

What is cyclosporiasis?

Cyclosporiasis is an intestinal illness caused by *Cyclospora cayetanensis*, a single-celled parasite.

Who is at risk for cyclosporiasis?

Anyone can get cyclosporiasis. It is most common in tropical or subtropical regions of the world, but foodborne outbreaks linked to imported fresh produce have occurred in the United States.

What are the symptoms of cyclosporiasis?

Cyclospora infects the small intestine and usually causes watery diarrhea, with frequent, sometimes explosive, bowel movements. Other common symptoms include loss of appetite, weight loss, bloating, increased gas, abdominal cramps, nausea, muscle aches, and prolonged fatigue. Less common symptoms include fever and vomiting. Without treatment, symptoms can last several weeks to months. Some people who are infected with *Cyclospora* do not have any symptoms.

How soon do symptoms appear?

Symptoms usually appear one week after infection, but the incubation period can range from two days to two weeks.

How is cyclosporiasis spread?

People become infected with *Cyclospora* when they ingest the infective form of the parasite. This usually happens when a person consumes food or water that was contaminated with feces. The parasite needs time (days or weeks) after being passed in a bowel movement to become infectious, which makes person-to-person transmission unlikely.

When and for how long is a person able to spread the disease?

It is unlikely for cyclosporiasis to be passed directly from person-to-person.

How is a person diagnosed?

Identification of *Cyclospora* in stool (i.e., feces) requires special laboratory tests. If a patient reports recent travel to an area where cyclosporiasis is common, the patient's health care provider should specifically request testing for *Cyclospora*.

What is the treatment?

The recommended treatment for cyclosporiasis is a combination of two antibiotics, trimethoprim/sulfamethoxazole.

Does past infection make a person immune?

No.

Should children or others be excluded from child care, school, work or other activities if they have cyclosporiasis?

A child should be excluded from child care if he/she has:

- Vomited two or more times within the previous 24 hours, unless the vomiting is determined to be caused by a noninfectious condition and the child is not in danger of dehydration
- Diarrhea, if stool is not contained in the diaper or if diarrhea frequency exceeds two or more stools above normal for that child
- A fever or is unable to participate and the staff determines that they cannot care for the child without compromising their ability to care for the health and safety of the other children in the group

A child or an adult should be excluded from school or work if diarrhea cannot be contained. An adult who prepares or handles food should be excluded from work until 24 hours after diarrhea resolves or they provide written medical documentation from a health practitioner that they are not contagious.

What can be done to prevent the spread of cyclosporiasis?

Avoiding water or food that may be contaminated with stool is the best way to prevent cyclosporiasis.

Cyclospora is unlikely to be killed by routine chemical disinfection or sanitizing methods (e.g., treatment with chlorine or iodine).

Additional Information:

For additional information, call the North Dakota Department of Health at 800.472.2180.

Resources:

1. *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30th ed. [Children in Out-Of-Home Care]. Kimberlin, DW; Brady, MT; Jackson, MA; Long, SS. American Academy of Pediatrics. 2015: 132-151.
2. *Red Book: 2015 Report of the Committee on Infectious Diseases*. 30th ed. [Cyclosporiasis]. Kimberlin, DW; Brady, MT; Jackson, MA; Long, SS. American Academy of Pediatrics. 2015: 316-317.
3. Heymann, D. L. (2015). *Control of Communicable Diseases Manual, 20th Edition*. Cyclosporiasis. American Public Health Association. 2015: 139-140.
4. Centers for Disease Control and Prevention. (2015). Cyclosporiasis. <http://www.cdc.gov/parasites/cyclosporiasis/index.html>.
5. North Dakota Administrative Code. (2016). 33-33-04-28.9-11. www.legis.nd.gov/information/acdata/pdf/33-33-04.pdf.