



Vector-Borne Disease 2026 Surveillance Report Summit County Public Health Report #10



Report Weeks 19 and 20 (September 20 to October 3, 2026)

This report will be issued from June through October of each year (or later if West Nile Virus disease is still a concern). Surveillance will include human and veterinary cases and testing of mosquito pools in Summit County. It will also include updates from Ohio and around the nation. It will include vector-borne diseases besides West Nile Virus.

SUMMIT COUNTY SURVEILLANCE

Reported Vector-borne diseases in 2026 (Table 1): As of October 4, there were 172 reported cases of Lyme disease; 59 were confirmed and 110 were suspected status. There were also 3 confirmed cases of Malaria, 2 suspect cases of Babesiosis and 1 suspect case of RMSF among Summit County residents.

VBS Table 2026			
Tick-borne diseases:	Confirmed	Suspected	Probable
Babesiosis	0	2	0
Ehrlichiosis / anaplasmosis	0	0	0
Lyme Disease	59	110	3
Powassan virus disease	0	0	0
Spotted Fever Rickettsiosis, including Rocky Mountain spotted fever (RMSF)	0	1	0
Mosquito-borne diseases:			
Chikungunya	0	0	0
Dengue	0	0	0
Eastern equine encephalitis	0	0	0
LaCrosse virus disease	0	0	0
Malaria	3	0	0
St. Louis encephalitis virus disease	0	0	0
Zika virus infection	0	0	0
West Nile virus disease (also current infection)	0	0	0
Totals	62	113	3

Data in Table 2 and Table 3 are based on the laboratory information submitted by participating Summit County Hospital Laboratories. While a test associated with West Nile Virus (WNV) may be positive, it does not directly confirm

an active human case. More information regarding laboratory testing for WNV can be found here: [Clinical Testing and Diagnosis for West Nile Virus Disease](#)

Laboratory Monitoring (West Nile Virus, Table 2): During surveillance period weeks 19 and 20, there were 4 tests for West Nile virus ordered by Summit County hospitals, of which 0 were positive. **Some test information may be unaccounted for at this time, related data will be added to future reports once it is made available.

Table 2: West Nile virus (WNV) tests ordered in Summit County hospitals 2026

Week(s)	# of WNV tests ordered this period	# of positive WNV tests this period	Cumulative # of tests ordered this season	Cumulative # of positive tests this season	Percentage of positive tests
Weeks 1 & 2: 5/17 to 5/30	6	0	6	0	0.00%
Weeks 3 & 4: 5/31 to 6/13	3	0	9	0	0.00%
Weeks 5 & 6: 6/14 to 6/27	5	0	14	0	0.00%
Weeks 7 & 8: 6/28 to 7/11	5	0	19	0	0.00%
Weeks 9 & 10: 7/12 to 7/25	9	0	28	0	0.00%
Weeks 11 & 12: 7/26 to 8/8	8	0	36	0	0.00%
Weeks 13 & 14: 8/9 to 8/22	4	0	40	0	0.00%
Weeks 15 & 16: 8/23 to 9/5	10	0	50	0	0.00%
Weeks 17 & 18: 9/6 to 9/19	7	0	57	0	0.00%
Weeks 19 & 20: 9/20 to 10/3	4	0	61	0	0.00%
Weeks 21 & 22: 10/4 to 10/17					

Note: Reporting may not be completed each week. Numbers will be updated when reports are received

Laboratory Monitoring (Lyme Disease, Table 3): There were 9 diagnostic test series performed for Lyme disease during weeks 19 and 20, 0 tests were positive and 0 were indeterminate. **Some test information may be unaccounted for at this time, related data will be added to future reports once it is made available.

