A "NEW" DISEASE FOR GUAM

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As diseases go, food poisoning due to Vibrio parahaemolyticus is a relatively recently discovered entity. It was first described by Japanese scientists investigating food poisoning outbreaks in that country in the early 1950's. It was soon found that this bacteria was causing many thousands of cases of food poisoning each year in Japan. The organism was not discovered earlier because it does not grow well on the media routinely used in medical laboratories. It is readily identified, however, on special media now available commercially (TCBS agar).

Vibrio parahaemolyticus infections were first encountered on Guam in 1975 when 41 passengers and crew of a Japanese cruise ship were treated at the GMH-OPD (the GMH Lab had begun routinely using TCBS media the previous year following the discovery of a cholera case on Guam). From 1975 to 1978 isolated cases but no epidemics of V. parahaemolyticus infection were observed on Guam. The organism was frequently isolated from samples of river and ocean water during this period, however.

In May of 1978, a food poisoning incident was investigated in which V. parahaemolyticus was found to be the cause and shrimp kelaguin was implicated as the food responsible. Since that time, 7 additional food poisoning incidents have been investigated. In three cases the causative organism was not determined. In all of the others, however, V. parahaemolyticus was confirmed as the cause. In 3 of these cases shrimp was found to be the food at fault and lobster was the cause of the fourth incident.

The reason for the apparent increase in V. parahaemolyticus cases within the last year is not clear as diagnostic facilities or procedures have apparently not changed and there apparently has not been any significant recent change in local dietary habits. It is also known that local waters were contaminated with this bacteria before this year.

This disease can be prevented by attention to good food-handling practices. Sea food from possibly contaminated areas (all near-shore areas) should be cooked thoroughly (e.g. boiled for at least 7 minutes), care should be taken that cooked food is not recontaminated by direct or indirect (bags, cutting boards, etc.) contact with uncooked food, and uneaten cooked food should be promptly refrigerated if it is to be saved for later consumption. Although this disease may cause severe diarrhea, fortunately the mortality rate is low.