



NEW YORK CITY DEPARTMENT OF
HEALTH AND MENTAL HYGIENE
Mary T. Bassett, MD, MPH
Commissioner

2014 Alert # 39

Outbreak of Shigellosis in Borough Park and Williamsburg

Please Distribute to All Clinical Staff in Pediatrics, Primary Care, Internal Medicine, Infectious Diseases, Emergency Medicine, Family Medicine, Laboratory Medicine and Infection Control Staff

- **43 cases of shigellosis have been diagnosed among the Observant Jewish community in Borough Park and Williamsburg since November 14, 2014.**
- **Most cases are occurring in children under six years old.**
- **Physicians should not routinely prescribe antibiotics to patients with *Shigella* infection.**
 - **All isolates to date from this outbreak are resistant to ampicillin, and one-third are resistant to sulfamethoxazole/trimethoprim**
 - **Antibiotics should be prescribed only if a patient has severe illness, prolonged illness, or risk factors for systemic illness, such as an immune-compromising condition.**
 - **When treatment is necessary antimicrobial susceptibility results should be used to guide therapy.**

December 17, 2014

Dear Colleagues,

Since November 14th, 43 cases of shigellosis (primarily *Shigella sonnei* group D) have been diagnosed among the Observant Jewish community in Borough Park and Williamsburg. Young children are primarily affected, with 79% of case-patients under six years old. Outbreaks of shigellosis have occurred in this community every 3-5 years since the 1980s. Some outbreaks have involved hundreds of cases.

The New York City Health Department is working with the community to prevent further cases. The Health Department recommends strict hand-washing after using the toilet, after diapering, before eating, and before preparing food. Young children should not attend daycare when they are ill. Children with shigellosis should not return to daycare until their symptoms resolve, and two stool specimens obtained at least 24 hours apart are negative for *Shigella* by culture. Please emphasize these issues with your patients, especially in the affected communities.

Most *Shigella* infections are mild, resolving on their own and requiring only supportive treatment (e.g., increasing oral fluid intake). Physicians often prescribe antibiotics for shigellosis, because antibiotics have been shown to reduce the duration of illness. All isolates from this outbreak have, to date, been resistant to ampicillin, and about one third have been resistant to

sulfamethoxazole/trimethoprim. The Health Department recommends that physicians do not routinely prescribe antibiotics to patients with *Shigella* infection, because widespread antibiotic use may lead to the emergence of antibiotic-resistant strains within this community. The Health Department recommends that physicians prescribe antibiotics to treat *Shigella* infection only if a patient has severe illness, prolonged illness, or risk factors for systemic illness, such as an immune-compromising condition.

If antibiotics are used, physicians should tailor treatment based on susceptibility results. For ampicillin-resistant strains, sulfamethoxazole/trimethoprim should be used. Amoxicillin is less effective because of its rapid absorption from the gastrointestinal tract. For strains resistant to both ampicillin and sulfamethoxazole/trimethoprim, azithromycin or ciprofloxacin should be used. For parenteral treatment, azithromycin for three days or ceftriaxone for 2-5 days should be administered

To monitor antimicrobial resistance among *Shigella* in NYC, laboratories should forward all *Shigella* isolates to the Public Health Laboratory (PHL) at:

Public Health Laboratory, Rm 136
455 First Ave
New York, NY 10016
(212) 447-6112

Please include a completed test requisition. The requisition can be found at:
<http://www.nyc.gov/html/doh/downloads/pdf/labs/testing-services.pdf>

Providers are required to report all laboratory-confirmed *Shigella* cases to DOHMH, using the Universal Reporting Form either electronically (eURF) or on paper. Paper URF forms can be found at: <http://www.nyc.gov/html/doh/html/hcp/hcp-reporting.shtml>

OR report on line at <http://www.nyc.gov/html/doh/html/hcp/hcp-urf.shtml>

Providers are also required to report all clusters of shigellosis, cases in foodhandlers, and cases who attend daycare immediately by calling the Health Department at **1-866-692-3641**.

If you are interested in having factsheets about *Shigella* (English only) for your patients or hand-washing posters (English or Yiddish) for your office, call 311.

As always, we appreciate your continued assistance in addressing emerging public health issues in New York City.

Sincerely,

Vasudha Reddy
Vasudha Reddy, MPH
Director Foodborne Disease Program
Bureau of Communicable Diseases

Sharon Balter
Sharon Balter, MD
Director Enteric, Waterborne and Hepatitis Unit
Bureau of Communicable Diseases