AUTHOR’S REPLY: Looking for tips to find icebergs - surveillance of haemolytic uraemic syndrome to detect outbreaks of Shiga toxin-producing E. coli infection

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To the Editor: We appreciate the comments by Dr Werber et al. [1] regarding our article on an outbreak of Shiga toxin-producing Escherichia coli (STEC) O145 in Belgium. We agree with the authors that active surveillance of haemolytic uraemic syndrome (HUS) patients allows the detection of outbreaks of virulent STEC strains and that under-ascertainment of verocytotoxin-producing E. coli (VTEC) is explained by the non-routine practice of culturing stools, by the under-use of sorbitol-MacConkey (SMAC) agar, and by the fact that most clinical laboratories do not test for these micro-organisms in routine gastroenteritis samples. In Belgium, well equipped clinical laboratories are systematically looking for enteropathogens such as VTEC in bloody stools or when HUS is suspected. In this outbreak, the clustering of HUS cases was an additional argument for further laboratory analysis. Moreover, we hope that we have shown that the prompt and systematic data collection of HUS patients can offer some added value in VTEC surveillance and help to identify the source of VTEC infections.

References


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