Table 3: Lyme disease tests ordered in Summit County hospitals 2026

Week(s)	# of Lyme tests ordered this period	# of positive Lyme tests this period	Cumulative # of tests ordered this season	Cumulative # of positive tests this season	Percentage of positive tests
Weeks 1 & 2: 5/17 to 5/30	29	1	29	1	3.45%
Weeks 3 & 4: 5/31 to 6/13	20	5	49	6	12.24%
Weeks 5 & 6: 6/14 to 6/27	30	8	79	14	17.72%
Weeks 7 & 8: 6/28 to 7/11	18	5	97	19	19.59%
Weeks 9 & 10: 7/12 to 7/25	38	6	135	25	18.52%
Weeks 11 & 12: 7/26 to 8/8	17	1	152	26	17.11%
Weeks 13 & 14: 8/9 to 8/22	27	7	179	33	18.44%
Weeks 15 & 16: 8/23 to 9/5	28	2	207	35	16.91%
Weeks 17 & 18: 9/6 to 9/19	11	1	218	36	16.51%
Weeks 19 & 20: 9/20 to 10/3	9	0	227	36	15.86%
Weeks 21 & 22: 10/4 to 10/17					

Note: Reporting may not be completed each week. Numbers will be updated when reports are received

For information about Diagnosis and Testing, visit this [link](#).

SUMMIT COUNTY EMERGENCY CARE DATA

Chart 1. Summit County Resident Emergency Room Visits related to Tick Bites by Month (Up to 10/4/2026):

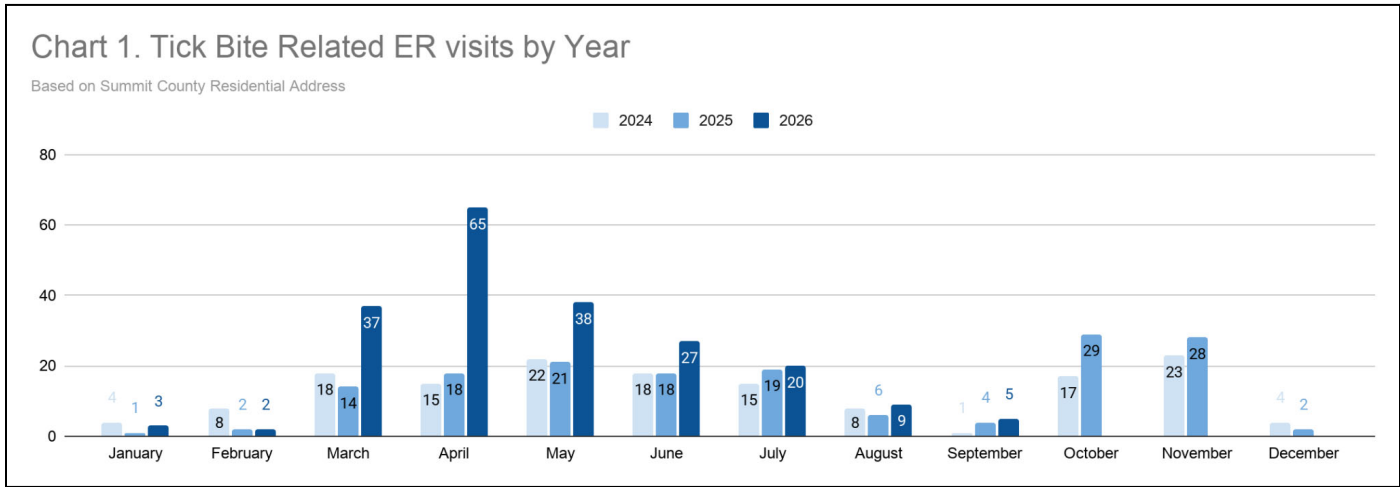
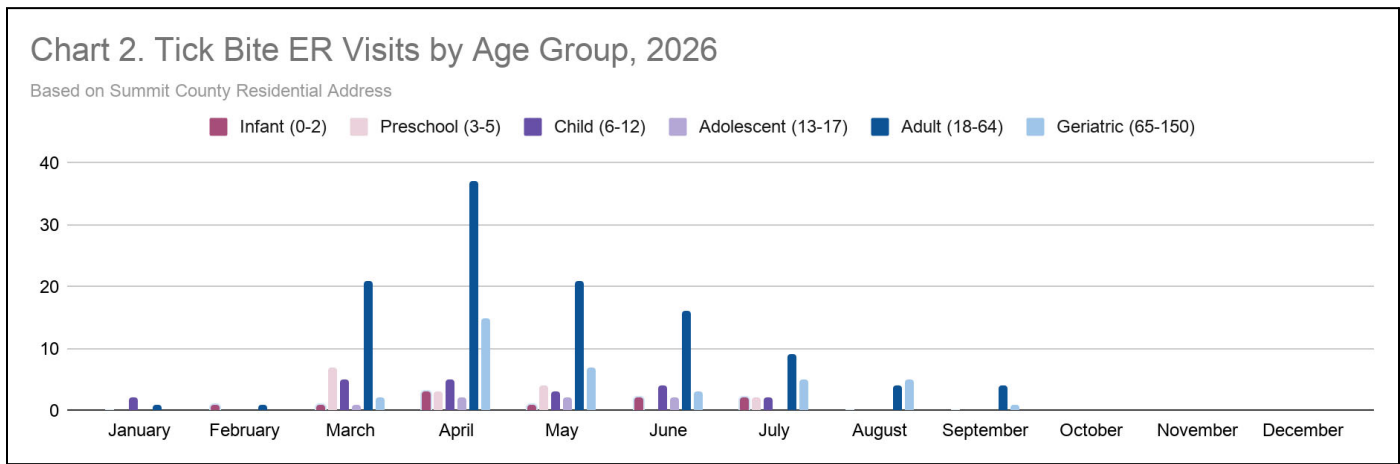


