



## COCCIDIOIDOMYCOSIS

(Valley fever, desert fever, desert rheumatism, coccidioidal granuloma.)

1. **Agent:** *Coccidioides immitis* or *Coccidioides posadasii* (mostly outside California), a dimorphic fungus.

### 2. Identification:

a. **Symptoms:** A systemic mycosis that begins as a respiratory illness.

**Primary infection:** May be asymptomatic or present as an acute respiratory illness with fever, chills, cough and pleural pain. About 5% of clinically recognized infections develop erythema nodosum. Primary infection may heal completely; may leave fibrosis or calcified pulmonary lesions, or a persistent thin walled cavity; or may progress to disseminated disease.

**Disseminated disease (coccidioidal granuloma):** A progressive, rare granulomatous disease with high mortality characterized by lung lesions and diffuse single or aggregated abscesses, especially in subcutaneous tissues, skin, bone, peritoneum, testes, thyroid, and central nervous system. Coccidioidal meningitis resembles tuberculous meningitis.

b. **Differential Diagnosis:** Influenza, viral infections with generalized rashes, other fungal infections, tuberculosis, and conditions associated with erythema multiforme or erythema nodosum.

c. **Diagnosis:** Microscopic examination of sputum or pus, or by culture. Serologic tests, (immunodiffusion, EIA, complement fixation) are also available. Skin testing (for delayed hypersensitivity) may be available for epidemiologic investigation, but is not typically used for clinical diagnosis of acute disease.

### 3. Incubation:

**Primary:** 1-4 weeks.

**Disseminated disease:** Develops insidiously.

4. **Reservoir:** Soil from endemic areas (mostly southwestern United States and northern Mexico). Antelope Valley and San Joaquin Valleys in southern California.

5. **Source:** Soil and dust.

6. **Transmission:** Inhalation of spores from dust, soil, and in laboratories from cultures of the mold form.

7. **Communicability:** Not directly transmissible from animal or person to person. After 7-10 days, *C. immitis* on dressings may become infectious.

8. **Specific Treatment:** None for uncomplicated respiratory infection. Amphotericin B in disseminated infection. Fluconazole is the agent of choice for meningeal infection

9. **Immunity:** Permanent.

### REPORTING PROCEDURES

1. Report within seven calendar days, *California Code of Regulations*, Title 17, Sections 2500 and 2558.

### 2. Epidemiologic Data:

a. Residence in or travel to endemic areas.

b. Occupation.

c. Similar illness in co-workers.

d. Skin test results.

e. Obtain any laboratory results and skin tests to confirm diagnosis of coccidioidomycosis (e.g., culture, serology).

f. Indicate whether case is **primary** or **disseminated**.

g. Determine date of onset.

h. Travel history during incubation period (including dates and places) to endemic



areas (see Reservoir section) where cases might have been exposed to dust.

- i. Occupational history, especially individuals working outdoors in endemic areas. Give dates of working and job description.
- j. Similar illness in co-workers.
- k. Outdoor recreational activities during the incubation period where cases might have been exposed to dust from endemic areas. Include date, type of activity, and place.
- l. *Coccidioides* species are listed by Centers for Disease Control and Prevention as agents of bioterrorism.

**NOTE:** Any possible bioterrorist exposures should be reported *immediately* to local law enforcement and public health for evaluation.

#### CONTROL OF CASE, CONTACTS, & CARRIERS

Investigate within 7 days.

#### CASE:

**Isolation:** None.

**CONTACTS:** No restrictions.

#### PREVENTION-EDUCATION

1. Emphasize dust control in endemic areas. Spores are most prevalent in the top four inches of the soil layer.

2. Disinfect discharges and fomites.
3. Laboratory cultures should be sealed before disposal and technicians should not “sniff” fungus cultures.

#### DIAGNOSTIC PROCEDURES

##### 1. Serology:

**Material:** Whole clotted blood

**Container:** Serum Separator Tube (SST).

**Laboratory Form:** [Test Requisition and Report Form H-3021](#)

**Examination Requested:** Coccidioides antibodies

**Amount:** 8-10 ml.

**Storage:** Refrigerate

##### 2. CSF:

**Material:** CSF

**Container:** Sterile tube.

**Laboratory Form:** [Test Requisition and Report Form H-3021](#)

**Examination Requested:** Coccidioides antibodies

**Amount:** 1 ml (minimum 0.2 ml).

**Storage:** Refrigerate