

Cryptosporidiosis

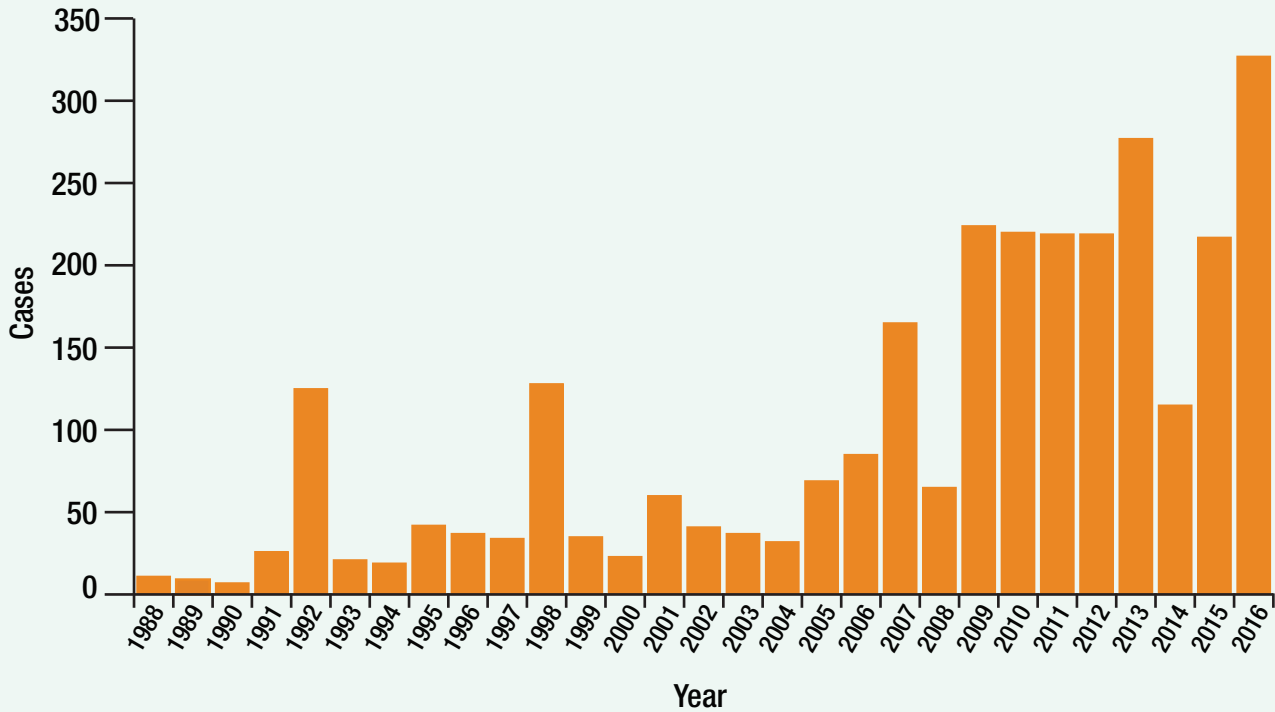
Cryptosporidiosis in humans results from infection with protozoal parasites of the genus *Cryptosporidium* — most commonly *C. hominis* or *C. parvum*. Symptomatic infections are characterized by watery diarrhea and abdominal cramps. Symptoms typically resolve in one to four weeks in immunocompetent persons, but infections in immunocompromised persons can be difficult or impossible to cure. Studies suggest the prevalence of cryptosporidiosis among young children, particularly those in large child care facilities, is surprisingly high. There are no symptoms for many of these infections.

In Oregon, the rate of infection with *Cryptosporidium* remains elevated from rates observed in 2000, with the 2016 rate of 8.0 per 100,000, the highest since reporting began. Nationally, infections began to rise in the early millennium and have continued to rise in 2016. Oregon incidence of *Cryptosporidium* remains twice the national rate (3.6 per 100,000 persons). Cases occur year-round with peaks in August, coincident with increases in exposure to recreational water.

