

Clinical Definition:

Cyclosporiasis is an enteric disease caused by a parasite called *Cyclospora cayetanensis*.



Source of Infection and Transmission:

- ◆ Primarily contaminated food or water. Some outbreaks have been associated with consumption of fresh produce (raspberries, basil and lettuce), but the way in which the produce was contaminated has not been identified.
- ◆ The host range is not completely known at this time. *Cyclospora* has been found in moles, snakes, insectivores, rodents, and poultry. It remains uncertain if animals are a source of human infection.
- ◆ *Cyclospora* is not infectious at the time it is excreted in the stool. Once outside the body, the oocysts form; they are quite resistant to chlorine.
- ◆ Person to person or animal to person transmission has not been documented.

Incubation Period:

- ◆ Averages about one week with a range of one to 11 days.

Symptoms

- ◆ Abrupt onset of:
 - ◆ Watery diarrhea.
 - ◆ Stomach pain or cramps.
 - ◆ Upset stomach.
 - ◆ Lack of appetite.
 - ◆ Tiredness.
 - ◆ Weight loss.
 - ◆ Fever occurs in about half of infected people.
- ◆ The infection is typically self-limited lasting two to seven weeks.
- ◆ Illness may be cyclic or relapsing.
- ◆ In immunocompromised individuals the diarrhea may be severe and persist for months.

Major Complications:

- ◆ Severe, persistent diarrhea in immuno-compromised persons.

Diagnosis and Treatment:

- ◆ Diagnosis is made by the identification of oocysts in the stool, duodenal/jejunal aspirate, or small bowel biopsy specimen.
- ◆ In most cases, cyclosporiasis is a self-limited disease and treatment is not indicated.
- ◆ Antimotility agents are not recommended.
- ◆ When symptoms persist, oral Trimethoprim-sulfamethoxazole for 7 days.
- ◆ For individuals with HIV, use TMP/SMX for 10 days followed by chronic prophylaxis three times per week.
- ◆ Antibiotics recommended are TMP/SMX or Ciprofloxacin. Refer to current edition of *"Bugs and Drugs"* for dosage and duration.
- ◆ Relapse is common.

Public Health Measures:

- ◆ Most common in tropical and sub-tropical areas.
 - ◆ Prevalence low in North America, most common in spring and summer.
- Cyclospora* are resistant to chlorination.

Reporting and Follow-up:

- ◆ All suspect or confirmed cases must be reported to the Office of the Chief Medical Health Officer (OCMHO) and the Environmental Health Officer (EHO), within 24 hours.
- ◆ Complete *Communicable Disease Report Form*.

Public Education (Key Messages):

- ◆ Wash produce carefully before eating to **reduce** the risk of *Cyclospora* infection, (it does not completely eliminate risk).
- ◆ Avoid drinking untreated or recreational water (such as pools, streams, lakes).
- ◆ Follow safe food and water guidelines when traveling in other countries.