Listeriosis

What are the symptoms of listeriosis?

A person with listeriosis has fever, muscle aches, and sometimes gastrointestinal symptoms such as nausea or diarrhea. If infection spreads to the nervous system, symptoms such as headache, stiff neck, confusion, loss of balance, or convulsions can occur.

Infected pregnant women may experience only a mild, flu-like illness; however, infections during pregnancy can lead to miscarriage or stillbirth, premature delivery, or infection of the newborn.
How great is the risk for listeriosis?

In the United States, an estimated 2,500 persons become seriously ill with listeriosis each year. Of these, 500 die. At increased risk are:

- **Pregnant women** - They are about 20 times more likely than other healthy adults to get listeriosis. About one-third of listeriosis cases happen during pregnancy.
- Newborns - Newborns rather than the pregnant women themselves suffer the serious effects of infection in pregnancy.
- Persons with weakened immune systems
- Persons with cancer, diabetes, or kidney disease
- Persons with AIDS - They are almost 300 times more likely to get listeriosis than people with normal immune systems.
- Persons who take glucocorticosteroid medications
- The elderly

Healthy adults and children occasionally get infected with Listeria, but they rarely become seriously ill.

How does *Listeria* get into food?

*Listeria monocytogenes* is found in soil and water. Vegetables can become contaminated from the soil or from manure used as fertilizer. Animals can carry the bacterium without appearing ill and can contaminate foods of animal origin such as meats and dairy products. The bacterium has been found in a variety of raw foods, such as uncooked meats and vegetables, as well as in processed foods that become contaminated after processing, such as soft cheeses and cold cuts at the deli counter. Unpasteurized (raw) milk or foods made from unpasteurized milk may contain the bacterium.

*Listeria* is killed by pasteurization and cooking; however, in certain ready-to-eat foods such as hot dogs and deli meats, contamination may occur after cooking but before packaging.

How do you get listeriosis?

You get listeriosis by eating food contaminated with *Listeria*. Babies can be born with listeriosis if their mothers eat contaminated food during pregnancy. Although healthy persons may consume contaminated foods without becoming ill, those at increased risk for infection can probably get listeriosis after eating food contaminated with even a few bacteria. Persons at risk can prevent *Listeria* infection by avoiding certain high-risk foods and by handling food properly.
Can listeriosis be prevented?

The general guidelines recommended for the prevention of listeriosis are similar to those used to help prevent other foodborne illnesses, such as salmonellosis.

How can you reduce your risk for listeriosis?

General recommendations:

- Thoroughly cook raw food from animal sources, such as beef, pork, or poultry.
- Wash raw vegetables thoroughly before eating.
- Keep uncooked meats separate from vegetables and from cooked foods and ready-to-eat foods.
- Avoid unpasteurized (raw) milk or foods made from unpasteurized milk.
- Wash hands, knives, and cutting boards after handling uncooked foods.
- Consume perishable and ready-to-eat foods as soon as possible.

Recommendations for persons at high risk, such as pregnant women and persons with weakened immune systems, in addition to the recommendations listed above:

- Do not eat hot dogs, luncheon meats, or deli meats, unless they are reheated until steaming hot.
- Avoid getting fluid from hot dog packages on other foods, utensils, and food preparation surfaces, and wash hands after handling hot dogs, luncheon meats, and deli meats.
- Do not eat soft cheeses such as feta, Brie, and Camembert, blue-veined cheeses, or Mexican-style cheeses such as queso blanco, queso fresco, and Panela, unless they have labels that clearly state they are made from pasteurized milk.
- Do not eat refrigerated pâtés or meat spreads. Canned or shelf-stable pâtés and meat spreads may be eaten.
- Do not eat refrigerated smoked seafood, unless it is contained in a cooked dish, such as a casserole. Refrigerated smoked seafood, such as salmon, trout, whitefish, cod, tuna or mackerel, is most often labeled as "nova-style," "lox," "kippered," "smoked," or "jerky." The fish is found in the refrigerator section or sold at deli counters of grocery stores and delicatessens. Canned or shelf-stable smoked seafood may be eaten.

How do you know if you have listeriosis?

There is no routine screening test for susceptibility to listeriosis during pregnancy, as there is for rubella and some other congenital infections. If you have symptoms such as fever or stiff neck, consult your doctor. A blood or spinal fluid test (to cultivate the bacteria) will show if you have listeriosis. During pregnancy, a blood test is the most reliable way to find out if your symptoms are due to listeriosis.

What should you do if you've eaten a food recalled because of *Listeria*
The risk of an individual person developing *Listeria* infection after consumption of a contaminated product is very small. If you have eaten a contaminated product and do not have any symptoms, we do not recommend that you have any tests or treatment, even if you are in a high-risk group. However, if you are in a high-risk group, have eaten the contaminated product, and within 2 months become ill with fever or signs of serious illness, you should contact your physician and inform him or her about this exposure.

