




CDR WEEKLY

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News

Last updated: 9 September 2004
Next update due: 16 September 2004

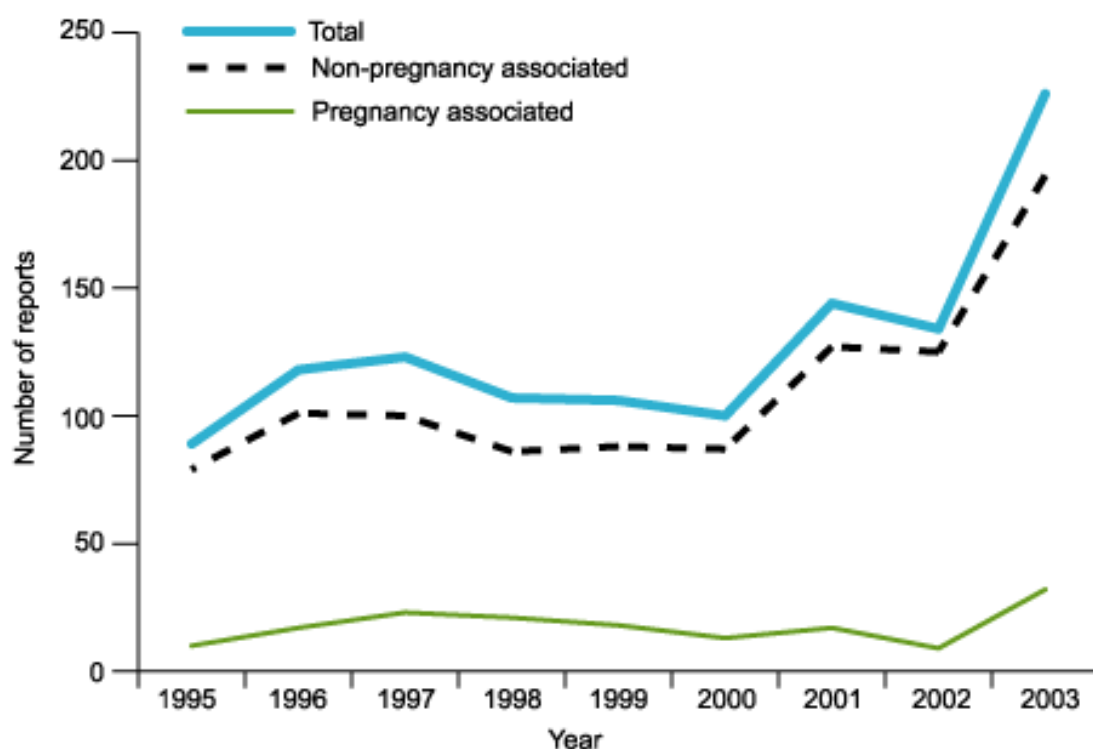
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Listeria monocytogenes infections in England and Wales in 2004

Listeria monocytogenes is a food borne pathogen, causing severe infections especially in pregnant women and those who are immunocompromised. Infection is characterised with long incubation period between three and 70 days, risk foods include those more associated with risk of infection than those with extended refrigerated shelf lives or eaten without cooking like soft cheeses, pates, and sliced meats.

Since 2001, the incidence of *L. monocytogenes* infections (reported through the National Enhanced Listeria Surveillance System) has increased in England and Wales. Approximately 100 cases were reported annually throughout the 1990s, with 146 and 139 cases reported in 2001 and 2002 respectively (figure). In 2003 numbers increased considerably and 234 cases were reported with a peak in incidence observed in the spring. Four distinct clusters were identified, predominantly in northern England. Molecular typing techniques applied to human, food, and environmental isolates implicated butter in one cluster and sandwiches in two clusters. The vehicle of the fourth cluster remained unknown. The four clusters did not account for all of the observed increase in incidence, the reasons for this remaining unknown.

Figure *Listeria monocytogenes* infections reported to CDSC*



*CDSC = the Health Protection Agency's Communicable Disease Surveillance System.

