

Health Advisory

National Increases in Domestically-Acquired Cyclosporiasis

July 24, 2026

SUMMARY POINTS

- Since May 2026, multiple states have reported substantial increases in domestically-acquired cyclosporiasis cases, including a large, multistate outbreak linked to iceberg lettuce.
- Area providers should collect and submit specimens for *Cyclospora* testing from patients with prolonged or relapsing watery diarrhea.
- Cyclosporiasis is a reportable disease by law in Philadelphia, and all confirmed, probable, and suspect cyclosporiasis cases should be reported to PDPH through electronic laboratory reporting or by telephone at 215-685-6741 (M-F, 8:30am – 5:00pm).

Background

In light of the increases in domestically-acquired cyclosporiasis and CDC's ongoing investigation of a multistate outbreak linked to iceberg lettuce, the Philadelphia Department of Public Health (PDPH) encourages area healthcare providers to be aware of the increased likelihood of cyclosporiasis among patients presenting with diarrhea and other gastrointestinal (GI) symptoms and have plans in place to collect and submit specimens for *Cyclospora* testing, which may not be included with routine testing for enteric infections.

Cyclospora cayetanensis is a parasite that causes illness with symptoms including frequent watery diarrhea, loss of appetite, bloating, stomach cramps, and nausea. Typically, cyclosporiasis increases occur seasonally from May–August. The incubation period averages about 1 week but can range from 2 to 14 days. Symptoms may follow a remitting-relapsing course and can last days to months. Complications can include malabsorption, cholecystitis, and reactive arthritis.

Since May 1, 2026, CDC has received substantially higher numbers of [confirmed, domestically-acquired cyclosporiasis cases](#) compared with counts from the same time last year. Nationally, several thousand cases have been identified and are under investigation as part of public health surveillance by state and local health departments, along with [a large cyclosporiasis outbreak linked to iceberg lettuce affecting multiple states](#). As part of the ongoing investigation and response to the outbreak, [a voluntary recall of iceberg lettuce products](#) distributed to 27 states, including Pennsylvania, was issued on July 17, 2026, and remains in effect.

To date, 13 confirmed cyclosporiasis cases from Philadelphia have been reported in 2026, and activity is on track to be higher than in recent years. The reported cases include individuals with international and domestic travel. PDPH will continue to closely monitor for rapid increases in local cyclosporiasis activity and investigate potential links to the large multi-state outbreak, clusters/outbreaks from other sources, and infections acquired during international travel.

Clinical Management, Testing, and Infection Prevention

- Consider cyclosporiasis in patients presenting with prolonged or relapsing watery diarrhea regardless of travel history.
- Ask patients with suspected or confirmed cyclosporiasis about their recent food and travel history to assist local investigations.
- Specifically request *Cyclospora* laboratory testing on stool specimens because routine ova and parasite (O&P) examinations might not reliably detect the parasite. Consider molecular (PCR-based) diagnostic testing where available, because it can improve detection. If ordering a commercially available multiplex PCR GI panel, given seasonal increases in bacterial enteric pathogens, make sure it includes *Cyclospora* detection. Clinicians should proactively identify which laboratories and tests for *Cyclospora* are available through their facility and ensure the laboratory's specimen collection and transport specifications are followed.

- Treat confirmed cases of cyclosporiasis with 7–10 days of trimethoprim-sulfamethoxazole (TMP-SMX) for immunocompetent adults and children over age 2 months; consider longer courses for patients with immunocompromising conditions. Consult current [CDC clinical guidance for recommended dosing](#).
- Advise patients to stay well hydrated, especially if diarrhea is frequent or severe.
- Healthcare workers should use [Standard Precautions](#), including performing hand hygiene before and after every patient contact. When providing direct care to diapered or stool-incontinent patients, use [Contact Precautions](#) and clean soiled surfaces with detergent followed by an EPA-registered hospital disinfectant.

Public Health Surveillance Reporting

Cyclosporiasis is a [reportable disease](#) by law in Philadelphia, and all confirmed, probable, and suspect cases should be reported to PDPH. Hospital and commercial laboratories that conduct PCR including multiplex GI panels and/or microscopy for *Cyclospora* should report all positive or detected results to PDPH through electronic laboratory reporting (ELR). In Philadelphia, healthcare providers who suspect cyclosporiasis in a patient should contact PDPH by calling 215-685-6741 during regular business hours (Monday-Friday 8:30am-5:00pm). Healthcare facilities outside Philadelphia should contact their local health department.

As part of public health surveillance activities to identify potential links among cases, laboratories should forward stool specimens that test positive for *Cyclospora* to the Pennsylvania Department of Health Bureau of Laboratories. Acceptable specimens include refrigerated stools in a preservative such as Cary Blair. Please ship with cold packs to maintain the sample temperature at 2–8°C, and include a completed [submission form](#) with a request for “*Cyclospora* genotyping.” Please also include the method that *Cyclospora* was identified with, i.e., Biofire® FilmArray® Gastrointestinal (GI) Panel (multiplex PCR), etc. or attach a printout of the results. Specimens can be sent Monday through Thursday to: PA Department of Health, Bureau of Laboratories 110 Pickering Way Exton, PA 19341. Call 610-280-3464 with questions.

Prevention and Control Recommendations

- Discard and do not eat [recalled iceberg lettuce products from Taylor Farms de Mexico](#). Wash items and surfaces that may have touched the recalled lettuce using hot soapy water or a dishwasher.
- Reduce your risk of foodborne illness by thoroughly washing fresh produce under clean running water before eating and by following [safe food handling](#) practices. Cooking produce to at least 158 °F can kill the parasite. Be aware that chemically disinfecting or sanitizing produce might not fully eliminate *Cyclospora*. It is important to thoroughly wash produce even if it is labeled as pre-washed.
- Visit a clinician if you have prolonged or watery diarrhea, especially if it lasts more than a few days or you have eaten iceberg lettuce in the 2 weeks before symptom onset.

Adapted from [CDCHAN-00531](#) and [2026-PAHAN-833-07-16-ADV](#)