

Government of the District of Columbia Department of Health



Center for Policy, Planning and Evaluation Administration Division of Epidemiology–Disease Surveillance and Investigation

February 25, 2022

### Health Notice for District of Columbia Health Care Providers CALL For CASES: Cronobacter Sakazakii

## **SUMMARY**

On February 16, 2022, the Centers for Disease Control and Prevention (CDC) published a call for *Cronobacter Sakazakii* cases associated with powdered infant formula (PIF) alerting healthcare providers of the possibility of an increased number of *Cronobacter* cases from November 2021 in multiple states. CDC is working with the U.S. Food and Drug Administration to investigate these cases. As part of this investigation, state and local health departments are assisting with collecting information on *Cronobacter* cases among infants who consumed powdered infant formula in the 10 days prior to illness onset. Onset dates are estimated to range from November 2021 to present date. There is an ongoing investigation of four consumer complaints of infant illness related to products from Abbott Nutrition's Sturgis, MI facility received from 9/20/2021 to 1/11/2022. All cases are reported to have consumed powdered infant formula (IF) produced from Abbott Nutrition's Sturgis, MI facility. These complaints include three reports of Cronobacter sakazakii infections and one report of Salmonella Newport infection in infants. All four cases related to these complaints were hospitalized, and *Cronobacter* may have contributed to a death in one case.

As of Today, there have been no report of *Cronobacter* infection in the District of Columbia. Clinicians are encouraged to maintain vigilance for *Cronobacter* infections among formula-fed infants and to report all laboratory-confirmed *Cronobacter* infection to DC Health to help states and CDC monitor the occurrence and better understand factors associated with this illness. This health notice provides reporting guidelines, recommendations, and resources on *Cronobacter*.

#### **BACKGROUND**

*Cronobacter* (formerly known as *Enterobacter sakazakii*) is a multi-species complex of gram-negative bacteria that exist in the environment and can survive in a variety of dry foods, including powdered infant formula, skimmed milk powder, herbal teas, and starches. Its natural habitat is unknown. *Cronobacter* infections are rare but are frequently lethal for infants and can cause serious illness among immunocompromised people and the elderly. In infants (<12 months old), *Cronobacter* usually causes sepsis or severe meningitis. Some infants may experience seizures. Those with meningitis may develop brain abscesses or infarcts, hydrocephalus, or other serious complications that can cause long-term neurological problems. The mortality rate for *Cronobacter* meningitis may be as high as 40%. A national FoodNet survey in 2002 estimated the annual incidence of invasive *Cronobacter* infection at one per 100,000 infants aged <1 year and at 8.7 per 100,000 low-birth-weight infants (<2,500 g [5.5 lbs])<sup>1</sup>. Although reporting is not required except in Minnesota, CDC typically receives reports of 2–4 cases per year in infants. In 2011, CDC was informed of a total of 13 cases (https://www.cdc.gov/foodnet)<sup>2</sup>. The infections are only known to be transmitted through consumption of reconstituted powdered infant formula. However, since the bacteria live in the environment, there may be other sources of infection that are unknown.





## **RECOMMENDATIONS**

- CASE MANAGEMENT: All infants suspected of having *Cronobacter* should undergo full clinical and testing evaluation
- CASE REPORTING: An emerging infectious disease or an unusual occurrence of any disease is reportable in the District of Columbia. Cases of confirmed *Cronobacter* from November 2021 must be reported immediately by submitting a <u>Notifiable Disease and Condition Case Report</u> <u>Form</u> online using the DC Reporting and Surveillance Center (DCRC), which can be found on our Infectious Diseases website (<u>https://dchealth.dc.gov/service/infectious-diseases</u>).
  - Submit clinical notes including laboratory test results for all confirmed patients as when reporting cases online (an Epidemiologist may reach out to obtain any additional information if needed)
- LABORATORY TESTING:
  - Blood culture
  - Infants who have meningitis from *Cronobacter* will need additional urine and cerebrospinal (CSF) fluid culture test to examine the brain and spinal fluid. These infants should be given empiric therapy for sepsis immediately

**NOTE**: If assistance is needed for testing, please collect the necessary specimens, and submit them with the required <u>lab forms</u> to DC Public Health Lab via your normal route for specimen submission

# **ADDITIONAL RESOURCES**

- Cronobacter Sakazakii: <u>https://www.cdc.gov/cronobacter/index.html</u>
- Cronobacter Sakazakii in Powdered Infant Formula: <u>https://www.who.int/foodsafety/publications/micro/MRA\_followup.pdf</u>
- Food Safety and Invasive *Cronobacter* Infections: <u>https://wwwnc.cdc.gov/eid/article/26/5/19-0858\_article?deliveryName=USCDC\_331-DM26146</u>
- Additional recall information is available on the FDA website and for more details about this recall and product photos, please visit: <u>https://www.fda.gov/food/outbreaks-foodborne-illness/fda-investigation-cronobacter-and-salmonella-complaints-powdered-infant-formula-february-2022</u>

# **REFERENCES**

- Centers for Disease Control and Prevention, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Foodborne, Waterborne, and Environmental Diseases (DFWED) <u>https://www.cdc.gov/cronobacter/index.html</u>
- Centers for Disease Control and Prevention, National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), Division of Foodborne, Waterborne, and Environmental Diseases (DFWED) <u>https://www.cdc.gov/cronobacter/index.html</u>

Please contact the DC Health Division of Epidemiology–Disease Surveillance and Investigation at: Phone: 202-442-9138 (8:15am-4:45pm) | 844-493-2652 (after-hours calls) Fax: 202-442-8060 | Email: <u>doh.epi@dc.gov</u>