

# Global Climate Teleconnections & Extremes: Impact on the Risk of Animal and Human Vector-Borne Disease

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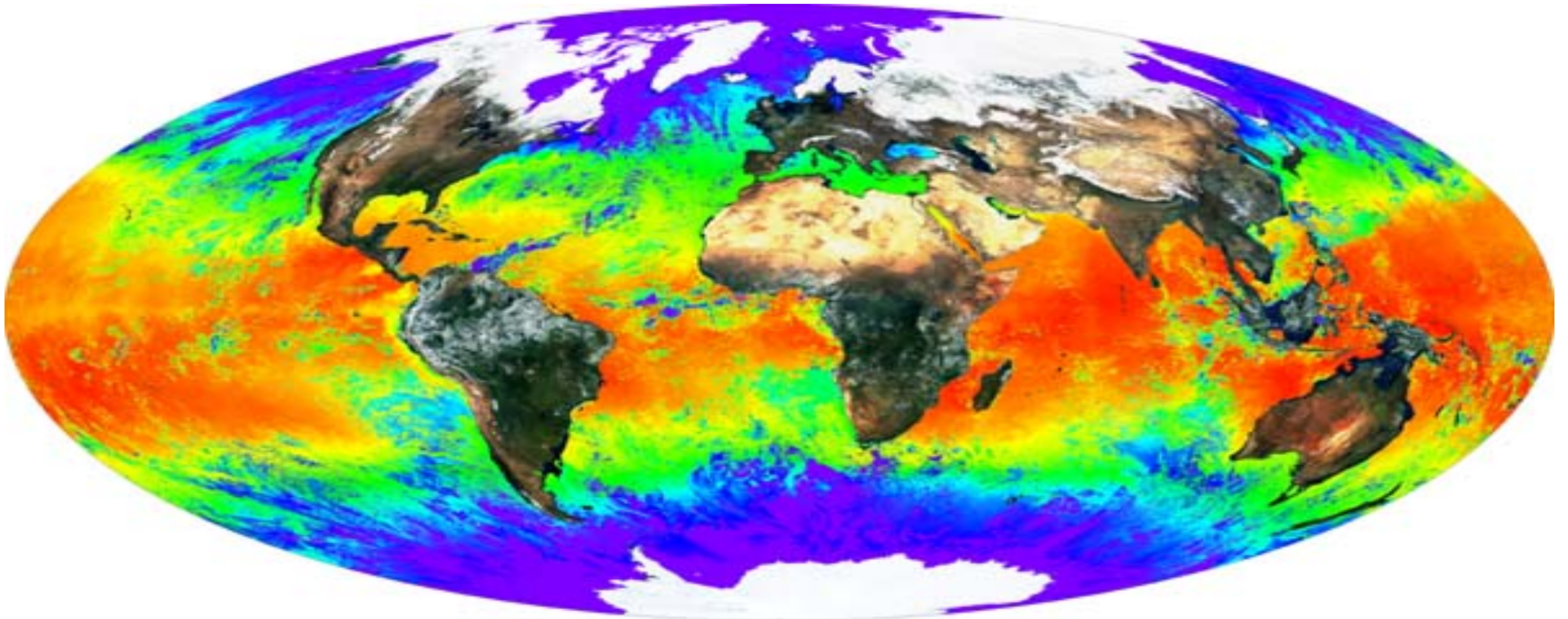
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**Earth's oceans serve as the engine of the earth's climate and they are closely linked with each other**

***Climate Change Increases Climate Variability & presents significant Challenges relative to Vector-Borne Disease***





# TOPICS



**1. CLIMATE TELECONNECTIONS TO VECTOR BORNE DISEASES**

**2. FORECASTING RIFT VALLEY FEVER**

**3. NEAR FUTURE (2015-2016) POTENTIAL DISEASE RISKS**

**4. SUMMARY**





# **1. Climate teleconnections to Vector-Borne Diseases (dengue, chikungunya, Rift Valley fever, and malaria)**

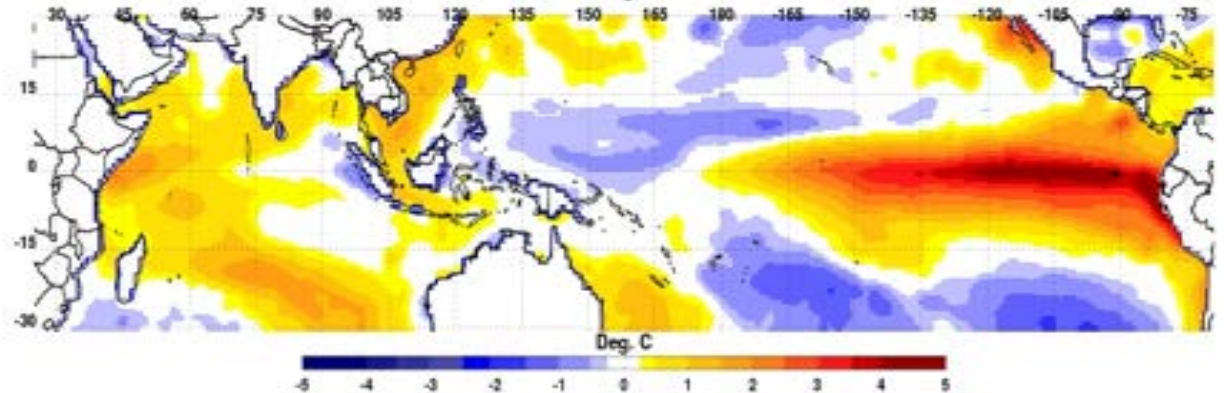
## Vector-borne Disease – Climate Links

- **Building evidence suggests links between El Niño/Southern Oscillation (ENSO) driven climate anomalies and infectious diseases, particularly those transmitted by arthropods:**
  - Murray Valley encephalitis (Nicholls 1986)
  - Bluetongue (Baylis et al. 1999)
  - **RVF (Linthicum et al. 1999)**
  - African Horse Sickness (Baylis et al 1999)
  - Ross River virus (Woodruff et al. 2002)
  - **Dengue (Linthicum et al. 2007 IOM publication)**
  - Malaria (Bouma & Dye 1996)
  - Chikungunya (Chretien et al. 2006)

# El Niño/ Southern Oscillation (ENSO)

## SST: Sea Surface Temperature

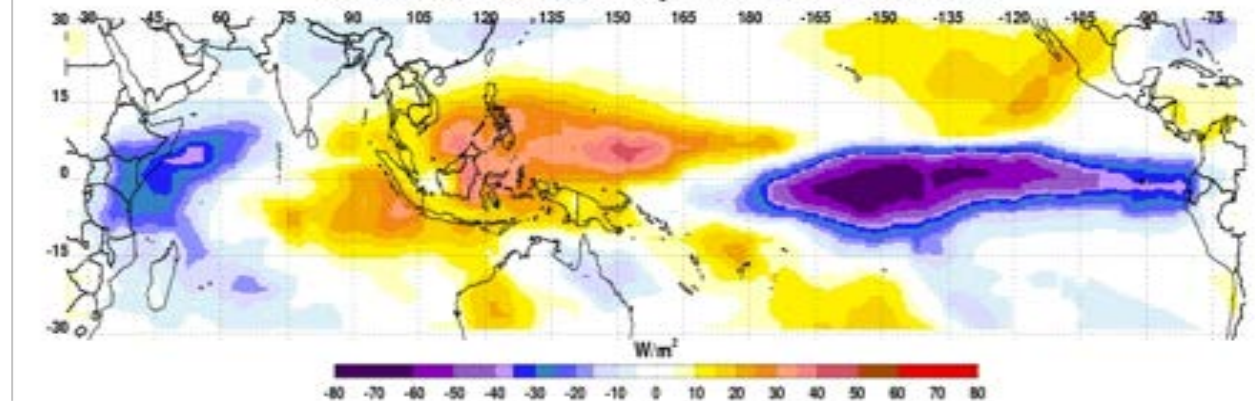
Seasonal SST Anomaly, Dec 1997 - Feb 1998



- Influences the patterns of floods and drought on an interannual time scale.
- Extremes have an impact on the emergence, propagation and survival of disease vectors/pathogens
- Results in episodic patterns of disease outbreaks as they dance in tune with climate variability

## OLR: Outgoing Longwave Radiation

Seasonal OLR Anomaly, Dec 1997 - Feb 1998

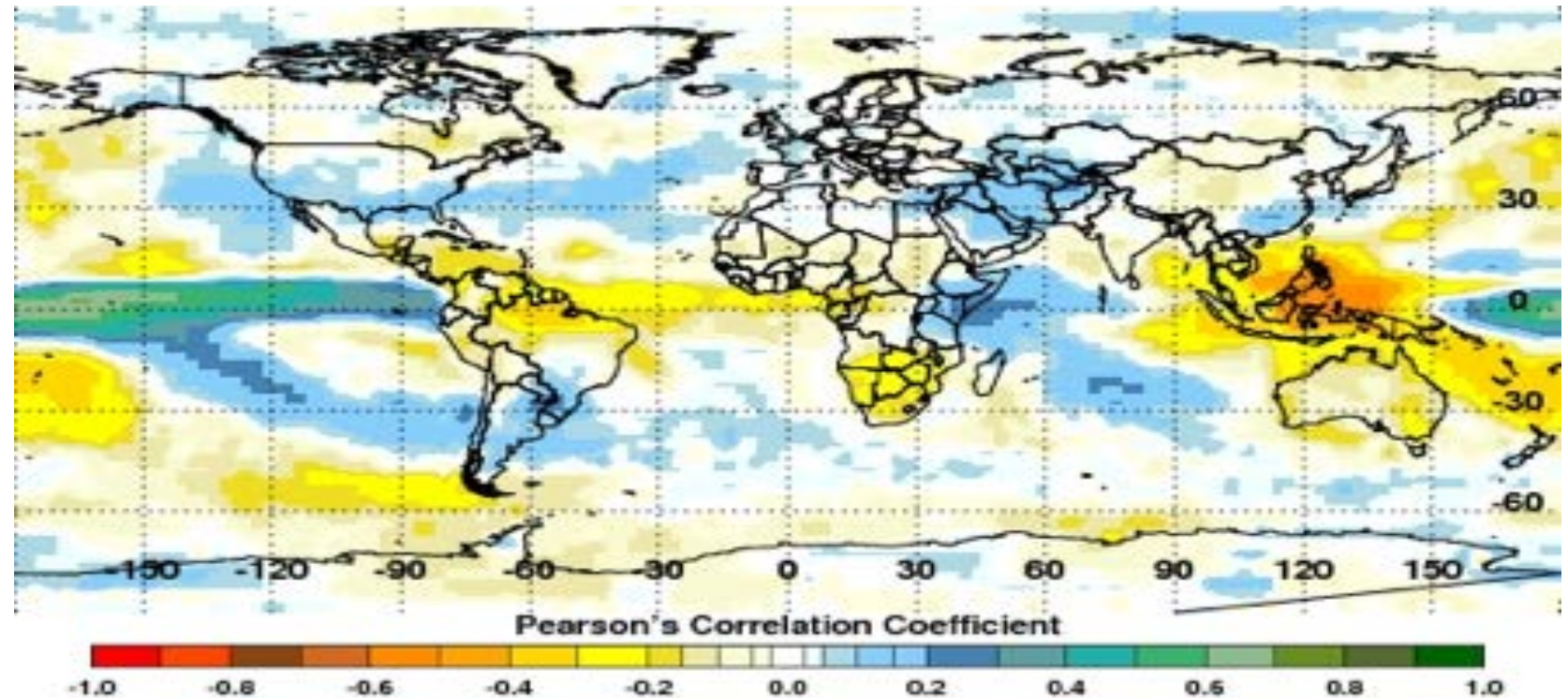


**Red: Hotter/Warmer, Blue: Cold/Cooler than Normal**

# ENSO Teleconnections

## through Global Precipitation

- Differential impacts at specific regional locations around the world
- ENSO + | Floods and excess rainfall in EEA, E.E. Pacific, Southern Brazil/Argentina, Southern-tire US
- ENSO + | Drought and >+ temperatures (Southern Africa, SE Asia, NE Brazil, C Africa)
- ENSO – [Largely reverse conditions)



**Green/Blue: +/Wetter** **Yellow/Red: -/Drier**



# Climate change/variability Impact on ecology of vectors/vector-borne diseases

## A. Temperature



- Affect on *Aedes aegypti* to transmit dengue virus in Southeast Asia
- Affect on *Ae. aegypti* & *Ae. Albopictus* / chikungunya virus in East Africa, Central Africa, South and Southeast Asia
- Affect on *Anopheles species*/ *P. vivax* malaria in Republic of Korea



## B. Rainfall

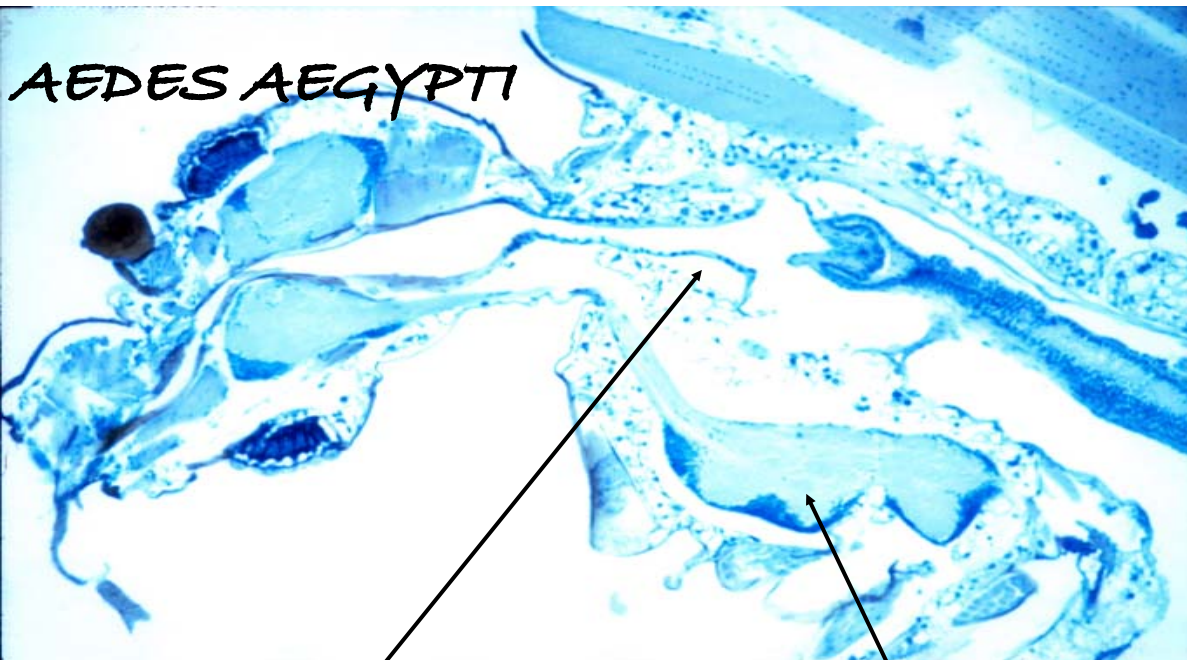
- Affect on *Aedes* and *Culex* to transmit Rift Valley fever in sub-Saharan Africa



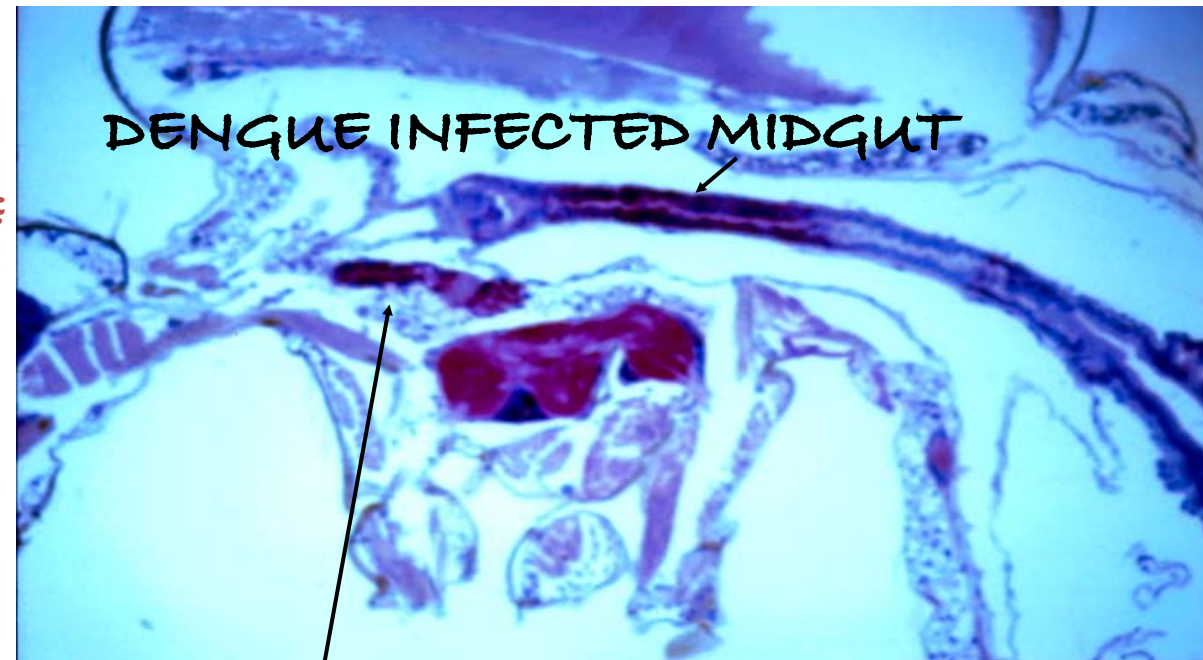


# A. Temperature

- Vectorial competence is dependent upon the Extrinsic incubation (EI) period
- EI = time from virus ingestion to virus in Salivary Gland
- Shorter EI period (higher ambient temperature) = greater vectorial competence



TIME  
→



# Vectorial Capacity<sup>1</sup>

$$C = \frac{(HA)AP^N}{-\ln P}$$

HA = daily human-biting rate

A = daily rate of blood feeding

P = daily rate of survival

N = length of sporogonic cycle  
(extrinsic incubation cycle)

<sup>1</sup>GARRETT-JONES AND SHIDRAWI 1969

# A. Temperature (dengue)

- *Aedes aegypti* mosquitoes transmit dengue virus

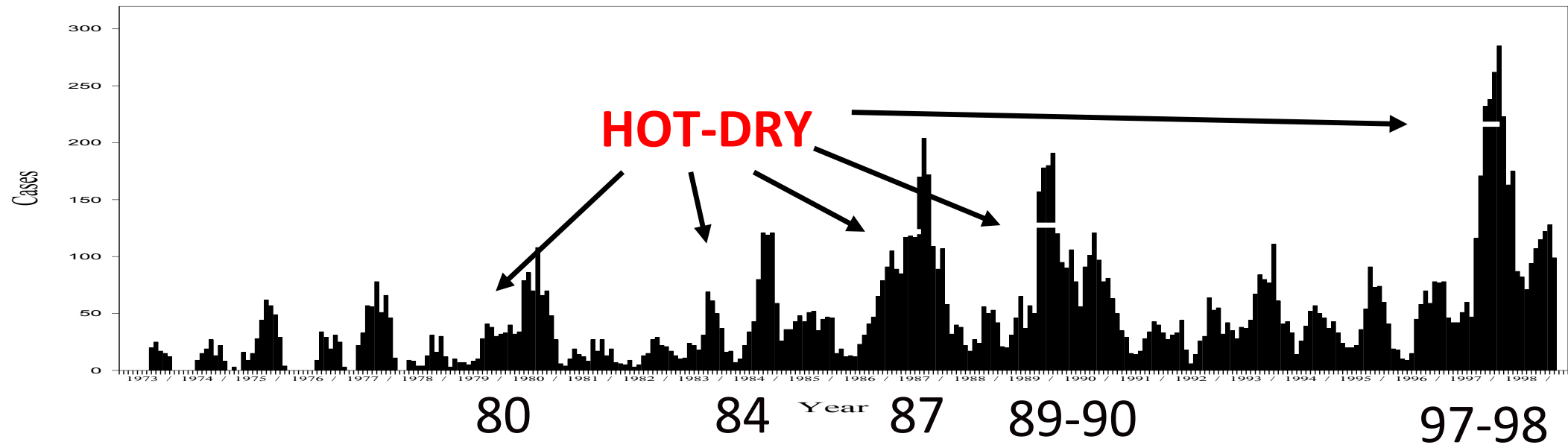


- Dengue virus infection produces classical dengue, DHF and DSS
- In Southeast Asia dengue is hyperendemic
- DHF is reported, classic dengue is not

# Dengue Summary

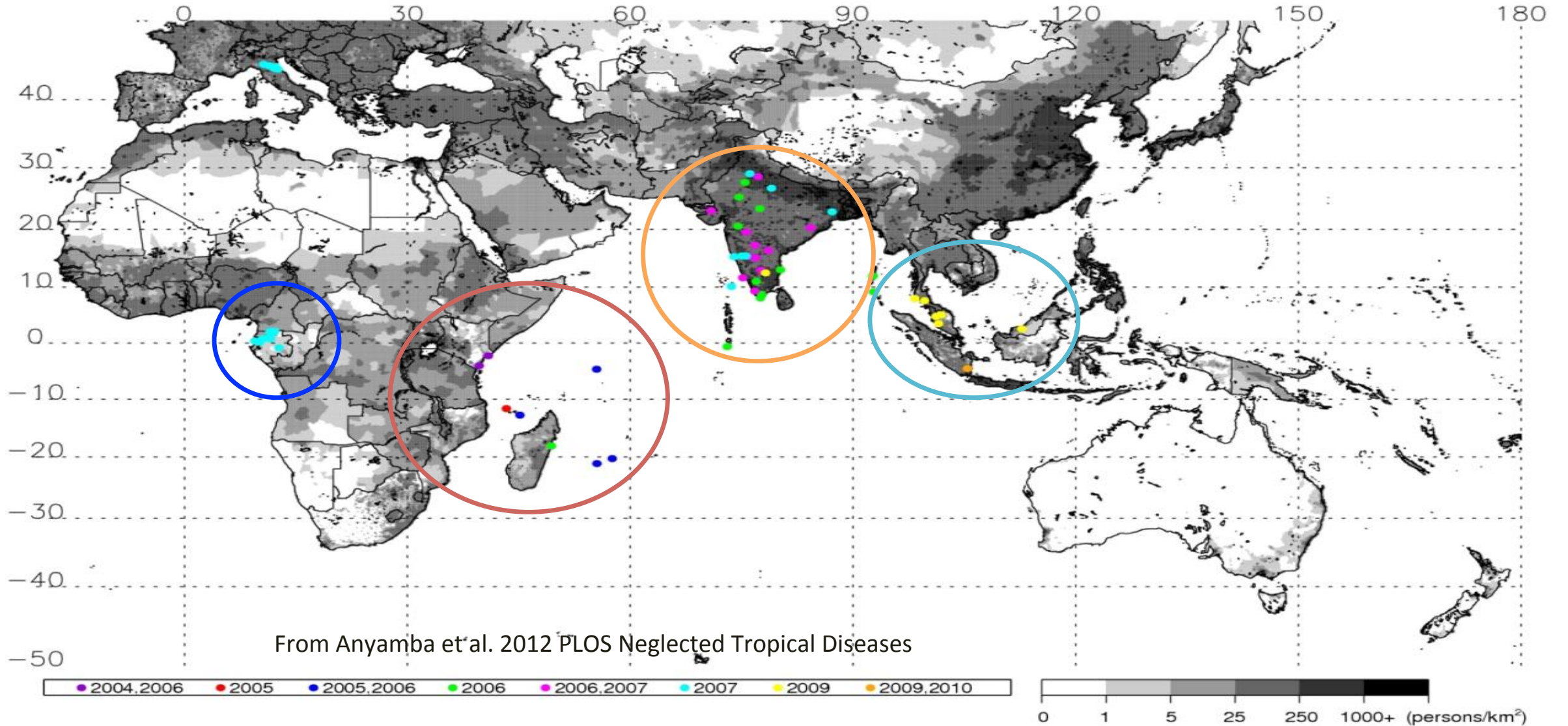
- Hot -dry periods precede elevated DHF
- Elevated DHF is likely the result of short Extrinsic Incubation period in mosquito

Figure Three: Seasonal Distribution of Serologically Confirmed Dengue Cases at Bangkok Children's Hospital from 1973-1998.

