

A CLINICAL GUIDE TO CRYPTOSPORIDIOSIS

Clinical Features:

Infection with cryptosporidium can range from asymptomatic to severe, life-threatening illness. The incubation period averages 7 days (range of 2-10 days). This disease frequently presents with **watery diarrhea**, and can be accompanied by **dehydration, weight loss, abdominal pain, fever, nausea, and vomiting**.

In immunocompetent persons, symptoms are usually short-lived (1 to 2 weeks) and self-limiting. Immunocompromised patients can experience disease that is more severe and may become chronic – especially in those with CD4 counts <200/ul.

Diagnosis:

The most sensitive test is enzyme immunoassay (EIA). This method is recommended over a routine ova and parasite microscopic exam (O&P).

Clinicians should refer to their laboratory client services manual to determine appropriate specimen collection, storage, and transport methods. Stools should be treated as infectious materials until they have been in contact with formalin for 18-24 hours. Multiple stool samples should be tested before a negative diagnostic interpretation is reported.

Treatment:

Rapid loss of fluids can be managed by fluid and electrolyte replacement.

Infection in healthy, immunocompetent persons is self-limited. Nitazoxanide has been approved for treatment of diarrhea in these individuals who are aged one year or older. For prescribing information see: <http://www.rxlist.com/cgi/generic/alinia.htm>.

Immunocompromised persons and those in poor health are at highest risk for severe illness. The effectiveness of nitazoxanide in these individuals is unclear. For patients with AIDS, effective anti-retroviral therapy is indicated. An infectious disease consult is appropriate to guide treatment in these patients. For more information see: <http://www.cdc.gov/mmwr/preview/mmwrhtml/rr5108a1.htm>

Reporting:

Cryptosporidiosis is a reportable disease in Utah. Utah law requires that this be reported to public health within 3 days of identification. You may report to your local health department or to the Utah Department of Health (801) 538-6191.