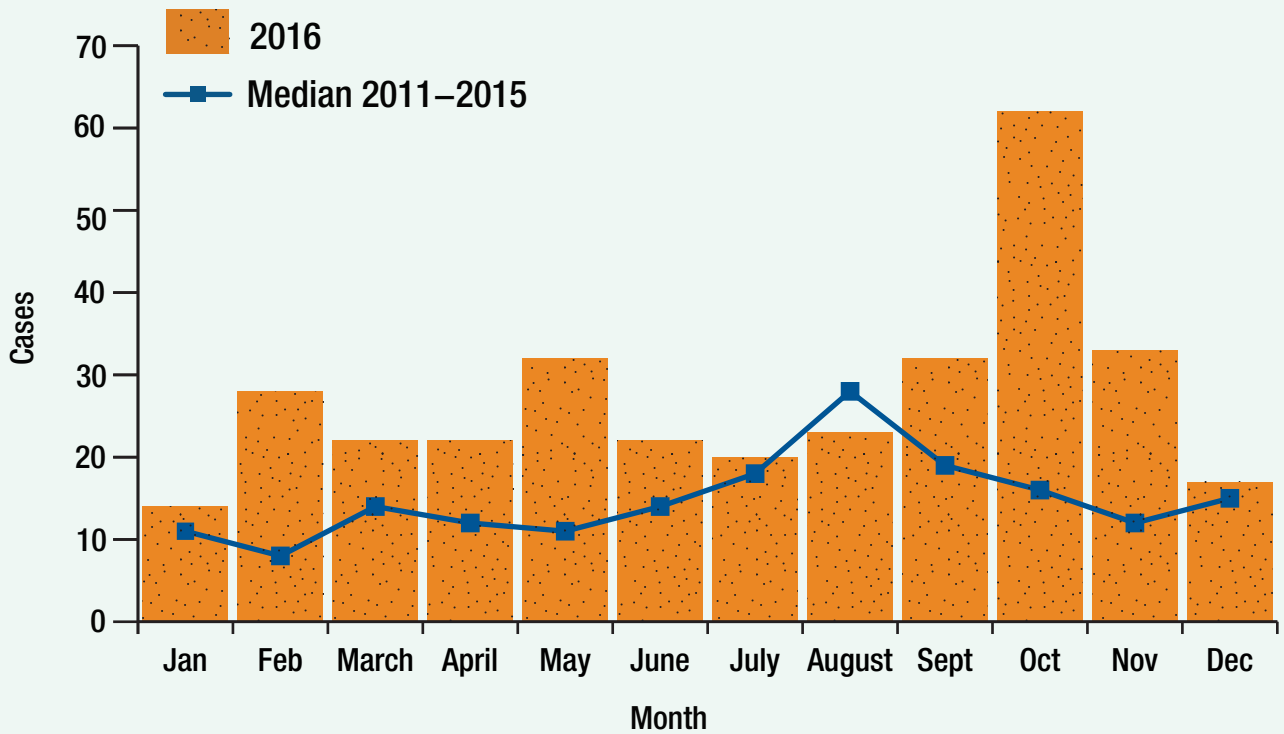
Rapid cartridge (ImmunoSTAT) tests and culture independent diagnostic testing for *Cryptosporidium* might be playing a role in the apparent increase in incidence. In 2016, 327 cases were reported. All cases are routinely investigated to identify the source of infection. Two outbreaks occurred in 2016, both associated with recreational water.

Treatment with an antiprotozoal agent has been shown effective in persons with a normal immune response; however, there are no proven effective treatments in immunocompromised hosts.

