

SALMONELLOSIS

REPORTING INFORMATION

- **Class B1:** Report by the close of the next business day after the case or suspected case presents and/or a positive laboratory result to the local public health department where the patient resides. If patient residence is unknown, report to the local public health department in which the reporting health care provider or laboratory is located.
- Reporting Form(s) and/or Mechanism: [Ohio Confidential Reportable Disease form](#) (HEA 3334, rev. 1/09), [Positive Laboratory Findings for Reportable Disease form](#) (HEA 3333, rev. 8/05), the local health department via the Ohio Disease Reporting System (ODRS) or telephone. The [hypothesis-generating questionnaire](#) may be helpful when investigating cases involved in multistate or multicounty clusters.
- Additional reporting information, with specifics regarding the key fields for ODRS reporting, can be located in [Section 7](#).

AGENT

Over 2,000 serotypes of *Salmonella* are known. *Salmonella* serotype Typhimurium and *Salmonella* serotype Enteritidis account for nearly half of all human *Salmonella* isolates typed in Ohio. *Salmonella* Typhi is the agent of typhoid fever and should be reported as typhoid fever, not salmonellosis.

Infectious Dose

In general, 100-1,000 organisms, but fewer organisms may sometimes cause infection.

CASE DEFINITION

Clinical Case Definition

An illness of variable severity commonly manifested by diarrhea, abdominal pain, nausea and sometimes vomiting. Asymptomatic infections may occur, and the organism may cause extraintestinal infections.

Laboratory Criteria for Diagnosis

Suspected: Detection of *Salmonella* from a clinical specimen using a non-culture based method.

Confirmed: Isolation of *Salmonella* from a clinical specimen.

Case Classification

Suspected: A case that meets the suspected laboratory criteria for diagnosis.

Probable: A clinically compatible case that is epidemiologically linked to a confirmed case (i.e. a contact of a confirmed case or member of a risk group as defined by public health authorities during an outbreak).

Confirmed: A case that meets the confirmed laboratory criteria for diagnosis. When available, O and H antigen serotype characterization should be reported.

Comments

Both asymptomatic infections and infections at sites other than the gastrointestinal tract, if laboratory confirmed, are considered confirmed cases that should be reported.

SIGNS AND SYMPTOMS

An acute gastrointestinal illness characterized by headache, diarrhea, abdominal cramps, fever and sometimes vomiting. Infection may progress from gastroenteritis to septicemia or a focal infection (e.g. cholecystitis, meningitis).

DIAGNOSIS

Salmonellosis is diagnosed by isolating the organism from stool, blood, urine or other body fluid. Serology tests are not useful for diagnosis. Most hospital laboratories have the ability to identify *Salmonella*. The ODH Laboratory performs testing for *Salmonella*. In some circumstances, testing of cases and contacts can be done at the ODH Laboratory without charge. To obtain the fee exemption and to arrange for receipt of the stool transport kit, contact the ODH Outbreak Response and Bioterrorism Investigation Team (ORBIT) at 614-995-5599. Clinical labs are asked to send all *Salmonella* isolates to ODHL for serotyping and pulsed-field gel electrophoresis typing. This is important for identifying and investigating outbreaks and to provide data on the incidence of *Salmonella* serotypes.

EPIDEMIOLOGY

Source

Animals and humans are the reservoir of *Salmonella*. Domestic or wild animals may be infected, including livestock, poultry and pets (including dogs, cats and reptiles). Food and water may be contaminated with *Salmonella* from animals or their waste. Raw meats and shell eggs may be contaminated with *Salmonella*. Raw produce may be contaminated from raw meat juices or animal feces (e.g. through contaminated irrigation water, during transport or processing).

Occurrence

Salmonellosis occurs worldwide. In Ohio, there is a slight increase in incidence during the mid-summer. Most recognized cases occur in children <5 years of age, adults 20-39 years of age and adults >60 years of age; however, all ages are at risk.

Mode of Transmission

Humans may acquire *Salmonella* directly (via the fecal-oral route) from animals (e.g. pets, livestock, reptiles) or from ingestion of contaminated food or water. Direct person-to-person transmission may occur via the fecal-oral route but is uncommon.

Period of Communicability

Salmonella is shed in the feces while the patient is acutely ill and perhaps for a week or two after symptoms end. Antibiotic use may prolong the period of shedding. The carrier state develops in $\leq 5\%$ of patients.

