Giardiasis

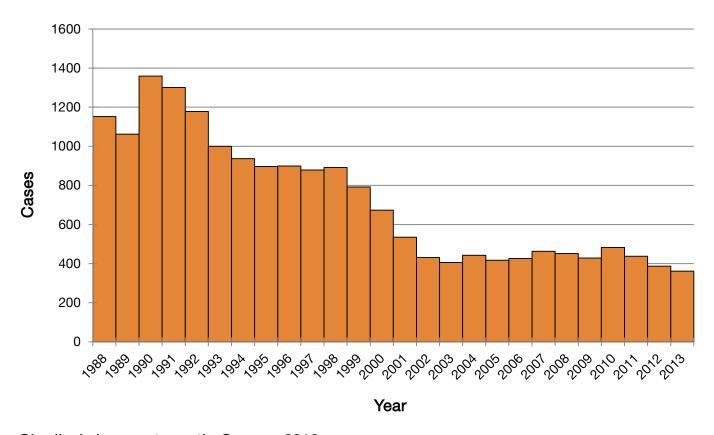
Giardia intestinalis, the flagellated protozoan originally named G. lamblia, is the most commonly identified parasitic pathogen in the United States. Children in daycare and their close contacts are at greatest risk, as are backpackers and campers (from drinking unfiltered, untreated water), persons drinking from shallow wells, travelers to disease-endemic areas, and men who have sex with men. Giardia cysts can be excreted in the stool intermittently for weeks or months, resulting in a protracted period of communicability. Transmission occurs when as few as 10 cysts are ingested through person-to-person or animal-to-person contact, or by ingesting fecally contaminated water or food. Because most human cases follow person-to-person transmission, identification and treatment of giardiasis as well as management of their contacts should prevent further spread of infection.

Most *Giardia* infections occur without symptoms. When symptomatic, patients report chronic diarrhea, steatorrhea, abdominal cramps, bloating, frequent loose and pale, greasy stools, fatigue, and weight loss.

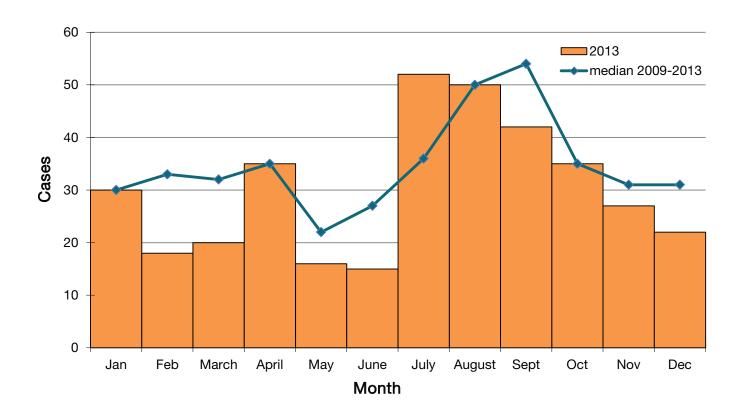
In 2013, the reported incidence of giardiasis in Oregon remained twice that of the rest of the U.S., with 9.2 cases per 100,000 persons. During 2013, 96% of the cases were reported as "sporadic" and 2% as household-associated; one outbreak was reported. Children less than 5 years of age continue to have the highest incidence, with 19 cases per 100,000 population. Rates of infection tend to be higher in the summer months with transmission related to outdoor activities in or near untreated water.

Giardiasis is treatable, though treatment fails ~10% of the time. Treatment failure, however, is not thought to indicate resistance. A repeat course of the same or a different medication may work.

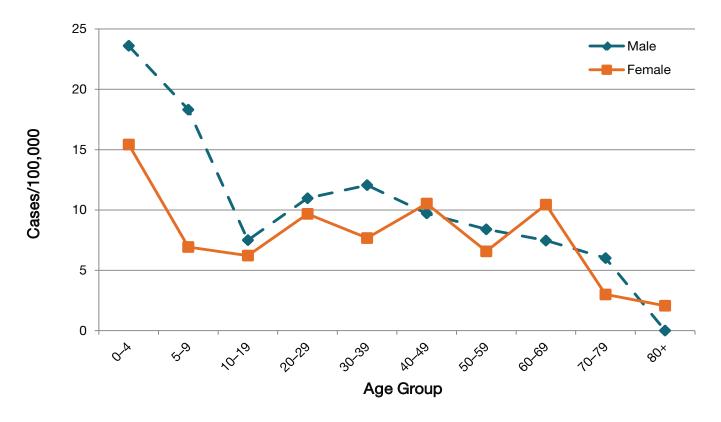
Giardiasis by year: Oregon, 1988-2013



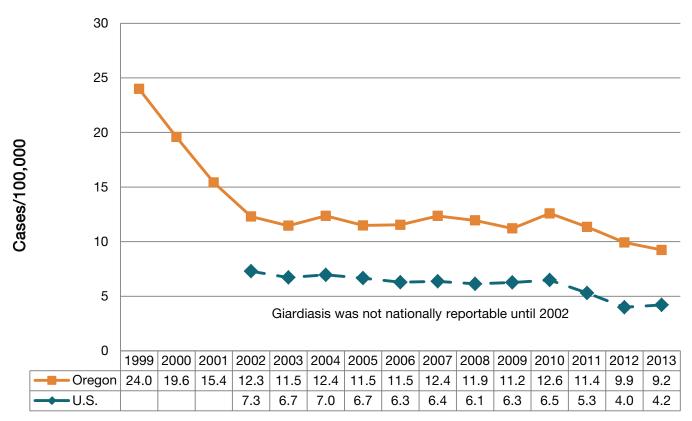
Giardiasis by onset month: Oregon, 2013



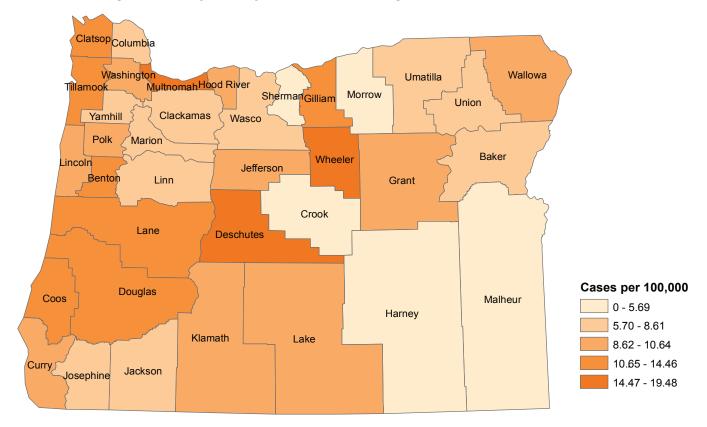
Incidence of giardiasis by age and sex: Oregon, 2013



Incidence of giardiasis: Oregon vs. nationwide, 1999–2013



Incidence of giardiasis by county of residence: Oregon, 2004–2013



Prevention

- Wash hands with soap carefully and frequently, especially after going to the bathroom, after changing diapers, or after touching livestock. Supervise hand washing of toddlers and small children after they use the toilet.
- Do not work or attend daycare, serve or prepare food, or work in health care while ill with diarrhea.
- Refrain from recreational water activities (pools, hot tubs, splash pads) for 2 weeks after symptoms from a bout of giardiasis subside.
- Do not drink untreated surface water.