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## West Nile Virus Frequently Asked Questions- Medical July 2007

### **What are the signs and symptoms of West Nile Virus infection?**

Most infections (8 out of 10) have no symptoms at all. Most of the rest are mild, with symptoms including fever, headache, and body aches, occasionally with skin rash and swollen lymph glands. More severe symptoms (seen in about 1 in 150 infections) include high fever, neck stiffness, altered consciousness, coma, tremors, convulsions, muscle weakness, paralysis, and rarely, death.

### **How is West Nile Virus infection treated?**

There is no specific treatment for West Nile Virus. Supportive care for comfort and to prevent dehydration is used. There are clinical trials of antiviral agents going on in the US and around the world.

### **What is the incubation period (time from exposure to illness) in humans for West Nile encephalitis?**

Usually 3 to 14 days.

### **How long do symptoms last?**

Symptoms of mild disease will generally last a few days. Symptoms of severe disease may last several weeks, and some patients have not had full recovery after more than a year.

### **I think I have symptoms of West Nile Virus. What should I do?**

Contact your health care provider if you have concerns about your health. If you or your family members develop symptoms such as high fever, confusion, muscle weakness, and severe headaches, you should see your doctor immediately.

### **How do health care providers test for West Nile Virus?**

Your physician will first take a medical history to assess your risk for West Nile Virus. People who live in or traveled to areas where West Nile Virus activity has been identified are at risk of getting West Nile encephalitis; persons older than 50 years of age have the highest risk of severe disease. If you are determined to be at high risk **and** have symptoms of West Nile Encephalitis, your provider will draw a blood sample and send it to a laboratory for confirmation.

### **Can I get infected with West Nile Virus by caring for an infected horse?**

Infected mosquitoes transmit West Nile Virus. Currently, the only documented evidence of person-to-person transmission of West Nile Virus is through blood transfusion, organ transplantation and breast feeding. There has been no evidence of animal-to-person transmission of West Nile Virus. Normal infection control precautions should be followed when caring for a horse suspected to have this or any other viral infection.

**Is there a vaccine against West Nile Virus for humans?**

Currently, there is no vaccine available to humans. Work is proceeding on a human vaccine, but vaccine development, testing and approval are expected to take several years.

**I hear a lot about mosquito repellent with DEET. Is DEET safe?**

Yes, products that contain DEET are very safe when they are used according to the directions on the container. There are some things to remember when using mosquito repellent. These include:

- Use enough repellent to cover exposed skin or clothing, but do not apply the repellent to skin that is covered by clothing.
- Do not apply repellent to cuts, wounds, or irritated skin.
- After you return inside, wash the skin that was sprayed with repellent with soap and water.
- Do not spray aerosol or pump products in enclosed areas.
- Do not apply aerosol or pump products directly to your face. Spray your hands and then rub them carefully over the face, avoiding the eyes and mouth. When you are done, wash your hands.
- Using repellent is not a substitute for other mosquito protection like staying indoors while mosquitoes are active, or wearing long sleeved shirts and pants as barriers.

**How should products containing DEET be used on children?**

The American Academy of Pediatrics has recommended that a cautious approach be used. Use products with a low concentration of DEET, 10% or less, on children aged 2-12. Most guidelines cite that it is acceptable to use repellents containing DEET on children over 2 years of age. Other experts suggest that it is acceptable to apply repellent with low concentrations of DEET to infants over 2 months old.

Talk to your health care provider to see what his/her recommendations are. Remember that it is important to follow the directions on the label whenever using mosquito repellent. When applying insect repellent to young children, never let them apply it to themselves. Apply it on your own hands and then rub it on your child avoiding their eyes and mouth and using it sparingly around their ears.

**Are infants at higher risk than other groups for illness with West Nile Virus?**

No. West Nile Virus illnesses in children younger than 1 year old are infrequent. Since 1999 only 18 of the 15,401 cases reported to CDC were in children younger than one year of age.

**I am pregnant, is it safe for me to use repellent with DEET?**

Talk to your obstetrician about whether you should use the repellent or not. There are no reports of adverse effects from exposure to DEET during pregnancy.

**For questions on transmission of WNV by transfusion, refer callers to the Mississippi Valley Regional Blood Center at 563-359-5401.**

**For other specific, personal questions refer callers to their physician.**

**For general questions on West Nile Virus, refer caller to the Scott County Health Department at 563-326-8618.**