Incubation Period

The incubation period is 6-72 hours, usually 12-36 hours.

PUBLIC HEALTH MANAGEMENT

Case

Investigation

All cases reported to the local health department should initially be followed up with a telephone call to obtain demographic and epidemiologic data. No further work-up is recommended if neither the case nor any household member is employed in a sensitive occupation (food handler, healthcare worker or employee in child care center who handles food or directly cares for children) or attends a child care center, unless there is evidence that the case is part of an outbreak.

Treatment

Antibiotics are generally not administered in cases of uncomplicated gastroenteritis, as they can lead to the carrier state. Antibiotic treatment may be indicated for salmonellosis in infants, the elderly or those with underlying medical conditions.

Isolation and Follow-up Specimens

Ohio Administrative Code 3701-3-13 (U) states:

"Salmonellosis: a person with salmonellosis who attends a child care center or works in a sensitive occupation shall be excluded from the child care center or work in the sensitive occupation and may return when the following conditions are met:

- 1) The child may return to the child care center after diarrhea has ceased.
- 2) A person may return to work in a sensitive occupation after diarrhea has ceased, provided that his or her duties do not include food handling.
- 3) A person who is a food handler may return to work after diarrhea has ceased and after two consecutive follow-up stool specimens are negative for *Salmonella*."

Obtain the first stool specimen no sooner than 48 hours after cessation of diarrhea or, if being treated, at least 48 hours after completion of antibiotic therapy. Obtain the remaining specimen(s) at least 24 hours apart.

Note: Even if *Salmonella* was initially recovered from blood or urine, the follow-up testing as described above is done on stool samples.

Contacts

Any household member who has diarrhea and is employed in a sensitive occupation or attends a child care center should be tested for *Salmonella*.

Prevention and Control

All meat and egg dishes should be thoroughly cooked. Avoid cross-contamination of food (especially raw fruits and vegetables) with raw meat juices. Hand washing after contact with animals can help prevent salmonellosis. Chicks, ducklings and all reptiles, which might be *Salmonella* carriers, are inappropriate pets for small children.

Thorough hand washing should be emphasized, especially after bowel movements, after changing diapers, and before eating or preparing food.

Food Handlers

Symptomatic persons shall be excluded from work. As detailed in **Isolation** above, food handlers may only return to work after diarrhea has ceased and two consecutive follow-up stool specimens are negative for *Salmonella*.

Food Service Operation rules also pertain to this situation. Salmonellosis is a disease which can be transmitted through food. Persons infected with a disease that is communicable by food are not permitted to work as a food handler. For additional information, refer to Ohio Administrative Code (OAC) Chapter 3717-1 (Ohio Uniform Food Safety Code) Section 02.1, Management and Personnel: Employee Health.

Healthcare Workers

Symptomatic persons shall be excluded from work. As detailed in **Isolation** above, persons who work in sensitive occupations may return when diarrhea has ceased, provided their duties do not include food handling. However, it is also recommended that healthcare workers who provide direct care of infant, elderly, immunocompromised or institutionalized patients be excluded from work until diarrhea has ceased and after two consecutive follow-up stool specimens are negative for *Salmonella*.

Child Care Workers and Children who Attend Child Care Centers

Symptomatic persons shall be excluded from work. As detailed in **Isolation** above, children who attend child care centers and persons who work in sensitive occupations may return when diarrhea has ceased, provided their duties do not include food handling.

Child Care Center Outbreak Control

Whenever a case of salmonellosis has been identified in a child care center attendee or worker, staff and children who are symptomatic and in the same classroom as the case should be cultured for *Salmonella*. Arrangements to have this testing done at ODH Laboratory (ODHL) can be made by contacting ODH ORBIT at 614-995-5599. Reptiles are not appropriate pets for child care centers (see below).

Special Information

Persons with diarrhea of infectious or unknown cause (e.g. confirmed or suspected cases of salmonellosis) are not permitted to work in sensitive occupations, according to OAC 3701-3-13 (H), which states: "Diarrhea, infectious or of unknown cause: a person with diarrhea, of infectious or unknown cause, who attends a child care center or works in a sensitive occupation shall be excluded from the child care center or work in the sensitive occupation and may return only after diarrhea has ceased. A person with infectious diarrhea of known cause shall be isolated in accordance with the provisions of the rule set forth for the specified disease." " 'Sensitive occupation' means direct food handling, direct patient care, the handling of food or provision of direct care to children in a child care center, or any other occupation which provides significant opportunity for an infected individual to transmit infectious disease agents" per OAC 3701-3-01 (X).

