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Commissioner

Date: June 15, 2020

HEALTH ADVISORY:

Recommendation to test patients with symptoms consistent with Cyclospora infection

In 2019, Texas had over 900 reported cases of cyclosporiasis, nearly a three-fold increase from last year's total. Most of these reported cases occur during summer months between May and August. The Texas Department of State Health Services is advising healthcare providers to consider testing patients for the parasite *Cyclospora* if they have diarrheal illness lasting more than a few days or diarrhea accompanied by severe anorexia or fatigue. Diagnosis of cyclosporiasis can be made by submission of stool specimens for "Ova and Parasite" testing, with specific orders for *Cyclospora* identification. Due to intermittent shedding of the parasite, a single negative stool specimen does not exclude the diagnosis; three specimens are optimal. *Cyclospora* may also be detected by molecular methods (e.g., polymerase chain reaction (PCR)).

Symptoms of cyclosporiasis usually begin 2 to 14 days after ingestion of *Cyclospora* oocysts in contaminated food or water. Watery diarrhea can persist for several weeks to a month or more and affected patients may relapse. Additional symptoms may include anorexia, fatigue, weight loss, abdominal cramps, bloating, increased gas, nausea, vomiting, and low-grade fever.

Previous outbreaks of cyclosporiasis have been associated with consumption of imported fresh produce, including: fresh cilantro, pre-packaged salad mix, raspberries, basil, snow peas, and mesclun lettuce. Avoiding food or water contaminated with feces is the best way to prevent cyclosporiasis. Thorough washing of all fresh produce is recommended. Consumers and retailers should also be aware that washing may not eliminate all risk of transmission since *Cyclospora* can be difficult to completely remove from produce. *Cyclospora* does not appear to be spread through direct person-to-person contact.

Rapid reporting to public health is essential to preventing additional cases of cyclosporiasis. Healthcare providers and laboratories are required to report confirmed cyclosporiasis cases to their respective local health department. We ask that healthcare providers remain vigilant in surveillance and testing.

Contact information can be found at:

https://www.dshs.texas.gov/IDCU/investigation/conditions/Disease-Reporting-Contacts.aspx.

Information about *Cyclospora* is available at: http://dshs.texas.gov/idcu/disease/cyclospora/ and http://dshs.texas.gov/idcu/disease/cyclospora/ and http://dshs.texas.gov/idcu/disease/ and <a href="http://dshs.texas.gov/id