## PICTORIAL KEYS TO THE MOSQUITOES OF MEDICAL IMPORTANCE

IX. AUSTRALIAN REGION 1, 2

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The present series of pictorial keys is being produced under a transfer of funds from the Department of the Army to the Entomology Research Branch. They are designed primarily to help publichealth workers rapidly separate and identify the mosquitoes of primary medical importance in various parts of the world. The keys are so constructed that they separate the important species not only from each other but also from all others known to occur, or suspected of occurring, in the region. We solicit any suggestions or comments pertaining to the keys and other information presented here in order that our knowledge of diseases and the mosquito fauna of the Australian region might be presented in a more useful way to the non-taxonomist.

Anopheles farauti and Anopheles punctulatus are the most common and dangerous vectors of malaria in this region. Of these two species, A. farauti has the wider distribution; it occurs from the Moluccas eastward through New Guinea, the Admiralty Islands, the Bismarck Archipelago, the Solomon Islands and the New Hebrides, and extends into northern Australia to about 17° to 19° south latitude. Malaria in the South Pacific is generally understood to be bounded by longitude

170° east and latitude 20° south, the junction of these two lines lying just north of Anietzum, the southernmost island of the New Hebrides group. This corresponds to the distribution in the New Hebrides of A. farauti. Neither malaria nor species of the genus Anopheles occur in New Caledonia or New Zealand. In dry weather A. farauti breeds in all kinds of collections of water close to man and during the rainy season it breeds readily in small man-made depressions. A. punctulatus occurs over much the same range as A. farauti, but it is absent from Australia and the New Hebrides. It also breeds in all sorts of small collections of sunlit ground and rain water, but is more characteristically a species of inland and elevated areas. Females of these two species bite by preference in complete darkness, although they are attracted to houses by lights at night and readily enter. The proximity of their breeding places to man, their ability to mature the malaria parasite, and their liking for human blood conspire to make these two Anopheles of primary medical importance over most of their range wherever they occur in large numbers. South of 19° south latitude on the Australian mainland malaria is restricted to short-lived and narrowly localized outbreaks. This sporadic malaria is transmitted by Anopheles annulipes, which breeds in situations quite similar to the two former species, enters houses to feed early in the evening, and afterward tends to rest inside during the night. This anopheline occurs in New Guinea and northern Australia as well, but is regarded as a secondary vector in these areas. Anopheles bancroftii, although occurring in northern Australia where it is not regarded as being an important vector, transmits ma-

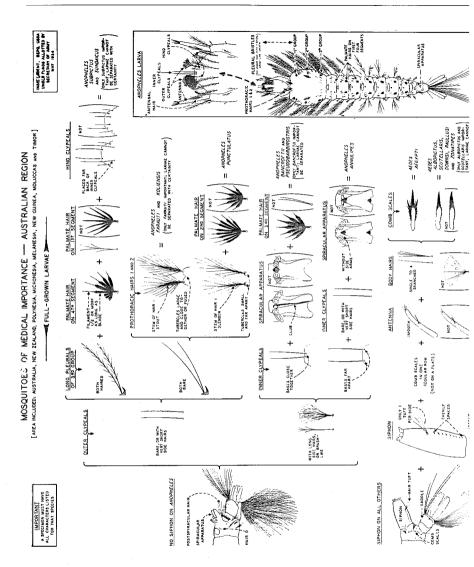
<sup>&</sup>lt;sup>1</sup> Previous keys and issues of Mosquito News in which they appeared are for Korca (I) and Formosa (II), Vol. 13, No. 1, 1953; Malaya (III), Vol. 13, No. 2; Anglo-Egyptian Sudan (IV), Vol. 13, No. 4; French Indochina (V), Vol. 14, No. 1, 1954; Philippine Islands (VI), Vol. 14, No. 2; Spain and Portugal (VII) and West Indies (VIII), Vol. 14, No. 3.

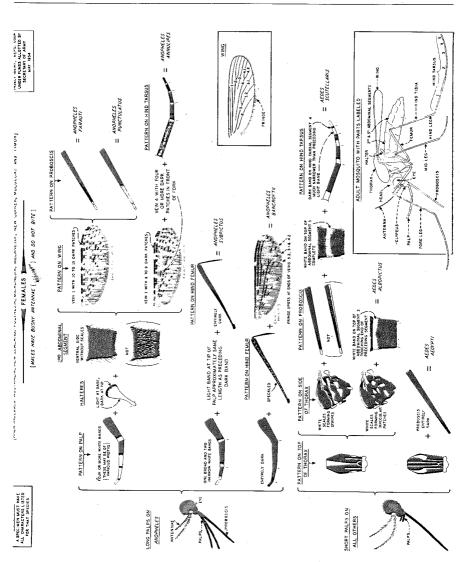
<sup>&</sup>lt;sup>2</sup> Keys were drawn by Sally D. Kaicher.

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laria in New Guinea, where it occurs in large numbers and is often more heavily infected than A. farauti. The species is an inhabitant of low, marshy countryside and its larvae are largely restricted to shade in jungle swamps and similar situations. Females are nocturnal biters of both man and domestic animals and are commonly found resting on walls inside houses and cattle sheds. Anopheles subpictus is essentially an Oriental mosquito whose distribution extends eastward into the Moluccas and New Guinea. Larvae have been found only along the coastal regions in open or partly shaded semitidal pools or in grassy fresh water pools nearby. In the Orient females are domestic, but in New Guinea this species has not been observed to bite in large numbers. This species is included in the key because it is an important vector of malaria in other parts of its range.

Other Anopheles species and varieties known or assumed to be present in the Australian Region are amictus var. amictus, var. hilli, annularis, annulipes, annulipes var. mastersi, atripes, bancroftii var. barbiventris, bancroftii var. pseudobarbirostris, barbirostris, barbumbrosus, clowi, nigerrimus, incognitus, insulaeflorum, karwari, kochi, longirostris, lungae, maculatus, meraukensis, minimus, nataliae, novaguinensis, philippinensis, powelli, solomonis, stigmaticus var. cor-

ethroides, stigmaticus var. stigmaticu sundaicus, tessellatus and vagus.

Of the approximately 360 non-anoph line mosquitoes occurring in the Au tralian region and Pacific Islands, on three are felt to be of primary medic importance. Aedes aegypti occurs throug out this region northward to Formosa ar the Ryukyus, eastward to include Pol nesia and Micronesia, and southwa through Melanesia and the northern po tion of the Australian mainland. In man areas of this region, however, A. aegyt is restricted to cities visited by ocean traff and breeds in all sorts of artificial co tainers in urban areas close to man. is an efficient vector of yellow fever as The former disease is abse from the Australian and Pacific area, b dengue is widespread, and is transmitte not only by A. aegypti but by Aedes all pictus, Aedes scutellaris, and probab Aedes polynesiensis as well, all of which are somewhat less domestic in their bree ing habits than A. aegypti. A. albopict does not extend much farther, if at a west of longitude 150° east; A. scutellar transmits dengue in New Guinea as parts of the New Hebrides; and A. poi nesiensis, which keys out with A. scutlaris in the accompanying plates, in Tahi American Samoa, and the Marquesas lands. An epidemic of Japanese equiencephalitis occurred on Guam in 19. and 1948, but its vector is not known.

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volume.

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