Recommendations for Preventing Transmission of *Salmonella* from Reptiles to Humans

- Persons at increased risk for infection or serious complications of salmonellosis (e.g. children <5 years of age and immunocompromised persons), should avoid contact with reptiles and amphibians.
- Reptiles and amphibians should not be kept in child care centers and may not be appropriate pets in households in which persons at increased risk for infection reside.
- Veterinarians and pet store owners should provide information to owners and

- potential purchasers of reptiles and amphibians about the risk of acquiring salmonellosis from their pets.
- Persons should always wash their hands after handling reptiles and amphibians and their cages.
 - Reptiles and amphibians should be kept out of kitchens and other food preparation areas. Kitchen sinks should not be used to bathe pets or to wash their dishes, cages or aquariums.
 - Reptiles and amphibians should not be allowed to roam freely throughout the house.

(Source: Turtle-associated Salmonellosis in Humans--United States, 2006-2007, *MMWR*, July 6, 2007, Vol. 56, No. 26, pages 649-652).

What is salmonellosis?

Salmonellosis is an infection with a bacterium called *Salmonella*. Most persons infected with *Salmonella* develop diarrhea, fever and abdominal cramps 12-72 hours after infection. The illness usually lasts 4-7 days, and most persons recover without treatment; however, in some persons the diarrhea may be so severe that the patient needs to be hospitalized. In these patients, the *Salmonella* infection may spread from the intestines to the blood stream and then to other body sites and can cause death unless the person is treated promptly with antibiotics. The elderly, infants and those with impaired immune systems are more likely to have a severe illness.

What sort of germ is *Salmonella*?

The *Salmonella* germ is actually a group of bacteria that can cause diarrheal illness in humans. They are microscopic living creatures that pass from the feces of people or animals to other people or other animals. There are many different kinds of *Salmonella* bacteria. *Salmonella* serotype Typhimurium and *Salmonella* serotype Enteritidis are the most common in the United States. *Salmonella* bacteria have been known to cause illness for over 100 years, having been discovered by an American scientist named Salmon, for whom they are named.

How common is salmonellosis?

Every year, approximately 40,000 cases of salmonellosis are reported in the United States. Because many milder cases are not diagnosed or reported, the actual number of infections may be 30 or more times greater. Salmonellosis is more common in the summer than in winter. Children are the most likely to get salmonellosis. Young children, the elderly and immunocompromised individuals are the most likely to have severe infections. It is estimated that approximately 400 persons die each year with acute salmonellosis.

How can *Salmonella* infections be diagnosed?

Many different kinds of illnesses can cause diarrhea, fever or abdominal cramps. Determining that *Salmonella* is the cause of the illness depends on laboratory tests that identify *Salmonella* in the stool of an infected person. These tests are sometimes not performed unless the laboratory is instructed specifically to look for the organism. Once *Salmonella* has been identified, further testing can determine its specific type and which antibiotics could be used to treat it.

How can *Salmonella* infections be treated?

Salmonella infections usually resolve in 5 to 7 days and often do not require treatment unless the patient becomes severely dehydrated or the infection spreads from the intestines. Persons with severe diarrhea may require rehydration, often with intravenous fluids. Antibiotics are not usually necessary unless the infection spreads from the intestines. Unfortunately, some *Salmonella* bacteria have become resistant to antibiotics, largely as a result of the use of antibiotics to promote the growth of feed animals.

Are there long term consequences to a *Salmonella* infection?

Persons with diarrhea usually recover completely, although it may be several months before their bowel habits are entirely normal. A small number of persons who are infected with *Salmonella*, will go on to develop pains in their joints, irritation of the eyes and painful urination. This is called Reiter's syndrome. It can last for months or years and can lead to chronic arthritis which is difficult to treat. Antibiotic treatment does not make a difference in whether or not the person develops arthritis.

How do people catch *Salmonella*?

