



Health Advisory: Salmonella Outbreak Associated with Chipotle Restaurants

Minnesota Department of Health Thu Sep 10 14:10 CDT 2015

Action Steps:

Local and tribal health departments: Please forward to hospitals, clinics, emergency departments, urgent care centers, and convenience clinics.

Hospital and clinics: Please forward to healthcare providers who see patients for new illness such as gastroenteritis.

Healthcare providers:

- Watch for patients presenting with febrile gastroenteritis with onset within 1 week after eating at Chipotle in August – consider *Salmonella*.
- Treat patients with fluid and electrolyte replacement as necessary; antibiotic treatment is not recommended for uncomplicated salmonella gastroenteritis in most otherwise healthy patients (see below).
- Report *Salmonella* infections to MDH at 651-201-5414 (1-877-676-5414).
- Submit *Salmonella* isolates to MDH-Public Health Laboratory as soon as possible.
- Exclude cases who are healthcare workers, food workers, or attend childcare from work or childcare until 24 hours after recovery from diarrhea.

State health and agriculture officials are investigating an outbreak of salmonellosis associated with eating at Chipotle restaurants in Minnesota. Forty-five (45) cases of *Salmonella* Newport infection have been reported to the Minnesota Department of Health (MDH) since Wednesday, Sept. 2. Five cases have been hospitalized.

Thus far 17 different Chipotle restaurant locations, most of which are in the Twin Cities metro area, with one in St. Cloud and one in Rochester; however, any location in Minnesota could be involved. Case-patient meal dates range from Aug. 16 to Aug. 26 and they became ill between Aug. 20 and Aug. 29. New cases are still being reported, and later meal dates and illness onset dates are possible, but we expect that most exposures happened in the last 2 weeks of August. Chipotle has changed suppliers for the suspect ingredients, and there should be no ongoing risk from eating at Chipotle.

Symptoms of salmonellosis include diarrhea, abdominal pain and cramps, and fever. Diarrhea is sometimes bloody. Symptoms usually begin within 12 to 72 hours after exposure, but they can begin up to a week or more after exposure. *Salmonella* infections usually resolve in 5 to 7 days, but approximately 28 percent of laboratory-confirmed cases require hospitalization. Invasive infections (for example, blood stream infections, meningitis) occasionally occur. In rare cases, *Salmonella* infection can lead to death, particularly in the elderly.

The cornerstone of therapy for salmonellosis is replacement of fluids and electrolytes. Antibiotic treatment is generally not recommended for immunocompetent adults or children over 12 months of age with mild to moderate symptoms of salmonella gastroenteritis. However, treatment should be considered for patients with severe disease (e.g., more than 9 or 10 stools per day, high fever,



hospitalization required). Treatment should also be considered to prevent complications of salmonellosis (e.g., invasive disease, focal infections) in patients with known atherosclerotic disease or with immunocompromising conditions, even those with less severe infection. These patients include those with: an organ transplant; AIDS; cancer with current or recent chemotherapy; sickle cell disease, hemoglobinopathies, or disorders of the reticuloendothelial system; and, those receiving corticosteroids or other immunosuppressive drugs.

Approximately 700 cases of salmonellosis are reported each year in Minnesota.

More information on Salmonella and how to prevent it can be found on the MDH Web site at Salmonellosis (<http://www.health.state.mn.us/divs/idepc/diseases/salmonellosis/>).