

## Giardiasis

*Giardia intestinalis*, the flagellated protozoan originally named *G. lamblia*, is the most commonly identified parasitic pathogen in the United States. Children in daycare and their close contacts are at greatest risk, as are backpackers and campers (by drinking unfiltered, untreated water), persons drinking from shallow wells, travelers to disease-endemic areas, and men who have sex with men. *Giardia* cysts can be excreted in the stool intermittently for weeks or months, resulting in a protracted period of communicability. Transmission occurs when as few as 10 cysts are ingested through person-to-person or animal-to-person contact, or by ingestion of fecally contaminated water or food.

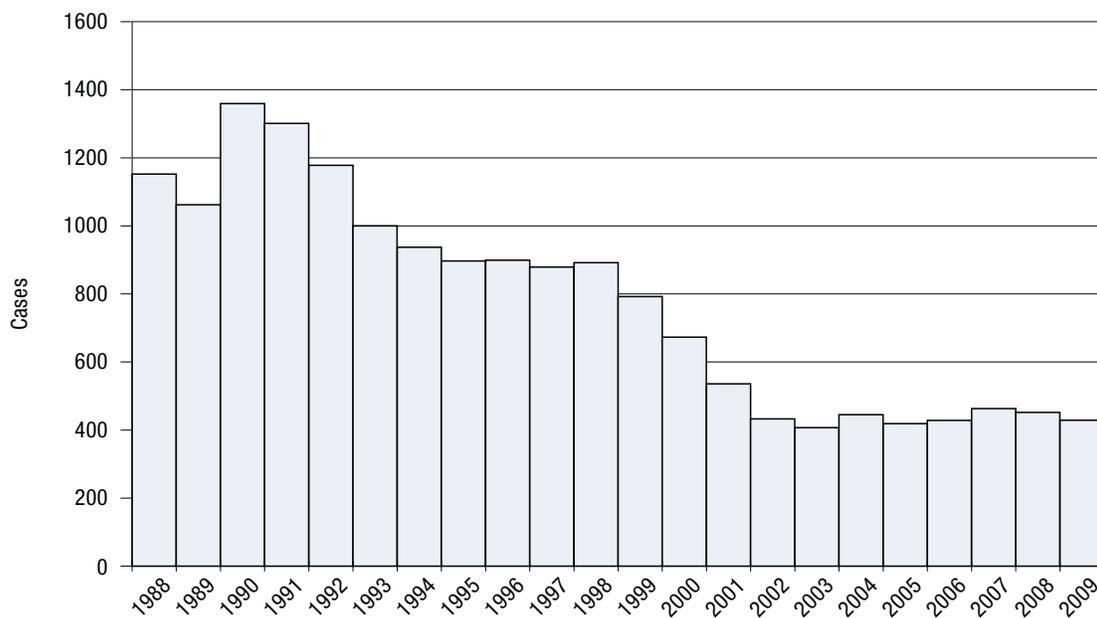
The majority of *Giardia* infections occur without symptoms. When symptomatic, patients report chronic diarrhea, steatorrhea,

abdominal cramps, bloating, frequent loose and pale greasy stools, fatigue, and weight loss.

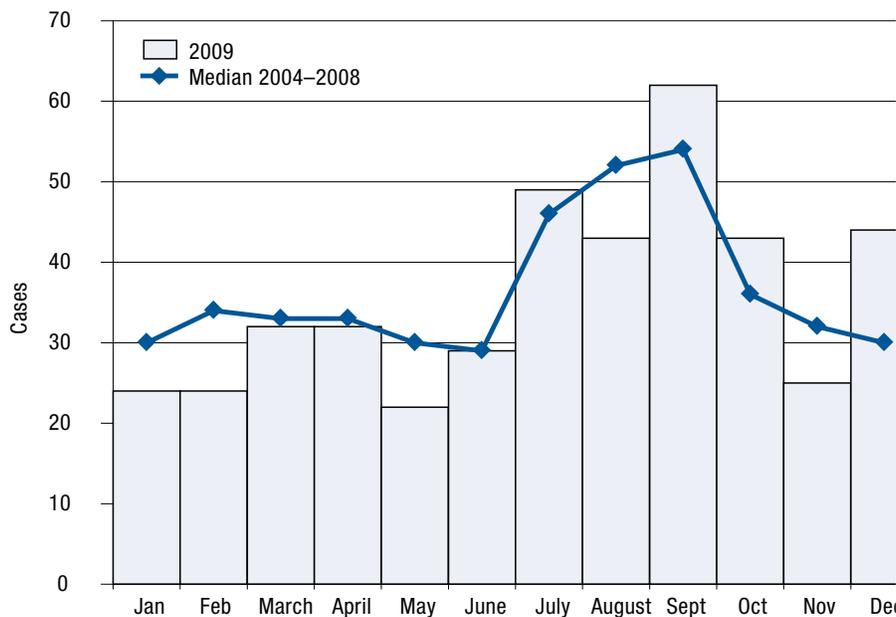
In 2009, the reported incidence of giardiasis in Oregon remained nearly twice that of the rest of the United States, with 11.2 cases per 100,000 population. Fifty-eight percent of 2008–2009 cases were reported as sporadic or household-associated; one outbreak occurred in a daycare center. Children less than 5 years of age continue to have the highest incidence, with 36 cases/100,000. Rates of infection tend to be higher in the summer months with transmission related to outdoor activities in or near untreated water.