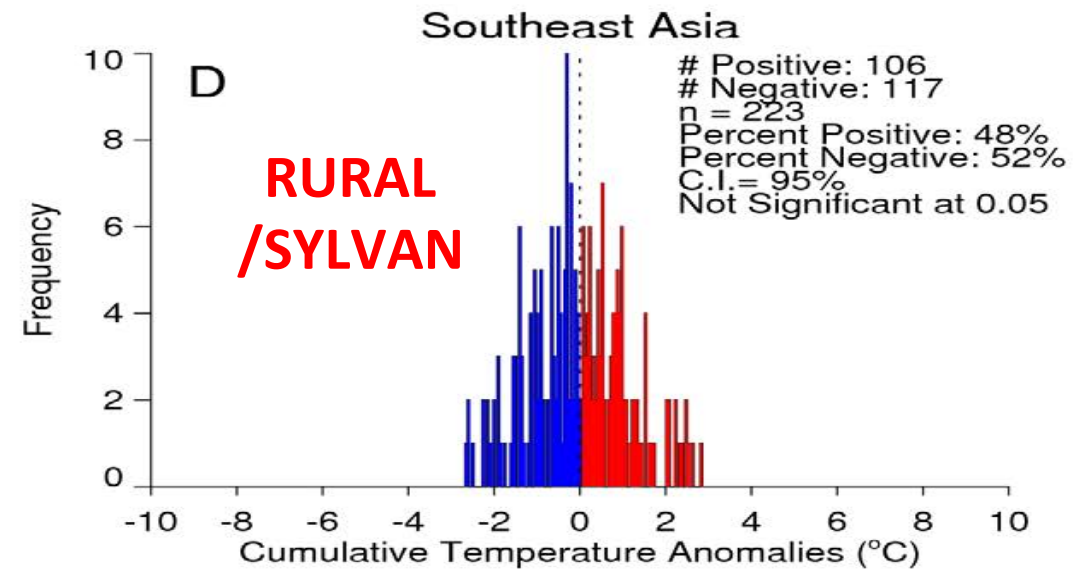
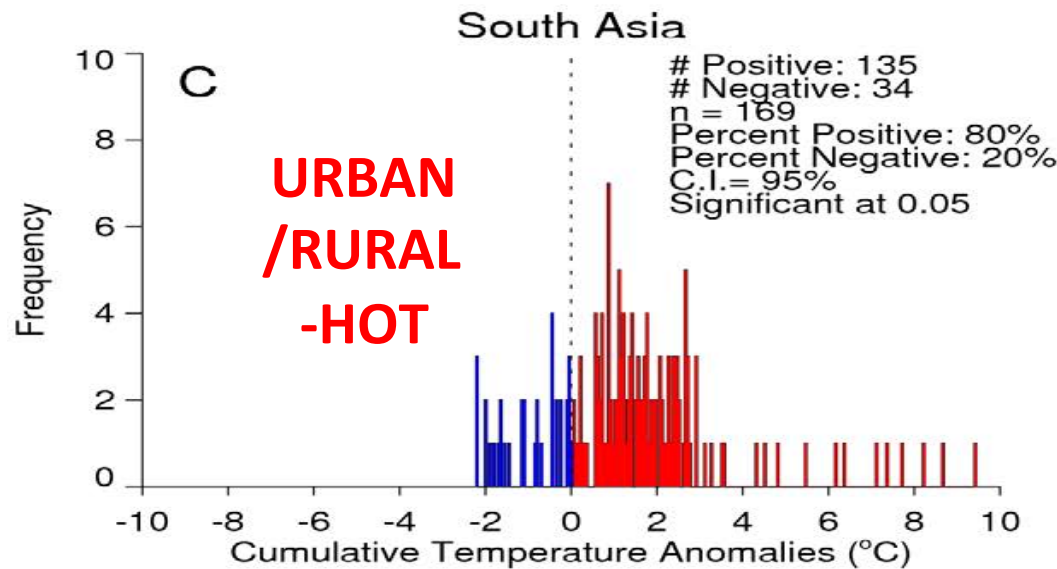
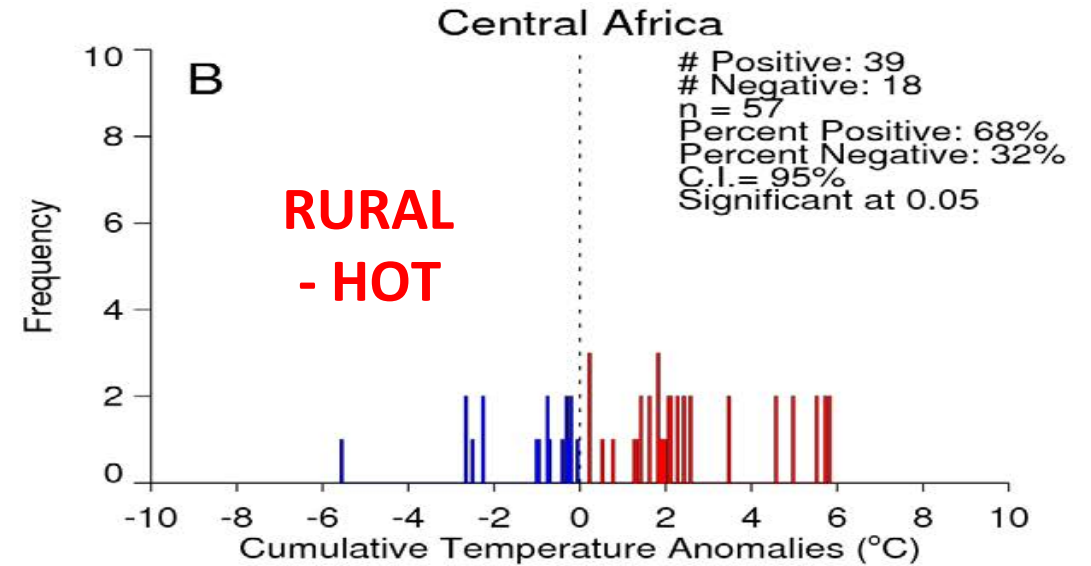
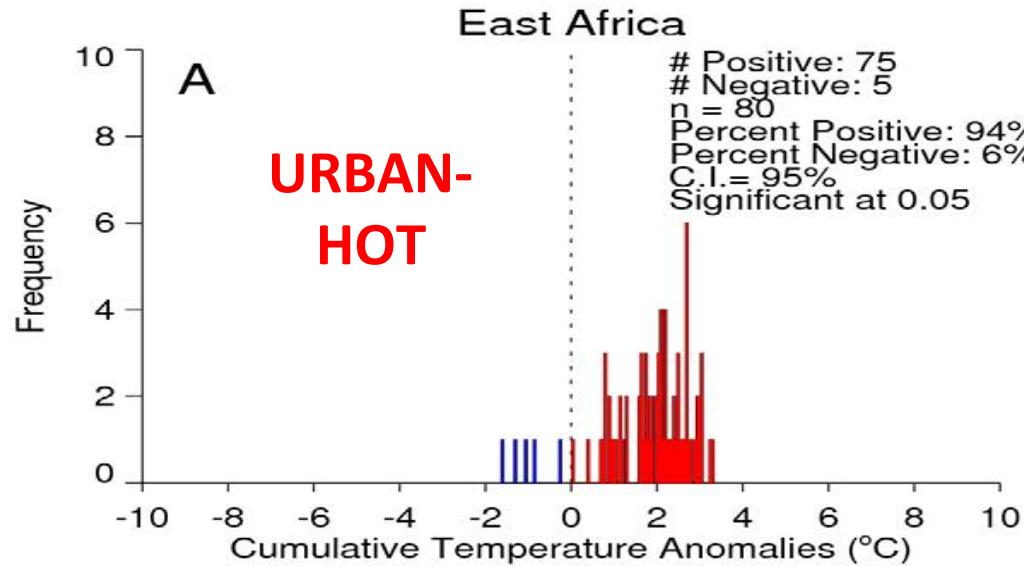


# Recent chikungunya Outbreaks in Relation to Human Population Density

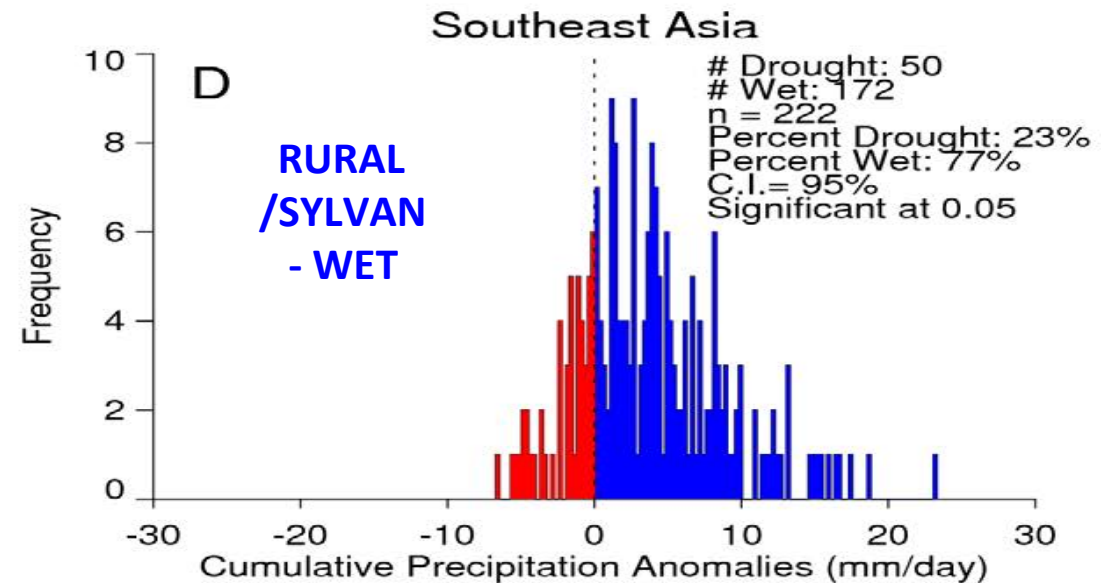
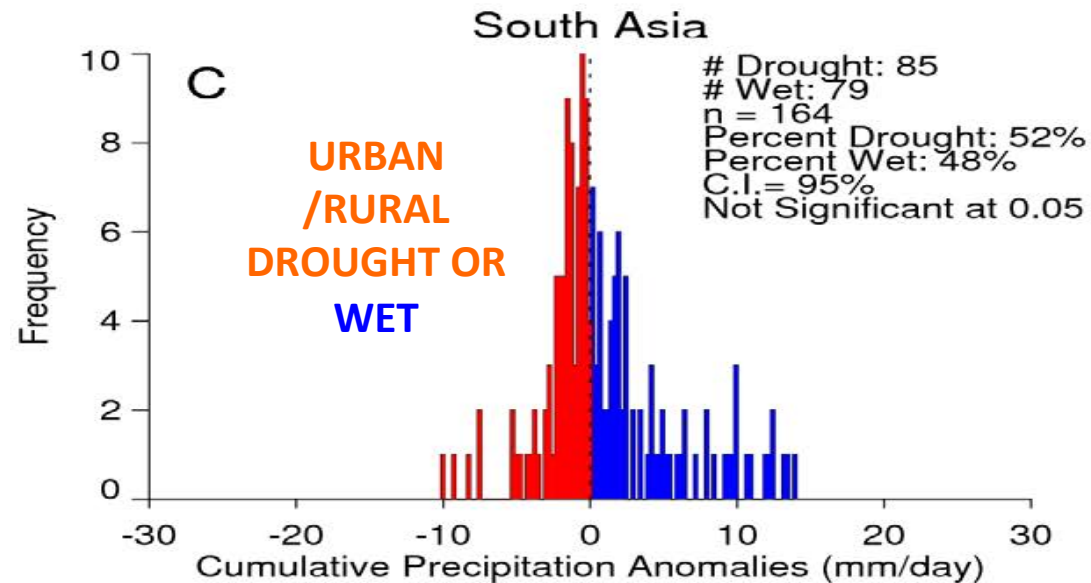
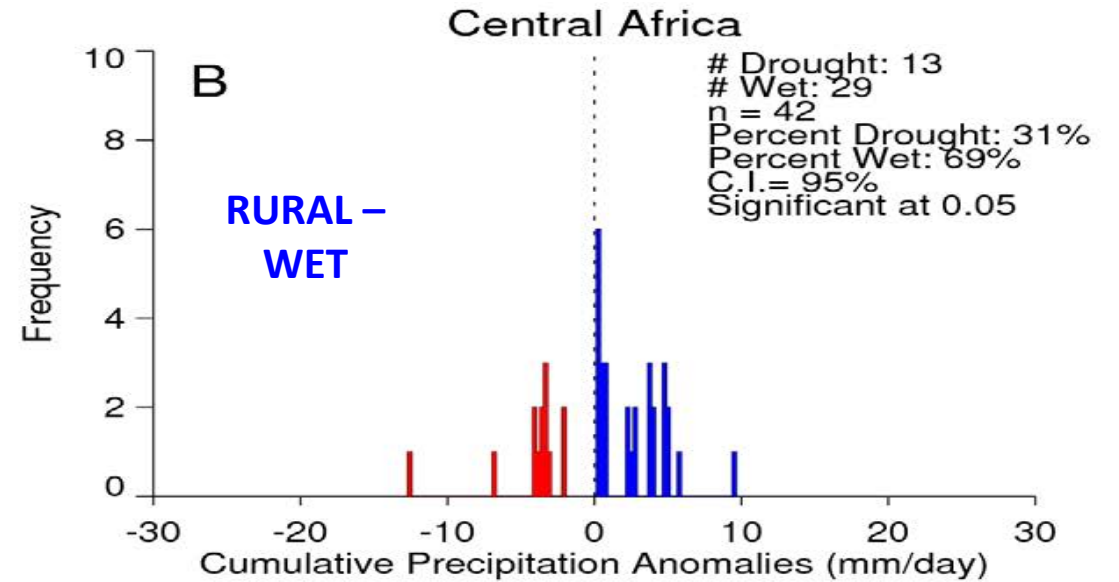
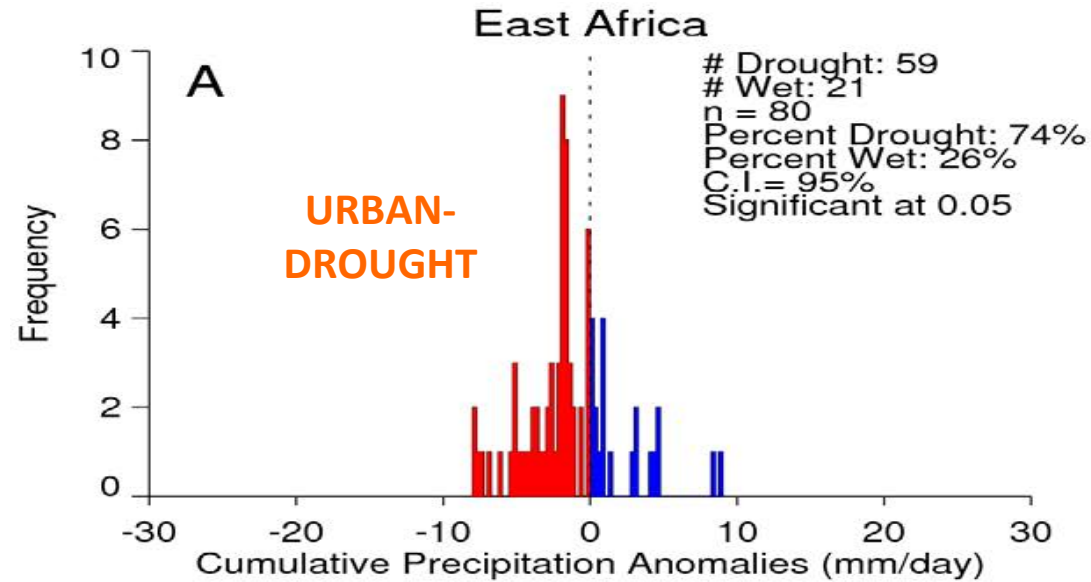
Chikungunya Outbreaks 2004–2010