**Can listeriosis be treated?**

When infection occurs during pregnancy, antibiotics given promptly to the pregnant woman can often prevent infection of the fetus or newborn. Babies with listeriosis receive the same antibiotics as adults, although a combination of antibiotics is often used until physicians are certain of the diagnosis. Even with prompt treatment, some infections result in death. This is particularly likely in the elderly and in persons with other serious medical problems.

**What is the government doing about listeriosis?**

Government agencies and the food industry have taken steps to reduce contamination of food by the *Listeria* bacterium. The Food and Drug Administration and the U. S. Department of Agriculture monitor food regularly. When a processed food is found to be contaminated, food monitoring and plant inspection are intensified, and if necessary, the implicated food is recalled.

The National Center for Infectious Diseases (NCID) is studying listeriosis in several states to help measure the impact of prevention activities and recognize trends in disease occurrence. NCID also assists local health departments in investigating outbreaks. Early detection and reporting of outbreaks of listeriosis to local and state health departments can help identify sources of infection and prevent more cases of the disease.
**Listeriosis**

<table>
<thead>
<tr>
<th>Clinical Features</th>
<th>Manifestations are host-dependent. In elderly and immunocompromised persons, sepsis and meningitis are the main presentations. Pregnant women may experience a mild, flu-like illness followed by fetal loss or bacteremia and meningitis in their newborns. Immunocompetent persons may experience acute febrile gastroenteritis.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Etiologic Agent</td>
<td><em>Listeria monocytogenes</em>, a gram-positive rod-shaped bacterium.</td>
</tr>
<tr>
<td>Incidence</td>
<td>Last estimated at 2500 cases annually in the United States, based on data through 1997 (but see Trends below).</td>
</tr>
<tr>
<td>Sequelea</td>
<td>Last estimated at 500 fatal cases annually in the United States, based on data through 1997 (but see Trends below).</td>
</tr>
<tr>
<td>Transmission</td>
<td>Contaminated food. Rare cases of nosocomial transmission have been reported.</td>
</tr>
<tr>
<td>Risk Groups</td>
<td>For invasive disease: immunocompromised individuals, pregnant women and their fetuses and neonates, and the elderly.</td>
</tr>
<tr>
<td>Surveillance</td>
<td>Active laboratory- and population-based surveillance in FoodNet. Listeriosis was added to the list of nationally notifiable diseases in 2001. To improve surveillance, the Council of State and Territorial Epidemiologists has recommended that all <em>L. monocytogenes</em> isolates be forwarded to state public health laboratories for subtyping through the National Molecular Subtyping Network for Foodborne Disease Surveillance (PulseNet). At least 46 states have regulations requiring health care providers to report cases of listeriosis.</td>
</tr>
<tr>
<td>Trends</td>
<td>The annual incidence of listeriosis decreased by 44% between 1989 and 1993; an analysis of the incidence trend from 1996 to 2002 revealed a 38% decline. However, outbreaks continue to occur. In 2002, an outbreak that resulted in 54 illnesses, 8 deaths, and 3 fetal deaths in 9 states was traced to consumption of contaminated turkey meat.</td>
</tr>
</tbody>
</table>
Challenges  
Improve the safety of processed meats through meticulous in-plant sanitation and post-packaging pasteurization; intensify education efforts for high-risk consumers to reduce their risk of listeriosis.

Opportunities  
Improve detection of dispersed outbreaks through PulseNet; compare subtypes of L. monocytogenes strains isolated from human cases with those isolated from recalled foods; determine the infectious dose through analysis of foods implicated in outbreaks; look for L. monocytogenes as a cause of outbreaks of febrile gastroenteritis where no other pathogens are identified.

December 2003

Listeriosis

MMWR Articles

Public Health Dispatch: Outbreak of Listeriosis --- Northeastern United States, 2002  
[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5142a3.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5142a3.htm)

Outbreak of Listeriosis Associated With Homemade Mexican-Style Cheese --- North Carolina, October 2000--January 2001  
[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5026a3.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5026a3.htm)

Preliminary FoodNet Data on the Incidence of Foodborne Illnesses --- Selected Sites, United States, 2001  
[http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5115a3.htm](http://www.cdc.gov/mmwr/preview/mmwrhtml/mm5115a3.htm)
Links

Press Release: Multistate listeriosis outbreak, 2002
http://www.cdc.gov/od/oc/media/pressrel/r021121.htm

USDA Directive to Reduce Listeria monocytogenes in Ready-to-Eat Meat and Poultry Products:

HHS and USDA Release Listera Risk Assessment and Listeria Action Plan

Reducing the Risk of Listeria monocytogenes - Joint Response to the President

Draft Assessment of the Relative Risk to Public Health from Foodborne Listeria monocytogenes Among Selected Categories of Ready-to-Eat Foods

Listeriosis and Pregnancy: What is your risk?

What You Can Do To Keep Germs From Harming You and Your Baby

References


(http://www.cdc.gov/ncidod/eid/vol5no5/mead.htm)