Cluster of listeriosis cases in France

A cluster of eight cases of Listeria monocytogenes infection with the same serotype and pulsed field gel; electrophoresis (PFGE) profile has been identified by the surveillance scheme operated by the Institut de Veille Sanitaire (national institute for health surveillance) and the national Listeria reference centre at the Institut Pasteur, Paris, since 29 May 2002 (1). The first two strains were isolated in week 22 (27 May-2 June), two more were isolated in week 23 (3-9 June), and four were isolated in week 24 (10-16 June).

Seven of these eight patients presented with infection of the central nervous system, and one with bacteraemia. Five patients had underlying medical conditions or were being treated with immunosuppressants, and so were at risk for listeriosis. One of these five patients has died. Five of the eight cases are localised in two departments (Moselle and Bas-Rhin) in eastern France, and the others are in three different departments (see figure).

Figure. Map of France showing geographic distribution of cases.



The coordinating committee for Listeria investigations was mobilised to determine and coordinate the investigations including food histories of case patients, the analysis of the supply channels of products on sale in shops where the patients had bought food in order to identify common suppliers, sampling of foods from these shops and from the patients' refrigerators, and screening for the epidemic clone among strains isolated from food products in France since January 2002. The German health authorities have been informed and asked to identify any cases that could possibly be linked to this outbreak close to the German border.

The main vehicle for transmission has been identified as spreadable sausage, a ready to eat food prepared from raw pork and fat. Among its collection of strains isolated from foods and food plants, the national reference centre identified a strain which has the same characteristics as the outbreak strain. This strain had been isolated from an unopened package of spreadable sausage produced by a manufacturer in eastern France. Five of the seven patients for whom this information was available reported having consumed this type of product.

On 2 July, the manufacturer recalled this spreadable sausage product. On 3 July, all pork products from this manufacturer were withdrawn from the market. These products include different meat products sold under the brand names Stoeffler, Dulano, and Claude Leger, and specific supermarket chain brands. All these products bear the establishment number 67-348-02. On the same day, a notification was sent to all member states of the European Union through the Rapid Alert System For Food (RASFF). Analysis of export distribution channels for the products is ongoing.

Consumers have been advised to throw away the affected products, or return them to the point of purchase. Since the risk for developing Listeria infection after eating a contaminated product is very low, people who have eaten the implicated product have been informed that they do not require any special medical evaluation or treatment, even if they are in high risk groups. Nevertheless, people have been advised that if they develop fever (or fever accompanied by headache) within two months of eating the product, they should consult a doctor, and inform him or her about this exposure.

Case surveillance is continuing. Because of the long incubation period (between four days and two months), cases may continue to occur and be reported for several weeks after a thorough product recall.

The role of food in listeriosis transmission in humans was established in the 1980s, when the annual number of new cases in France was around 1000. Subsequent changes made in agriculture and the food industry have greatly reduced the annual number of cases to under 300 (2,3).

References:

- 1. INVS. Cas groupés de listériose. Institut de Veille Sanitaire press release, 3 July 2002. [in French] (http://www.invs.sante.fr/presse/2002/communiques/listeriose020703/listeriose020703.htm)
- 2. Goulet V, de Valk H, Pierre O, Stainer F, Rocourt J, Vaillant V, et al. Effect of Prevention Measures on Incidence of Human Listeriosis, France, 1987-1997. *Emerg Infect Dis* 2001; **7**: 983-9. (http://www.cdc.gov/ncidod/EID/vol7no6/goulet.htm)
- 3. Goulet V, Jacquet C, Laurent E, Rocourt J, Vaillant V, de Valk H. La surveillance de la listériose humaine en France en 1999. Bull Epidem Hebd 2001; 34: 161-5. (http://www.invs.sante.fr/beh/2001/34/index.htm)

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