Philadelphia Department of Public Health



Division of Disease Control

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Health Advisory Increase in Community-wide Transmission of Shigella in Philadelphia December 11, 2008

The Division of Disease Control (DDC), Philadelphia Department of Public Health (PDPH) is advising the healthcare community of a substantial increase in community-wide *Shigella* infections, particularly among young children attending center-based childcare programs and their household contacts. Shigellosis is highly contagious, easily transmitted within closed facilities or institutions, and has significant implications for public health, particularly when young children, healthcare workers, or foodhandlers are affected. Transmission can result from either direct person-to-person spread via fecal-oral spread, or through ingestion of contaminated food. DDC recommends the following to control the spread of *Shigella*:

- Healthcare professionals who treat patients with diarrhea should obtain stool cultures, particularly from young
 children, healthcare workers with direct patient contact, anyone who resides or works in a residential shelter
 or group setting, and food handlers. Stool cultures should also be collected for persons who present as part
 of an outbreak or cluster of diarrhea, particularly if associated with an institution or facility.
- Antibiotics shorten the duration and severity of Shigella infection, and the duration of bacterial excretion.
 PDPH recommends treatment for persons who have severe symptoms, or who pose a risk to close contacts, such as childcare center participants or shelter residents. Antibiotic resistance is common and emerges quickly with Shigella; the choice of specific agents should be guided by susceptibility patterns.
- State and city public health regulations require the exclusion of persons with Shigella infection who participate in high-risk situations (e.g., childcare, foodservice, healthcare). They must have two negative stool cultures collected at least 48 hours after completion of antibiotics and at least 24 hours apart, before they can return. Older children (e.g., elementary age and older) may be allowed to return to school once asymptomatic, and do not require negative stool cultures. Large outbreaks of Shigella infection in childcare programs may require cohorting of children and staff. Persons with diarrhea due to any infectious cause should be advised to stay home from work, school or childcare until they are completely well.
- Close, household contacts to cases of Shigella are considered to be carriers, and presumed to be shedding
 the organism even if they have no symptoms of diarrhea. As such, state and city public health regulations
 require that persons who work in high risk situations and who are close contacts to Shigella cases be
 excluded from those situations until they have two negative stool cultures collected at least 24 hours apart.
- Persons with suspected or confirmed Shigella infections who reside in a shelter should be allowed to return
 to the facility, with clear instructions about hand hygiene. DDC has developed guidelines for the control of
 infectious diarrhea disease in residential shelter situations, and works closely with shelter operators to limit
 the spread of disease. The shelter operator should be informed of the diagnosis so they can work with
 PDPH to implement disease control measures in the shelter, such as cohorting, etc.
- Advise patients and household contacts to clean hands before eating or drinking, and after using the
 bathroom or changing diapers. Hand washing should be reinforced in all high-risk settings with young
 children, especially residential shelters and childcare programs, where children should be supervised to
 ensure that they wash hands after using the toilet and before eating. Shared bathrooms should be cleaned
 often with a chlorine-based solution, especially frequently touched surfaces such as toilets and fixtures.

Report all confirmed or suspected cases of *Shigella*, and any cluster or outbreak of gastrointestinal illness, to DDC. To speak with a staff-person call 215-685-6740; after-hours call 215-686-1776 and request to speak with the person on-call for DDC. Additional information can be found at https://hip.phila.gov.