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To: Wisconsin Clinicians, Infection Preventionists, Local and Tribal Health Departments, and  
Laboratorians

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## Increased Reports of Laboratory-confirmed Cases of Cyclosporiasis

### PLEASE DISTRIBUTE WIDELY

An increase in reported laboratory-confirmed cases of cyclosporiasis has been detected among Wisconsin residents statewide. Since May 29, 2018 the Wisconsin Division of Public Health (DPH) has received more than 60 reports of cyclosporiasis cases. On June 8, 2018 DPH issued a [press release](#) stating many of the cyclosporiasis case-patients reported eating vegetable trays purchased from Kwik Trip locations in Wisconsin and Minnesota. Because of the increase in cases statewide, we request your assistance with detecting, reporting, and treating patients with cyclosporiasis.

#### For Health Care Providers

**Symptoms:** *Cyclospora* infects the small intestine and typically causes watery diarrhea, with frequent, sometimes explosive stools. Other common symptoms include loss of appetite, weight loss, abdominal cramping/bloating, increased flatus, nausea, and prolonged fatigue. Vomiting, body aches, low-grade fever, and other flu-like symptoms may be noted. The incubation period for *Cyclospora* averages 1 week (ranges from ~2–14 or more days). If untreated, the illness may last for a few days to a month or longer and may follow a remitting-relapsing course. Cyclosporiasis is not transmitted from person to person. However, persons working in high-risk occupations (e.g., food service, health care, child care) should not return to work until asymptomatic.

**Diagnosis:** Diagnosis can be made by identification of *Cyclospora* oocysts in stool specimens by light microscopy or using a commercially available multi-target gastrointestinal PCR panel that includes *Cyclospora*. *Cyclospora* testing is widely available; providers should contact their laboratory to request testing. If *Cyclospora* testing is not available in-house or at a reference laboratory, DPH can approve fee-exempt testing for *Cyclospora* at the Wisconsin State Laboratory of Hygiene (WSLH) for patients meeting clinical and epidemiologic criteria. To request approval for fee-exempt *Cyclospora* testing, please contact the DPH Bureau of Communicable Diseases Enteric Epidemiologist of the Day at 608-267-7143.

**Treatment:** [Trimethoprim-sulfamethoxazole](#) (TMP-SMX) is the treatment of choice. The typical regimen for immunocompetent adults is TMP 160 mg plus SMX 800 mg (one double-strength tablet), orally, twice a day, for 7–10 days. HIV-infected patients may need longer courses of therapy.

[Nitazoxanide](#) (500 mg twice daily for seven days) may be an acceptable alternative regimen for patients with sulfa allergy; its efficacy has been described in case reports.

(Source: UpToDate.com, *Cyclospora* Infection)

[Anecdotal or unpublished data](#) suggest that the following drugs are ineffective: albendazole, trimethoprim (when used as a single agent), azithromycin, nalidixic acid, tinidazole, metronidazole, quinacrine, tetracycline, doxycycline, and diloxanide furoate. Although data from a small study among HIV-infected patients in Haiti suggested that ciprofloxacin might have modest activity against *Cyclospora*, substantial anecdotal experience among many immunocompetent persons suggests that ciprofloxacin is ineffective.

(Source: CDC Treatment for Cyclosporiasis:

[https://www.cdc.gov/parasites/cyclosporiasis/health\\_professionals/tx.html](https://www.cdc.gov/parasites/cyclosporiasis/health_professionals/tx.html))

**Reporting:** Cyclosporiasis is a reportable condition in Wisconsin. Reporting requirements for cyclosporiasis can be found on the [DHS website](#).

### **For Laboratorians**

Clinical laboratories are asked to forward patient specimens positive for cyclosporiasis to the WSLH as part of Wisconsin Enteric Pathogens Surveillance (WEPS). Instructions available at [http://www.slh.wisc.edu/wp-content/uploads/2017/07/170724\\_WEPS-Specimen-Submission-Instructions\\_FINAL.doc](http://www.slh.wisc.edu/wp-content/uploads/2017/07/170724_WEPS-Specimen-Submission-Instructions_FINAL.doc)

Specimens should be shipped to:  
Wisconsin State Laboratory of Hygiene  
2601 Agriculture Drive  
Madison, WI 53718  
ATTN: Bacteriology

If you have questions regarding specimen kits and shipping, please contact the WSLH Customer Service at 800-862-1013.

### **Questions**

If you have any questions, please contact [your local health department](#) or the DPH Enteric Epidemiologist of the Day (608-267-7143 or [DHSDPHEnterics@dhs.wisconsin.gov](mailto:DHSDPHEnterics@dhs.wisconsin.gov)) or the DPH Bureau of Communicable Diseases at 608-267-9003.

Thank you for your assistance in this important matter.