Gastrointestinal outbreaks

Person-to-person transmission was responsible for 75 gastroenteritis outbreaks and foodborne transmission for 26. Transmission was undetermined (we couldn’t figure it out) or unknown (we didn’t have enough data to figure it out) in 68 of the outbreaks. More than 80% of person-to-person outbreaks happened in institutional cohorts, especially among those in LTCFs.

In 2013, the case definition of a norovirus outbreak was modified to be more in line with national standards. Some outbreaks previously classified as indeterminate were reclassified as suspect norovirus. The new classification includes outbreaks where symptoms were classical of norovirus but a positive specimen was not documented.

Fifty-one percent of reported gastroenteritis outbreaks reported from 2011–2015 occurred in LTCFs for the elderly.

Lab-confirmed norovirus and suspect norovirus outbreaks: Oregon, 2011–2015

<table>
<thead>
<tr>
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<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
<th>2015</th>
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<tr>
<td>Confirmed norovirus</td>
<td>75</td>
<td>121</td>
<td>124</td>
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<td>95</td>
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<td>Suspect norovirus</td>
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<td>8</td>
<td>14</td>
<td>18</td>
<td>9</td>
</tr>
</tbody>
</table>

Reported outbreaks by transmission mode and settings, Oregon 2011–2015

1229 outbreaks
- 134 foodborne
- 6 waterborne
- 262 respiratory
- 21 animal contact
- 548 person-to-person
- 393 long-term care facilities
- 36 schools
- 28 daycare centers
- 29 hospitals
- 27 retirement/independent living
- 26 other non-institutional
- 9 camps