

# ACUTE GASTROENTERIC ILLNESS EPIDEMIOLOGY BRIEF

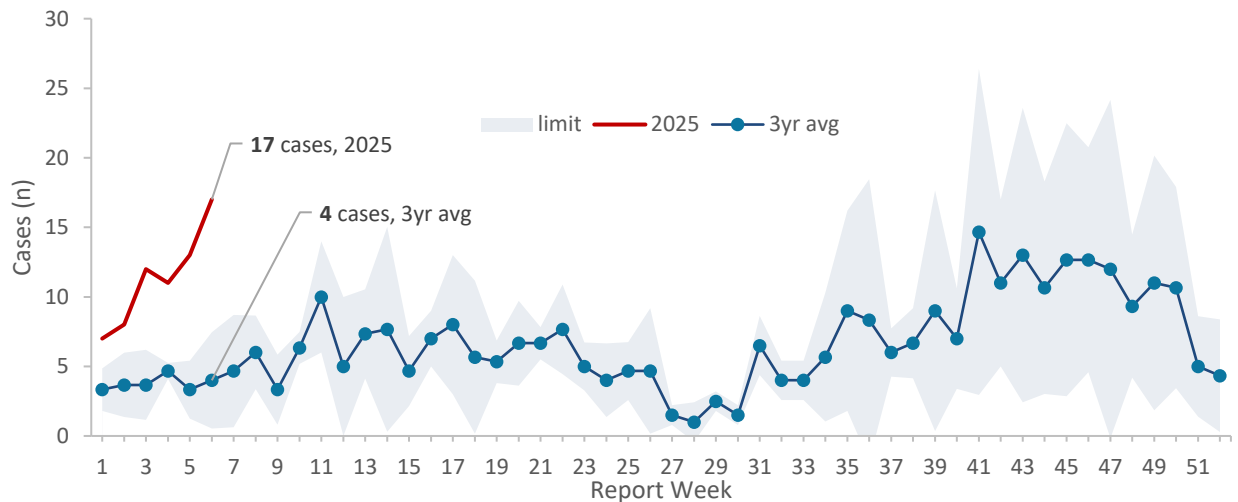
OFFICE OF EPIDEMIOLOGY AND RESEARCH

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The Department of Public Health and Social Services (DPHSS) is monitoring increased detection of acute gastroenteritis (AGE) cases seen at the Emergency Room (ER) (**Figure 1**), in excess of what has been observed in the preceding 3-year average (2022-2024). January 2025 has consistently reported an increase of 40% or more in AGE cases, with 3-4 times the reports in late January when compared to the 3-year average (data as of February 08, 2025).

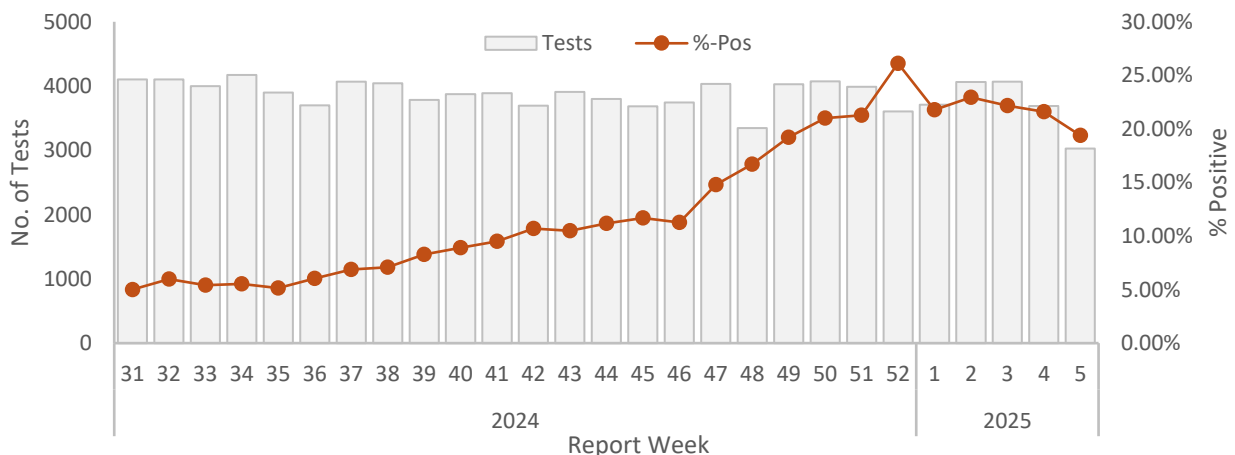
There have been minimal to zero (0) reports of hospitalized patients with infectious disease-associated AGE conditions.