Between January and August 2004, the number of listeriosis cases is around the same level as 2001 and 2002. A spring increase has not been observed this year. The geographical distribution of the cases is presented in the table below. Although the total number of cases is no higher than in 2001 and 2002, the disease incidence is higher in Yorkshire and Humberside, East Midlands, and Wales compared to other regions. Only three pregnancy related cases have been reported to date. Molecular typing of strains is continuing. As butter was the implicated infection source in one of the clusters in 2003, a national butter survey was commissioned and is being carried out by the Health Protection Agency's Environmental and Enteric Diseases Department. Furthermore, an updated enhanced surveillance questionnaire will be made available later this year to obtain additional epidemiological information, particularly on food exposures.

Table Number of *L. monocytogenes* cases reported between 1 January and 7 September 2004

| Region | Cases | Population | Risk/million |
|--------------------------|-----------|-------------------|--------------|
| North East | 4 | 2,513,274 | 1.6 |
| Yorkshire and Humberside | 14 | 4,982,503 | 2.8 |
| East Midlands | 11 | 4,215,492 | 2.6 |
| East of England | 5 | 5,420,360 | 0.9 |
| London | 10 | 7,355,354 | 1.4 |
| South East | 8 | 8,037,140 | 1 |
| South West | 1 | 4,959,593 | 0.2 |
| West Midlands | 7 | 5,304,124 | 1.3 |
| North West | 12 | 6,748,727 | 1.8 |
| Wales | 8 | 2,918,723 | 2.7 |
| Total | 80 | 52,455,290 | 1.5 |

Laboratories are reminded that it is important to send *L. monocytogenes* isolates from clinical and food samples to the Health Protection Agency's Food Safety Microbiology Laboratory for typing.

Campaign to reduce hospital infections by encouraging handwashing

On 1 September 2004, the National Patient Safety Agency (NPSA) issued an instruction to the NHS to place alcohol-based hand rubs near every patient in all acute hospitals by next April 2005, following their pilot study. Following this instruction, the Health Minister announced the first national campaign funded by the Department of Health (DH) to promote hand cleaning by healthcare staff to reduce hospital infections. The 'cleanyourhands' campaign will be initiated later in 2004 – the 'cleanyourhands' campaign website is available at: <http://81.144.177.110/cleanyourhands>.

Additionally, all NHS chief executives have been informed via the chief executives bulletin, available at <http://www.publications.doh.gov.uk/cebuletin2september04.htm#3>.

The NPSA pilot study has shown that hand cleaning by healthcare staff can be trebled by introducing simple practical changes. This move is the next step in the campaign to reduce infection rates in hospitals. International studies show infection rates can be reduced by 10% to 50% when healthcare staff regularly clean their hands (1). The NPSA has issued a patient safety alert that sets out to reduce infection rates and to prepare for the campaign, with action points for NHS acute trusts in England and Wales. The complete NPSA alert is available to download at: <http://81.144.177.110/health/display?contentId=3257>.

References

1. Pittet D, Hugonnet S, Harbath S, *et al.* Effectiveness of a hospital-wide programme to improve compliance with hand hygiene. 2000 *Lancet* 356:12.

Enteric

Last updated: 9 September 2004
Next update due: 14 October 2004

-  [General outbreaks of foodborne illness, England and Wales: weeks 32-35/04](#)
-  [Salmonella infections, England and Wales, reports to the HPA \(salmonella data set\): July 2004](#)
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General outbreaks of foodborne illness, England and Wales: weeks 32-35/04

Preliminary information has been received about the following outbreaks. Final information will be published in the quarterly report.

| Health Protection Unit | Organism | Location of food prepared or served | Month of outbreak | Number ill | Cases positive | Suspect vehicle | Evidence |
|--------------------------|-----------------------------------|-------------------------------------|-------------------|------------|----------------|-------------------------|----------|
| Cumbria & Lancashire | <i>Salmonella</i> Enteritidis PT1 | Restaurant | August | 15 | 15 | Chicken fried rice | M |
| North West London | <i>S. Enteritidis</i> PT4 | Restaurant | August | 50 | >50 | Chilli chicken wings | M |
| North Central London | <i>S. Enteritidis</i> PT4 | Restaurant | June | 3 | 3 | None | – |
| Cumbria & Lancashire | <i>S. Enteritidis</i> PT6 | Restaurant | Aug | 2 | 2 | – | – |
| Cambridge & Peterborough | <i>S. Enteritidis</i> PT14B | Restaurant | Aug | 3 | 3 | – | – |
| Crewe & Merseyside | <i>S. Enteritidis</i> PT14B | Reception | Aug | 7 | 7 | – | – |
| Thames Valley | <i>S. Enteritidis</i> PT24 | College | July | 2 | 2 | Chicken, lemon meringue | D |
| South West London | <i>S. Enteritidis</i> | Restaurant | Aug | 15 | >1 | Tiramisu | – |

