



**DALLAS COUNTY
DEPARTMENT OF HEALTH AND HUMAN SERVICES
EPIDEMIOLOGY**

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To: Dallas County Medical Providers and Laboratory Staff

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HEALTH ADVISORY: Increase in *Cyclospora* Infections

Since July 8, 2015, 14 confirmed *Cyclospora* infections have been reported to Dallas County Health and Human Services (DCHHS). These illnesses are occurring in the context of statewide increases in *Cyclospora* cases noted over the past 2 months¹, and were not associated with recent international travel. Similar increases in *Cyclospora* cases were also recorded in Texas during the summer months in 2012 and 2013. Although the investigation into a common exposure source for this outbreak is currently ongoing, past outbreaks and some of the 2015 cases have been associated with consumption of imported fresh cilantro from the state of Puebla in Mexico.^{2,3}

DCHHS is encouraging medical providers to consider testing patients for *Cyclospora* if they have diarrheal illness lasting more than a few days or diarrhea accompanied by severe anorexia or fatigue. Diagnosis of *Cyclospora* requires submission of stool specimens for "Ova and Parasite" testing with additional specific orders for *Cyclospora* (e.g. "*Cyclospora* smear"). A single negative stool specimen does not exclude the diagnosis; several specimens may be required.

Symptoms of cyclosporiasis usually begin about 1 week after ingestion of oocysts in contaminated food or water. Although infection is usually self-limited, watery diarrhea can last weeks to months, and may relapse if untreated. Additional symptoms may include bloating, nausea, vomiting, weight-loss, fatigue and low-grade fever. Hospitalizations for illnesses occur infrequently.

The drug of choice for treatment of immunocompetent adults is trimethoprim-sulfamethoxazole (1 double-strength tablet) orally, twice a day, for 7 to 10 days. Patients with HIV infection may need longer courses of therapy. No highly effective alternatives have been identified for patients with sulfa allergies. Ciprofloxacin for 7 days may have modest activity against *Cyclospora* in patients with HIV infection. (www.cdc.gov/parasites/cyclosporiasis/health_professionals/hp-fags.html)

Thorough washing of fresh produce is recommended, but may not eliminate the risk of transmission since *Cyclospora* can be difficult to wash off all types of produce. Cooking will kill *Cyclospora*. Infection is generally not transmitted directly from person to person.

Please report cyclosporiasis cases as soon as possible by fax to DCHHS at (214) 819-1933. For questions, contact DCHHS at (214) 819-2004. Information about *Cyclospora* is available at: http://www.cdc.gov/parasites/cyclosporiasis/health_professionals/index.html

(1) Texas DSHS Health Advisory: <https://www.dshs.state.tx.us/news/updates.shtm>

(2) FDA Import Alert for Cilantro from Puebla, Mexico: http://www.accessdata.fda.gov/cms_ia/importalert_1148.html

(3) FDA Cilantro Safety: <http://www.fda.gov/food/foodborneillnesscontaminants/buystoreervesafefood/ucm455941.htm>