Chart 2. Summit County Resident Emergency Room Visits related to Tick Bites by Age Group (Up to 10/4/2026):



Tracking Tick Bites via Ohio’s EpiCenter System:

EpiCenter is Ohio’s statewide syndromic surveillance system operated by the Ohio Department of Health (ODH) in partnership with Health Monitoring Systems, Inc. It automatically tracks, manages, and visualizes real-time, de-identified data from approximately 94% of Ohio’s emergency department (ED) and urgent care visits.

By continuously analyzing the "chief complaints" and symptoms of patients upon registration, EpiCenter serves as an early warning radar for public health threats, including the tracking of tick bites and subsequent tick-borne illnesses.

For more information: [ODH Syndromic Surveillance Reporting](#)

OHIO VECTOR IDENTIFICATION DATA

Table 4. Notable mosquito and tick species identifications in Summit County (as of October 1, 2026)			
Species name	Diseases associated	Summit County	Ohio
Mosquito species			
<i>Aedes albopictus</i>	Chikungunya, dengue fever, yellow fever	49	9,301
<i>Aedes triseriatus</i>	La Crosse encephalitis	623	4,169
<i>Coquillettia perturbans</i>	Eastern equine encephalitis, West Nile virus	104	358
Tick species			
<i>Amblyomma americanum</i>	Ehrlichiosis, tularemia, red meat allergy	-	354
<i>Dermacentor variabilis</i>	Rocky Mountain spotted fever, tularemia	-	2,429
<i>Ixodes scapularis</i>	Lyme disease, babesiosis, anaplasmosis	12	1,679
Source: Ohio Department of Health (Identification via mailed specimens, emailed photos and iNaturalist observations)			

Mosquito testing by the Ohio Department of Health:

Table 5. Mosquito Testing in Summit County (samples processed by noon on 10/1/26)	
Mosquitoes identified	49,164
Pooled samples tested	42,427
Positive WNV pooled samples	58
Note: All mosquitoes pools tested were <i>Culex</i> spp.	

Special note for travelers:

Ohioans traveling to areas where local transmission is occurring should be aware of the ongoing situation and make every effort to avoid mosquito bites. Additional information can be found from the [Centers for Disease Control and Prevention \(CDC\)'s Travelers' Health](#) and [Pan-American Health Organization](#) websites.

TRENDS IN VECTOR-BORNE DISEASE IN SUMMIT COUNTY, 2013 - 2025

Table 6 provides data on the vector-borne diseases that were reported in Summit County from 2013 to 2025. The vector for Lyme disease, the blacklegged tick (*Ixodes scapularis*), was first identified in Ohio in 1989, but populations did not begin to increase dramatically until 2009. The blacklegged tick is now established throughout eastern and southern Ohio, and has been collected in all of Ohio's 88 counties.

