“When you have Valley Fever, you don’t measure when you will feel better with a watch; you measure it with a calendar. And while there is no cure for Valley Fever, we can make sure that people get the care they need just by simply asking to be tested and being aware of what it really is.”

Like many people on New Year’s Day, Rob Purdie woke up with a headache. Unlike those partygoers, he wasn’t suffering after a night of revelry. Purdie had gone to bed early on Dec. 31, 2011, after not feeling well. His headache the next day got continuously worse until he finally went to an urgent care facility near his home in California.

He was prescribed and completed an entire course of antibiotics for a diagnosed sinus infection. It didn’t help. He went to a different urgent care facility and completed another course of a different antibiotic. Same result. What’s more, he started feeling worse. At that point, Purdie visited an ENT who was able to confirm through imaging that Purdie didn’t have a sinus infection so he wasn’t prescribed any more unnecessary antibiotics.

In the ER, he was diagnosed with cluster headaches but once he started getting double vision, he was admitted to the hospital where, after additional testing, he was diagnosed with Valley Fever. Valley Fever is a fungal infection that occurs in the deserts of the Southwest, primarily Arizona and California. It’s contracted by spores in the air that are inhaled.

At least he had a diagnosis. But there is no cure for Valley Fever and treatment options are limited with often debilitating side effects. Purdie failed on three different oral antifungal medications over the course of more than a year. His only option was to move to another class of medication that is delivered directly into his brain via a port that was installed on his head.

The treatment is working but with significant side effects, which include acute side effects such as fevers, chills, vomiting, nausea and headaches as well as potential kidney and liver toxicity. Added to that, a previous treatment, which didn’t work, caused photosensitivity and that led to multiple skin cancer diagnoses.

Purdie used to get his treatments multiple times a week. That meant increased side effects after each treatment. Today, he feels lucky that he gets his treatments once every four months.

While Purdie still doesn’t know how he contracted Valley Fever, he does know that it’s important to educate others. He works for the Valley Fever Institute and helps raise awareness of the disease, which often goes undiagnosed. He has testified in Sacramento and Washington, D.C., to advocate for legislation that increases funding for additional research and development of diagnostics and treatments. He encourages others – especially those in the Southwest – to learn more.