Fungal pneumonia: a silent epidemic
Coccidioidomycosis (valley fever)

Along with the rise in infection rates, suffering and deaths, costs are rising, too. And we are all paying for that.

~The Bakersfield Californian, September 26, 2012

Coccidioidomycosis, a fungal disease called “cocci” or “valley fever,” is a major cause of community-acquired pneumonia in California and the southwestern US.

**From soil to lungs**

Valley fever is an illness caused by the fungus *Coccidioides*, which lives in soil. People can become infected by inhaling fungal spores. This can cause flu-like symptoms that may last from weeks to months.

Valley fever occurs in people who live in or have traveled to areas where *Coccidioides* is endemic, or native and common in the environment. It is found most often in the southwestern United States (especially Arizona and California) and parts of Mexico, Central America, and South America.

**A costly problem**

- In 2011, more than 20,000 cases were reported in the US, twice as many cases as tuberculosis.
- Nearly 75% of people who get valley fever miss work or school due to their illness, for a median of two weeks.²
- More than 40% of people who get valley fever need to be hospitalized. The average cost of a hospital stay for valley fever is almost $50,000.²

An estimated 150,000 more cases go undiagnosed every year. More than 70% of cases occur in Arizona and 25% occur in California.¹

National Center for Emerging & Zoonotic Infectious Diseases
Division of Foodborne, Waterborne, and Environmental Diseases

http://www.cdc.gov/fungal/
Snapshot of California’s experience with valley fever

- In Ventura County after the Northridge earthquake (1994): 203 cases including 3 deaths. Most cases occurred in the town of Simi Valley
- In Lost Hills (Kern County), among persons attending the World Championship of Model Airplane Flying from 30 countries (2001): at least 7 persons developed valley fever after attending this event
- At the Taft Correctional Facility (Kern County), 88 cases were identified from 2003-04
- In 2011 (last full year of data), 5697 cases were reported to public health from California

People at risk

Anyone can get valley fever by inhaling airborne spores in endemic areas. It is most common among older adults, particularly those ages 60 and older, but more young people are getting the disease. Valley fever cannot spread from person to person.

Some groups of people, including military personnel, US-Mexico border patrol agents, prison inmates, archaeologists, or construction workers have high levels of exposure to dusty environments where Coccidioides is common. Some groups of people are at increased risk for developing more severe forms of valley fever, including African Americans, Asians, women in their third trimester of pregnancy, and people with weak immune systems.

What is CDC doing?

- Supporting states in endemic areas to track and better understand the impact of valley fever on local communities
- Monitoring the epidemiology of valley fever to understand national trends in disease
- Serving as a reference laboratory and providing training in laboratory diagnosis

What else can be done?

- Increase capability to track illnesses throughout the US and throughout the western hemisphere in areas where valley fever is endemic
- Further research into ways to reduce the severity or duration of illness, including early diagnosis and antifungal treatment
- Expand awareness of valley fever among healthcare providers and the general public in order to minimize delays in diagnosis and treatment
- Support ongoing research into vaccine development

For more information, please contact the Centers for Disease Control and Prevention (CDC), National Center for Emerging and Zoonotic Infectious Diseases Division of Foodborne, Waterborne, and Environmental Diseases 1600 Clifton Road, NE, Mail Stop C-09, Atlanta, GA 30329-4018 Telephone: 800-CDC-INFO (232-4636) • E-mail: cdcinfo@cdc.gov • Web: http://www.cdc.gov/fungal/

References