Benton County
HEALTH DEPARTMENT

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HEALTH ADVISORY: Domestically Acquired Cyclosporiasis Cases in Multiple US States, 2026

July 17, 2026

Dear Colleagues,

Benton County Health Department is sharing the Oregon Health Authority (OHA) Health Alert Network (HAN) advisory, "Domestically Acquired Cyclosporiasis Cases in Multiple US States, 2026."

At this time, **Oregon has not detected an unusual increase in cases of cyclosporiasis**, and no Oregon cases have been linked to the multi-state outbreak.

For patients suspected with cyclosporiasis, clinicians must order specific *Cyclospora* laboratory testing, as routine laboratory tests do not typically include *Cyclospora*.

For questions, please contact OHA at OHD.ACDP@odhsoha.oregon.gov.

The full OHA HAN advisory is included below for additional details.

Thank you for your continued vigilance in protecting the health of our community.

Respectfully,

Carolina Amador, MD, MPH
Public Health Officer

Sara Hartstein, MPH
Public Health Administrator

State of Oregon
Health Alert Network

Oregon Health Authority (OHA) is distributing this CDC Health Alert Network (HAN) Health Advisory to alert healthcare providers, public health practitioners, and laboratorians of cases of domestically acquired cyclosporiasis in multiple U.S. states.

Oregon has not detected an unusual increase in cases of cyclosporiasis, and cases in Oregon have not been linked to the multi-state outbreak. For patients suspected with cyclosporiasis, clinicians must order specific *Cyclospora* laboratory testing, as routine laboratory tests do not typically include *Cyclospora*.

CDC Recommendations for Healthcare Providers

- Consider cyclosporiasis in patients presenting with prolonged or relapsing watery diarrhea, particularly during the May–August cyclosporiasis season, even without a history of international travel.

- Ask patients with suspected or confirmed cyclosporiasis about their recent food and travel history to assist local investigations.

- Specifically request *Cyclospora* laboratory testing on stool specimens because routine ova and parasite (O&P) examinations might not reliably detect the parasite. Consider molecular (PCR-based) diagnostic testing where available, because it can improve detection.

- Treat confirmed cases of cyclosporiasis with 7-10 days of trimethoprim-sulfamethoxazole (TMP-SMX) for immunocompetent adults and children over age 2 months; consider longer courses for patients with immunocompromising conditions. Consult current CDC clinical guidance for recommended dosing.

- Advise patients to stay well hydrated, especially if diarrhea is frequent or severe.

Oregon Public Health Reporting

- Cases of cyclosporiasis in Oregon are reportable within one working day to your local public health authority. If the local health department cannot be reached, please call the Oregon Health Authority Epidemiologist On-Call at 971-673-1111.

- Case counts for cyclosporiasis are available on the Oregon Monthly Reportable Disease Data Dashboard.

Resources

CDC Health Alert Network – Domestically Acquired Cyclosporiasis Cases in Multiple US States, 2026.

OHA Monthly Reportable Disease Data Dashboard.

OHA Food Safety for the Public.

For questions, please contact: OHD.ACDP@odhsoha.oregon.gov.

Unless otherwise noted, feel free to share this HAN notification with:
- Others within your organization.
- Professionals within your health, preparedness, and response affiliations.
If you received this alert from a colleague and would like to receive notifications directly, email HAN.OREGON@ODHSOHA.OREGON.GOV
Oregon 24/7 disease reporting: 971-673-1111