COLORADO
Department of Public Health & Environment

Health Alert Network (HAN) Broadcast

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From: CO-CDPHE
Subject: HAN Advisory — Domestically Acquired Cyclosporiasis Cases in Multiple U.S. State, 2026 | July 14,2026
Recipients:
Recipient Instructions: LPHAs —
Healthcare Providers — distribute widely in your office

HAN Advisory | Domestically Acquired Cyclosporiasis Cases in Multiple U.S. States, 2026| July 14, 2026

This information is for healthcare providers and key public health partners involved in managing public health issues. Most CDPHE HANs can be found on the CDPHE Colorado Health Alert Network webpage.

Key points

- The Centers for Disease Control and Prevention (CDC) has issued the Health Alert Network (HAN) Health Advisory titled "Domestically Acquired Cyclosporiasis Cases in Multiple U.S. States, 2026." Since May 1, 2026, CDC has received reports of 1,645 confirmed domestic cases of cyclosporiasis nationwide and is aware of more than 5,100 cases that require further analysis to confirm the illness as domestically acquired cyclosporiasis. This is substantially higher than the 249 cases reported nationally by this same time last year. Of the 1,645 case-patients with available information, 141 (9%) were hospitalized, and none have died. Because cyclosporiasis is often

underdiagnosed and underreported, the true number of illnesses is likely higher than what has been reported to CDC.

- While Colorado is seeing a seasonally anticipated increase in *Cyclospora* cases this summer, only 7% of cases to date are domestically acquired infections. Most cases to date have been related to international travel. **At this time, there is no indication that Colorado is part of the *Cyclospora* outbreak occurring in the Midwestern United States.**
- Cyclosporiasis is a gastrointestinal illness caused by the microscopic parasite *Cyclospora*. People can become infected by consuming food or water contaminated with the parasite. This illness is not spread directly from person to person. Previous outbreaks have been linked to consuming contaminated fresh produce. Testing and treatment guidance is below or can be found in the CDC HAN.
- In Colorado, all positive *Cyclospora* laboratory results from any specimen source must be reported to public health, regardless of symptoms, by the clinical laboratory. *Cyclospor*a cases are reportable within four (4) calendar days of the positive result. Positive results should be reported through established electronic laboratory reporting channels; reports can also be called in to CDPHE at 303-692-2700. Colorado public health agencies attempt to interview all reported cases.

Background information

Cyclosporiasis cases are typically seasonal, with CDC designating May through September as the highest incidence period. From Jan. 1, 2026, to July 13, 2026, there have been 150 cases of cyclosporiasis reported in Colorado, with the majority (146) being reported since May 2026. Four cases (3%) have been hospitalized. Among the 120 cases whose public health investigation is complete, 108 (90%) report international travel, eight (7%) are domestically acquired, and four (3%) have unknown travel status. Among domestically acquired cases, there have been no

common locations or products identified that suggest they are part of an outbreak in Colorado or part of the outbreak in the Midwestern United States.

Recommendations/guidance

- 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 or travel to the Midwest of the United States.
- Consider asking patients with suspected or confirmed cyclosporiasis about their recent travel history, as this information in medical records assists 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 panels) 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.
- Reference the CDC HAN for additional laboratory and disinfection information.
- Advise patients to stay well-hydrated, especially if diarrhea is frequent or severe.

More information

CDC: Cyclospora Surveillance

Cyclosporiasis Outbreak in Midwest with Unknown Source

Keeping up to date

Register for CDC HANs

Sign up for Clinician Outreach and Communication Activity (COCA) calls and emails

Register for Colorado HANs

CDPHE Disease Reporting Line: 303-692-2700 or 303-370-9395 (after hours)