**Figure 1.** Weekly report of acute GI illness cases visiting the ER, Guam 2025



**Figure 2** illustrates the combined weekly testing volume and percent positive for norovirus tests reported through the US National Respiratory and Enteric Virus Surveillance System (NREVSS)<sup>1</sup>. While Guam is monitoring a marked increase in AGE, consideration should be given to the increased percent positive for norovirus detection, at relatively stable testing volume throughout the US. On average, for 2025 approximately 22% of all viral enteric laboratory (PCR) tests performed nationwide resulted in norovirus.

**Figure 2.** Norovirus weekly test volume and %-positive reported through NREVSS, US 2024-2025



**Table 1** represents the annual case count for most major AGE-causing pathogens in Guam from 2021-2025 (data as of February 08). The number of Salmonellosis cases detected increased 50% from 2023 to 2024, with special consideration to the first half of 2024, coinciding with the Salmonella-contaminated Quaker Oats recall<sup>2</sup> which extended to Guam. However, to date there has been no definitive association between detected cases in Guam and the nationwide Salmonella-contaminated product recalls (including the Quaker Company recall)<sup>3</sup>.

**Table 1.** Annual report of common AGE-causing pathogens, Guam, 2021-2025

Disease/Condition	2021	2022	2023	2024					2025	
				Q1	Q2	Q3	Q4	TOT		
Campylobacteriosis	10	19	14	5	3	1	9	18	2	<sup>†</sup> Surveillance definition adjusted to account for only IgM results <sup>††</sup> Non-typhoidal <sup>†††</sup> Excludes toxigenic <i>Vibrio cholerae</i> serogroups O1 and O139 <sup>††††</sup> Unknown onset (community versus healthcare)
Cryptosporidiosis	-	-	-	0	0	0	1	1	0	
Giardiasis	0	0	0	0	0	1	0	1	0	
Hepatitis A	- <sup>†</sup>	- <sup>†</sup>	1	0	1	0	0	1	0	
Salmonellosis <sup>††</sup>	19	22	23	12	10	6	8	36	2	
STEC (O157:H7)	0	0	0	0	0	0	0	0	0	
Shigellosis	8	11	12	0	0	0	0	0	0	
Vibriosis <sup>†††</sup>	0	3	1	0	0	1	0	1	0	
Clostridium difficile <sup>††††</sup>	10	12	31	5	4	2	3	14	0	
Rotavirus, Suspect	0	0	0	1	2	0	0	3	0	
Noroviruses	0	0	0	6	6	6	3	21	3	

While identifying a specific pathogen may rarely be indicated in acute bacterial gastroenteritis due to self-limited illness, with increasing concern surrounding foodborne-related gastroenteritis, DPHSS is encouraging submission of samples that meet the following criteria for testing.

**Testing will be considered for:**

- Patients hospitalized with symptoms of acute gastroenteritis defined as;
  - o Diarrhea, or,
  - o Vomiting and  $\geq 1$  of the following symptoms:
    - Diarrhea,
    - Abdominal cramps,
    - Headache,
    - Muscle ache, or,
    - Fever;
- Patients presenting with bloody diarrhea;
- Immunocompromised patients or patients with significant comorbidities.

*Note, the data presented and subsequent increased detection may be a residual effect of enhanced surveillance post-pandemic.*

<sup>1</sup>Centers for Disease Control and Prevention. NREVSS Interactive Dashboard. <https://www.cdc.gov/nrevss/php/dashboard/index.html>. Accessed 02/11/25

<sup>2</sup>US Food and Drug Administration. Update: Quaker issues revised recall notice with additional products due to possible health risk. <https://www.fda.gov/safety/recalls-market-withdrawals-safety-alerts/update-quaker-issues-revised-recall-notice-additional-products-due-possible-health-risk>. Accessed 02/11/25

<sup>3</sup>US Food and Drug Administration. Investigations of foodborne illness outbreaks. <https://www.fda.gov/food/outbreaks-foodborne-illness/investigations-foodborne-illness-outbreaks>. Accessed 02/10/25