most cases are mild and patients recover without excessive medical intervention. However, severe cases require hospitalization and careful monitoring.
- There is currently no vaccine available, although scientists working on the issue have hope that one will be available in the next few years.

REFERENCES
<http://www.cdc.gov/ncidod/dvbid/westnile/surv&controlCaseCount06_detailed.htm>

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