## 2008 Georgia Data Summary



# Shiga Toxin Producing E. coli (STEC)

STEC Quick Fact: STEC infections are commonly associated with ground beef, but illnesses and outbreaks in recent years have occurred after eating fresh produce items.

## **OVERVIEW**

Shiga Toxin Producing *E.coli* (STEC) refers to a certain kind of *E.coli* bacteria that produces a toxin that often results in disease.

- It is often characterized by bloody diarrhea, severe abdominal cramping, vomiting and sometimes fever.
- The most common serogroup is O157. However, there are other serogroups including O26, O45, O103 and O111.

## SURVEILLANCE

- All Georgia physicians, laboratories and other health care providers are required by law to report both labconfirmed and clinical diagnoses of cases of STEC.
- Cultures should be sent to the Georgia Public Health Laboratory for confirmation, serogroup determination, and DNA fingerprinting.

| TOP SEROGROUPS IN GEORGIA, 2008 |      |    |    |
|---------------------------------|------|----|----|
| Serogroup                       |      | #  | %  |
| 1                               | O157 | 44 | 68 |
| 2                               | O26  | 7  | 11 |
| 3                               | O103 | 6  | 9  |
| 4                               | 0111 | 3  | 5  |
| 5                               | O145 | 2  | 3  |
| 6                               | O45  | 2  | 3  |

- Active Surveillance for Shiga Toxin Producing *E.coli* is conducted through FoodNet. For more information, please visit:
  - http://health.state.ga.us/eip/
  - http://www.cdc.gov/foodnet/

### INCIDENCE

In 2008, 74 cases of STEC were reported, for a rate of 0.78/100,000 persons (Figure 1). Of those 74 cases, 44 were *E.coli* O157 for a rate of 0.46/100,000 persons. Although the incidence of *E.coli* O157 has remained relatively stable over time, the incidence of STEC cases overall has been increasing. This may be due to the increase in the number of labs with shiga-toxin testing capabilities.



\*includes O157, non-O157 serogroups, and STEC positive cultures from which no bacteria was recovered

#### Figure 2. E.coli O157 Cases and Rate



## **DEMOGRAPHICS**

- In 2008, of the reported cases with known race and ethnicity, 68% of cases were White, 13% of cases were Black, 10% of cases were Hispanic and 9% of cases were other race/ethnicities.
- Consistent with the described epidemiology of STEC, in Georgia, higher rates of disease appear in young children, followed by young adults (Figure 4).

#### Figure 1. STEC Cases and Rate\*

#### Figure 3.



#### Figure 4.



## **IMPACT OF STEC**

#### **Hospitalizations & Deaths**

Of the total 74 cases of STEC in 2008, 32% of individuals were hospitalized, while an additional 14% of individuals were seen in the Emergency Room; 1 STEC patient died.

#### Outbreaks

In 2008, one outbreak associated with ground beef served at a restaurant resulted in 8 cases of E. coli O157 and 4 cases of hemolytic uremic syndrome (HUS).

## **PREVENTION & RESEARCH**

#### **Food Preparation Tips**

1. Always treat raw poultry, beef and pork as if they are contaminated and handle accordingly:

- Wrap fresh meats in plastic bags at the market to prevent juices from dripping on other foods.
- Refrigerate foods promptly; minimize holding time at room temperature.
- Cutting boards and counters used for meat preparation should be washed immediately after use to prevent cross contamination with other foods.
- Avoid eating raw or undercooked meats (internal cooking temperature for ground beef should be 160 degrees F).
- 2. Avoid consuming raw (unpasteurized) milk.
- 3. Thoroughly wash raw produce items before eating.

#### For more information, visit: www.foodsafety.gov

#### Hand Washing

1. Encourage careful hand washing before and after food preparation.

2. Always wash hands thoroughly after handling animals (pets, zoo, etc.) or feces of any kind.

#### **FoodNet Projects**

- Monitoring trends in STEC Epidemiology over time
- Surveying laboratories and clinicians about STEC diagnostics
- STEC interview studies in cooperation with the Centers for Disease Control and Prevention to evaluate risk factors for the development of HUS and to better characterize non-O157 STEC infections

For more information: http://health.state.ga.us/epi/foodborne