Table 6. Reported vector-borne disease cases in Summit County, 1/1/2013 - 12/31/2025

	2013	2014	2015	2016	2017	2018	2019	2020	2021	2022	2023	2024	2025
Babesiosis	0	0	0	0	1	0	0	1	1	0	2	2	0
Ehrlichiosis / anaplasmosis	1	0	0	0	3	1	2	1	2	0	0	0	0
Lyme Disease	9	18	14	21	33	29	32	44	86	92	171	158	204
Spotted Fever Rickettsiosis, (including Rocky Mountain spotted fever)	2	0	0	0	2	6	4	0	1	0	0	0	0
West Nile virus disease	0	0	2	0	1	3	0	0	1	0	1	1	1
Other mosquito-borne disease acquired outside contiguous US*	1	6	3	6	3	5	2	0	2	4	10	2	1
Other mosquito-borne disease acquired within contiguous US**	1	0	2	0	1	0	0	2	3	0	0	0	0
	14	24	21	27	44	44	40	48	96	96	184	163	206

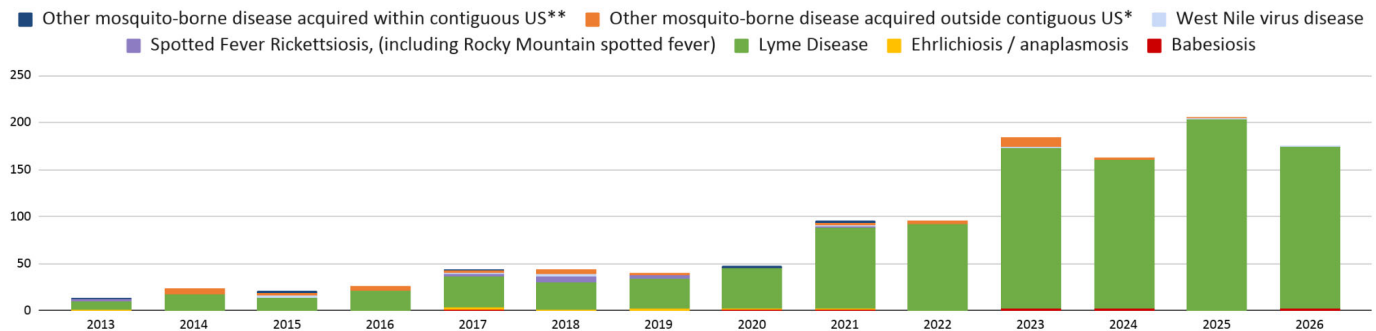


Chart 3. Reported vector-borne disease cases in Summit County, 2013 – 2025

Notes: * Includes imported cases of malaria, chikungunya, dengue, and Zika virus infection

** Includes LaCrosse virus disease and St. Louis encephalitis virus disease

Data Source: Ohio Disease Reporting System

OTHER AVAILABLE RESOURCES

Source [CDC STACKS NNDSS](#): National Notifiable Disease Surveillance System

- Weekly and Annual statistics from the National Notifiable Diseases Surveillance System (NNDSS), a nationwide collaboration that enables all levels of public health—local, state, territorial, federal, and international—to share notifiable disease-related health information. Find tables on a specific condition by searching for the condition using the CDC Stacks Search bar. Users may also browse the Topics filter on the left panel; topics are currently being updated and browsing may not provide comprehensive results.

Source [Ohio Vector-borne Disease Surveillance Update](#)

- The Ohio Department of Health (ODH) Zoonotic Disease Program, in partnership with ODH Laboratory, local public health partners, and sanitary district partners, conducts statewide vector-borne disease surveillance which includes monitoring for human and veterinary cases.
- “We will monitor for diseases transmitted by mosquitoes and ticks throughout the summer and fall and will report positive results and summary statistics on this website, updated each Friday at noon.”
- For more data on human cases of mosquito-borne and tickborne diseases, please visit ODH's infectious disease dashboard.

Source [CDC West Nile Virus 2026](#)

- ArboNET is a national arboviral surveillance system managed by CDC and state health departments.
- These data are preliminary and subject to change.
- Current season data are updated every one to two weeks during June through December.
- Due to delays in reporting, state, territorial, and local health departments may have more up-to-date information than what is presented here.

About this report: Reporting agencies include Summit County hospital laboratories and the Ohio Department of Health. Vector-borne disease case data for Summit County are obtained from the Ohio Disease Reporting System.

Many thanks to all agencies who report vector-borne disease data weekly.

Reporting from participants may not be complete each week. Numbers may change as updated reports are received. For questions, please contact Julie Zidones (JZidones@schd.org) or the Summit County Public Health Communicable Disease Unit (330-375-2662). This report was issued on **October 6, 2026**.