

**Campylobacteriosis***(Campylobacter spp.)***What is campylobacteriosis?**

Campylobacteriosis is an infectious disease caused by bacteria of the genus *Campylobacter*. Most people who become ill with campylobacteriosis get diarrhea, cramping, abdominal pain and fever within two to five days after exposure to the organism. The diarrhea may be bloody and can be accompanied by nausea and vomiting. The illness typically lasts one week.

**Who is at risk for campylobacteriosis?**

People of all age groups are susceptible to the disease. Younger children, older adults and people who have compromised immune systems are at greatest risk for complications associated with campylobacteriosis.

**What are the symptoms of campylobacteriosis?**

The most common symptom of campylobacteriosis is diarrhea, which is often watery and may contain blood. Other symptoms include fever, abdominal pain, nausea, headache and muscle pain.

**How soon do symptoms appear?**

The illness usually occurs two to five days after ingestion of the contaminated food or water, with a range of one to 10 days depending on the dose ingested.

**How is *Campylobacter* spread?**

- Contact with stool from infected birds, farm animals (e.g., chickens and turkeys), or pets (e.g., dogs, cats, hamsters and birds – especially young animals)
- Contaminated water
- Unpasteurized milk
- Contaminated food (e.g., raw poultry)
- Person-to-person through fecally contaminated food, hands or surfaces touched by objects or hands put into the mouth (fecal-oral route) occurs occasionally, particularly from very young children (most likely during diarrhea phase)

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

An infected person can spread the disease throughout the course of infection, usually several days to several weeks. Excretion of *Campylobacter* in the stools is shortened by treatment with antibiotics if given early in the illness. Without treatment, excretion of bacteria can continue for two to seven weeks.

**How is a person diagnosed?**

Diagnosis is usually accomplished by isolating *Campylobacter* bacteria from stool specimens by culture.

**What is the treatment?**

Most cases of campylobacteriosis will resolve without specific treatment. Providing fluids and electrolyte replacement therapy prevents and corrects dehydration. In severe cases, antibiotics may be used.

**Does past infection make a person immune?**

No. In fact, if not treated properly, the person may experience a relapse of symptoms.

## **Should children or others be excluded from day care, school, work or other activities if they have campylobacteriosis?**

Yes, if:

- The child is unable to participate and 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.
- The child meets other exclusion criteria, such as fever with behavior change.

Exclusion of infected day care staff or people who handle food is recommended.

## **What can be done to prevent the spread of campylobacteriosis?**

- Good hand washing after handling animals, especially farm animals, and before handling food.
- Drinking only pasteurized milk.
- Proper cooking of chicken and other meat products, milk pasteurization and water chlorination.
- Proper food handling and preparation techniques, such as washing hands with soap after handling raw foods of animal origin and after toilet use or diaper changing.
- Preventing cross-contamination in the kitchen by using separate cutting boards for foods of animal origin and other foods.
- Carefully cleaning all cutting boards, countertops and utensils with soap and hot water or disinfectant after preparing raw food of animal origin.

### **Additional Information:**

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

**This disease is a reportable condition. As mandated by North Dakota law, any incidence of this disease shall be reported to the North Dakota Department of Health.**

Resources: American Academy of Pediatrics. [Children In Out-of-Home Child Care]. In: Pickering LK, ed. Red Book: 2003 Report of the Committee on Infectious Diseases. 26th ed. Elk Grove Village, IL: American Academy of Pediatrics; 2003:[123-137].

Control of Communicable Disease Manual, 18th Edition-2004, Heymann, David, MD ed.