Prevention depends upon good personal hygiene (hand washing!) and avoiding consumption of fecally contaminated water. Travel warnings on water quality should be heeded.

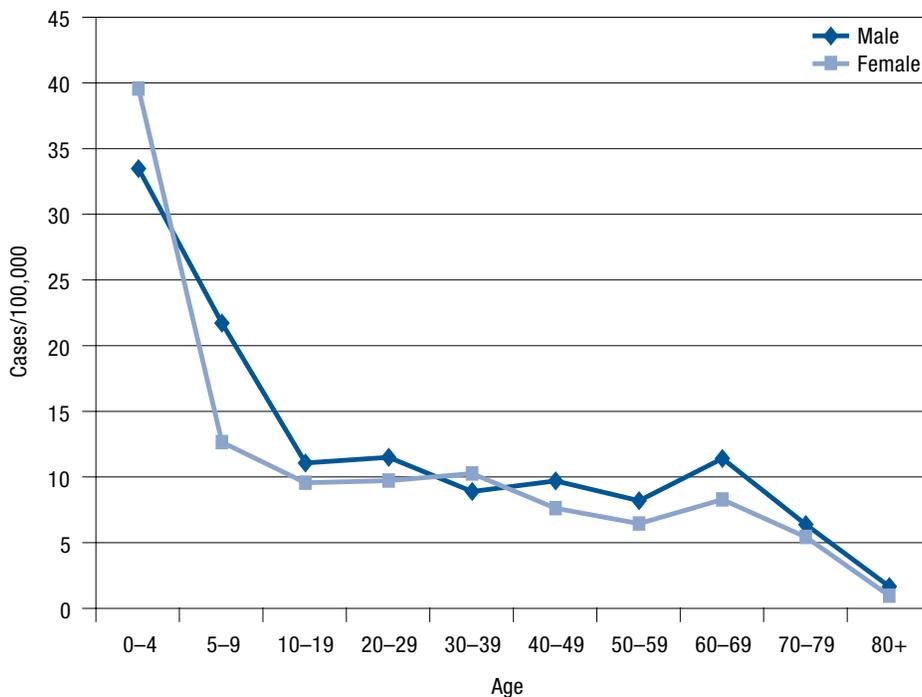
**Giardiasis by year: Oregon, 1988–2009**



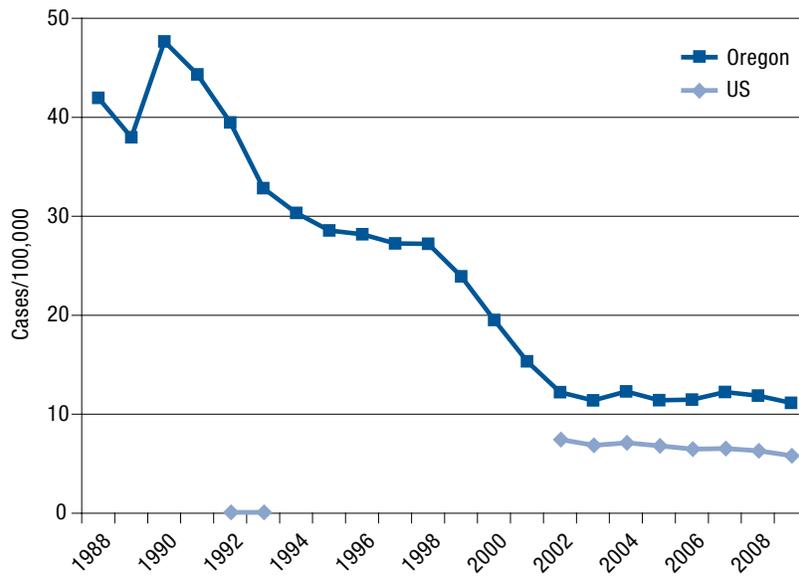
### Giardiasis by onset month: Oregon, 2009



### Incidence of giardiasis by age and sex: Oregon, 2009



### Incidence of giardiasis: Oregon vs. nationwide, 1988–2009



Not nationally reportable until 2002.

### Incidence of giardiasis by county of residence: Oregon, 2000–2009

