



# FLASH REPORT

August 22, 2021

An Urgent Public Health Activity Report Within Jackson County

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## Contact Us

**Communicable  
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at JCPH:  
541-774-8045**

After Hours:  
541-618-4651

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## Shiga-toxigenic *Escherichia coli* (STEC) & HUS

Jackson County Public Health is investigating an unusually high number of Shiga toxin-producing *Escherichia coli* (STEC) cases. Since August 1, 2021, 14 cases have been reported to Jackson County, and 10 (71%) of these cases have been hospitalized.

### Symptoms of STEC

Shiga toxin-producing *E. coli* (STEC) infection symptoms vary for each person, but often include severe stomach cramps, diarrhea (often bloody), and vomiting. Some people may have a fever, which usually is not very high (less than 101°F/38.5°C). Most people get better within 5 to 7 days. Some infections are very mild, but others are severe or even life-threatening. Hemolytic Uremic Syndrome (HUS) is a particularly severe potential complication of STEC infection. Features of HUS include low platelet count, anemia due to broken blood cells, and kidney failure.

### Actions to Take for Providers

Jackson County Public Health is asking medical providers to be aware of the increases in STEC cases in Jackson County and collect and test stool specimens on patients suspected to have bacterial gastroenteritis.

In addition, refrain from treating any gastroenteritis patients with antibiotics unless a definitive diagnosis supports this treatment. Antibiotics are not recommended for patients with suspected STEC infections until complete diagnostic testing can be performed, and STEC infection is ruled out. Some studies have shown that administering antibiotics to patients with STEC infections might increase their risk of developing HUS, and the benefit of treatment has not been clearly demonstrated.<sup>1</sup> Early treatment of pediatric STEC cases with IV fluids is recommended to prevent the development of HUS.

Patients with STEC infection are restricted from school and child care attendance, food handling, and patient care. Ask about the infected patient's activities and counsel patients on restrictions that apply to them.

### Laboratory and Physician Reporting Requirements

Shiga-toxigenic *Escherichia coli* (including O157, HUS, and other serogroups) are reportable infections and must be reported to local public health authorities within one working day.

The requirement for HUS reporting is primarily a roundabout way of finding otherwise unreported STEC infections and secondarily a way of learning about other potential causes of HUS. A case is defined as such by the attending physician—typically a nephrologist or gastroenterologist.

**Please print the  
Reporting  
Guidelines**



**How to report STEC and HUS cases to Jackson County Public Health**

Report all lab-confirmed and clinically suspect cases of STEC and HUS to Jackson County Public Health within one public health working day.

1. **Electronic** – This is a web-based confidential reporting system through the Oregon Health Authority. These reports will be automatically routed to Jackson County Public Health. Click on the hyperlink to access this option, [Web-based Confidential Oregon Morbidity Report](#).
2. **Call Jackson County Public Health Communicable Disease** – Clinicians can call and make a report 24 hours a day. During business hours, call 541-774-8045, and after-hours, call 541-618-4651.
3. **Fax** – Clinicians can fax a report to Jackson County Public Health using the [Oregon Confidential Morbidity Form](#) (please click on the hyperlink to access this form). The form should be faxed at 541-774-7954.

**Resources:**

- E.coli (Escherichia coli. Resources for Clinicians for Laboratories: <https://www.cdc.gov/ecoli/clinicians.html>

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*The mission of Jackson County Health and Human Services is to plan, coordinate and provide public services that protect and promote the health and well-being of county residents.*

**References**

1. E.coli (Escherichia coli. Resources for Clinicians for Laboratories. Centers for Disease Control and Prevention. <https://www.cdc.gov/ecoli/clinicians.html>. Reviewed December 1, 2014. Accessed August 22, 2021.