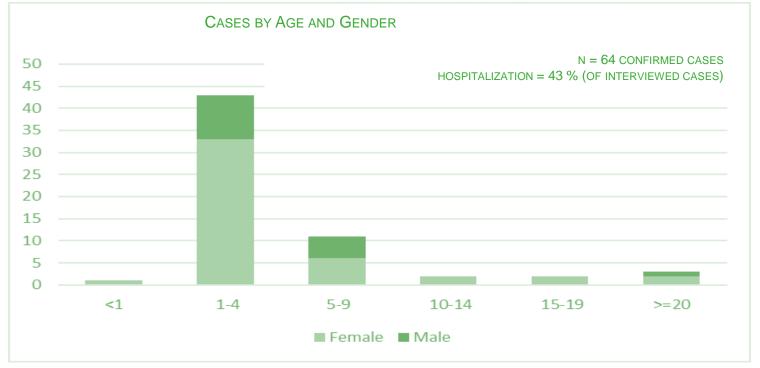


FOODBORNE ILLNESS

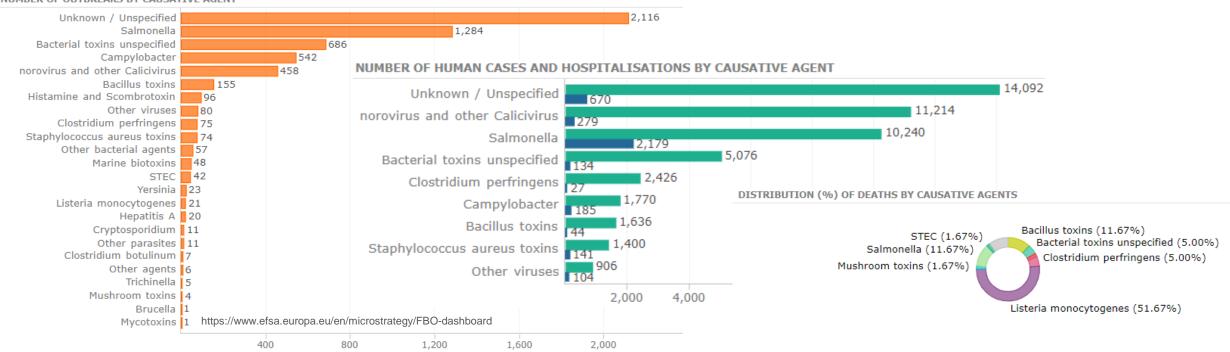
SUSCEPTIBILITY OF VULNERABLE POPULATIONS

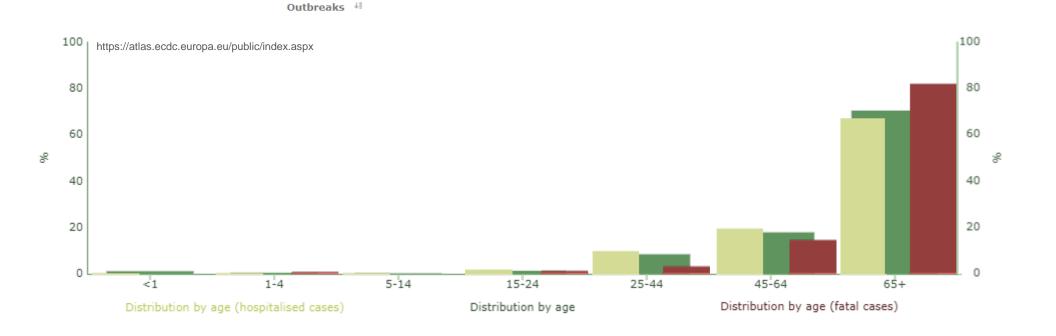
Notifications @NRL FBO

	< 2 SICK	≥ 2 sick	TOTAL
# NOTIFICATIONS	46	132	170
# SICK	46	1982	2028
# HOSPITALIZATIONS	21	112	133
# DECEASED	2	2	4
# EXPOSURES	51	59930	59981



