

Deadly outbreak of Legionnaires' disease in low-income neighborhoods of New York City

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An outbreak of deadly legionnaires' disease, which causes severe pneumonia, is spreading in the Harlem neighborhood in New York City. First reported on July 25, at latest count the bacterial disease has so far infected more than 60 people and killed 3.

The disease is caused by the *Legionella* bacterium which grows in warm, stagnant water. While the bacterium is present in nature, certain man-made environments are especially conducive to its proliferation. It is suspected that the current outbreak is caused by water vapor emanating from rooftop cooling towers associated with building cooling systems. The bacterium can be carried long distances in the water droplets released by the towers, which, when inhaled, may cause disease.

Symptoms include cough, fever, chills, muscle aches and difficulty breathing. Older adults, smokers, people with chronic diseases or otherwise compromised immune systems are especially vulnerable. Incubation period is 2-14 days following inhalation.

Current information indicates that the bacteria must be inhaled. It is apparently not transmitted in drinking water, nor is it passed from person to person. The fatality rate ranges between 5 and 30 percent of infected individuals.

There have been previous outbreaks of the disease in New York City, including one in 2015 in the South Bronx with 138 reported infections and 16 deaths. That too was caused by building cooling towers. Last year, there were 257 cases diagnosed.

Legionnaires' disease, first identified in 1976 due to an outbreak at a Pennsylvania American Legion convention in Philadelphia, is an ongoing problem in New York, which has an unusually high case rate. Approximately 200 to 700 people are diagnosed with the disease annually in New York, most of whom

require hospitalization, with over a dozen resulting in death.

Not surprisingly, the highest frequencies of the disease occur in some of the poorer neighborhoods of the city—including parts of the Bronx and Harlem—where rates are between 10 and 20 per 100,000 people. Five zip codes in Harlem have been identified with the current outbreak, with some having a median household income of just \$40,000. Many studies have shown that well over \$100,000/year income is needed to live comfortably in New York City, the most expensive city in the United States.

Low-income neighborhoods are also characterized by poorer health in general, with higher rates of chronic diseases. These are also areas where plumbing and cooling towers tend to be poorly maintained.

Cooling towers are not the only potential source of the disease. The bacteria may also grow in poorly maintained plumbing systems, spread by the spray in showers, for example. Health department officials suspect that the source of infection in the current outbreak is a cooling tower since the reported cases are not confined to a single building. Inspections have so far detected *Legionella* bacteria in 11 cooling towers but have not been able to pinpoint a specific source.

Based on an analysis of publicly available health data, the *Gothamist* reports that city inspections of cooling towers have declined markedly in the months preceding the current outbreak, which the Department of Health and Mental Hygiene attributes to a staffing shortage. In 2017, the city inspected 5,200 cooling towers and issued over 48,000 violations. This year, as of June, just 1,167 inspections have been conducted, and only 269 violations were issued, as of April. Following a previous outbreak a decade ago, during which 138 were sickened and 16 died, the city requires

landlords to test for Legionella bacteria every three months. Given the continuing high rate of infections, the combined efforts of city inspectors and private landlords are grossly inadequate.

The leading source of Legionnaires' disease—building cooling towers—can easily be suppressed by frequent testing and decontamination. That this is not systematically carried out is a consequence of the gross income inequality under capitalism. The recurring outbreaks of the disease in low-income neighborhoods are symptomatic of the dangerous conditions in which many workers are forced to live. Overcrowded, unsanitary living spaces, poorly maintained by unscrupulous landlords, are a breeding ground for a whole range of diseases which weaken people's immune systems and are rampant in working class neighborhoods, not to mention other hazards like frequent house fires.

All of this is compounded by limitations in access to healthcare, to be exacerbated by cuts in Medicaid and nutrition-support programs being implemented by the Trump administration.



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