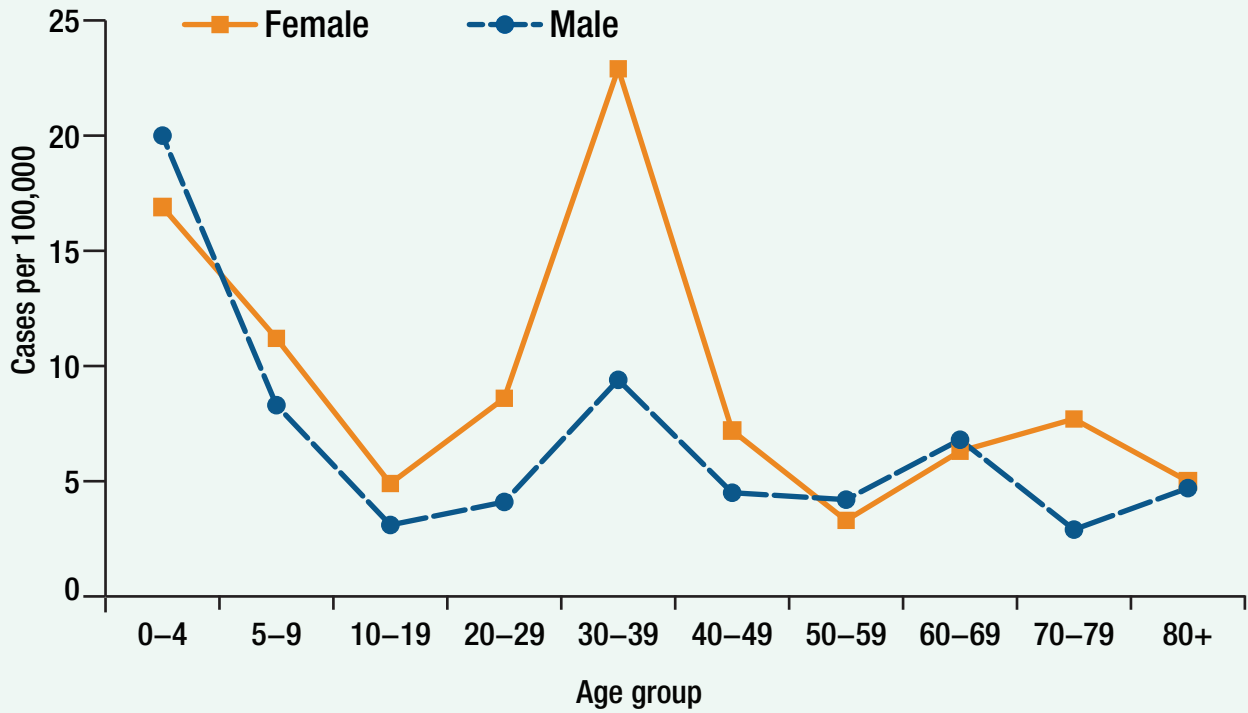
Cryptosporidiosis by year: Oregon, 1988–2016



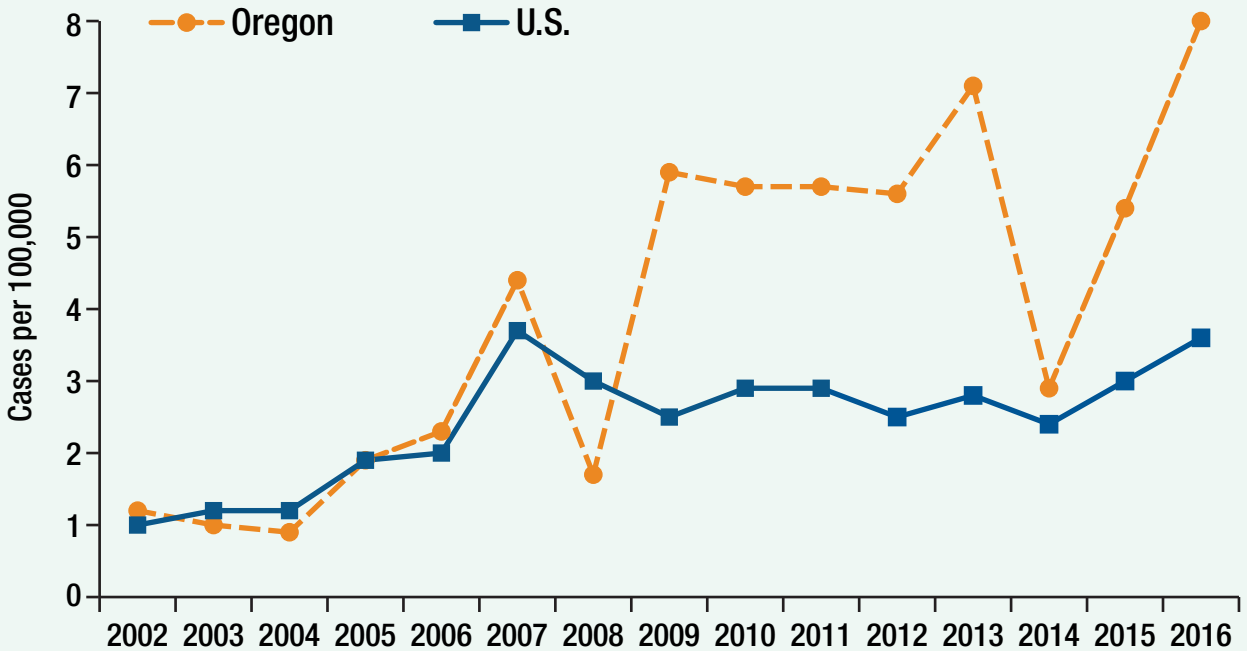
Cryptosporidiosis by onset month: Oregon, 2016



