



## ***Cyclospora* Infection**

### **Cyclosporiasis** (sigh-clo-spore-EYE-uh-sis)

#### **What is cyclosporiasis?**

*Cyclospora cayetanensis* (SIGH-clo-SPORE-uh KYE-uh-tuh-NEN-sis) is a parasite composed of one cell, too small to be seen without a microscope. The first known human cases of illness caused by *Cyclospora* infection (that is, cyclosporiasis) were reported in 1979. Cases began being reported more often in the mid-1980s. In the last several years, outbreaks of cyclosporiasis have been reported in the United States and Canada.

#### **How is *Cyclospora* spread?**

*Cyclospora* is spread by people ingesting something, for example, water or food that was contaminated with infected stool. For example, outbreaks of cyclosporiasis have been linked to various types of fresh produce. *Cyclospora* needs time (days or weeks) after being passed in a bowel movement to become infectious. Therefore, it is unlikely that *Cyclospora* is passed directly from one person to another. It is unknown whether animals can be infected and pass infection to people.

#### **Who is at risk for *Cyclospora* infection?**

People of all ages are at risk for infection. In the past, *Cyclospora* infection was usually found in people who lived or traveled in developing countries. However, nowadays the infection is found worldwide.

#### **What are the symptoms of infection?**

*Cyclospora* infects the small intestine (bowel) and usually causes watery diarrhea, with frequent, sometimes explosive, bowel movements. Other symptoms can include loss of appetite, substantial loss of weight, bloating, increased gas, stomach cramps, nausea, vomiting, muscle aches, low-grade fever, and fatigue. Some people who are infected with *Cyclospora* do not have any symptoms.

#### **How soon after infection will symptoms begin?**

The time between becoming infected and becoming sick is usually about 1 week.

#### **How long will symptoms last?**

If not treated, the illness may last from a few days to a month or longer. Symptoms may seem to go away and then return one or more times (relapse).

**What should I do if I think I might be infected?**

If you think you might be infected with *Cyclospora*, see your health care provider.

**How is *Cyclospora* infection diagnosed?**

Your health care provider will ask you to submit stool specimens to see if you are infected. Because testing for *Cyclospora* infection can be difficult, you may be asked to submit several stool specimens over several days. Identification of this parasite in stool requires special laboratory tests that are not routinely done. Therefore, your health care provider should specifically request testing for *Cyclospora*. Your health care provider might have your stool checked for other organisms that can cause similar symptoms.

**How is infection treated?**

The recommended treatment for infection with *Cyclospora* is a combination of two antibiotics, trimethoprim-sulfamethoxazole, also known as Bactrim\*, Septra\*, or Cotrim\*. People who have diarrhea should rest and drink plenty of fluids.

**I am allergic to sulfa drugs; is there another drug I can take?**

No alternative drugs have been identified yet for people with *Cyclospora* infection who are unable to take sulfa drugs. See your health care provider to discuss other possible treatment options.

**How is infection prevented?**

Avoiding water or food that may be contaminated with stool may help prevent *Cyclospora* infection. People who have previously been infected with *Cyclospora* can become infected again.

