



Department of Health and Human Services
Maine Center for Disease Control and Prevention
286 Water Street
11 State House Station
Augusta, Maine 04333-0011
Tel: (207) 287-8016; Fax (207) 287-9058
TTY Users: Dial 711 (Maine Relay)

Maine Health Alert Network (HAN) System

PUBLIC HEALTH ADVISORY

To: Health Care Providers
From: Dr. Isaac Benowitz, State Epidemiologist
Subject: Human Powassan Case in Maine
Date / Time: Tuesday, June 23, 2026, at 9:10AM
Priority: Normal
Pages: 2
Message ID: 2026PHADV015

Human Powassan Case in Maine

Summary

The Maine Department of Health and Human Services' Center for Disease Control and Prevention (Maine CDC) confirmed Powassan virus (POW) in a Maine resident in Penobscot County. This individual acquired the infection in Maine. This is the first confirmed detection of POW in Maine in 2026. The Maine CDC is issuing this HAN Health Advisory to remind clinicians to consider testing for Powassan infection in patients with unexplained fever, meningitis, or encephalitis.

Background

Ticks can spread arboviruses (arthropod-borne viruses) to people. In Maine, ticks can transmit both lineages of POW (Lineage 1 Powassan Virus and Lineage 2 Deer Tick Virus). Human infections with these viruses can be severe and fatal. **Transmission can occur in as little as 15 minutes after a bite from an infected tick.** About 1% of deer ticks submitted to the University of Maine Tick Laboratory test positive for Powassan virus.

The recently identified human case of POW developed non-neuroinvasive disease in early June and was not hospitalized. A commercial laboratory confirmed the infection by polymerase chain reaction (PCR).

Symptoms

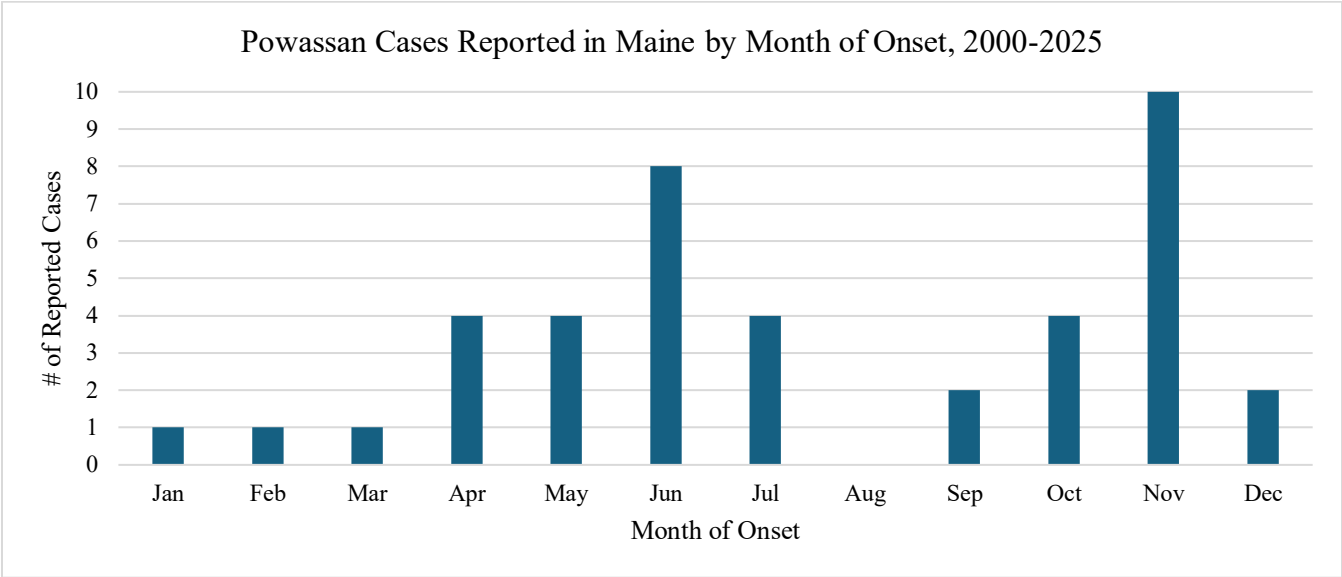
Most arboviral diseases have similar symptoms. While most people infected by arboviruses are asymptomatic, clinical presentations can be either neuroinvasive or non-neuroinvasive.

- Non-neuroinvasive (mild): fever, headache, fatigue, muscle aches, and neck stiffness.
- Neuroinvasive (severe): vomiting, ataxia, aphasia, encephalitis, meningitis, confusion, altered mental status, convulsions, seizures, paresis/paralysis, coma, and death.

The incubation period ranges from 1 to 5 weeks after a bite from an infected tick. About 10% of people with severe neuroinvasive symptoms die from infection and about 50% of survivors have long-lasting neurologic deficits.

Epidemiology

Among the 41 POW cases reported in Maine residents since 2000, the most frequent months of symptom onset are June and November. However, onsets have been reported in almost all months of the year. Most cases (75%) reported no recent travel outside Maine, 10% of cases reported recent travel outside Maine, and the remainder had unknown travel history.



Testing

POW testing is available at many commercial laboratories and the Maine Health and Environmental Testing Laboratory (HETL). Clinicians can refer to the Arboviral Testing in Maine guidance for more information on testing. (See attached guidance document).

If testing through HETL, both the HETL [Requisition Form](#) and [Arboviral Submission Form](#) are required for testing.

Treatment

Treatment of Powassan infection is supportive.

Reporting

All arboviral illnesses are reportable in Maine, including Powassan. All suspected cases and positive laboratory results should be reported by electronic laboratory reporting.

Additional Information

- The Maine CDC tick website: www.maine.gov/dhhs/vectorborne
- HETL clinical forms and submission instructions: www.maine.gov/dhhs/mecdc/services/maine-public-health-laboratory/clinical-microbiology/forms-and-information
- The U.S. CDC tickborne disease reference manual for clinicians: www.cdc.gov/ticks/media/pdfs/2025/03/tickborne-diseases-manual-508.pdf
- The Maine CDC disease reporting and consultation line: 1-800-821-5821 (available 24/7)