Public Health Advisory
09/08/2025
Rising Incidence of Coccidioidomycosis (Valley Fever) in Clark County

SITUATIONAL AWARENESS SUMMARY

Situation: The incidence of coccidioidomycosis, also known as Valley Fever, is increasing in Southern Nevada. Coccidioidomycosis is a human infection caused by the *Coccidioides* fungus, whose spores are naturally present in the soil throughout Southern Nevada. Exposure occurs during soil-disturbing activities such as construction, agriculture, or land development, which aerosolize infectious spores. Clinically, coccidioidomycosis may be asymptomatic or present with respiratory symptoms similar to pneumonia or influenza-like illness. Although most infections are self-limiting, a small proportion can progress to severe or disseminated disease.

- The incidence of coccidioidomycosis in Clark County increased nearly fourfold between 2014–2024, rising from 3.1 to 11.8 cases per 100,000.
- Infections can occur year-round but most often peak during autumn months (September–November).
- Adults aged over 60 years experience disproportionately higher rates of infection, hospitalization, and death related to coccidioidomycosis.
- Mortality from coccidioidomycosis disproportionately impacts Black and Hispanic populations within Clark County.
- Individuals at risk of severe illness include those with suppressed immune systems (such as those living with HIV), individuals with diabetes, pregnant women in their third trimester, and patients recovering from recent COVID-19 infection.

Recommendations for Healthcare Providers

1) **Consider** coccidioidomycosis in all patients with symptoms of prolonged or antibiotic-resistant community-acquired pneumonia, and in patients presenting with signs of erythema nodosum.

2) **Test** for coccidioidomycosis through IgM / IgG serology. Microscopy, culture, and PCR may be used for detection in tissue / respiratory specimens but require enhanced biosafety precautions.

Test	Specimen Type	ARUP	CPL	LabCorp	Quest
Coccidioides IgM / IgG*	Serum	3001982	5582	164798	40299

**A reactive IgG is a sufficient marker for active disease that requires further evaluation even with a negative IgM.*

3) **Treat** coccidioidomycosis with fluconazole or similar anti-fungal medications for at least 3–6 months. Extended treatment (6+ months) may be necessary depending on disease severity.

4) **Promote** prevention measures, especially for patients at higher risk of severe disease. Prevent coccidioidomycosis by limiting exposure to dust:
   - Stay indoors during dust storms.
   - Use indoor air filter systems.
   - Avoid dust-generating activities, such as construction when possible.
   - Wear N95 respirators when dust exposure can't be avoided.

5) **Report** confirmed or suspected coccidiomycosis cases to the Southern Nevada Health District through the Reportable Diseases Form or through telephone to 702-759-1300.

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Southern Nevada Health District

Resources Centers for Disease Control & Prevention — Valley Fever (Coccidiomycosis) https://www.cdc.gov/valley-fever/index.html
Southern Nevada Health District — Coccidiomycosis (Valley Fever) https://www.southernnevadahealthdistrict.org/Health-Topics/coccidioidomycosis-valley-fever/