Incidence of cryptosporidiosis by age and sex: Oregon, 2016

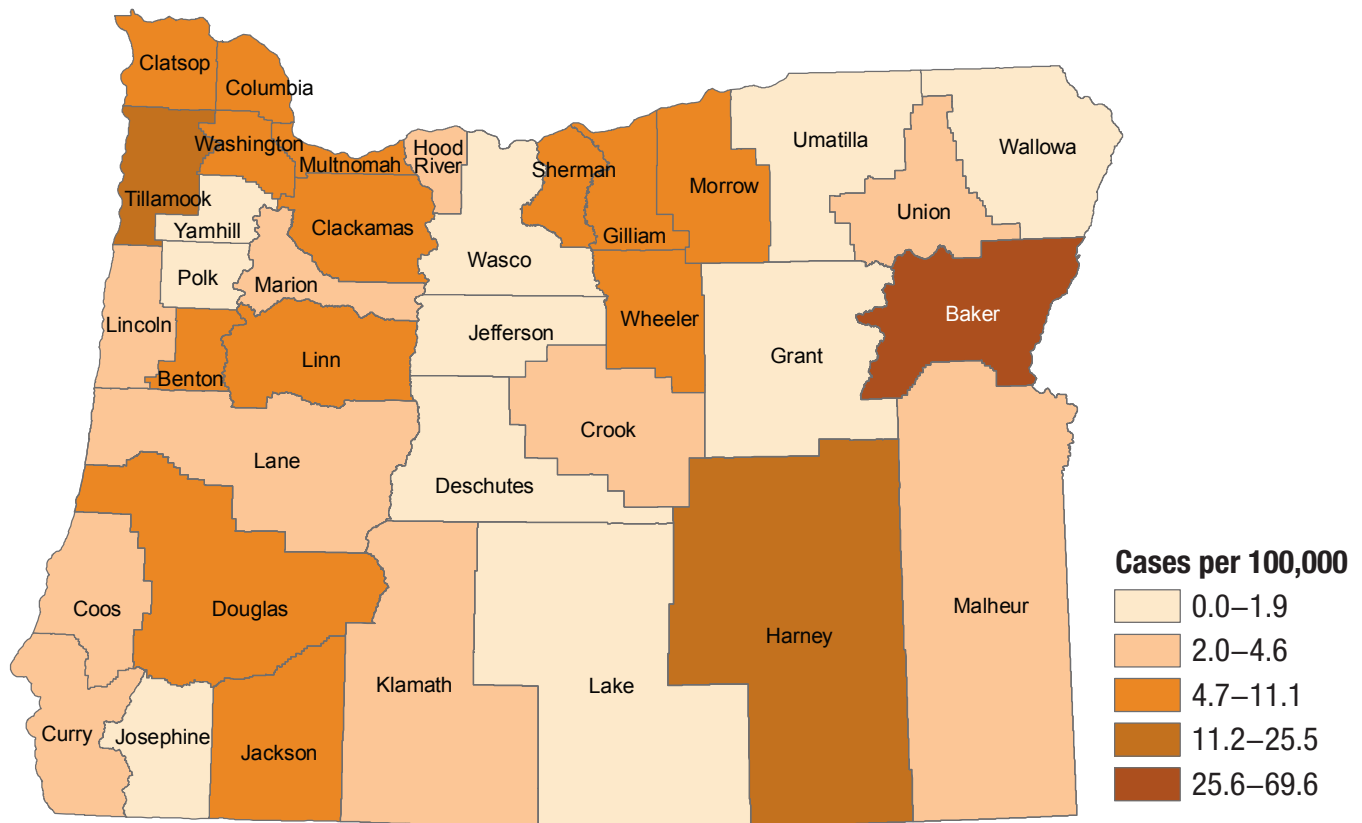


Incidence of cryptosporidiosis: Oregon vs. nationwide, 2002–2016



Oregon	1.2	1.0	0.9	1.9	2.3	4.4	1.7	5.9	5.7	5.7	5.6	7.1	2.9	5.4	8.0
U.S.	1.0	1.2	1.2	1.9	2.0	3.7	3.0	2.5	2.9	2.9	2.5	2.8	2.4	3.0	3.6

Incidence of cryptosporidiosis by county of residence: Oregon, 2007–2016



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 two weeks after symptoms from a bout of cryptosporidiosis subside.
- Do not drink untreated surface water.