

Shigellosis

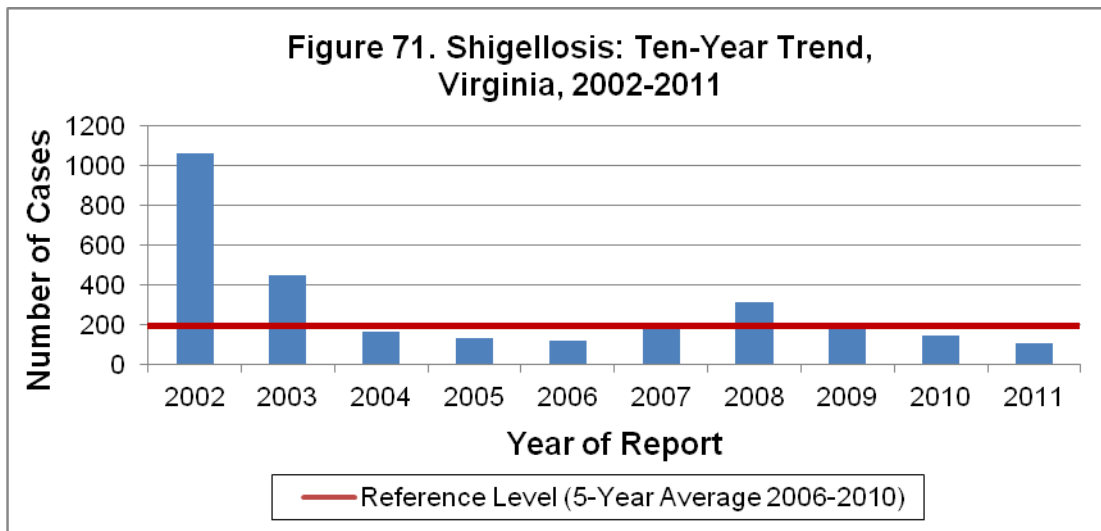
Agent: *Shigella* (bacteria)

Mode of Transmission: Primarily person-to-person transmission when the bacteria are passed from the stool of an infected person to another person through direct contact. Additionally, contact with a contaminated inanimate object, ingestion of contaminated food or water and certain types of sexual contact may spread the disease.

Signs/Symptoms: Diarrhea ranging from watery and loose to mucoid with or without blood; fever; and sometimes nausea, vomiting, abdominal cramps and painful straining while defecating. Mild and asymptomatic infections can also occur.

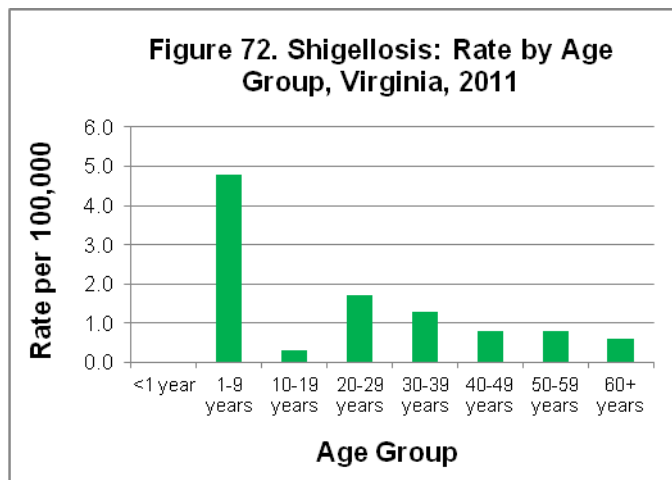
Prevention: Proper hand hygiene is essential to limit transmission. Additional control measures include improved sanitation, chlorination of drinking water, proper cooking and storage of food, the exclusion of infected persons as food handlers and measures to decrease contamination of food by houseflies.

Other Important Information: *Shigella sonnei*, (also known as "Group D" *Shigella*), accounts for over two-thirds of shigellosis in the United States, while *Shigella flexneri* (also known as "group B" *Shigella*) accounts for almost all the rest.



During 2011, 107 cases of shigellosis were reported in Virginia. This represents a 26% decrease from the 145 cases reported in 2010, and a 45% decrease from the five-year average of 194.6 cases per year (Figure 71).

The 1-9 year age group had the highest number of cases and the highest incidence rate (44 cases, 4.8 per 100,000) (Figure 72). The



high rate in this age group is expected because toddlers, age 2 to 4 years, are most likely to get shigellosis. Incidence among the other age groups ranged from 0.3 to 1.7 per 100,000, with no cases reported from children <1 year of age. Race data were missing for 45% of reported shigellosis cases. Among those with race information, incidence in the black population was slightly higher than in the white population (1.0 and 0.7 per 100,000, respectively). The incidence of shigellosis was similar among males and females (1.4 and 1.2 per 100,000, respectively).

By region, the northern region had the highest incidence rate (2.7 per 100,000). Rates among the other regions ranged from 0.4 to 1.2 per 100,000. Although there is monthly variation, onset dates show a general pattern of more disease in warmer months than in cooler months (Figure 73). No reported outbreaks were attributed to *Shigella* during 2011.

