

## Health Advisory: *Salmonella* Outbreak Associated with Live Poultry Contact

Minnesota Department of Health June 21, 2016 14:00 CDT

### Action Steps:

**Local and tribal health departments:** Please forward to clinics and hospitals in your jurisdiction.

**Hospital and clinics:** Please distribute to healthcare professions who might treat patients with diarrhea and fever.

### Healthcare providers:

- Ask patients with febrile gastroenteritis about any animal exposure, specifically live poultry
- Obtain a stool sample and test for bacterial pathogens.
- Report *Salmonella* infections to MDH at 651-201-5414 (1-877-676-5414).
- Submit *Salmonella* isolates to MDH-Public Health Laboratory as soon as possible

State health and agriculture officials are investigating an outbreak of *Salmonella* infections associated with handling baby chicks or other newly hatched poultry purchased from multiple feed stores in Minnesota. Currently, nine cases have been reported through routine surveillance including six cases of *Salmonella* Infantis, two cases of *S. Enteritidis* and one case of *S. Indiana*, all serotypes that have been previously associated with poultry. Patient ages range from 2 months to 66 years and two patients have been hospitalized. These cases are associated with a multistate outbreak of seven *Salmonella* serotypes being investigated by the U.S. Centers for Disease Control and Prevention (CDC). Over 324 cases from 35 states have been reported, and 27 percent of cases were children 5 years of age or younger. These outbreaks are expected to continue for the next several months as flock owners may be unaware of the risk of *Salmonella* infection from live poultry or participate in risky behaviors that can result in infection.

Symptoms of salmonellosis include diarrhea, abdominal pain and cramps, and fever. Diarrhea is sometimes bloody. Symptoms usually begin within 12 to 72 hours after exposure, but they can begin up to a week or more after exposure. *Salmonella* infections usually resolve in 5 to 7 days, but approximately 28 percent of laboratory-confirmed cases require hospitalization. Invasive infections (for example, blood stream infections, meningitis) occasionally occur. In rare cases, *Salmonella* infection can lead to death, particularly in the elderly.

Providers should obtain stool samples from patients with febrile gastroenteritis and test for bacterial enteric pathogens. Fluid and electrolyte replacement is the primary therapy for salmonellosis. Antibiotic treatment is generally not recommended for immunocompetent adults or children over 12 months of age with mild to moderate symptoms of salmonella gastroenteritis. However, treatment should be considered for patients with severe disease (e.g., more than 9 or 10 stools per day, high fever, hospitalization required). Treatment should also be considered to prevent complications of salmonellosis (e.g., invasive disease, focal infections) in patients with known atherosclerotic disease or with immunocompromising conditions, even those with less severe infection. These patients include those with: an organ transplant; AIDS; cancer with current or recent chemotherapy; sickle cell disease, hemoglobinopathies, or disorders of the reticuloendothelial system; and, those receiving corticosteroids or other immunosuppressive drugs.

Approximately 700 cases of salmonellosis are reported each year in Minnesota.

More information on intestinal illnesses from poultry can be found here

<http://www.health.state.mn.us/divs/idepc/dtopics/animal/backyard.html>. More information from CDC is available at the [Multistate Outbreaks of \*Salmonella\* Infections Linked to Live Poultry](#).

A copy of this HAN is available in PDF and Word format at [www.health.state.mn.us/han/](http://www.health.state.mn.us/han/).

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