* M (microbiological): identification of an organism of the same type from cases and in the suspect vehicle, or vehicle ingredient(s), or detection of toxin in faeces or food;

D (descriptive): other evidence, usually descriptive, reported by local investigators as indicating the suspect vehicle.

Salmonella infections (faecal specimens), England and Wales, reports to the HPA (*salmonella* data set): July 2004

Details of serotypes of the 1373 *salmonella* infections recorded in July 2004 are given in the table below. In August 2004, 1333 *salmonella* infections were recorded and preliminary information was received about eight outbreaks (see table above).

Figures quoted from the HPA salmonella data set are for isolates confirmed and typed by Laboratory of Enteric Pathogens (LEP).

| | July 2004 |
|----------------------------------|-------------|
| Total <i>Salmonella</i> * | 1373 |
| S. Enteritidis (PT4) | 255 |
| S. Enteritidis (other PTs) | 787 |
| S. Typhimurium | 132 |
| S. Virchow | 18 |
| Others (typed) | 181 |

* Data provisional.

Common gastrointestinal infections, England and Wales, laboratory reports: weeks 32-35/04

| Laboratory reports | Number of reports received | | | | Total reports 32-35/04 | Cumulative total to | |
|--------------------------------------|----------------------------|-------|-------|-------|---------------------------|---------------------|--------|
| | 32/04 | 33/04 | 34/04 | 35/04 | | 35/04 | 35/03 |
| <i>Campylobacter</i> | 822 | 771 | 646 | 466 | 2705 | 25,982 | 30,161 |
| <i>Escherichia coli</i> O157* | 14 | 27 | 27 | 47 | 115 | 425 | 328 |
| <i>Salmonella</i>† | 396 | 403 | 398 | 116 | 1313 | 6799 | 9424 |
| <i>Shigella sonnei</i> | 9 | 7 | 11 | 2 | 29 | 373 | 418 |
| Rotavirus | 24 | 21 | 28 | 18 | 91 | 12,507 | 14,167 |
| Norovirus | 15 | 10 | 13 | 7 | 45 | 1589 | 1753 |
| <i>Cryptosporidium</i> | 54 | 72 | 67 | 68 | 261 | 1736 | 2584 |
| <i>Giardia</i> | 38 | 22 | 33 | 33 | 126 | 1639 | 1945 |

* Vero cytotoxin producing isolates (data from Health Protection Agency's Laboratory of Enteric Pathogens (LEP)).

† Data from Health Protection Agency's Laboratory of Enteric Pathogens.

**General outbreaks of foodborne illness, England and Wales, laboratory reports: January to March 2004**

| Health Protection Unit | Organism | Location of food prepared or served | Number ill | Cases positive | Suspect vehicle | Evidence |
|------------------------------|--------------------------------------|-------------------------------------|------------|----------------|-----------------|----------|
| Shropshire and Staffordshire | <i>Escherichia coli</i> O157 PT21/28 | Residential Institution | 8 | 2 | – | – |
| East Midlands | <i>Salmonella</i> Enteritidis PT14B | Restaurant | 43 | 32 | Chicken | M |
| South East London | S. Give, S. Ibadan, and S. Shangani | Private House | 47 | 15 | Various foods | S |
| Cumbria | Norovirus | Hotel | 15 | 3 | Oysters | D |
| Cornwall & Isles of Scily | Norovirus | Hotel | 16 | 4 | Oysters | M |
| Birmingham | Unknown | Restaurant | 5 | – | – | – |
| County Durham | Unknown | Restaurant | 2 | – | – | – |

* M (microbiological): identification of an organism of the same type from cases and in the suspect vehicle, or vehicle ingredient(s), or detection of toxin in faeces or food; S (statistical): a significant statistical association between consumption of the suspect vehicle(s) and being a case. D (descriptive): other evidence, usually descriptive, reported by local investigators as indicating the suspect vehicle.

