



Diseases Fact Sheet - Typhoid Fever

South Dakota Department of Health

Office of Disease Prevention Services - 605-773-3737 -(1-800-592-1861 in South Dakota only)

This material is provided for informational purposes only and is not a substitute for medical care. We are not able to answer personal medical questions. Please see your health care provider concerning appropriate care, treatment or other medical advice.

What is it?

Typhoid fever is a bacterial infection of the intestinal tract and occasionally the bloodstream. Most of the cases are acquired during foreign travel to underdeveloped countries. The germ that causes typhoid is a unique human strain of salmonella called *Salmonella typhi*.

Who gets typhoid fever?

Anyone can get typhoid fever, but the greatest risk exists to travelers visiting countries where the disease is common. Occasionally, local cases can be traced to exposure to a person who is a chronic carrier.

How is the germ spread?

Typhoid germs are passed in the feces and, to some extent, the urine of infected people. The germs are spread by eating or drinking water or foods contaminated by feces from the infected individual.

What are the symptoms?

Symptoms may be mild or severe and may include fever, headache, constipation or diarrhea, rose-colored spots on the trunk and an enlarged spleen and liver. Relapses are common. Fatalities are less than one percent with antibiotic treatment.

How soon do symptoms appear?

Symptoms generally appear one to three weeks after exposure.

For how long can an infected person carry the typhoid germ?

The carrier stage varies from a number of days to years. Only about three percent of cases go on to become lifelong carriers of the germ, and this tends to occur more often in adults than in children.

How is typhoid treated?



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Specific antibiotics, such as chloramphenicol, ampicillin and amoxicillin, are often used to treat cases of typhoid.

Should infected people be isolated?

Because the germ is passed in the feces of infected people, only people with active diarrhea who are unable to control their bowel habits (infants, certain handicapped individuals) should be isolated. Most infected people may return to work or school when they have recovered, provided that they carefully wash hands after toilet visits. Children in daycare and other sensitive settings must obtain the approval of the local or state health department before returning to their routine activities. Food handlers and health care workers may not return to work until three consecutive negative stool cultures are confirmed.

Is there a vaccine for typhoid?

A vaccine is available but is generally reserved for people traveling to underdeveloped countries where significant exposure may occur. Strict attention to food and water precautions while traveling to such countries is the most effective preventive method. Household members residing with a chronic carrier of *Salmonella typhi* may benefit from vaccination.