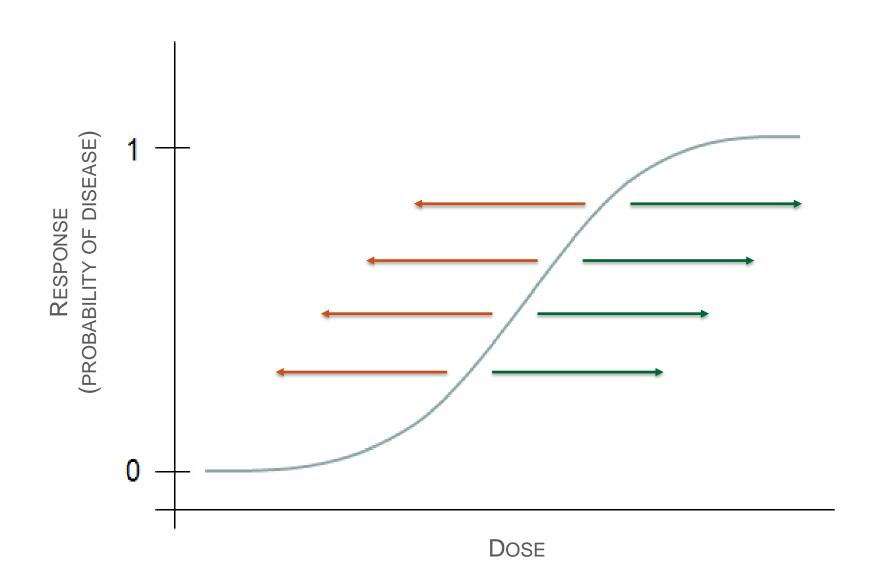
NUMBER OF OUTBREAKS BY CAUSATIVE AGENT



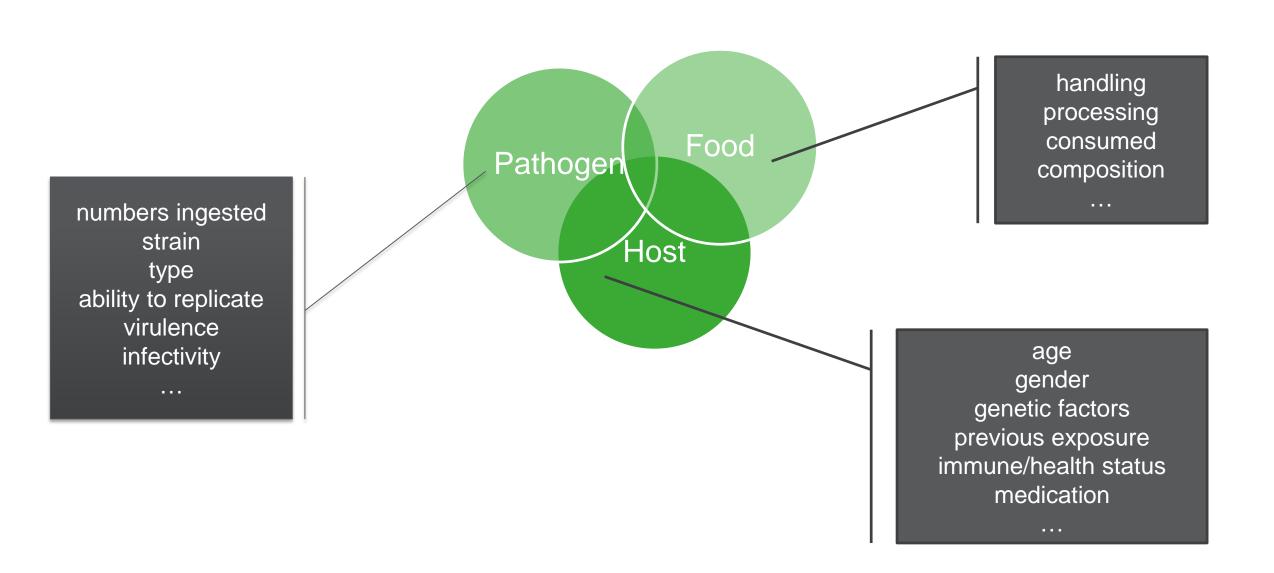


A SCENARIO

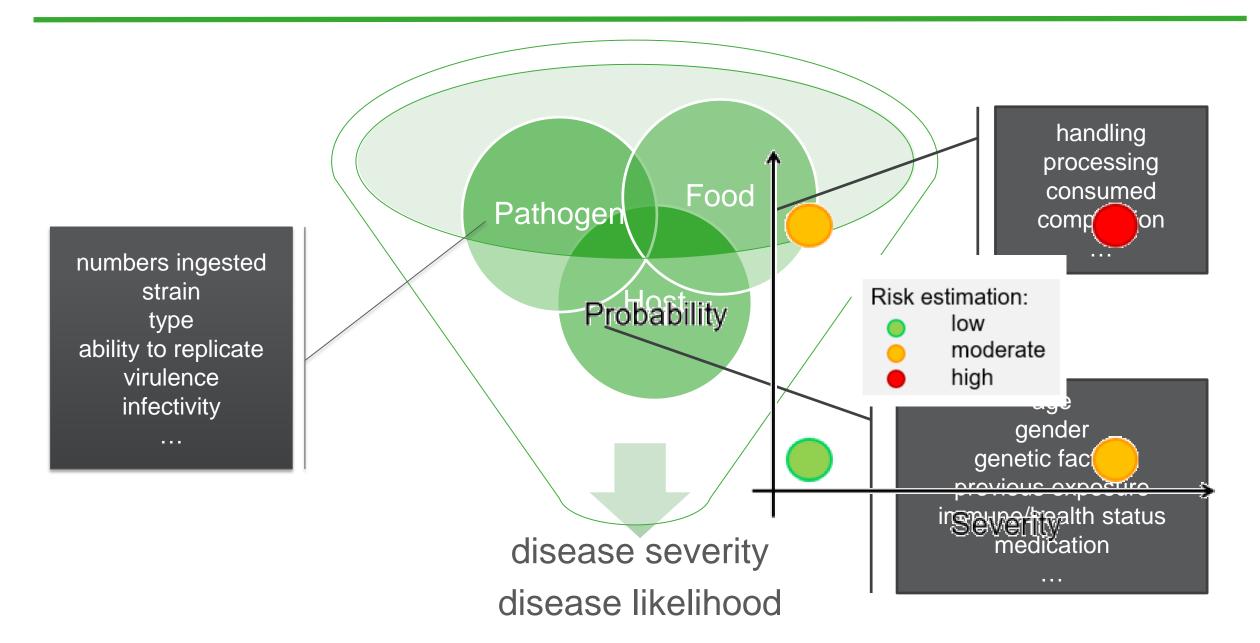




INFECTIOUS DISEASE TRIANGLE



INFECTIOUS DISEASE TRIANGLE



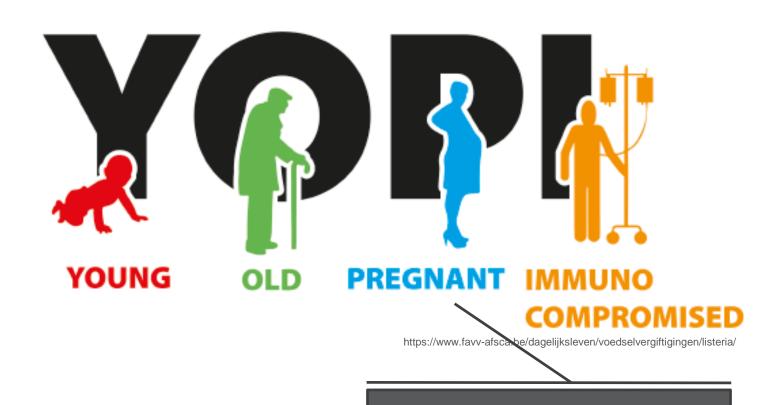




IS not fully developed immature intestinal epithelial barrier immature gut microbiota less stomach acid production



age-related weakening of IS slower GIT transit less stomach acid production comorbidity medication malnutrition



negative hormonal impact on IS





- acid suppression
- antidiarrheal
- immunosuppressants
- steroids

MEDICATION

- acid suppression
- antidiarrheal
- immunosuppressants
- steroids

IMPACT

↑ gastroenteritis

healthcare settings

hospitals

MEDICATION acid suppression antidiarrheal • immunosuppressants steroids IMPACT ↑ gastroenteritis healthcare settings hospitals

DIABETES

- impact on IS
- ↓ intestinal motility
- † transit time
- 1 gastric acid

MEDICATION acid suppression antidiarrheal immunosuppressants · steroids IMPACT ↑ gastroenteritis healthcare settings hospitals

DIABETES impact on IS ↓ intestinal motility • † transit time ↓ gastric acid IMPACT campylobacteriosis x3-4 salmonellosis x3-4

listeriosis x25

TAKE HOME MESSAGES

everyone can get a foodborne illness

vulnerable persons are more likely than healthy individuals to be affected by lower numbers of a pathogen and are more likely to suffer more severe consequences of infection

together we can ensure microbiological safety of food also for those vulnerable groups more at risk

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Contact

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