**Salmonella serotypes recorded in the Health Protection Agency salmonella data set April to June 2004**

All serotypes recorded in the Health Protection Agency Salmonella data set in the second quarter of 2004 are listed below. There were more than ten reports of 18 serotypes, two to ten reports were 52 serotypes, and one report of 54 serotypes.

More than ten reports of the following serotypes were received: April to June 2004

| | | | |
|----------------|------|----------------|-----|
| S. Agona | 21 | S. Bareilly | 11 |
| S. Braenderup | 17 | S. Corvallis | 19 |
| S. Enteritidis | 1610 | S. Give | 13 |
| S. Hadar | 20 | S. Infantis | 11 |
| S. Java | 20 | S. Kentucky | 15 |
| S. Montevideo | 14 | S. Newport | 32 |
| S. Oranienburg | 12 | S. Stanley | 39 |
| S. Thompson | 12 | S. Typhimurium | 263 |
| S. Unnamed | 23 | S. Virchow | 64 |

Between two and ten reports of the following serotypes were received: April to June 2004

| | | | |
|-------------------|----|----------------------|---|
| S. Abony | 4 | S. Adelaide | 3 |
| S. Agama | 3 | S. Ajiobo | 3 |
| S. Alachua | 3 | S. Albany | 3 |
| S. Anatum | 7 | S. Arechavaleta | 2 |
| S. Arizonae | 5 | S. Bispebjerg | 2 |
| S. Blockley | 7 | S. Bovis-Morbificans | 4 |
| S. Brandenburg | 4 | S. Chester | 7 |
| S. Colindale | 2 | S. Derby | 8 |
| S. Dublin | 6 | S. Durban | 2 |
| S. Durham | 7 | S. Emek | 4 |
| S. Galiema | 3 | S. Gold-Coast | 2 |
| S. Haifa | 6 | S. Havana | 3 |
| S. Heidelberg | 10 | S. Ibadan | 6 |
| S. Ituri | 2 | S. Javiana | 5 |
| S. Kedougou | 6 | S. Kottbus | 5 |
| S. Manhattan | 3 | S. Mbandaka | 4 |
| S. Muenchen | 2 | S. Muenster | 5 |
| S. Newington | 3 | S. Ohio | 3 |
| S. Oslo | 4 | S. Panama | 7 |
| S. Plymouth | 4 | S. Pomona | 2 |
| S. Poona | 2 | S. Reading | 6 |
| S. Richmond | 2 | S. Rissen | 3 |
| S. Rubislaw | 2 | S. Saint-Paul | 9 |
| S. Schwarzengrund | 2 | S. Senftenberg | 5 |
| S. Singapore | 3 | S. Stanleyville | 4 |
| S. Tennessee | 5 | S. Weltevreden | 6 |

One each of the following were received: April to June 2004

| | |
|-----------------|------------------|
| S. Altona | S. Amsterdam |
| S. Augustenborg | S. Berkeley |
| S. Biafra | S. Bonn |
| S. Bredeney | S. Brikama |
| S. Cerro | S. Champaign |
| S. Chandans | S. Coeln |
| S. Curacao | S. Dugbe |
| S. Duisburg | S. Eastbourne |
| S. Ferruch | S. Guinea |
| S. Herston | S. Hvittingfoss |
| S. Inpraw | S. Irumu |
| S. Jodhpur | S. Kapemba |
| S. Kiambu | S. Kibi |
| S. Kisangani | S. Kokoli |
| S. Larochelle | S. Lexington |
| S. Litchfield | S. Liverpool |
| S. Livingstone | S. London |
| S. Mississippi | S. Morehead |
| S. Nchanga | S. New Brunswick |
| S. Nima | S. Obogu |
| S. Ochsenzoll | S. Othmarschen |
| S. Sarajane | S. Shangani |
| S. Stourbridge | S. Tananarive |
| S. Tel-El-Kebir | S. Teshie |
| S. Uganda | S. Urbana |
| S. Virginia | S. Warnow |
| S. Waycross | S. Worthington |