Salmonella live in the intestinal tracts of humans and other animals, including birds. *Salmonella* are usually transmitted to humans by eating foods contaminated with animal feces. Contaminated foods usually look and smell normal. Contaminated foods are often of animal origin, such as beef, poultry, milk or eggs, but any food, including vegetables, may become contaminated. Many raw foods of animal origin are frequently contaminated, but thorough cooking kills *Salmonella*. Food may also become contaminated by the unwashed hands of an infected food handler who forgot to wash his or her hands with soap after using the bathroom.

Salmonella may also be found in the feces of some pets, especially those with diarrhea, and people can become infected if they do not wash their hands after contact with pets or pet feces. Reptiles are particularly likely to harbor *Salmonella*. Many chicks and young birds carry *Salmonella* in their feces. People should always wash their hands immediately after handling a reptile or bird, even if the animal is healthy. Adults should also be careful that children wash their hands after handling a reptile or bird or after touching its environment.

What can a person do to prevent this illness?

There is no vaccine to prevent salmonellosis. Since foods of animal origin may be contaminated with *Salmonella*, people should not eat raw or undercooked eggs, poultry or meat. Raw eggs may be unrecognized in some foods such as homemade Hollandaise sauce, Caesar and other salad dressings, tiramisu, homemade ice cream, homemade mayonnaise, cookie dough and frostings. Poultry and meat, including hamburgers, should be well-cooked, not pink in the middle. Persons also should not consume raw or unpasteurized milk or other dairy products. Produce should be thoroughly washed before consuming.

Cross-contamination of foods should be avoided. Uncooked meats should be kept separate from produce, cooked foods and ready-to-eat foods. Hands, cutting boards, counters, knives and other utensils should be washed thoroughly after touching uncooked foods. Hands should be washed before handling any food and between handling different food items.

People who have salmonellosis should not prepare food or pour water for others until they have been shown to no longer be carrying the *Salmonella* bacterium.

People should wash their hands after contact with animal feces. Since reptiles are particularly likely to have *Salmonella*, everyone should immediately wash their hands after handling reptiles. Reptiles (including turtles) are not appropriate pets for small children and should not be in the same house as an infant. *Salmonella* carried in the intestines of chicks and ducklings contaminate their environment and the entire surface of the animal. Children can be exposed to the bacteria by simply holding, cuddling or kissing the birds. Children should not handle baby chicks or other young birds. Everyone should immediately wash their hands after touching birds, including baby chicks and ducklings, or their environment.

What else can be done to prevent salmonellosis?

It is important for the public health department to know about cases of salmonellosis. It is important for clinical laboratories to send isolates of *Salmonella* to the Ohio Department of Health Laboratory (ODHL) so the specific type can be determined and compared with other *Salmonella* in the community. If many cases occur at the same time, it may mean that a restaurant, food or water supply has a problem which needs correction by the public health department.

Some prevention steps occur everyday without you thinking about it. Pasteurization of milk and treating municipal water supplies are highly effective prevention measures that have been in place for many years. In the 1970s, small pet turtles were a common source of salmonellosis in the United States, and in 1975, the sale of small turtles was halted in this country. However, small turtles are sometimes still sold, and cases of salmonellosis associated with these turtles have been reported. Improvements in farm animal hygiene, in slaughter plant practices and in vegetable and fruit harvesting and packing operations may help prevent salmonellosis caused by contaminated foods. Better education of food industry workers in basic food safety and restaurant inspection procedures may prevent cross-contamination and other food handling errors that can lead to outbreaks. Wider use of pasteurized eggs in restaurants, hospitals and nursing homes is an important prevention measure. In the future, irradiation or other treatments may greatly reduce contamination of raw meat.

What can I do to prevent salmonellosis?

- Cook poultry, ground beef and eggs thoroughly before eating. Do not eat or drink foods containing raw eggs or raw, unpasteurized milk.
- If you are served undercooked meat, poultry or eggs in a restaurant, do not hesitate to send it back to the kitchen for further cooking.
- Wash hands, kitchen work surfaces and utensils with soap and water immediately after they have been in contact with raw meat or poultry.
- Be particularly careful with foods prepared for infants, the elderly and the immunocompromised.
- Wash hands with soap after handling reptiles, birds or baby chicks and after contact with pet feces.
- Avoid direct or even indirect contact between reptiles (turtles, iguanas, other lizards, snakes) and infants or immunocompromised persons.
- Do not work with raw poultry or meat and an infant (e.g. feed, change diaper) at the same time.
- Mother's milk is the safest food for young infants. Breast-feeding prevents salmonellosis and many other health problems.