

Gastroenteritis, institutional outbreaks

Reporting Obligations

Outbreaks of gastrointestinal illness in institutions are designated as a disease of public health significance and is reportable under the *Ontario Health Protection and Promotion Act*. Report all suspect and confirmed outbreaks of gastroenteritis in an institution **immediately by phone** to the local Health Unit.

Epidemiology

Aetiologic Agent:

Outbreaks of gastrointestinal illness in institutions are most frequently caused by viruses such as noroviruses, rotaviruses, and rarely other viruses. However, bacteria and other pathogens may cause outbreaks as well.

Clinical Presentation:

The clinical presentation is dependent on aetiology; however, the most common presentation of gastroenteritis is, but is not limited to, abdominal pain, vomiting, diarrhea that is unusual or different for the patient/resident without other recognized aetiology, along with nausea, headache, chills, fever and/or myalgia.

Modes of transmission:

Primarily transmitted through fecal-oral route. May also be transmitted from person-to-person, foodborne, waterborne and droplet contact of vomitus (for norovirus). Transmission may also occur through contact with fomites.

Incubation Period:

Varies depending on the agent.

Period of Communicability:

Varies depending on the agent

Risk Factors/Susceptibility

All persons are susceptible.

Diagnosis & Laboratory Testing

Outbreak Definition: An occurrence of gastroenteritis beyond what is normally expected based on surveillance data. This definition makes it clear why it is important to conduct ongoing surveillance to establish a baseline of normal occurrences for a LTCH. Some additional, simpler outbreak definitions are provided below for guidance. Contact your local Public Health Unit immediately if you suspect an outbreak.

- Suspected Gastroenteritis Outbreak Definition: Two suspected cases of infectious gastroenteritis in a specific area, such as a home, unit, or floor within 48 hours.

- Gastroenteritis Outbreak Definition: Three or more cases with signs and symptoms compatible with infectious gastroenteritis in a specific unit or floor within a four-day period, or three or more units/floors having a case of infectious gastroenteritis within 48 hours.

Note: This definition may be modified as the investigation proceeds.

Laboratory Testing: Submit stool specimens from cases using enteric stool specimen outbreak kits available from health unit. Most facilities keep a supply of kits on-site. Test requisition forms are provided with kits.

TESTING INFORMATION & REQUISITION

Treatment & Case Management

Cases are managed as part of the outbreak as per this Protocol and the [Recommendations for the Control of Gastroenteritis Outbreaks in Long-Term Care Homes, March 2018](#). (or as current).

If the outbreak is caused by a reportable disease, (e.g., salmonellosis, *E. Coli*) refer also to the disease-specific chapter for that disease.

Conduct surveillance of residents/patients and staff for development of symptoms.

Implement control measures for visitors in the institution during an outbreak. For more information on management of contacts, please refer to [Recommendations for the Control of Gastroenteritis Outbreaks in Long-Term Care Homes, March 2018](#). (or as current).

Treatment of individual cases is under the direction of the attending care provider.

Patient Information

PATIENT FACT SHEET

References

1. [Ontario, Ministry of Health, Infectious Diseases Protocol, Appendix 1: Gastroenteritis Outbreaks, Toronto: Queen's Printer for Ontario; 2022 \[cited 2024 Mar 12\]](#)
2. [MOHLTC, Recommendations for the Control of Gastroenteritis Outbreaks in Long-Term Care Homes, March 2018.](#)

Additional Resources

1. Heymann, D.L. Control of Communicable Disease Manual (21st Ed.). Washington, American Public Health Association, 2022.
2. [OHA, Communicable Disease Surveillance Protocol Guide, 2022.](#)