# Impact of Temperature on Chikungunya Outbreaks (2004-2010)

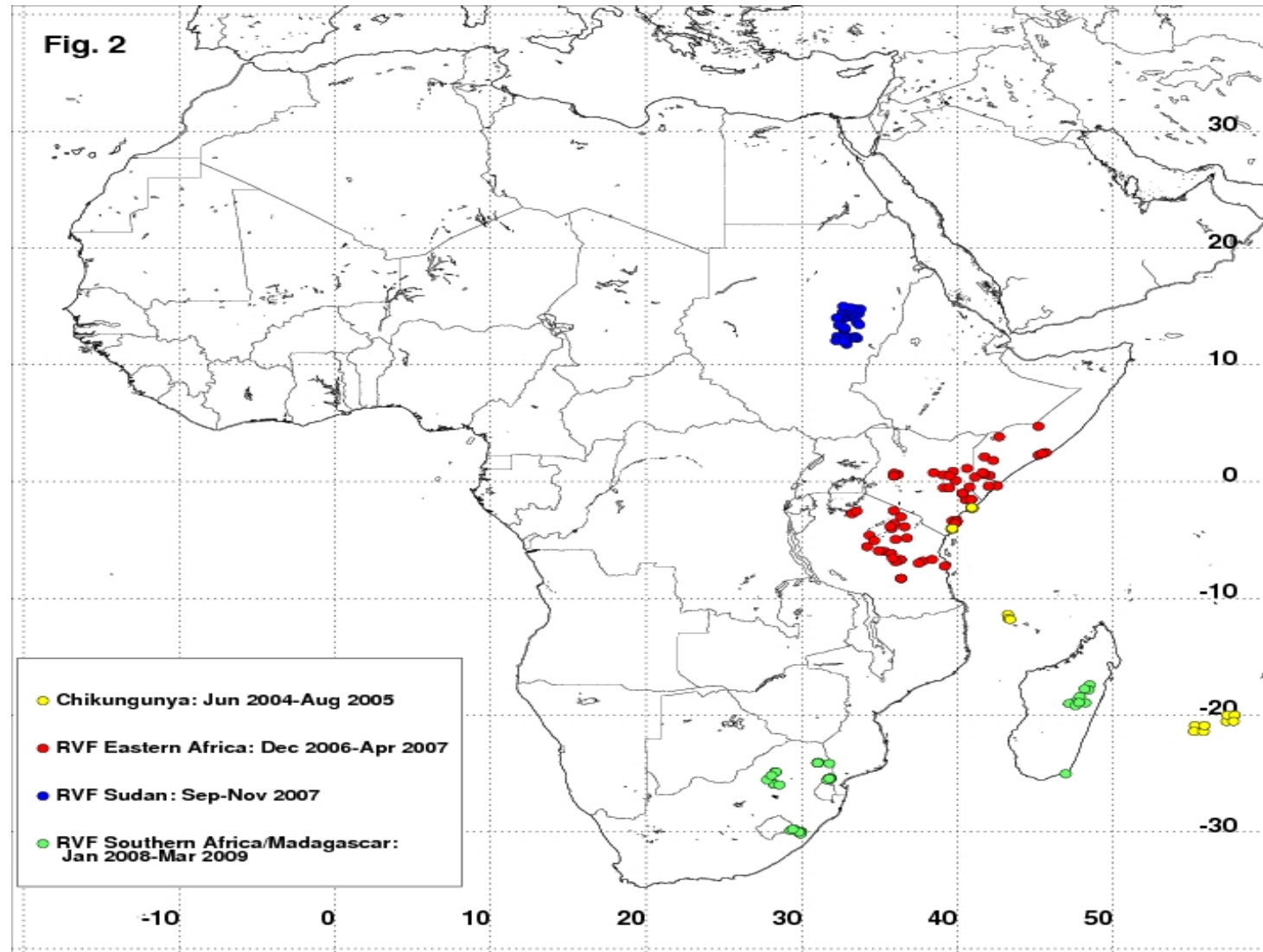


# Impact of Drought on Chikungunya Outbreaks (2004-2010)



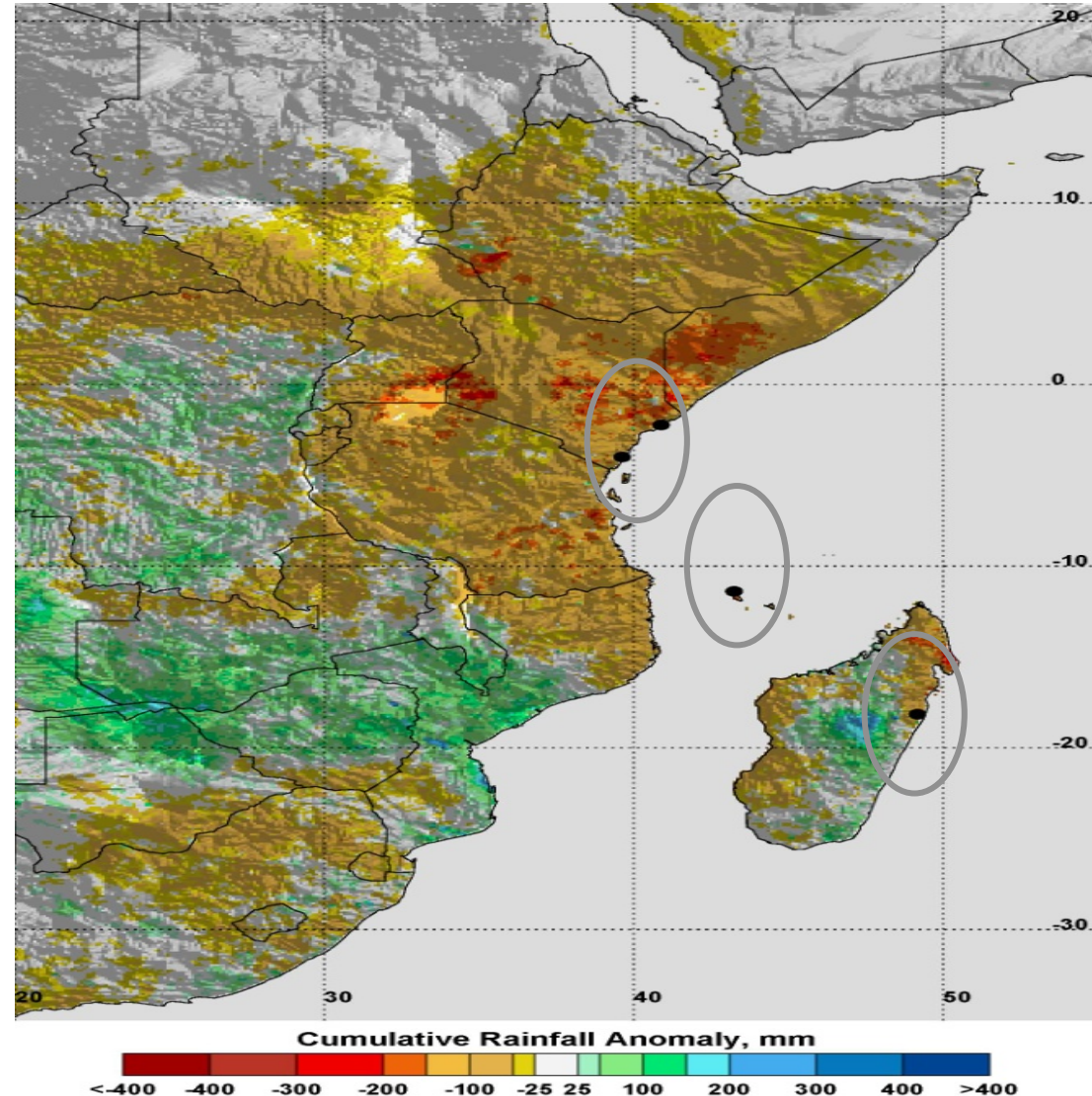


Geographic distribution of recent outbreak clusters of **chikungunya** (2004-2006) and **Rift Valley fever** (2006 – 2009) over Africa and the Indian Ocean islands



# RAINFALL ANOMALIES: OCT-DEC 2005

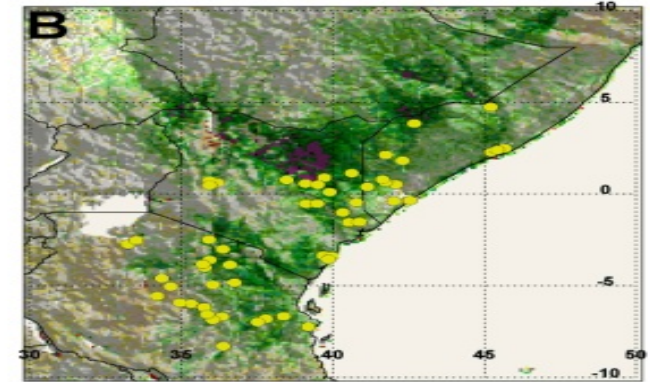
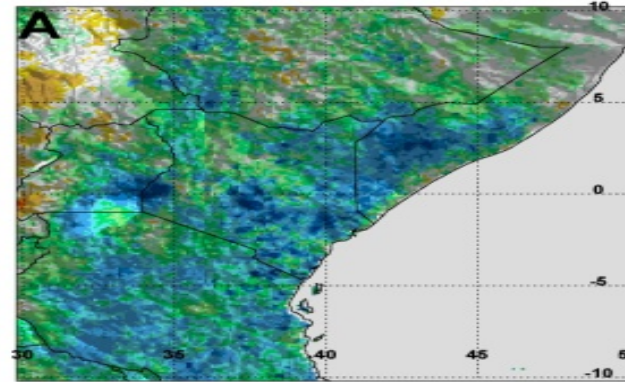
Rainfall anomalies for Eastern Africa showing the large-scale regional drought during the period October – December 2005. Anomalies are calculated with reference to the 1995-2000 base mean period. Epicenters of **chikungunya** outbreaks during this period are shown by black dots



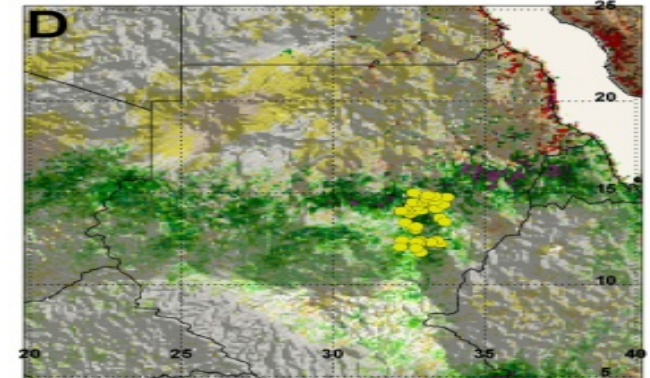
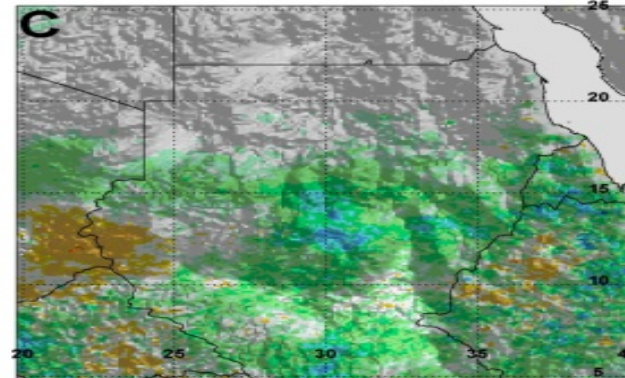
# RAINFALL AND NDVI ANOMALIES: 2006-2008

Cumulative rainfall anomaly and vegetation index anomalies patterns preceding outbreaks of **Rift Valley fever in East Africa**: September 2006 - December 2006; **Sudan**: June 2007 - September 2007, and **Southern Africa**: October 2007 - January 2008. Areas of Rift Valley fever outbreaks are marked by the yellow dots

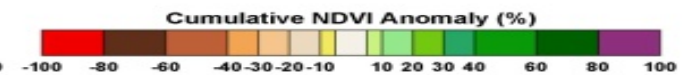
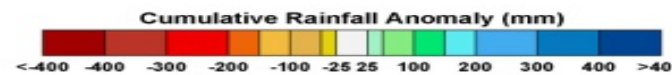
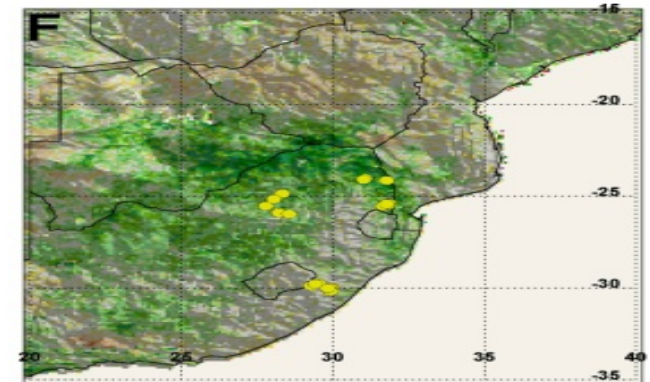
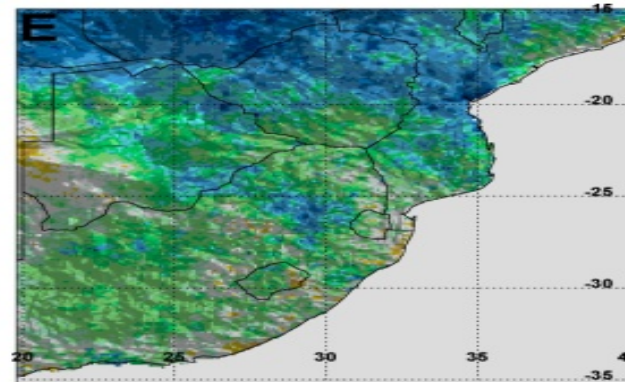
EAST AFRICA



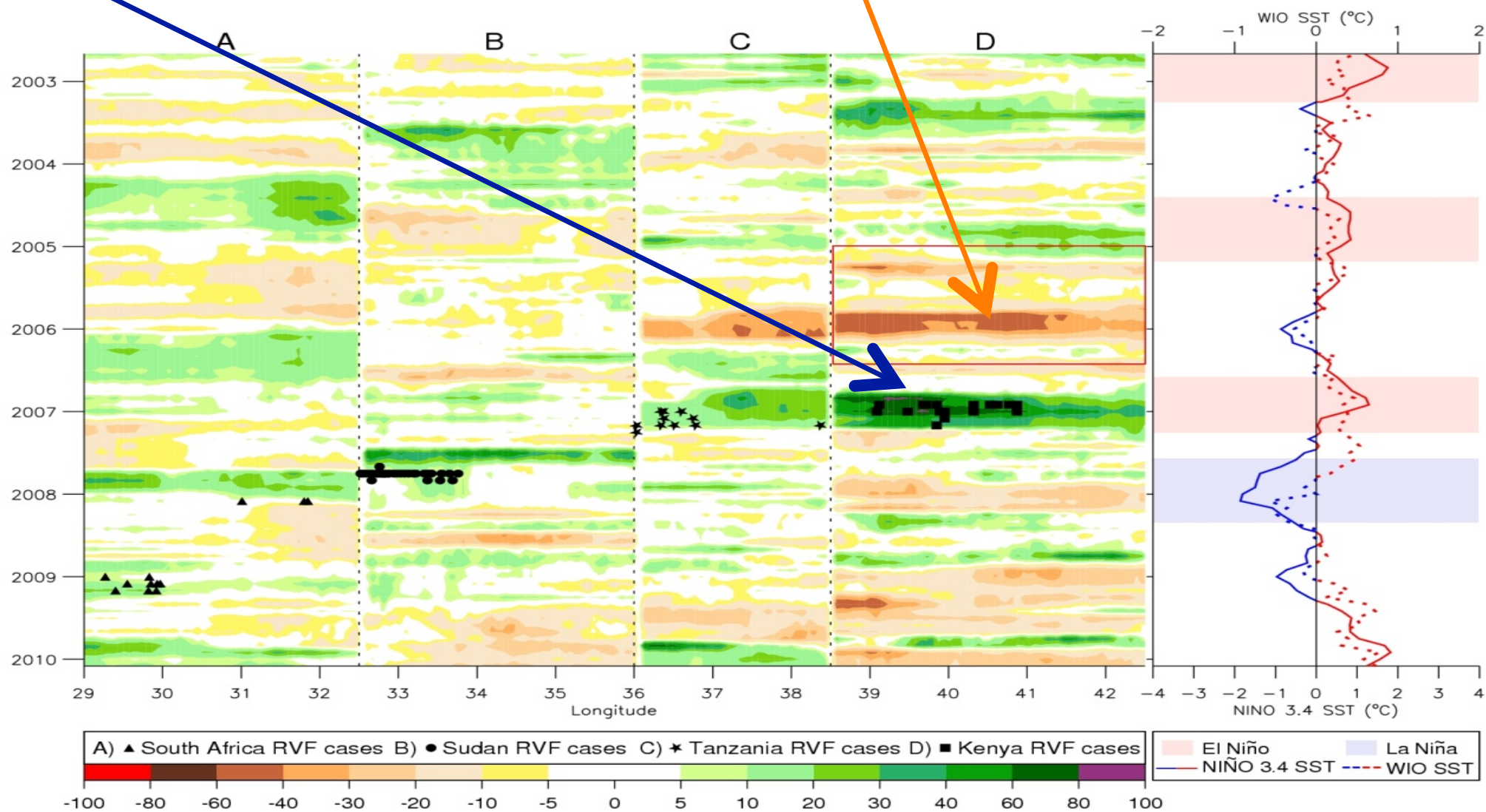
SUDA  
N



SOUTHERN  
AFRICA

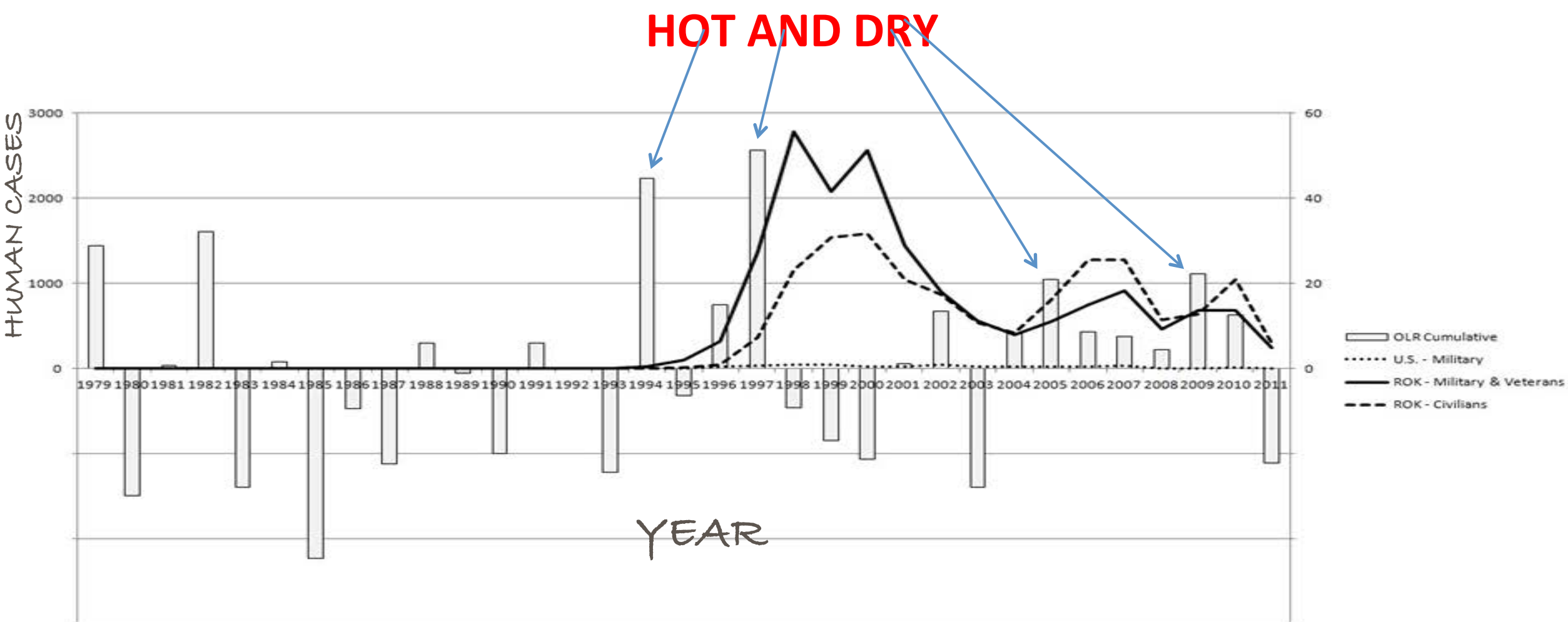


# RVF Relationship to **Wet** Conditions and Chikungunya Relationship to **Dry** Conditions



# *P. Vivax* Malaria in Republic of Korea

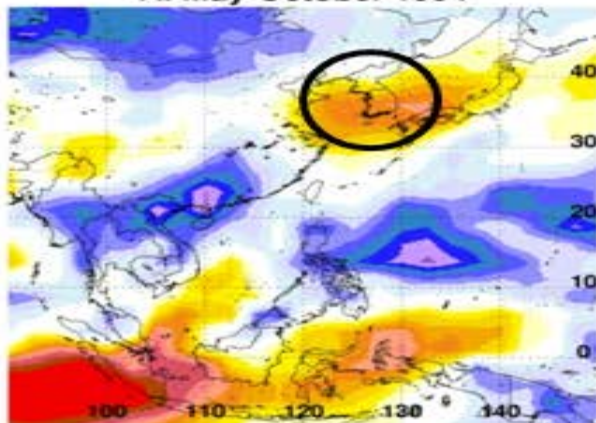




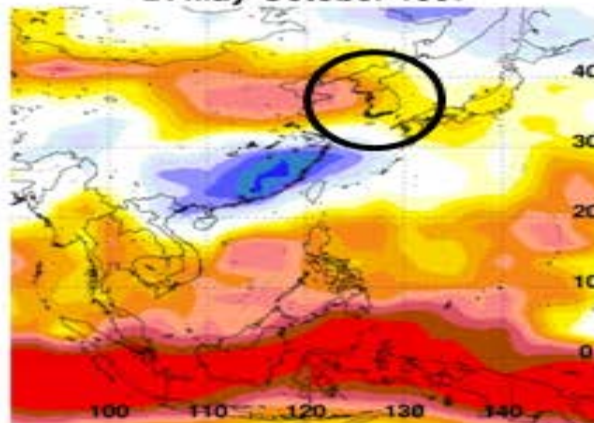
***P. Vivax* Malaria in ROK from 1979 – 2011  
and Cumulative OLR Data**

