

Typhoid Fever Fact Sheet

1. **What is Typhoid fever?** - Typhoid fever is a bacterial infection of the intestinal tract and sometimes the bloodstream. Most of the cases are acquired during foreign travel to underdeveloped countries. The germ that causes Typhoid is a unique human strain of *Salmonella* called *Salmonella typhi*.
2. **Who gets Typhoid fever?** - Anyone can get Typhoid fever but the greatest risk exists to travelers visiting countries where the disease is common. Occasionally, local cases can be traced to exposure to a person who is a chronic carrier.
3. **How are the germs spread?** - Typhoid germs are passed in the feces and, to some extent, the urine of infected people. The germs are spread by eating or drinking water or foods contaminated by feces from the infected individual.
4. **What are the symptoms?** - Symptoms may be mild or severe and may include fever, headache, constipation or diarrhea, rose-colored spots on the trunk and an enlarged spleen and liver. Relapses are common. Fatalities are less than one percent with appropriate antibiotic treatment.
5. **How soon do symptoms appear?** - Symptoms generally appear one to three weeks after exposure.
6. **For how long can an infected person carry Typhoid?** - The carrier stage varies from a number of days to years. Only about 3 percent of cases go on to become lifelong carriers of the germ and this tends to occur more often in adults than in children.
7. **How is Typhoid diagnosed?** - Typhoid can be diagnosed by culturing the organism from clinical specimens, including stool, blood, and bone marrow. Serological tests are available, but are less reliable for diagnosis than culturing the organism.
8. **How is Typhoid treated?** - Specific antibiotics such as trimethoprim-sulfamethoxazole, ampicillin or ciprofloxacin are often used to treat cases of Typhoid. Because the organism can be resistant to antibiotics, treatment decisions should be guided by laboratory test results.
9. **Should infected people be isolated?** - Since the germ is passed in the feces of infected people, only people with active diarrhea who are unable to control their bowel habits (infants, certain handicapped individuals) should be isolated. Most infected people may return to work or school when they have recovered, provided that they carefully wash their hands after toilet visits. Children in child care and other sensitive settings must obtain the approval of the local or state health department before returning to their routine activities. Food handlers may not return to work until three consecutive negative stool cultures are confirmed.



10. **Is there a vaccine for Typhoid?** – Oral and injectable vaccines are available but are generally reserved for people traveling to underdeveloped countries where significant exposure may occur. Strict attention to food and water precautions while traveling to such countries is the most effective preventive method.

11. **For more information about Typhoid Fever:**

http://www.cdc.gov/ncidod/diseases/submenus/sub_typhoid.htm

This fact sheet provides general information. Please contact your physician for specific clinical information.