

## ***Foreword***

It is only 40 years since Verocytogenic *E. coli* were first identified, but, in the intervening years, they have successfully colonised a significant proportion of cattle in Europe and globally produce tens of thousands cases of illness each year, much of it serious. The clinical spectrum produced by infection with VTEC ranges from subclinical infection to profuse bloody diarrhoea complicated by Haemolytic Uraemic Syndrome that can, particularly in the elderly and children under five, lead to death.

Since data collection on VTEC began in 1998, there has been a steady increase in the numbers of cases seen in Ireland. In 2005 there were 125 cases of VTEC infection reported, many associated with outbreaks in a variety of settings. Part of this increase reflects improved methods of diagnosis, greater awareness of the disease among clinicians and public health professionals and more complete investigation of cases that will often uncover other linked cases. But there is no doubt, that we are seeing higher levels of disease than we did in the past.

VTECs are particularly adept at producing illness (it takes as few as 10 bacteria to produce illness and it can survive in the environment for extended periods) and is transmitted by a variety of routes (food, water, person-to-person and through the environment) and this coupled with their potential clinical severity means that their control and prevention is a matter of considerable public health and clinical importance.

This report is intended to provide guidance on the rapid identification of single cases and outbreaks of human VTEC illness and on methods to promptly control its spread. It is also intended that the information contained in this report be used to prevent cases of VTEC infection through the application of the expert advice and best practice hygiene measures.

Its aim is to provide a guidance framework to facilitate decision-making, based upon local conditions and within local working arrangements.

In this version of the Document, there is not included Guidance on Laboratory aspects of VTEC. This is because new and highly relevant Health and Safety Legislation is awaited. Once this is available, it will be incorporated into the document.

I am extremely grateful to the VTEC Committee, a multiagency and multidisciplinary subcommittee of Health Protection Surveillance Centre's Scientific Advisory Committee which developed this Guidance. Their vigilance, expertise and professionalism has ensured that this Guidance incorporated the best evidence from Ireland and around the world.

Dr. Paul McKeown  
Committee Chair