*From Linthicum et al. 2014 Military Medicine*

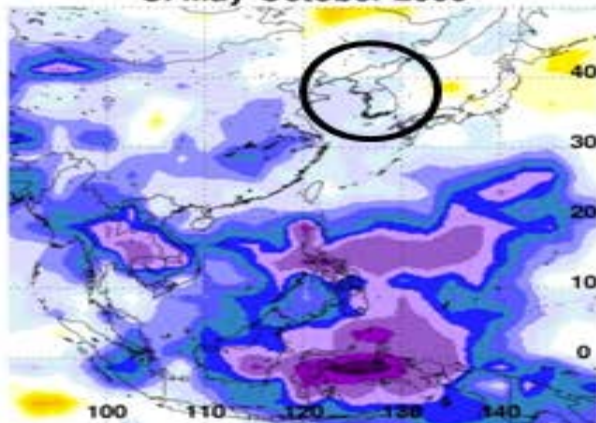
**A. May-October 1994**



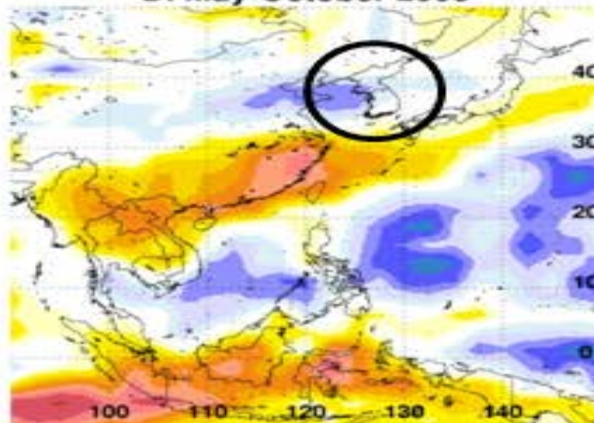
**B. May-October 1997**



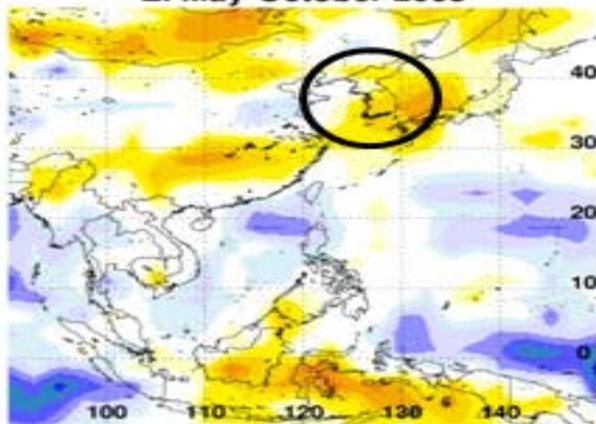
**C. May-October 2000**



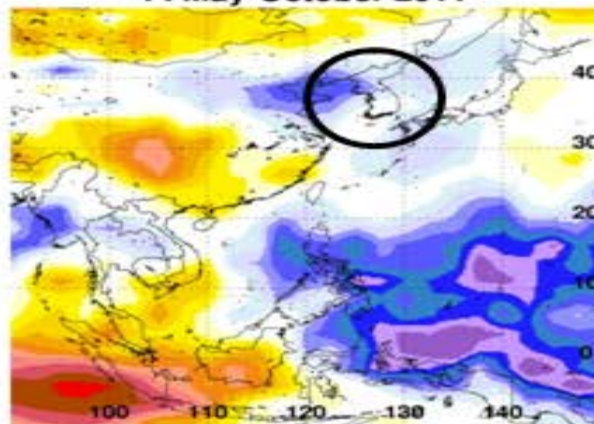
**D. May-October 2003**



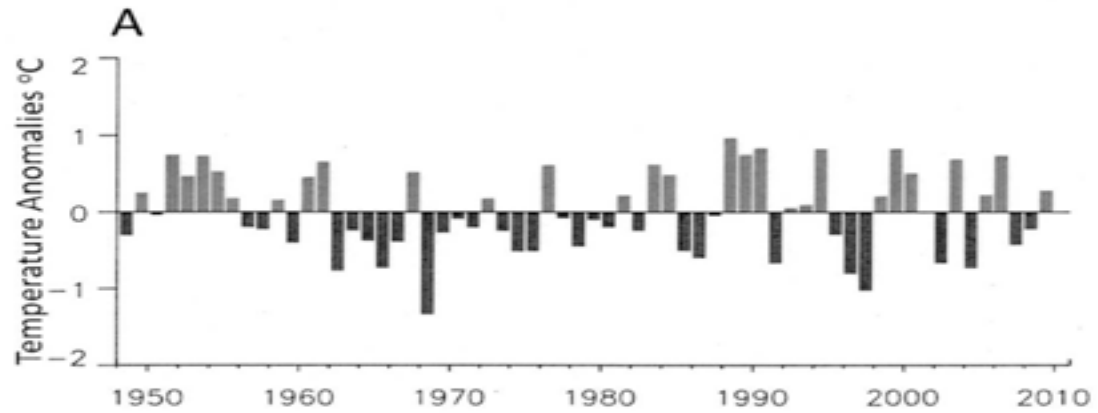
**E. May-October 2005**



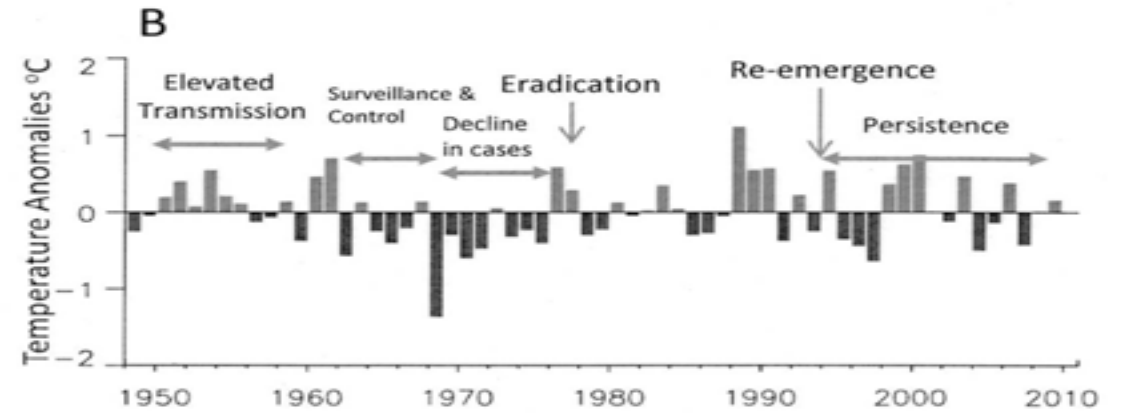
**F. May-October 2011**



# NORTH KOREA (DPRK)



# SOUTH KOREA (ROK)



Temperature anomalies from 1950 - 2011



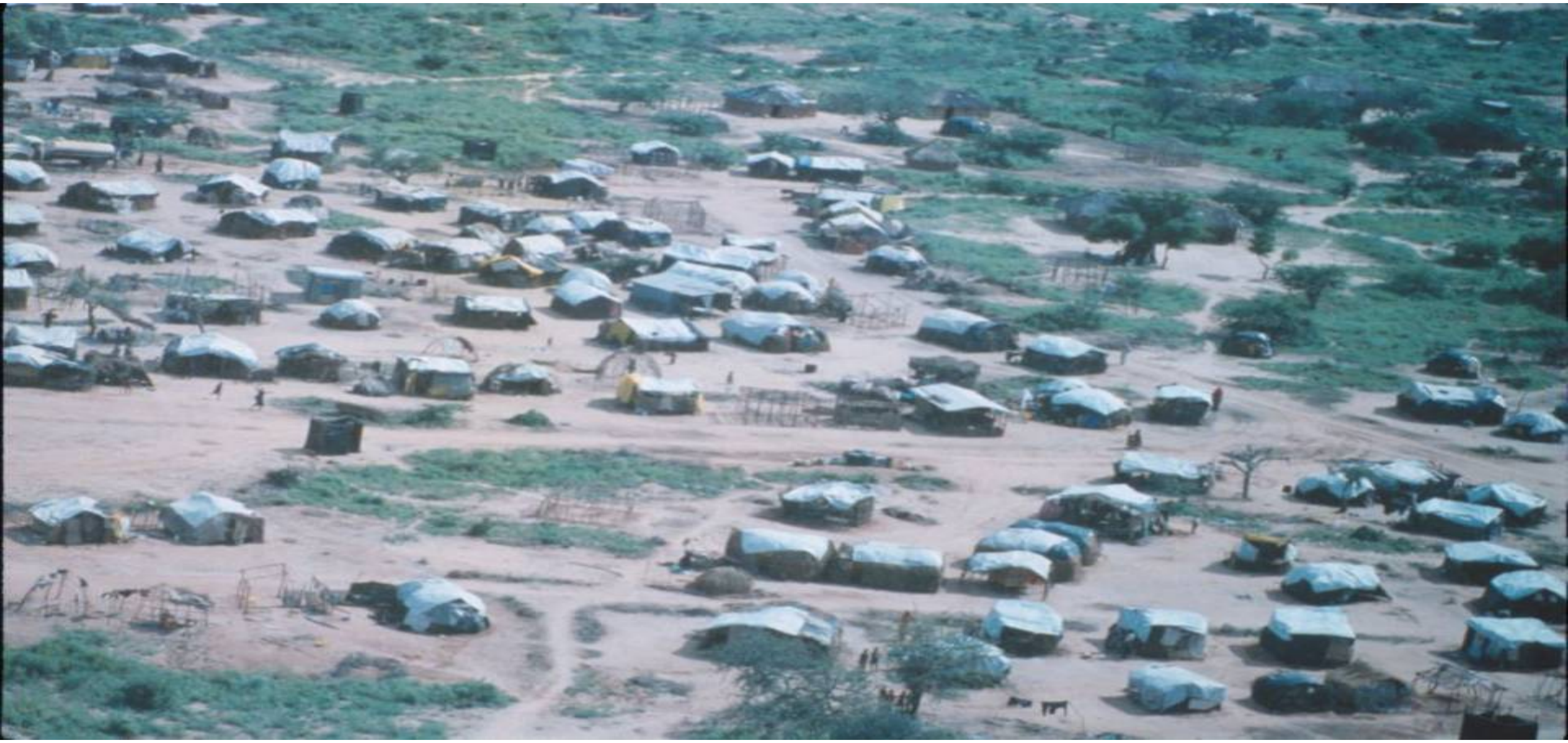


## **2. Rift Valley fever Risk Forecasting**

## Human Impact: Flooding near Garissa, Kenya, 1997



# NOMADIC REFUGEES IN CAMP NEAR GARISSA, KENYA 1997



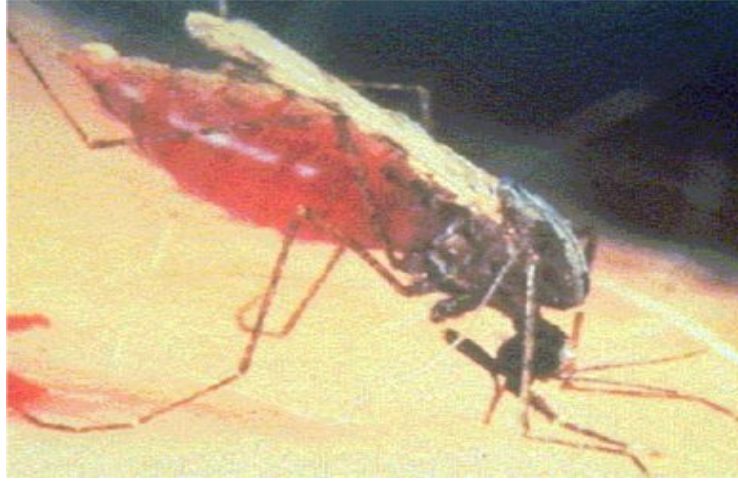
RIFT VALLEY  
FEVER

FLOODED  
DAMBO





# Transmission



# RIFT VALLEY FEVER

HERDERS LIVE ON RAW BLOOD & MILK





# NAIVASHA, KENYA

REPORTED DISEASE ON  
BUFFALO FARM IN NAIVASHA  
TRADE IN SHEEP PRODUCTS  
IMPORTANT INCOME SOURCE  
FOR THE RURAL COMMUNITIES.





# **RVF**

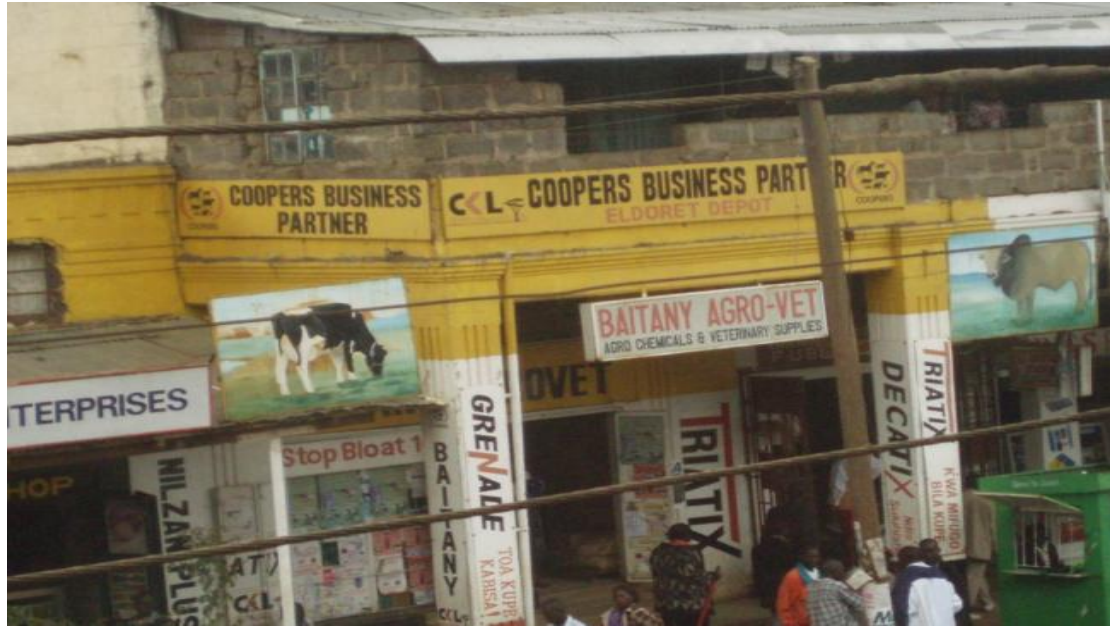
## **Manifestations**



- ANOREXIA AND WEAKNESS
- LISTLESSNESS
- EVIDENT ABDOMINAL PAIN
- ABORTIONS AS HIGH AS 100% IN LAMBS
- CEREBRAL INFECTIONS
- OCULAR INFECTIONS
- HEMORRHAGIC FEVER WITH MARKED HEPATITIS AND BLEEDING MANIFESTATIONS
- COMMON BLEEDING MANIFESTATIONS INCLUDE GASTROINTESTINAL BLEEDING
- NEUROLOGIC SYMPTOMS INCLUDE CONFUSION, LETHARGY, TREMORS, ATAXIA, COMA, SEIZURES E.T.C



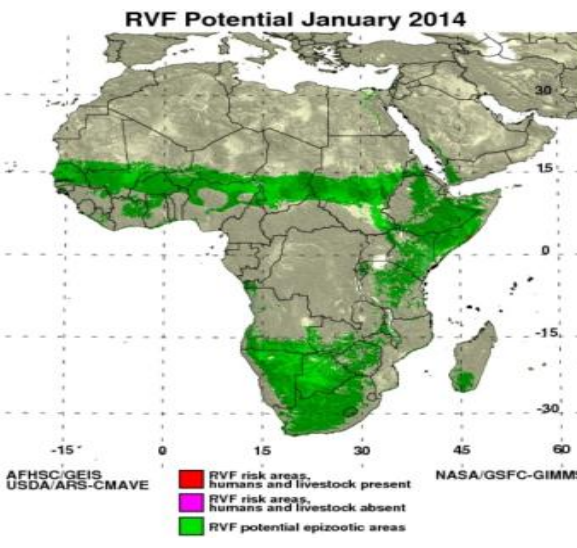
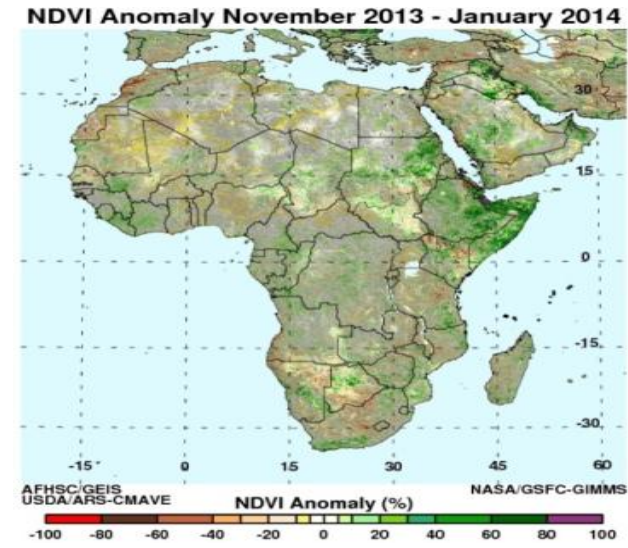
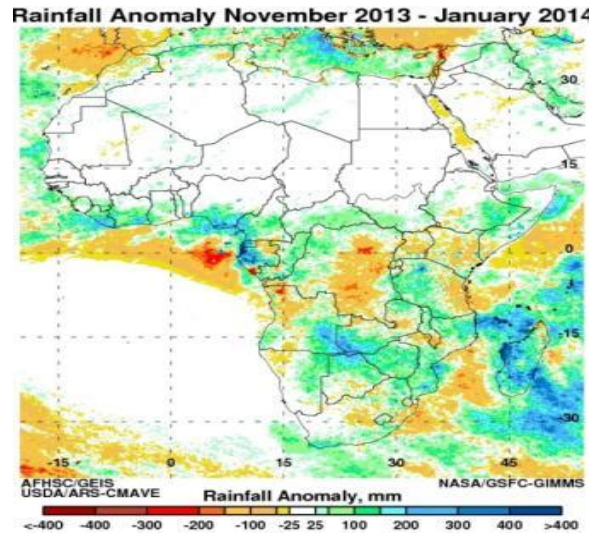
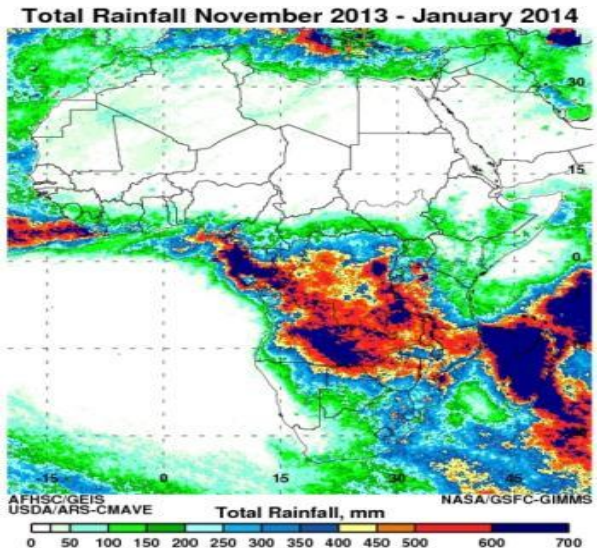
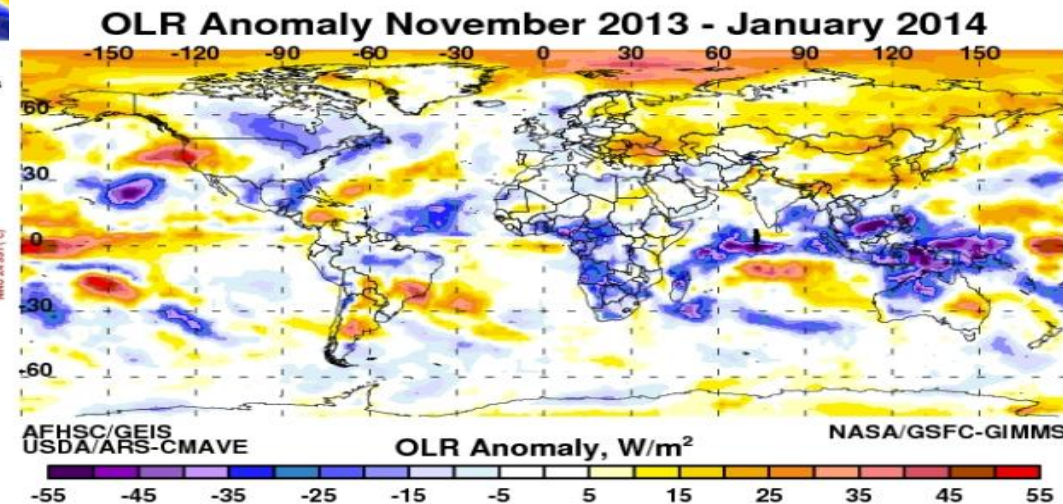
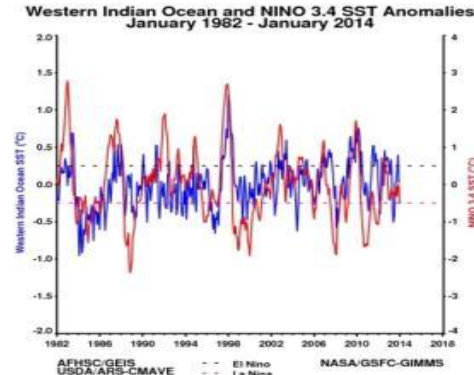
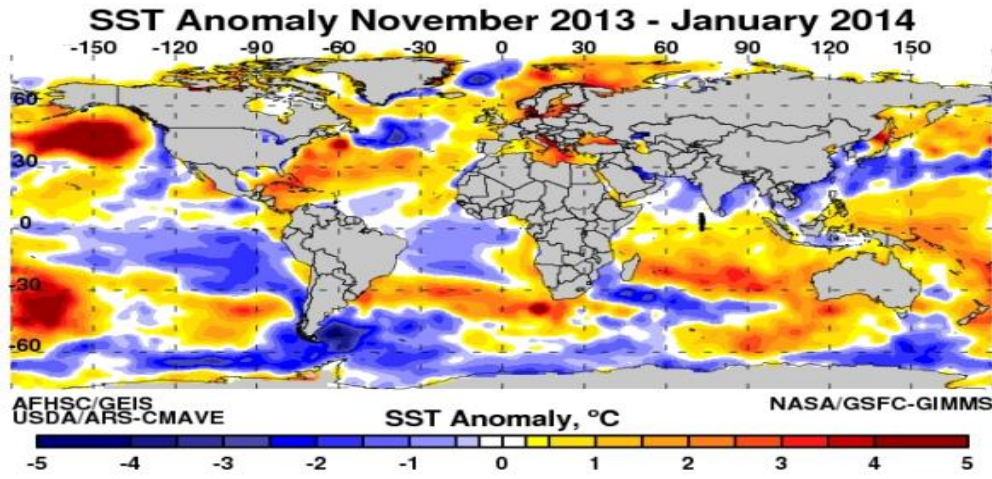




