



Introduction

Enteric Fever is a name generally given for infection caused by *Salmonella typhi* and *Salmonella paratyphi* A and B. They are Gram negative bacteria.

Clinical Features

Clinical features may include insidious onset of sustained fever, marked headache, malaise, anorexia, relative bradycardia, splenomegaly and a non productive cough in the early stages. Patients may have constipation or diarrhoea. Adults may have constipation more commonly than diarrhoea. Twenty five percent (25%) of fair skinned people may have rose spots on the trunk.

Complications include ulceration of Peyer patches resulting in intestinal haemorrhage or perforation (about 1% of cases), especially late in untreated cases. Paratyphoid fever A and B presents with a similar picture but tends to be milder and with a much lower case fatality rate.

Diagnosis

The causative organisms can be isolated from blood early in the disease and from urine and faeces after the first week. Blood culture is the diagnostic mainstay of typhoid fever. Serological tests based on agglutination antibodies (SAT) are of little diagnostic value because of the limited sensitivity and specificity. However, the demonstration of a four fold rise in antibody titre is confirmatory of salmonella infection.

Period of Communicability

It is communicable as long as typhoid or paratyphoid bacilli are present in excreta. Some patients become permanent carriers.

Reservoir

Humans are the reservoir for both typhoid and paratyphoid fever. Rarely domestic animals act as reservoir for paratyphoid. A carrier state may follow an acute illness or mild or even sub clinical infection.

Mode of transmission

Enteric fever is transmitted through ingestion of food and water contaminated by faeces and urine of patients and carriers.

Incubation period

The usual incubation period for typhoid fever is between 8 – 14 days and paratyphoid is between 1 – 10 days

Preventive measures

- Prevent contamination of water sources. This is very important especially in relation to water projects, public and household wells.
- Drink boiled cool water.
- Prevent contamination of food and ensure the food is hygienically prepared and made available for consumption. Food items which are eaten raw such as green leafy vegetables should be thoroughly washed before eating.
- Protect food and water being contaminated from flies.
- Wash hands properly with adequate soap and water. Especially before eating/feeding and after using the toilet.
- Always use sanitary latrines to dispose of excreta. The children's stool should be disposed through sanitary latrines as well.
- Ensure hygienic practices of food handlers since enteric fever could be transmitted from chronic carriers.
- Vaccinate the food handlers in the PHI area with the Typhoid Polysaccharide vaccine. This is a single dose IM vaccine and need a booster dose once in 3 years. Please issue the special Typhoid vaccination card after vaccination. Maintain a register of the food handlers in the PHI area and vaccinate them once in 3 years.