**Campylobacteriosis**

**Agent:** *Campylobacter* species (bacteria)

**Mode of Transmission:** Ingestion of undercooked meat, particularly poultry; contaminated food or water; raw milk; or 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, post-infectious complications include reactive arthritis, febrile convulsions or Guillain-Barré Syndrome.

**Prevention:** Careful hand hygiene after each toilet visit, before preparing and eating food and after contact with feces of dogs and cats is critical. Pasteurization of milk and chlorination of water supplies are important. Thoroughly cook all foods containing eggs and meats, particularly poultry.

During 2008, 669 cases of campylobacteriosis were reported in Virginia. This is a 4% decrease from the five year average of 700.4 cases per year, and an incremental (<1%) increase from the 665 cases reported in 2007 (Figure 4).

![Figure 4. Campylobacteriosis: Ten Year Trend, Virginia, 1999-2008](image)

In 2008, the highest incidence occurred in the less than one year age group (14.5 per 100,000). Rates in the other age groups ranged between 5.0 and 9.6 per 100,000 (Figure 5). Race was missing for 42% of reported campylobacteriosis cases. Among cases for which race was reported, the incidence rate in the white population (6.3 per 100,000) was more than three times that in the
black population (2.0 per 100,000), and more than ten times that in the “other” population (0.6 per 100,000).

The rate among males (9.5 per 100,000) was slightly higher than the rate among females (7.6 per 100,000). By region, the highest rates of disease occurred in the northwest and northern regions (12.7 and 9.5 per 100,000 respectively). Rates among the other regions were between 5.8 and 8.6 per 100,000. Cases occurred throughout the year, but the majority had onsets from May through September (Figure 6). This seasonality may be attributable to improper cooking and storage of poultry products at outdoor cooking events during the warmer months. One campylobacteriosis outbreak was reported during 2008. The outbreak occurred among five workers in a poultry plant and was related to exposure during the handling and processing of poultry products.

![Figure 6. Campylobacteriosis: Month of Onset, Virginia, 2008](image_url)