THE GREAT RIFT DIVIDE - BEEF CONSUMPTION IN WESTERN RIFT REGION NORMAL, BARN IMPOSED IN THE EASTERN RIFT REGION, REDUCED BEEF CONSUMPTION, PRICE INCREASE FOR CHICKEN, FISH. CERTIFIED BEEF AVAILABLE FOR CONSUMPTION ONLY FROM KENYA MEAT COMMISSION (KMC)

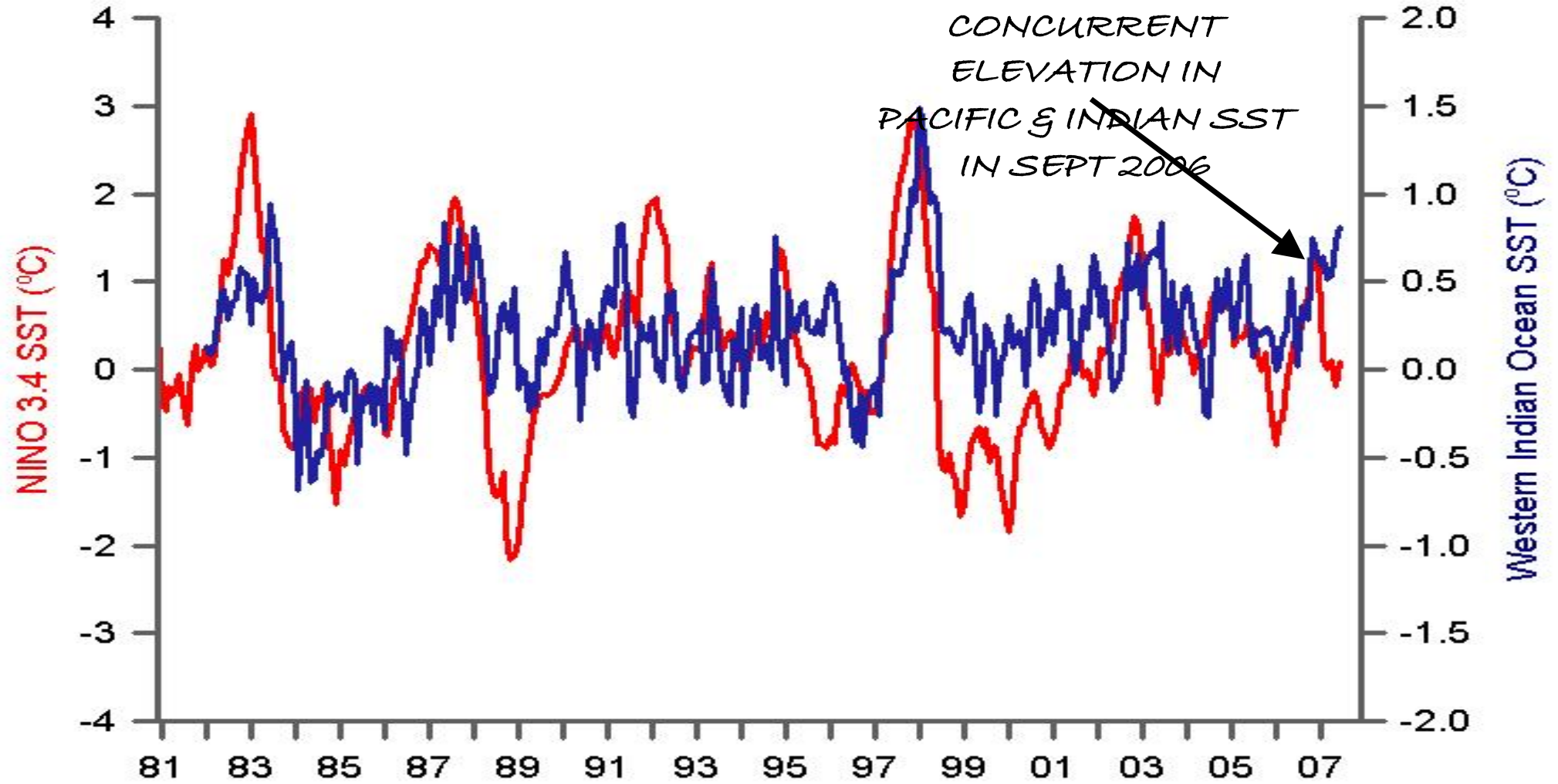


# Rift Valley fever MONITOR

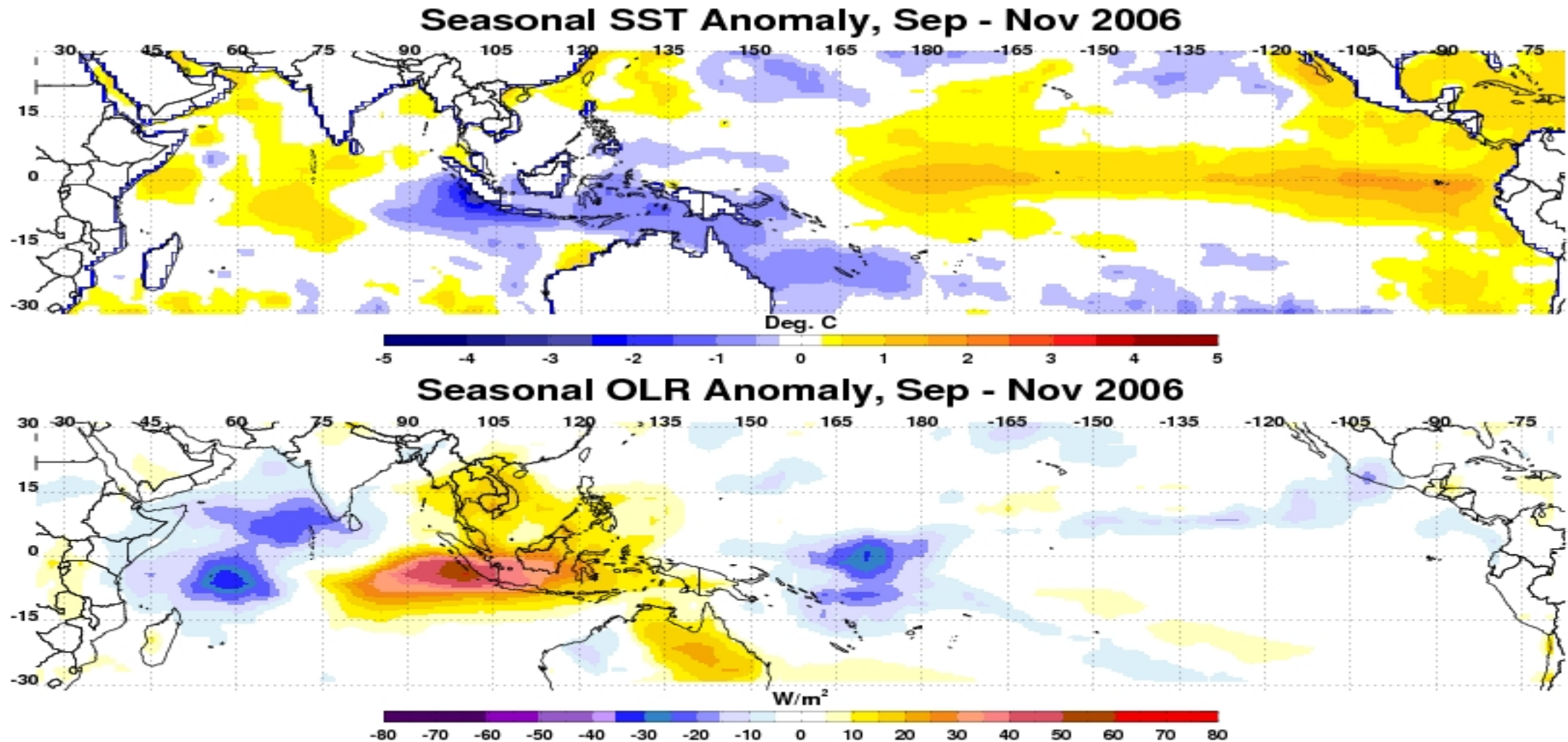


# Prediction of Rift Valley fever SST Time Series

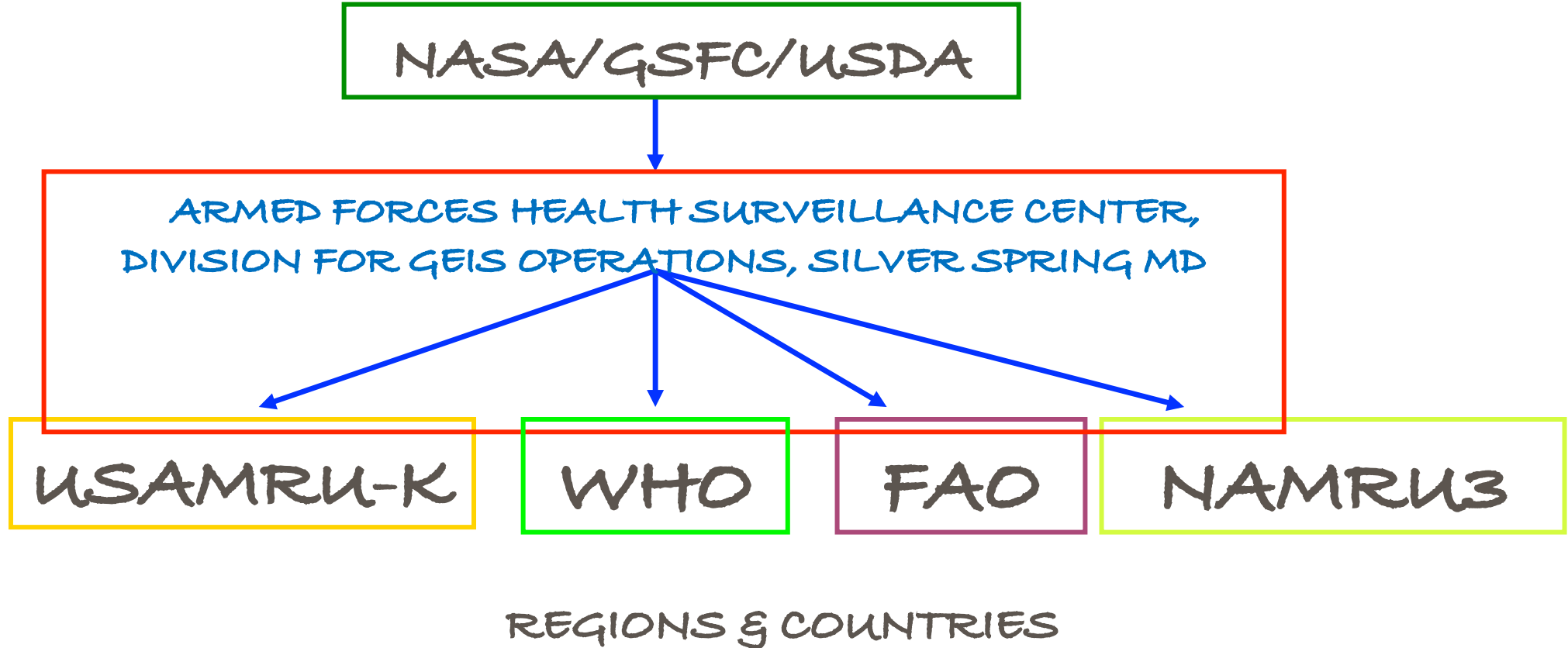
NINO3.4 & WIO SST ANOMALIES



# Successfully Used Remotely Sensed Satellite Global Climate Data to Predict 4 Rift Valley Fever Outbreaks in Livestock and Humans in Africa 2006-2009



# INFORMATION DISSEMINATION INFRASTRUCTURE



EARLY WARNINGS - INCREMENTAL MONTHLY  
PUBLIC DOMAIN, ALERTS - CUSTOMIZED E.G.  
EMPRES

# FAO Alerts: Emergency Prevention System (EMPRES) for Transboundary Animal and Plant Pests and Diseases

## EMPRES WATCH



emergency prevention systems

### Possible RVF activity in the Horn of Africa

#### 1. Introduction

Rift Valley fever (RVF) is an arthropod-borne viral disease of ruminants, camels and humans. It is a significant zoonosis which may present itself from an uncomplicated influenza-like illness to a haemorrhagic disease with severe liver involvement and ocular or neurological lesions. In animals, RVF may be unapparent in non-pregnant adults, but outbreaks are characterised by the onset of abortions and high neonatal mortality. Transmission to humans may occur through close contact with infected material (slaughtering or manipulation of runts), but the virus (Phlebovirus) is transmitted in animals by various arthropods including 6 mosquito genus (*Aedes*, *Culex*, *Mansonia*, *Anopheles*, *Coquillettidia* and *Eretmapodites*) with more than 30 species of mosquitoes recorded as infected and some of them been proved to have a role as vectors. Most of these species get the infection by biting infected vertebrates, yet some of these (specifically *Aedes* species) transmit the virus to their eggs. These infected pools of eggs can survive through desiccation during months or years and restart the transmission after flooding, and then other species (*Culex* spp.) may be involved as secondary vectors.

#### 2. Disease ecology and climatic drivers in the horn of Africa

This vertical infection explains how the disease can persist between outbreaks.

RVF virus (RVFV) is recorded to occur from South Africa to Saudi Arabia including Madagascar, in varied bioclimatic ecotypes, ranging from wet and tropical countries such as the Gambia, irrigated regions such as the Senegal River Valley or the Nile Delta, to hot and arid areas such as Yemen or Chad. The occurrence of RVF can be endemic or epidemic, depending on the climatic and vegetation characteristics of different geographic regions. In the high rainfall forest zones in coastal and central African areas it is reported to occur in endemic cycles which are poorly understood. Currently available evidence suggests that this may happen annually after heavy rainfall, but at least every 2-3 years otherwise. In contrast, in the epidemic areas in East Africa, RVF epidemics appear at 5 to 15 year cycles. These areas are generally relatively high rainfall plateau grasslands, which may be natural or cleared from forests. In the much drier bushed Savannah grasslands and semi-arid zones, which are characteristic for the Horn of Africa, epidemic RVF has manifested itself only a few times in the past 40 years, in 1961-62, 1982-83, 1989 and in 1997-1998.

In addition the possibility exists that RVFV may spread outside traditionally endemic areas, or even out of the continent of Africa, mostly due to the large range of vectors capable of transmitting the virus and requires a level of viraemia in ruminants and humans that is sufficiently high to infect mosquitoes. Such a situation occurred following the unusual floods of 1997-1998 in the Horn of Africa countries, and subsequently the disease spread to the Arabian Peninsula in 2000.

#### 2. Disease ecology and climatic drivers in the horn of Africa

The ecology of RVF has been intensively explored in East Africa. Historical information has shown that pronounced periods of RVF virus activity in Africa have occurred during periods of heavy, widespread and persistent

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7. For more information	6

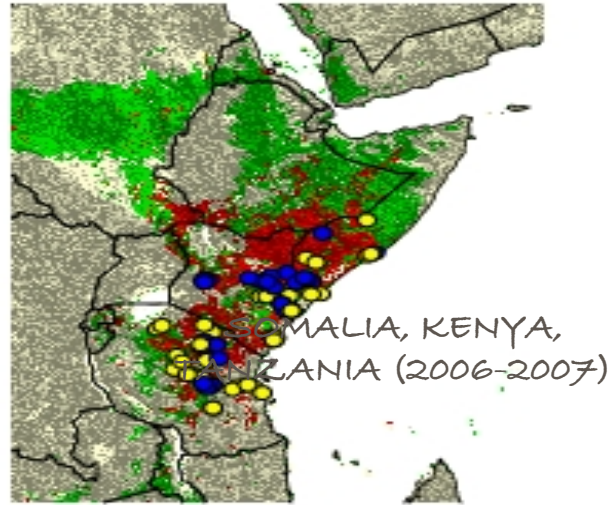


# RVF Outbreaks: Human Case Data

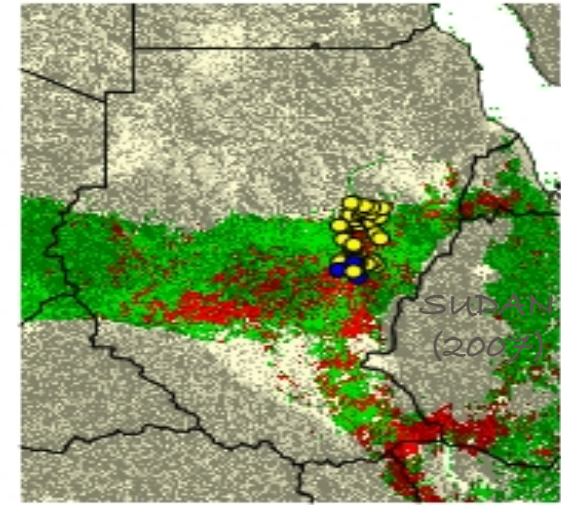
Years	Countries	NB human cases estimates	NB human cases reported	Nb human deaths reported
2006 -07	Kenya	75,000	684	234
2006-07	Somalia	30,000	114	51
2006-07	Tanzania	40,000	264	109
2007-08	Sudan	75,000	738	230
2007-08	Madagascar	10,000	418	17
2007-09	South Africa		15	0
2008-09	Madagascar	2,500	233	4

PREDICTED RIFT  
VALLEY  
FEVER RISK  
AREA (RED)  
AND ACTUAL  
HUMAN CASES  
(YELLOW AND  
BLUE DOTS)

