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Outbreak of Shiga toxin-producing *E. coli* Infections in SLO County

Current Situation

In the past week, four cases of Shiga toxin-producing *Escherichia coli* (STEC) were reported to SLO County Department of Public Health. Of these, three are young children with confirmed hemolytic uremic syndrome (HUS). These cases are linked to visits to Brookshire Farms in San Luis Obispo during the weekend of October 17-18.

Extreme Danger to Young Children: Triage to Prevent Renal Failure

Illness from Shiga toxin-producing *E. Coli* is **extremely dangerous for children ages 0-10 years**. Children presenting with bloody diarrhea who were recently at Brookshire Farms should be suspected of Shiga toxin-producing *E. Coli* illness and **be triaged immediately** as these patients can develop severe symptoms, including renal failure. **Do not give these patients antibiotics**, which are thought to hasten or worsen the development of disease.

Report Cases to Public Health

Please report suspected and/or confirmed cases of STEC infection by calling 805-781-5500 (M-F, 8 a.m. to 5 p.m.) or 805-781-4553 (weekends and after hours).

Submitting Stool Samples to Public Health for Testing

The County of SLO Public Health Laboratory performs a gastrointestinal pathogen PCR panel for rapid detection of *E. coli* O157 and Shiga toxins in stool specimens collected in Cary Blair medium. Original stool samples, broth cultures, or isolates from positive cases detected in healthcare settings should be sent for further characterization, including serotyping and whole-genome sequencing. For more information on rapid testing, visit:

<https://www.slocounty.ca.gov/departments/slo-health/public-health/forms-documents/laboratory/test-summaries/gastrointestinal-pcr-panel>

Background

Clinical Presentation

Shiga toxin-producing E. coli (STEC) O157 infection can cause vomiting, abdominal cramps, diarrhea, and bloody diarrhea. The most serious complication is hemolytic uremic syndrome (HUS), which can lead to kidney failure, anemia, and low platelet counts. Children younger than 5 years are at highest risk of HUS. Symptoms of E. coli typically begin 2–5 days after exposure but may take up to 8 days to develop.

Treatment and Management

Supportive care, including hydration and close monitoring for HUS, is recommended. Antibiotics are generally not beneficial for STEC O157 infections and may increase the risk of HUS. Antimotility medications may also increase the risk of complications and should be avoided.

Transmission and Exposure Risks

STEC spreads through contaminated food or water, contact with infected animals, or exposure to the feces of an infected person or animal and can persist in the environment for months. Cattle are a primary reservoir, but other animals, including deer, sheep, pigs, and goats, can also carry STEC without appearing ill.