

Campylobacteriosis

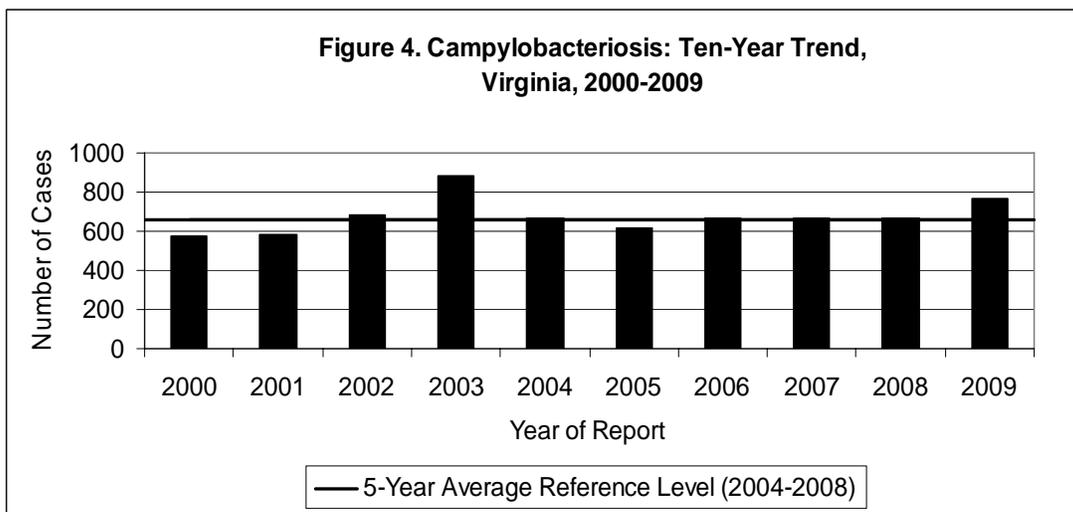
Agent: *Campylobacter* species (bacteria)

Mode of Transmission: Ingestion of undercooked meat, particularly poultry; ingestion of contaminated food, water or raw milk; and direct contact with fecal material from infected animals or people.

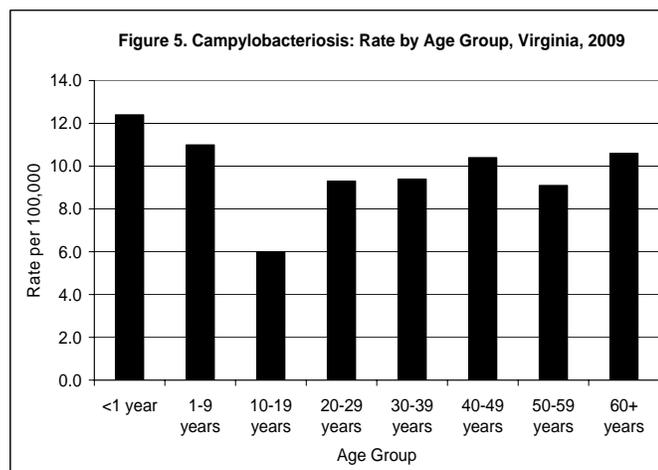
Signs/Symptoms: Include diarrhea (frequently with bloody stools), abdominal pain, malaise, fever, nausea or vomiting. In neonates and young infants, bloody diarrhea without fever may be the only manifestation of illness. Many infections are asymptomatic. Rarely, complications that can develop include reactive arthritis, febrile convulsions or Guillain-Barré Syndrome.

Prevention: Hands should be washed carefully after using the bathroom, after changing diapers or cleaning a child who has used the bathroom, after handling animals or their feces, and before preparing and eating food. Pasteurization of milk and chlorination of water supplies are also important. All foods containing eggs and meats, particularly poultry, should be thoroughly cooked.

During 2009, 770 cases of campylobacteriosis were reported in Virginia. This is a 17% increase from the five-year average of 657.8 cases per year, and a 15% increase from the 669 cases reported in 2008 (Figure 4).



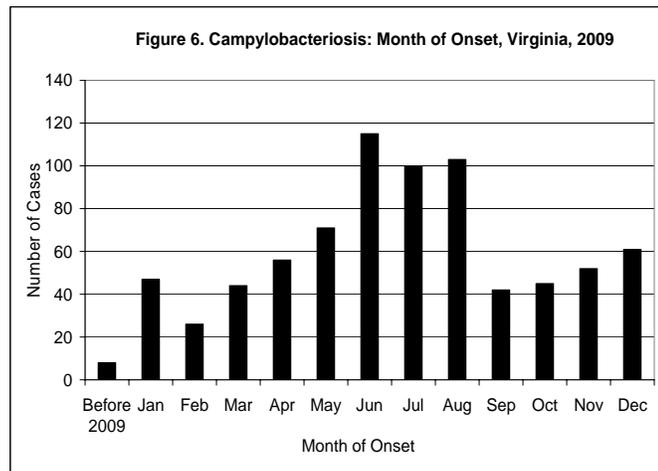
In 2009, the highest incidence of campylobacteriosis occurred in the <1 year age group (12.4 per 100,000). Rates in the other age groups ranged between 6.0 and 11.0 per 100,000 (Figure 5). Race information was missing for 49% of reported campylobacteriosis cases. Among cases for which race was reported, the incidence rate in the white population (6.1 per 100,000) was higher than in the



black and “other” populations (2.1 and 2.6 per 100,000, respectively). The incidence rate among males (11.0 per 100,000) was higher than the rate among females (8.6 per 100,000).

By region, the highest rates of disease occurred in the northwest and northern regions (14.0 and 11.3 per 100,000, respectively). Rates among the other regions were between 6.6 and 10.4 per 100,000. Cases occurred throughout the year, but by month, more cases occurred in June, July and August (Figure 6). Two campylobacteriosis outbreaks were reported during 2009 and both were reported from the central region.

The first outbreak occurred in April and involved six members of a group who traveled on a missionary trip to a European country. The exposure likely occurred outside the U.S. and was suspected to be foodborne, but the food vehicle was undetermined. The second outbreak occurred in August among lunch and dinner patrons of a restaurant, and guests of a wedding party who consumed food



at the wedding reception that was prepared by the same restaurant. Seventeen persons reported gastrointestinal symptoms during this outbreak. Among cases reported in 2009, two deaths were attributed to campylobacteriosis. One occurred in a child from the eastern region, and the other in an adult from the northwest region.