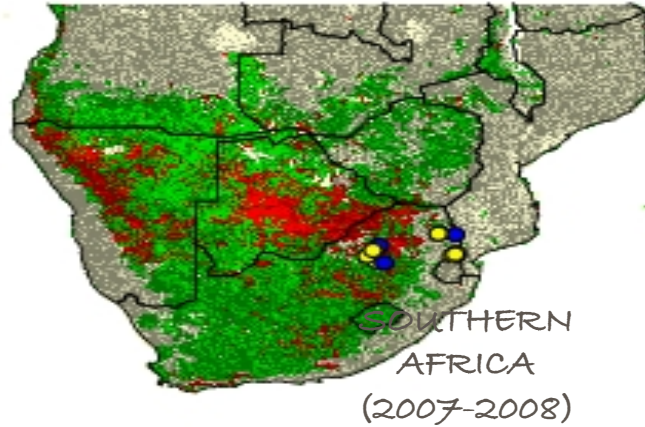
**A**



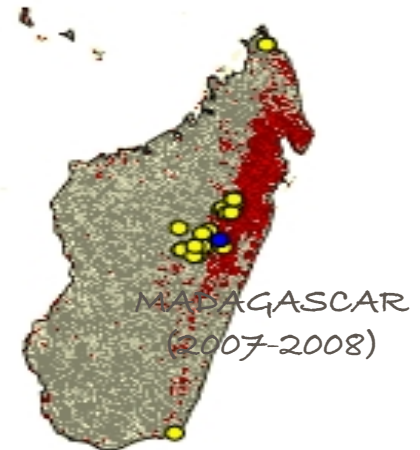
**B**



**C**



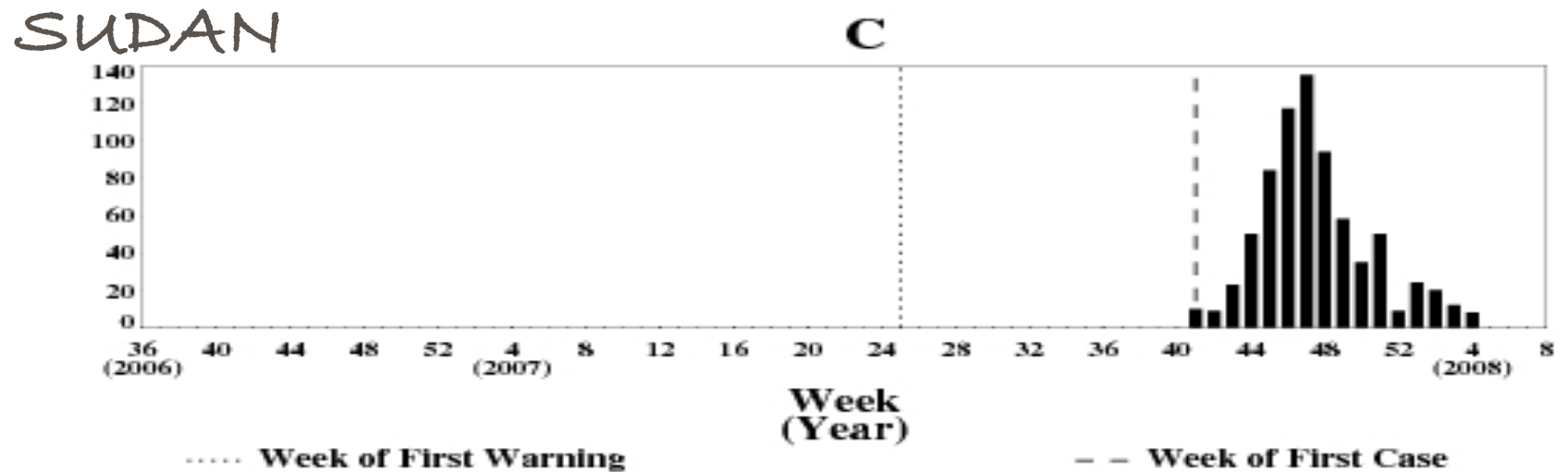
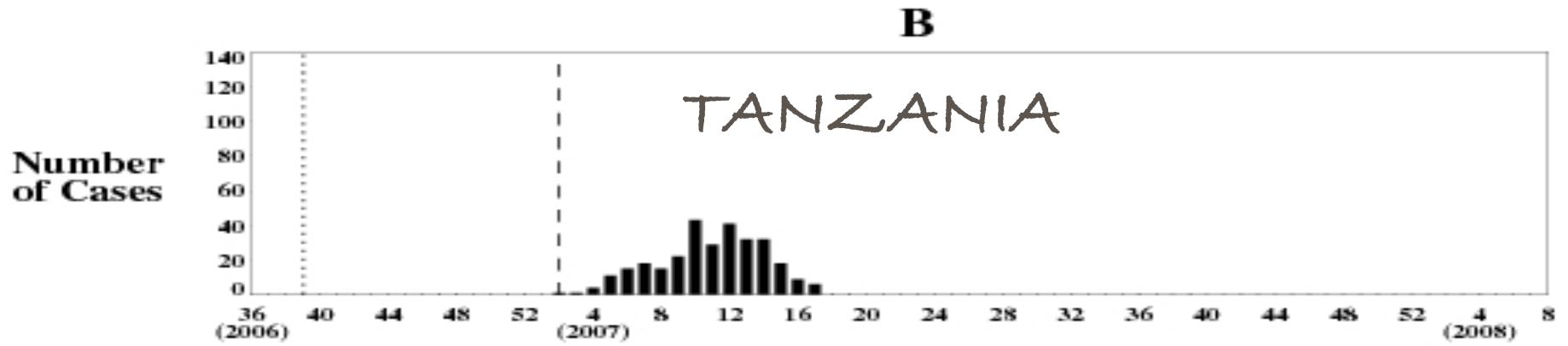
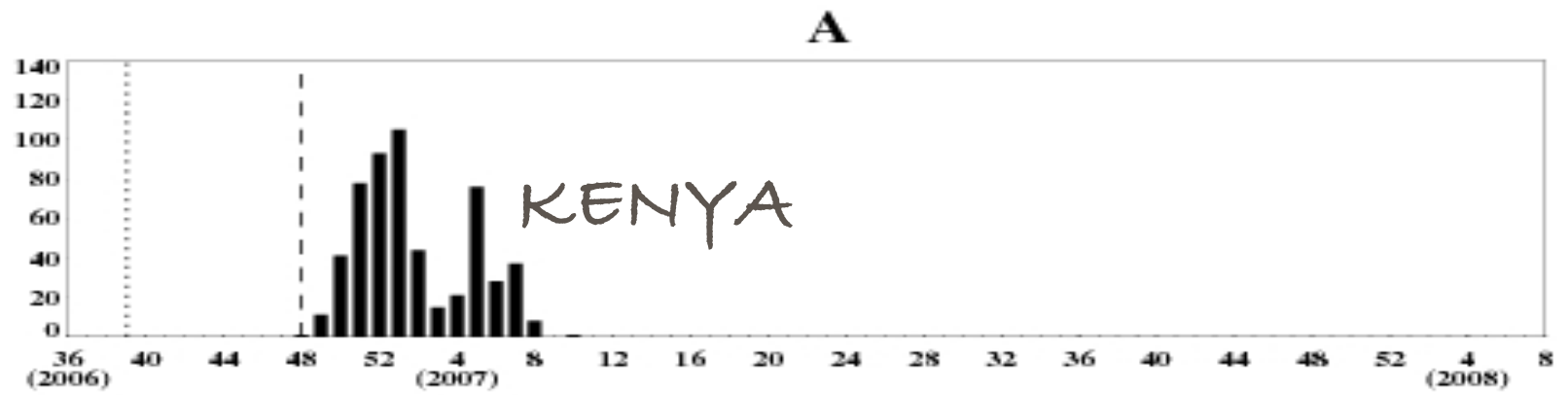
**D**



**■** RVF risk areas  
**■** RVF potential epizootic areas

**●** Identified as Non-Risk  
**●** Identified as Risk

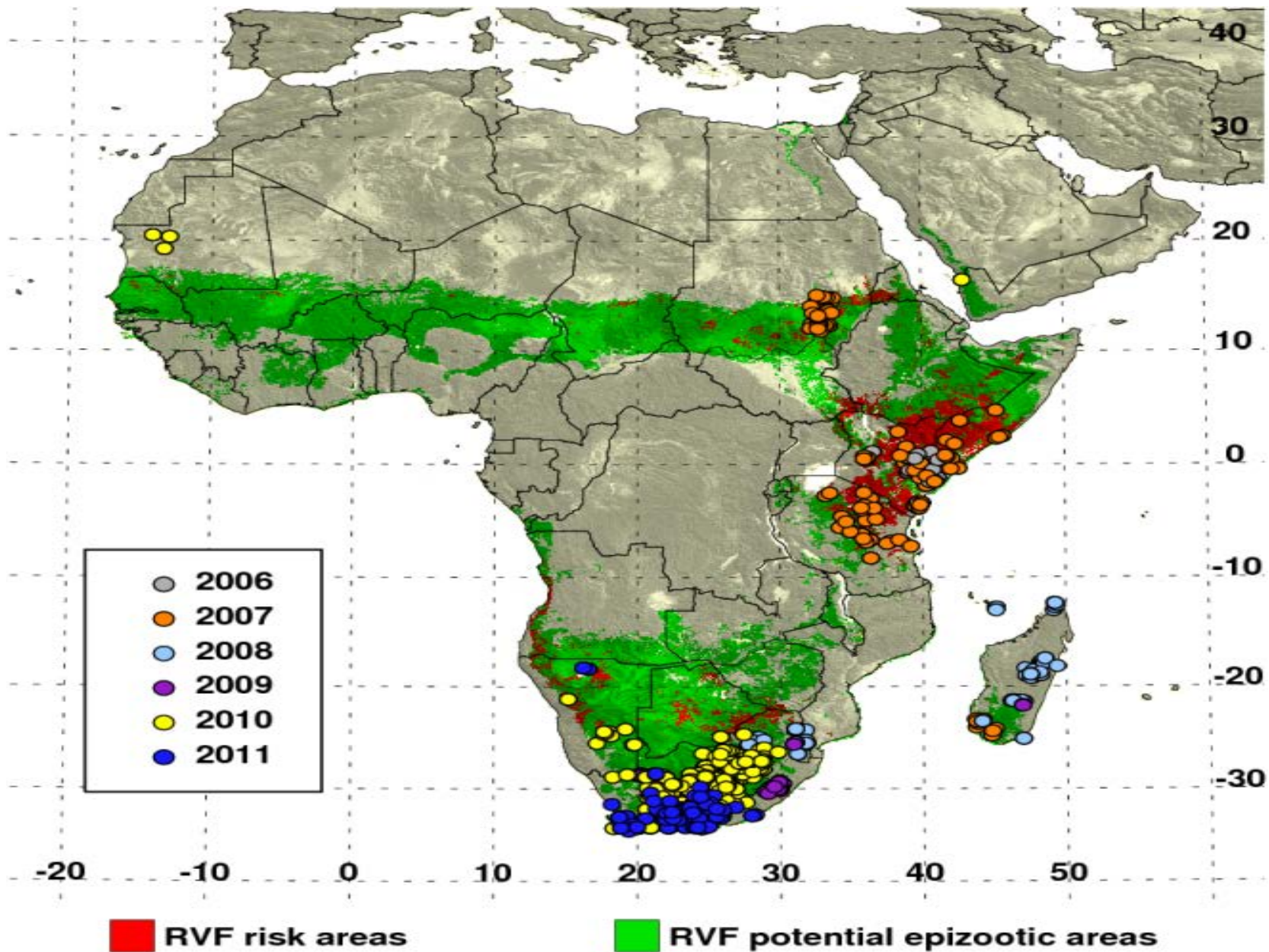
RIFT VALLEY  
 FEVER  
 WARNING  
 (DOTTED  
 LINE)  
 2.5-4.5  
 MONTHS  
 PRIOR  
 TO ONSET OF  
 HUMAN  
 CASES  
 (DASHED  
 LINE)



..... Week of First Warning

-- Week of First Case

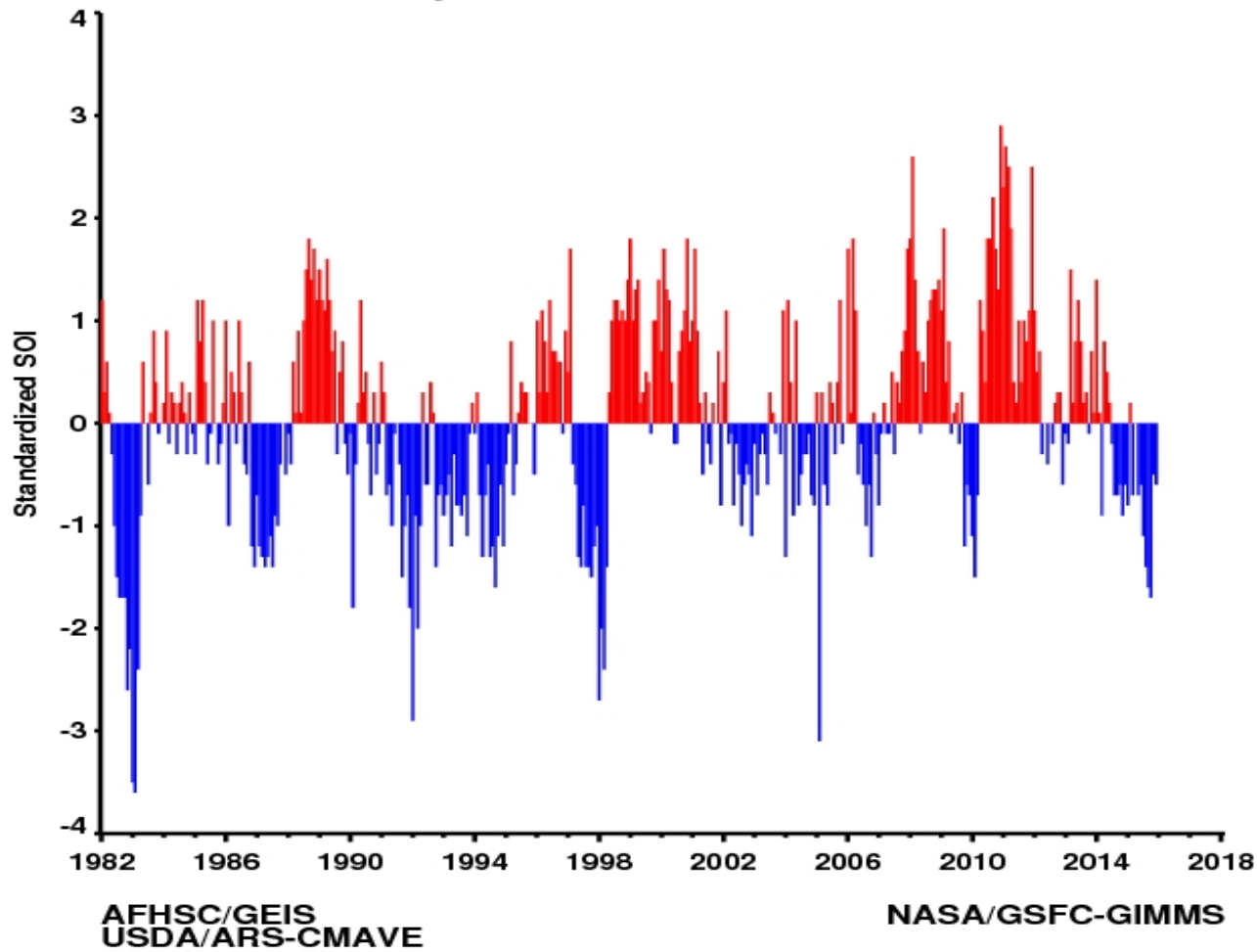
Geographic Distribution of Locations of Rift Valley fever epidemics/epizootics from 2006-2011.



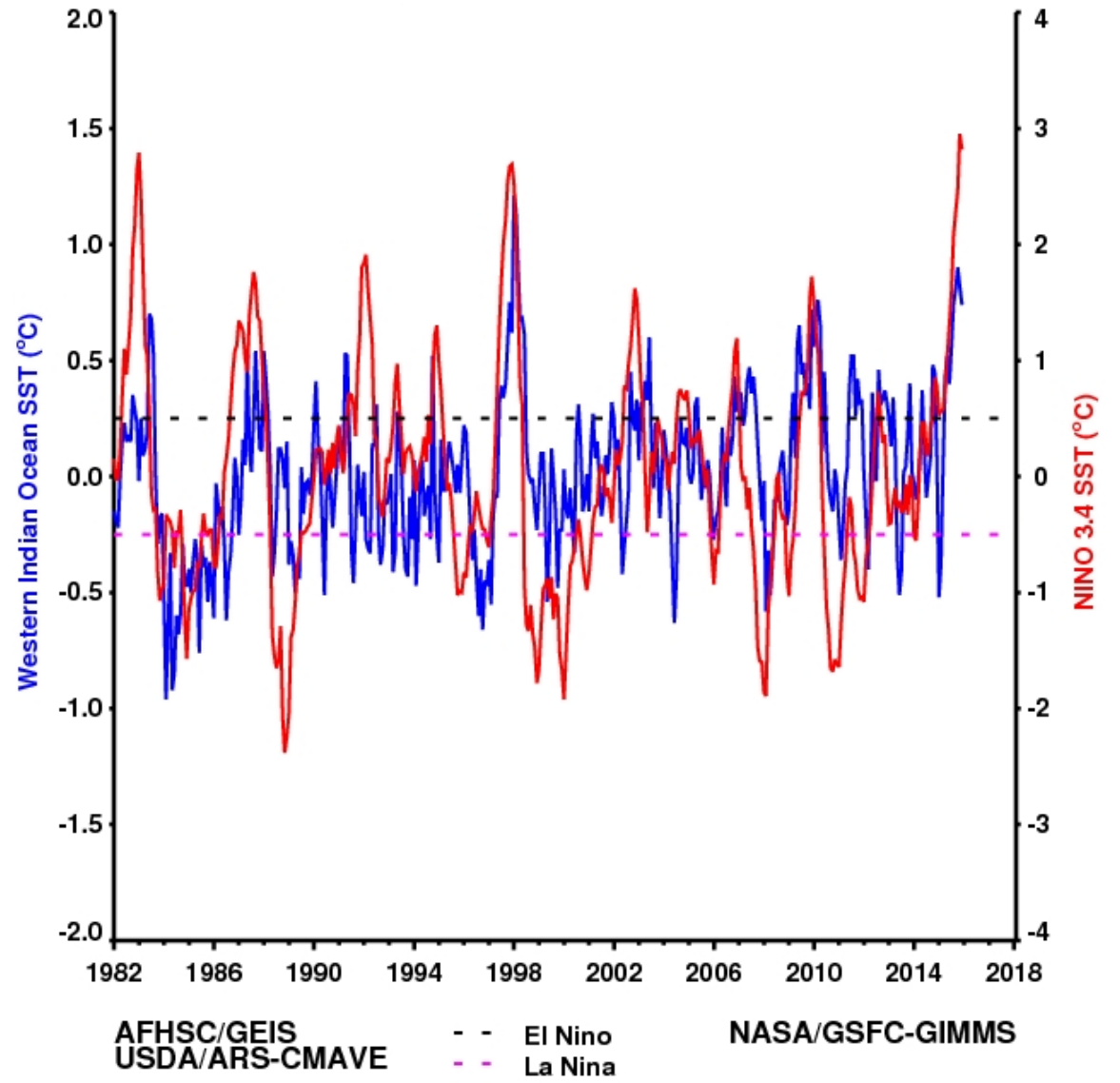


# **3. Recent Past, Current and Near Future (2015-2016) Potential Disease Risks**

### Southern Oscillation Index (SOI) January 1982 - December 2015



### Western Indian Ocean and NINO 3.4 SST Anomalies January 1982 - December 2015



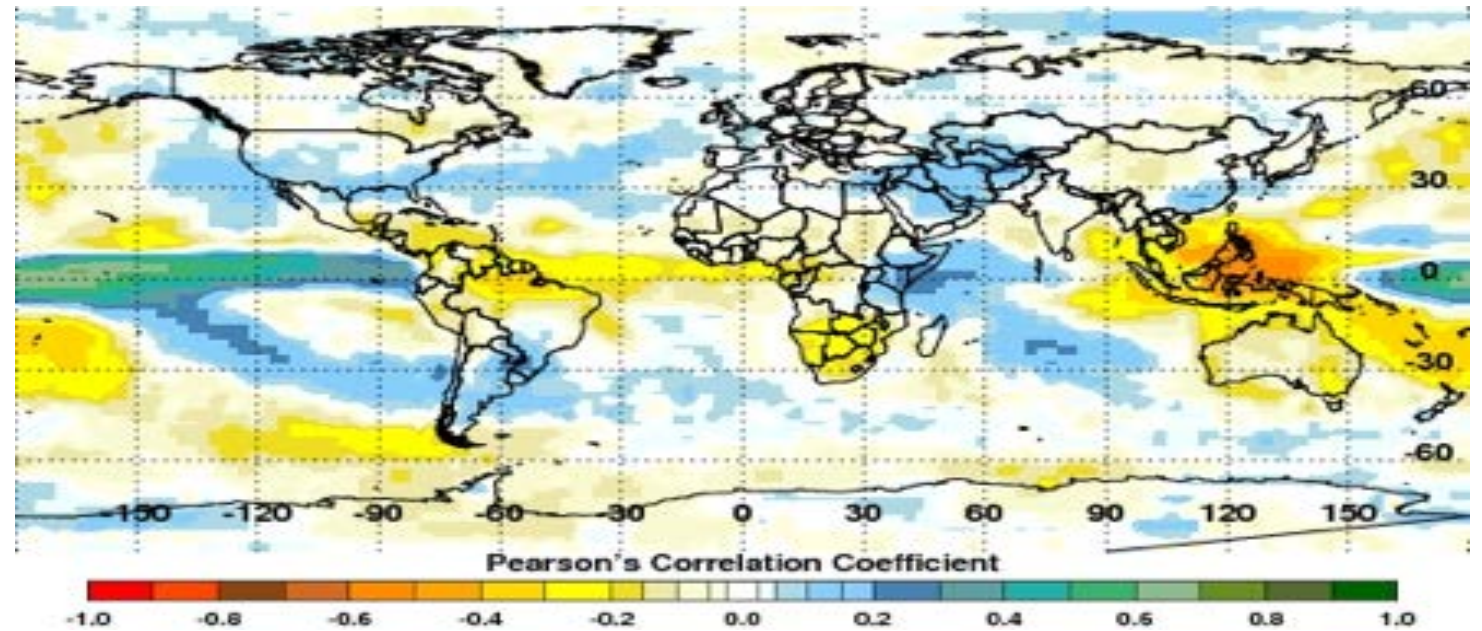
Month	2006-2007		2014 - 2015	
	WIO	NINO3.4	WIO	NINO3.4
April	-0.05	-0.19	+0.10	-0.24
May	+0.21	+0.06	+0.37	+0.46
June	-0.01	+0.20	+0.10	+0.46
July	-0.13	+0.13	-0.09	+0.18
August	+0.17	+0.40	-0.01	+0.20
September	+0.09	+0.62	+0.09	+0.45
October	+0.17	+0.78	+0.48	+0.49

Comparison of the evolution of Western Indian Ocean (WIO) and eastern Pacific Ocean region 3.4 (NINO3.4 SST) anomaly indices in degrees centigrade between 2006-2007 El Niño event and the currently developing 2014-2015 event. Chance of has decreased from 65% (winter to Spring 2015)

# ENSO TELECONNECTIONS

## through Global Precipitation

- Differential impacts at specific regional locations around the world
- ENSO + | Floods and excess rainfall in EEA, E. E. Pacific, Southern Brazil/Argentina, Southern-tire US
- ENSO + | Drought and > + temperatures (Southern Africa, SE Asia, NE Brazil, C Africa)
- ENSO - [Largely reverse conditions)

