

Campylobacteriosis

Campylobacter Quick Fact: *Campylobacter* cases are mostly seen in the summer months and occur as single cases or as part of recognized outbreaks.

OVERVIEW

Campylobacteriosis is an enteric disease caused by bacteria of the genus *Campylobacter*. The most common species is *jejuni*, followed by *coli*. Typical symptoms include diarrhea, abdominal cramps, malaise, fever, nausea, and vomiting, but asymptomatic infections occur. Stool may contain blood and white cells. The illness generally lasts 2-5 days. Prolonged illness may occur in adults, and relapse is possible. In immunocompromised persons, *Campylobacter* may spread to the bloodstream and cause a serious life-threatening infection. Reactive arthritis, febrile seizures, and Guillain-Barré Syndrome are uncommon complications of *Campylobacter* infections. The mode of transmission of *Campylobacter* is normally by ingestion of the organism in under-cooked chicken or other contaminated food and water, or raw milk. Contact with infected pets (especially puppies and kittens), farm animals or infected infants may also be a source of transmission.

SURVEILLANCE

- All Georgia physicians, laboratories and other health care providers are required by law to report both lab-confirmed and clinical diagnoses of cases of *Campylobacter*.
- Cultures may be sent to the Georgia Public Health Laboratory for case confirmation.
- Reporting of all cases are required within seven days to the State.
- Outbreaks are investigated to determine the possible source of infection and prevent additional illness.
- Active Surveillance for *Campylobacter* is conducted through FoodNet. For more information, please visit:
 - <http://health.state.ga.us/eip/>
 - <http://www.cdc.gov/foodnet/>

INCIDENCE

In 2008, 688 cases of *Campylobacter* were reported to the Georgia Acute Epidemiology Section, for a rate of 7.10/100,000 (Figure 1). Overall, rates of *Campylobacter* are consistent across the state, with counties in the northern and southern parts of the state reporting higher rates *Campylobacter* than central counties (Figure 2).

Figure 1. *Campylobacter* Cases and Rate

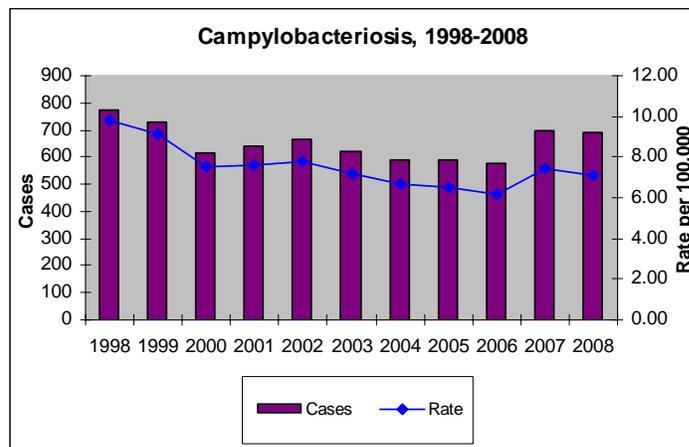
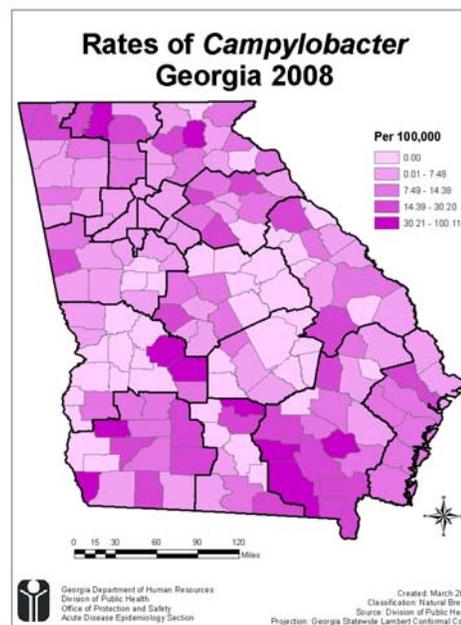


Figure 2.



DEMOGRAPHICS

- In 2008, of the reported cases with known race and ethnicity, 71% of cases were White, 14% of cases were Black, 11% of cases were Hispanic, and 4% of cases were other race/ethnicities (Figure 3).
- The highest number of reported cases is in the 18- <30 age group and cases were more frequently male.

Figure 3.

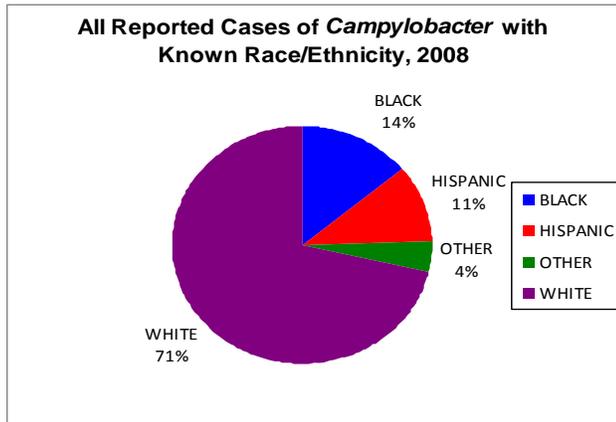
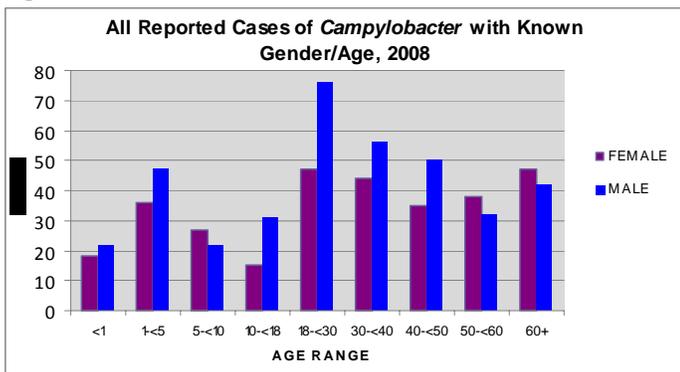


Figure 4.



IMPACT OF CAMPYLOBACTER

Hospitalizations & Deaths

- Of the total 688 cases of *Campylobacter* in 2008, 131 (19%) individuals were hospitalized, while an additional 117 (17%) individuals were seen in the Emergency Room.
- Although, *Campylobacter* deaths are rare, there were 3 reported deaths in 2008.

PREVENTION & RESEARCH

Some simple food handling practices can help prevent *Campylobacter* infections.

- Cook all poultry products thoroughly. Make sure that the meat is cooked throughout (no longer pink) and any juices run clear. All poultry should be cooked to reach a minimum internal temperature of 165 °F.
- Wash hands with soap before preparing food
- Wash hands with soap after handling raw foods of animal origin and before touching anything else.
- Prevent cross-contamination in the kitchen by using separate cutting boards for foods of animal origin and other foods and by carefully cleaning all cutting boards, countertops, and utensils with soap and hot water after preparing raw food of animal origin.
- Avoid consuming unpasteurized milk and untreated surface water.
- Make sure that persons with diarrhea, especially children, wash their hands carefully and frequently with soap to reduce the risk of spreading the infection.
- Wash hands with soap after contact with pet feces

Data Sources and more information:

- <http://health.state.ga.us/epi/foodborne>
- http://www.cdc.gov/nczved/dfbmd/disease_listing/campylobacter_gi.html

Date Updated:

- February 2009