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Norovirus outbreak management: how much cohorting is necessary?

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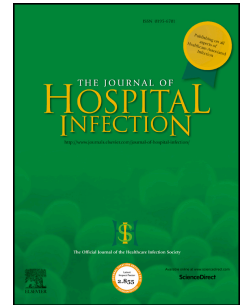
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Short report**Norovirus outbreak management: how much cohorting is necessary?**S. Korte^{a,*}, A. Pettke^b, A. Kossow^a, A. Mellmann^a, S. Willems^a, F. Kipp^a^a*Institute of Hygiene, University Hospital Muenster, Muenster, Germany*^b*Institute of Medical Microbiology – Clinical Virology, University Hospital Muenster, Muenster, Germany*

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SUMMARY

For the control of norovirus outbreaks, it is widely recommended that exposed but asymptomatic patients should be cohorted separately from unexposed patients and from symptomatic patients. The frequency of subsequent symptomatic norovirus infection in contact patients has not been investigated systematically. We retrospectively investigated the development of typical norovirus symptoms in contact patients during seven norovirus outbreaks affecting 57 patients between November 2014 and May 2015. Only one of 14 contact patients developed typical norovirus symptoms, calling into question current recommendations to isolate contact patients.

Keywords:

Cohorting

Norovirus infection

Outbreak management

Introduction

Norovirus infections lead to acute gastroenteritis in people of all ages. The typical symptoms are diarrhoea, vomiting, and nausea. Symptoms begin after an average incubation time of 12–48 h.¹ In otherwise healthy persons symptoms end without treatment after 24–72 h. Excretion of the virus after resolution of symptoms lasts 48–72 h in immunocompetent persons.² Norovirus pathogens persist on surfaces for several weeks. Even exposure to small numbers – fewer than 100 virus particles – may be associated with high infection rates.³ Faecal–oral spread is the primary mode of transmission, but waterborne and foodborne modes of transmission are also described.⁴ Moreover, during outbreaks norovirus aerosols can be detected.⁵ The burden of norovirus outbreaks in healthcare settings is high. In

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