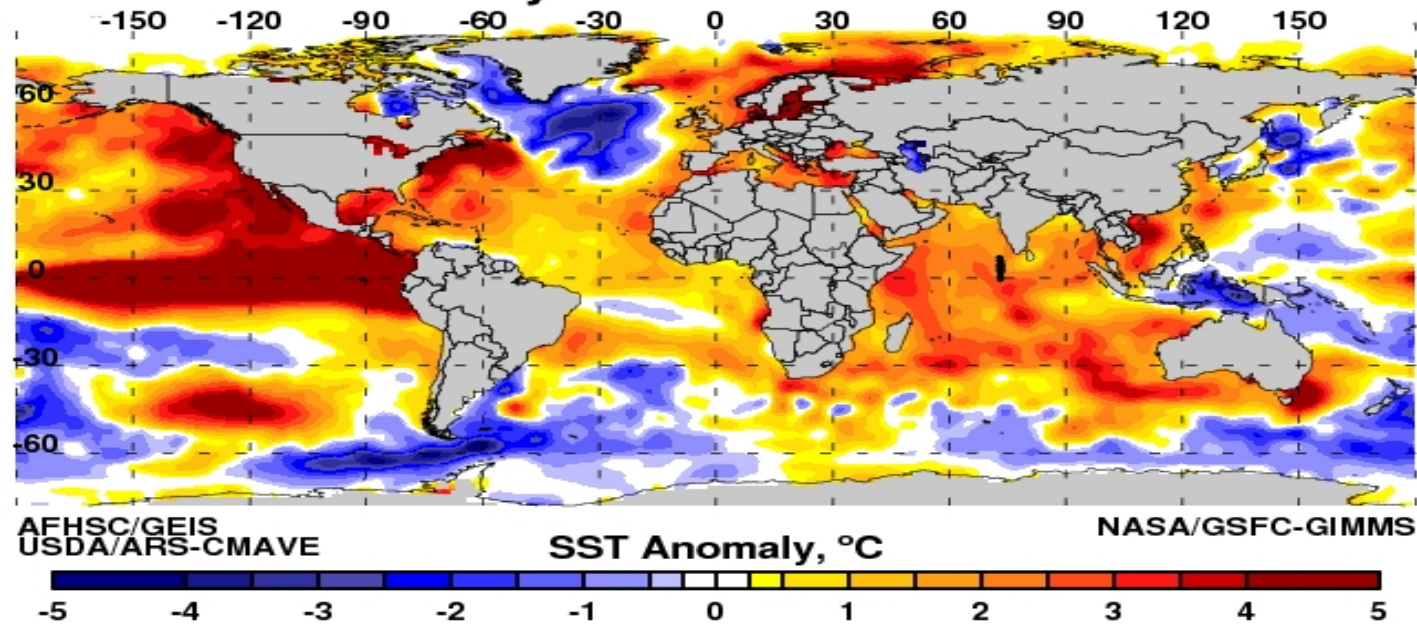


CORRELATION BETWEEN PACIFIC OCEAN (NINO 3.4) [EL NIÑO] SST AND RAINFALL ANOMALIES

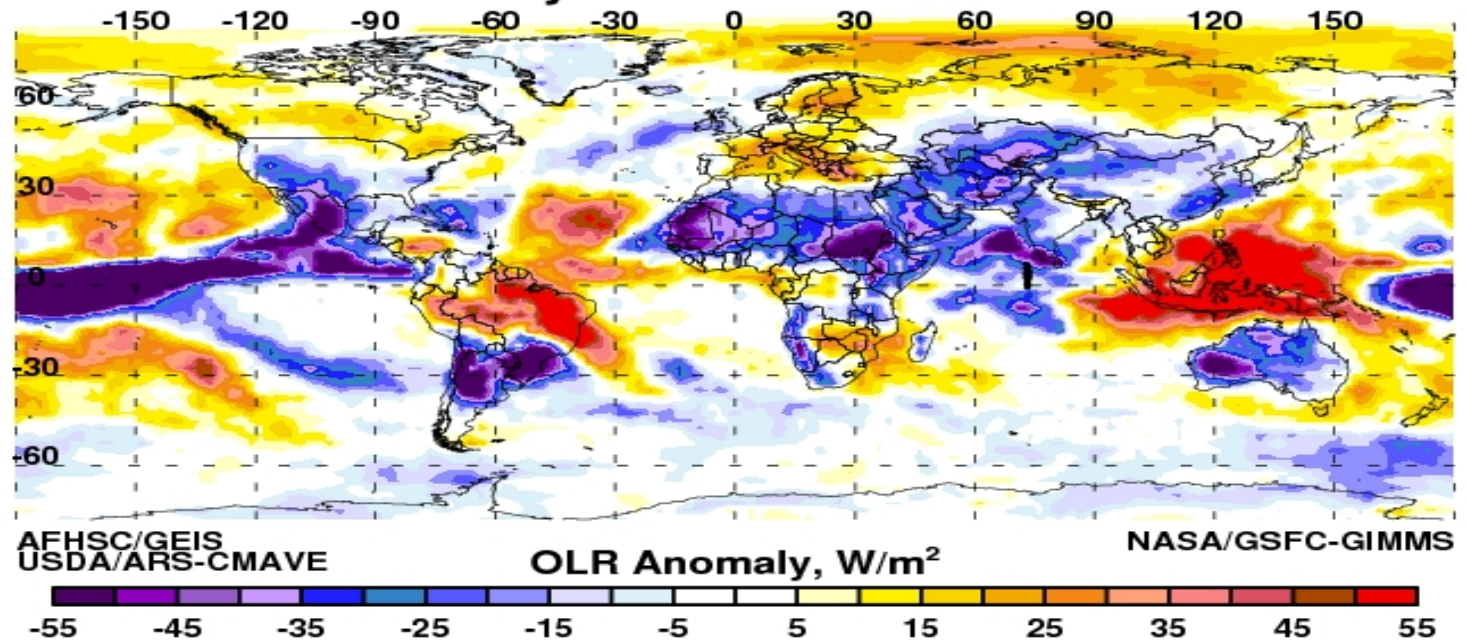
**Green/Blue: +/Wetter Yellow/Red: -/Drier**



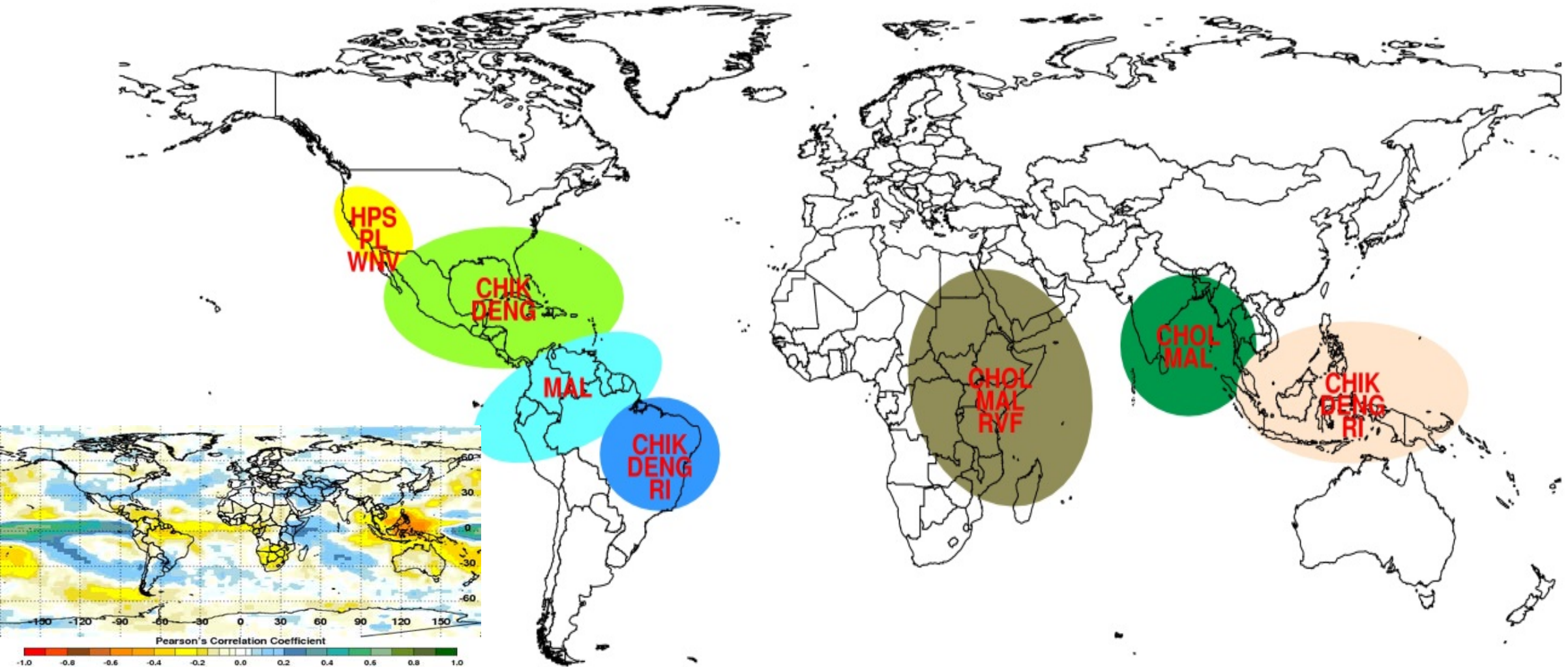
# SST Anomaly October - December 2015



# OLR Anomaly October - December 2015



# Hotspots of Potential Elevated Risk for Disease Outbreaks: 2014-2015



CHIK Chikungunya  
CHOL Cholera  
DENG Dengue Fever

HPS Hantavirus Pulmonary Syndrome  
MAL Malaria  
PL Plague

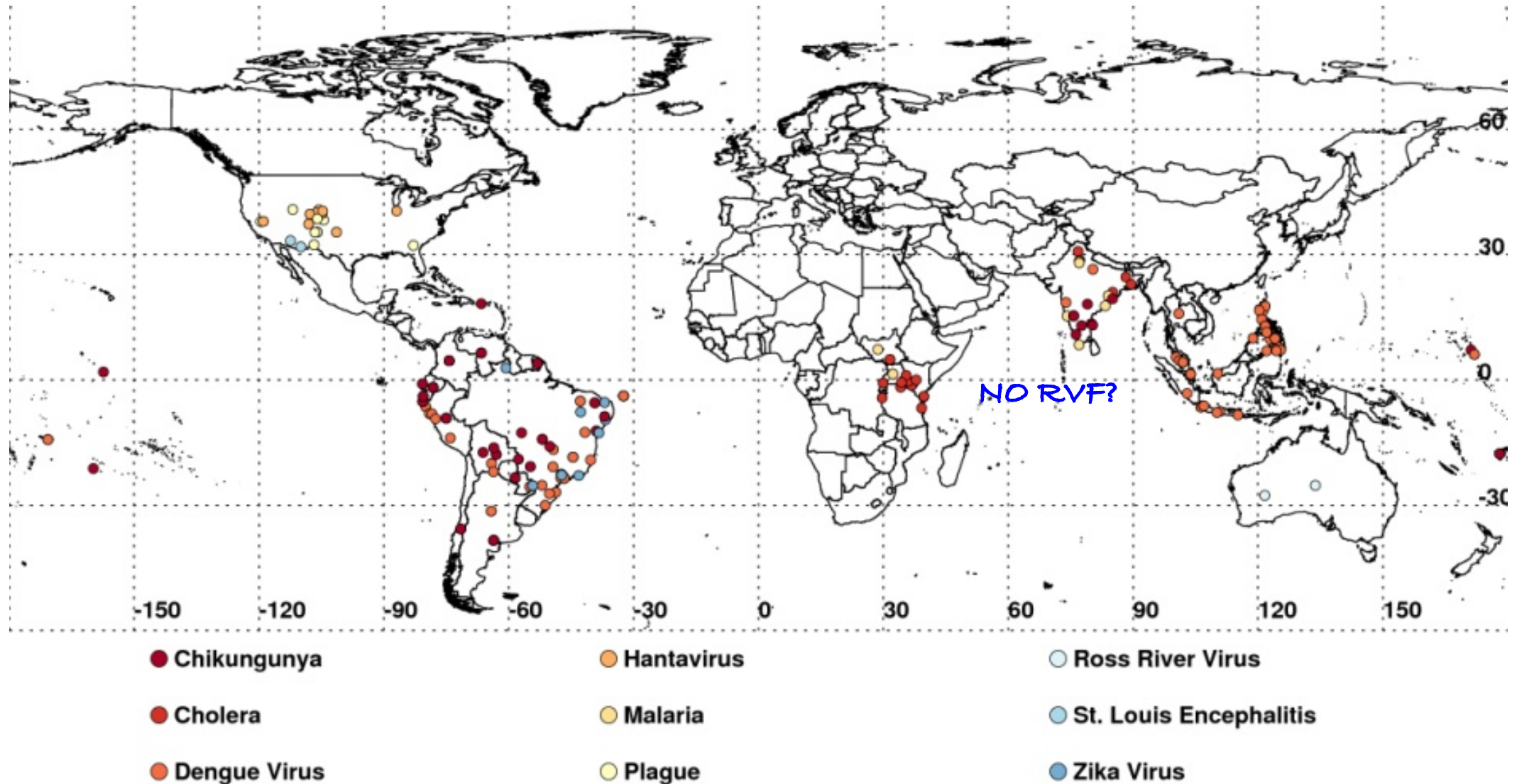
RI Respiratory Illness  
RVF Rift Valley Fever  
WNV West Nile Virus

# GLOBAL ASSESSMENT

ASSUMING EL NIÑO OCCURS IN FALL 2015

- 1. Indonesia, Malaysia, Thailand and most of the Southeast Asia Islands:** Increased risk for dengue and chikungunya transmission caused by drought conditions which (1) increase water storage around houses leading to elevated *Aedes aegypti* mosquito populations and (2) elevate ambient air temperatures which will reduce the extrinsic incubation period for the virus in vector *Aedes aegypti* and *Aedes albopictus* mosquitoes increasing vector capacity; respiratory illnesses due to haze from uncontrolled burning of tropical forests when extreme drought occurs.
- 2. Coastal Peru, Venezuela, Colombia:** Malaria due to elevated *Anopheles* vector populations which will develop when various types of immature habitats are flooded after heavy rainfall.
- 3. Bangladesh, coastal India, Sri Lanka:** Elevated risk for cholera and malaria outbreaks.
- 4. East Africa (Kenya, Tanzania, Somalia, Uganda and Ethiopia):** Increased risk for RVF and malaria resulting from elevated mosquito vector populations, and cholera caused by flooding due to heavy rainfall in dry land areas. We advise early surveillance of vector populations and disease control planning. Much will depend on how the El Niño plays out and the evolution of rainfall conditions in the September – November 2014 period.
- 5. South West USA (New Mexico, Arizona, Colorado, Utah, Texas, California):** Hantavirus pulmonary syndrome and plague due to elevated rodent populations caused by heavy rainfall. Impact on new *Ae. aegypti* populations in central California and *Ae. albopictus* in southern California uncertain (has survived w/o rain).
- 6. Southern and Southeast USA,** particularly along the Gulf Coast: Elevated rainfall conditions may increase *Aedes albopictus* and *Aedes aegypti* populations, potentially increasing the likelihood of local transmission of dengue and chikungunya virus following introduction from endemic regions in the Caribbean and/or Central/South America.
- 7. Northeast Brazil:** Increased risk for dengue and respiratory illnesses due to drought conditions and large scale forest fires. Additionally, increased risk of chikungunya introduction from the Caribbean and/or Central/South America into Brazil.

Some infectious disease risks, primarily mosquito-borne diseases that have been occurring in various parts of the world in 2015 and are likely to continue or increase in severity in 2016 (from Anyamba et. al. NASA-Goddard Space Flight Center/Global Precipitation Climatology Project. See also Chretien et al. 2015



# Flood Mosquito Habitats





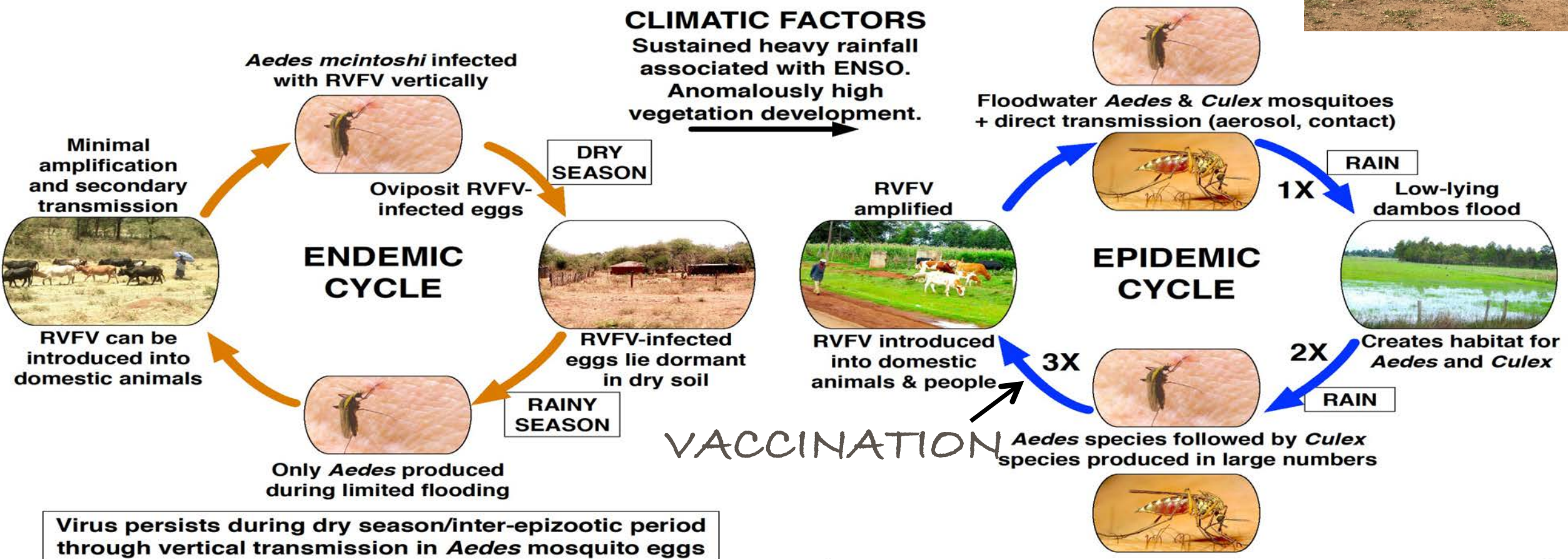




# Rift Valley Fever Virus (RVFV) Life Cycle

## CLIMATIC FACTORS

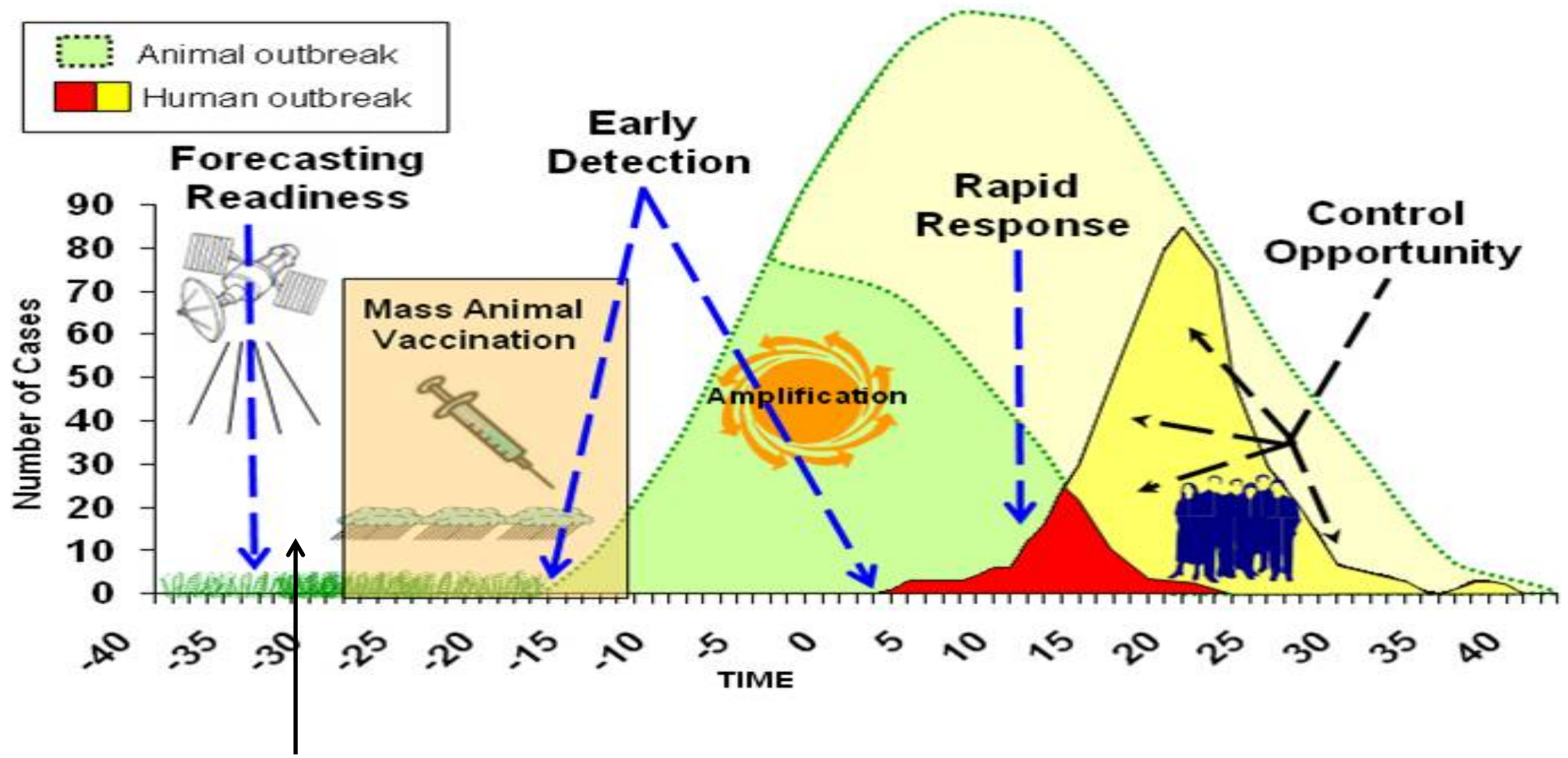
Sustained heavy rainfall associated with ENSO. Anomalously high vegetation development.



Virus persists during dry season/inter-epizootic period through vertical transmission in *Aedes* mosquito eggs

Flooding results in mass hatching of infected *Aedes* eggs and subsequent *Culex* mosquitoes leading to RVF outbreak



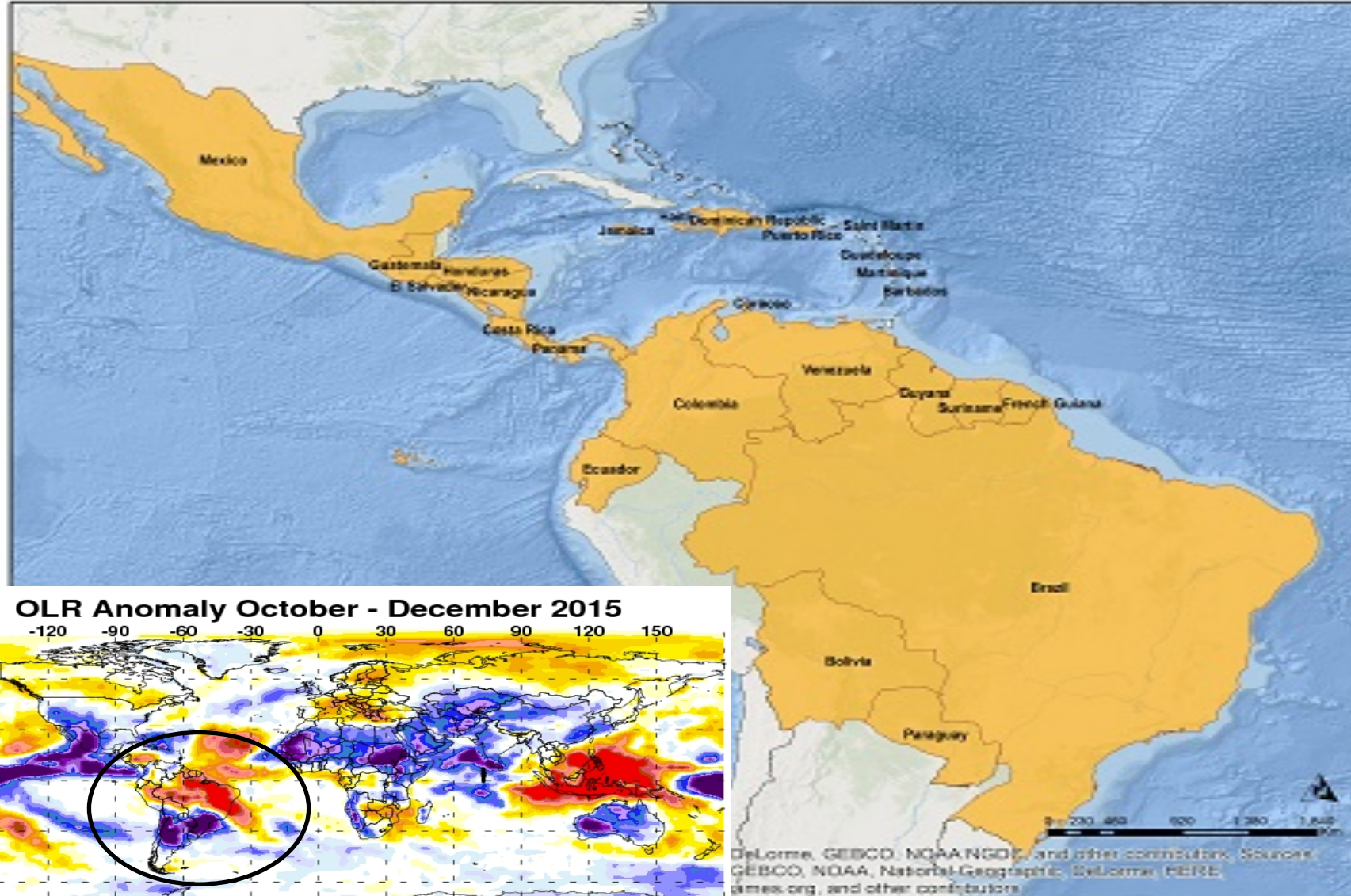


VECTOR CONTROL

# Countries and territories with confirmed cases of Zika virus (autochthonous transmission) in the Americas, 2015-2016.



Updated as of  
Epidemiological Week 4  
(Jan 24-30, 2016)



### Legend

Countries with confirmed cases of Zika virus

Presence

- Countries with confirmed cases
- Country limits

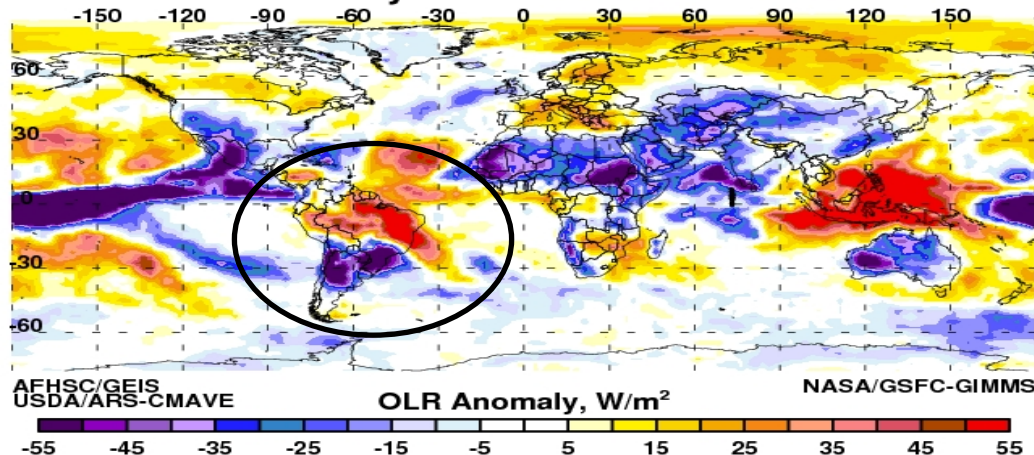


DeLorme, GEBCO, NOAA/NGDC, and other contributors. Sources: GEBCO, NOAA, National Geographic, DeLorme, HERE, James.org, and other contributors.

location lost. Not for circulation, reproduction, publishing or distribution outside of PAHO/WHO. This map do not imply the expression of any opinion whatsoever on the part of PAHO/WHO in relation to its frontiers or boundaries.

Data Source:  
Reported from the IHR National Focal Points  
and through the Ministry of Health websites.  
Map Production:  
PAHO-WHO/AD CHA/IR/ARO

## OLR Anomaly October - December 2015



# DENGUE FEVER HAWAII ISLAND OUTBREAK

Map Updated: 1/25/2016 at 1:00 pm

Potentially Infectious Individuals = 3

Cases No Longer Infectious = 234

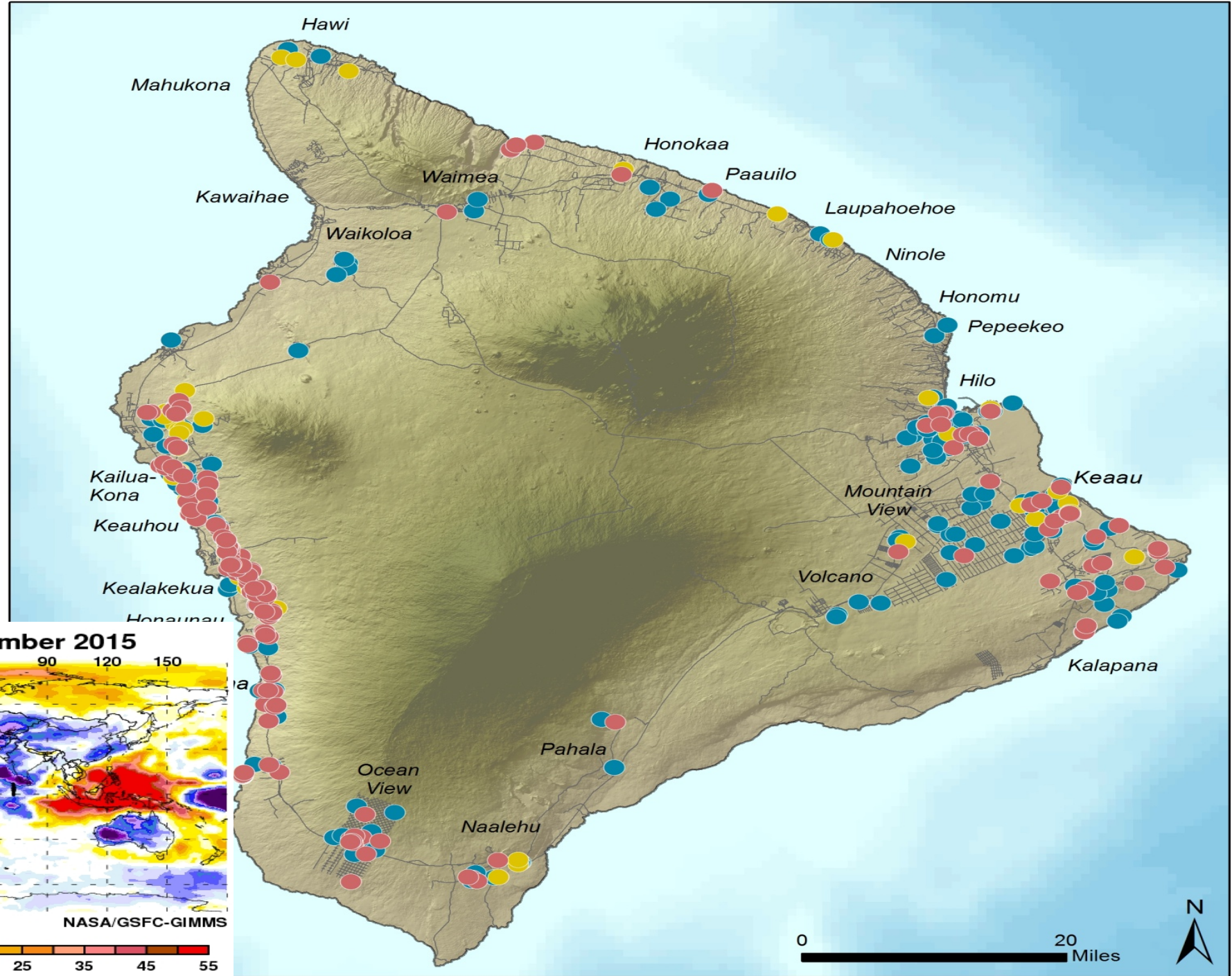
Total Confirmed Cases = 237

- Confirmed DOH Case Locations  
(Tested and Confirmed Positive)
- Suspect DOH Case Locations  
(Under Investigation)
- Negative DOH Case Locations  
(Tested and Confirmed Negative)

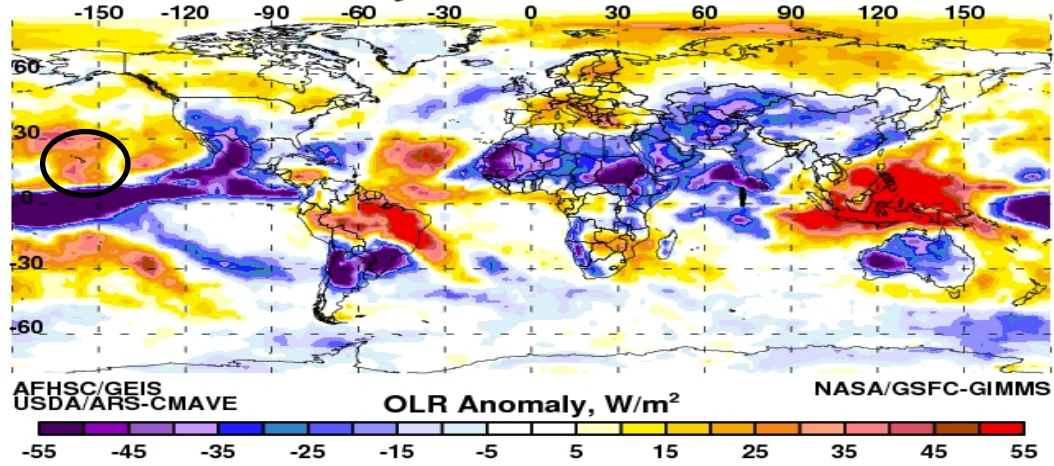
Potentially Infectious Individuals:  
- Illness Onset 1/16/16 to 1/17/16

Cases No Longer Infectious  
- Illness Onset 9/11/15 to 1/13/16

Confirmed Cases:  
- 214 Hawaii Island Residents  
- 23 Visitors  
- 193 Adults

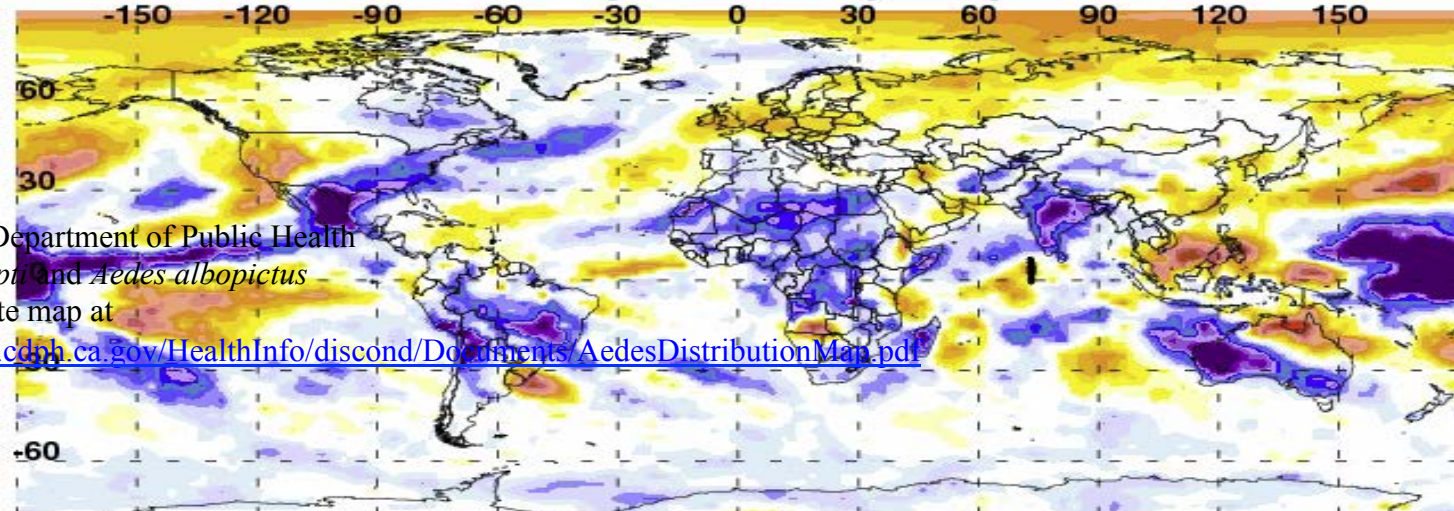


## OLR Anomaly October - December 2015



# *Aedes aegypti* and Detection Sites

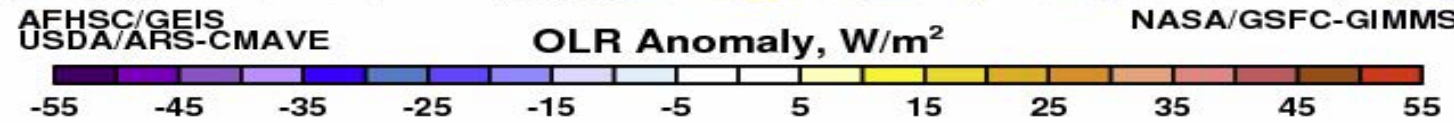
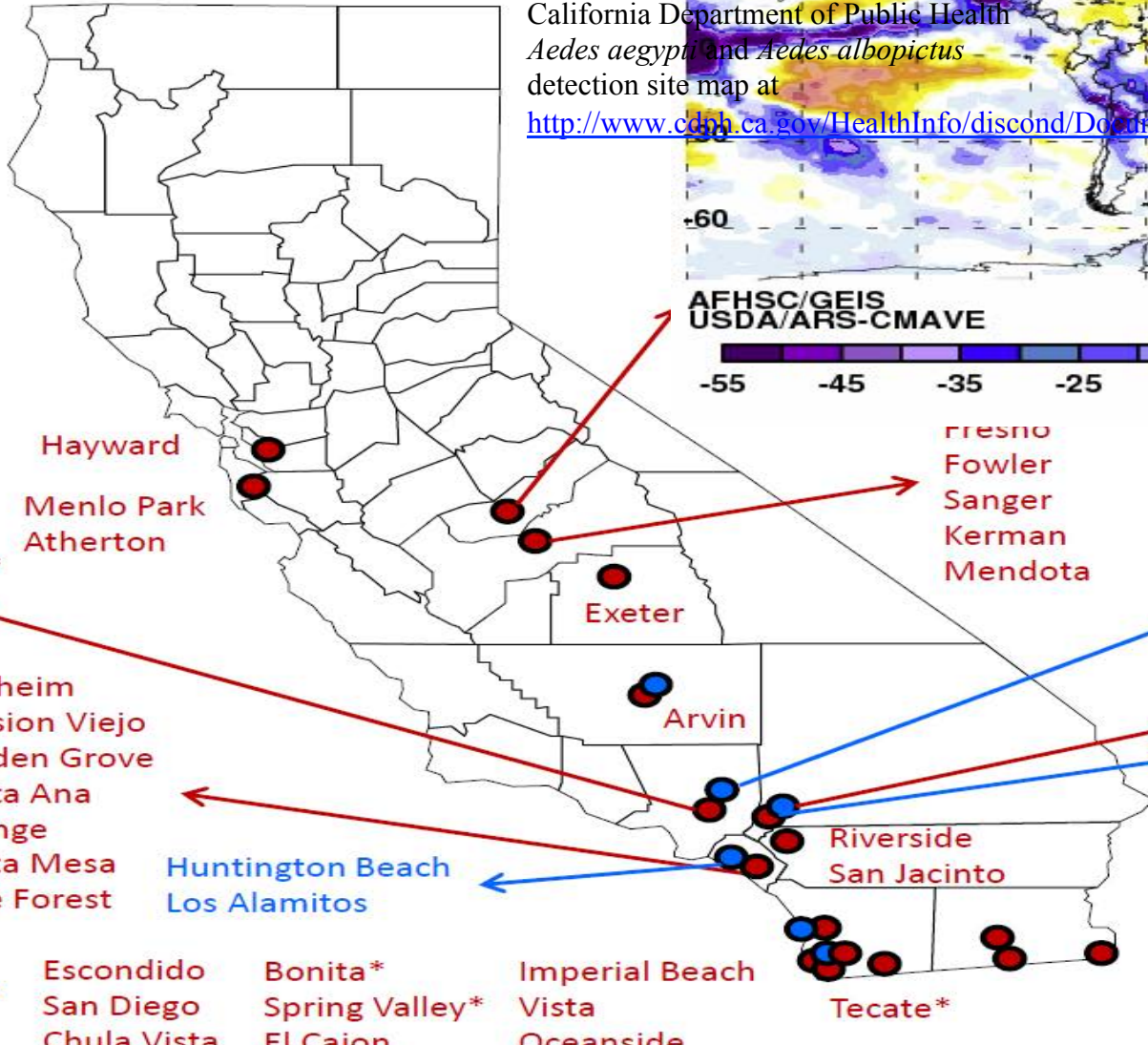
## OLR Anomaly February - April 2015



Update

California Department of Public Health  
*Aedes aegypti* and *Aedes albopictus*  
detection site map at

<http://www.cdph.ca.gov/HealthInfo/discond/Documents/AedesDistributionMap.pdf>



Commerce  
Pico Rivera  
Los Angeles  
East Los Angeles\*  
Maywood  
Montebello  
Florence\*  
South Gate  
La Mirada

Hayward  
Menlo Park  
Atherton

Fresno  
Fowler  
Sanger  
Kerman  
Mendota

Monrovia  
La Puente  
Avocado Heights\*  
Rosemead  
Whittier\*  
Bradbury  
South Whittier\*  
San Gabriel  
Azusa  
Covina  
West Covina  
Glendora  
Los Angeles  
Alhambra  
Pico Rivera  
La Cañada Flintridge

Anaheim  
Mission Viejo  
Garden Grove  
Santa Ana  
Orange  
Costa Mesa  
Lake Forest

Huntington Beach  
Los Alamitos

Montclair  
Colton  
Upland

Riverside  
San Jacinto

Andrade\*  
Calexico  
Heber\*  
El Centro  
Imperial

Brawley  
Holtville  
Seeley\*

San Diego  
Carlsbad

Escondido  
San Diego  
Chula Vista

Bonita\*  
Spring Valley\*  
El Cajon

Imperial Beach  
Vista  
Oceanside

Tecate\*

\*Unincorporated Census-Designated Places

# 4. Summary

# Conclusions

- Some vector-borne disease outbreaks can be predicted using Earth Observing Technologies
- **The development of El Niño/La Niña conditions and subsequent local weather have significant implications for global One Health**
- Threat from globalization of various vector-borne diseases like dengue, chikungunya, malaria and RVF, is real and ever present danger
- Prediction in endemic areas followed by mitigation can reduce threat from globalization

# Rift Valley fever MONITOR

