

CHP investigates sporadic case of Shiga toxin-producing Escherichia coli infection

â€‹The Centre for Health Protection (CHP) of the Department of Health announced today (June 2) that it is investigating a sporadic case of Shiga toxin-producing Escherichia coli (STEC) infection and reminded members of the public to maintain good personal, food and environmental hygiene to prevent intestinal infections.

The case involves a 59-year-old man with good past health who attended the Accident and Emergency Department of Tseung Kwan O Hospital on April 28 due to an acute neurological condition, and was transferred to the neurosurgery ward of Kwong Wah Hospital (KWH) for hospitalisation on the same day. He developed bloody diarrhoea on May 9, and this symptom has been resolving since May 12 after treatment. He remains hospitalised for his acute neurological condition and is now in stable condition. His household contact is asymptomatic.

His stool sample tested positive for STEC.

A preliminary investigation by the CHP revealed that the patient had consumed food in the community during the early stage of the incubation period, including patronising restaurants and consuming takeaway food at home. The CHP obtained detailed information from his household member about the food he consumed at home and the cooking process. No high-risk factors were identified. However, the patient could not provide any information on the restaurants he had patronised due to his current health condition. Since the patient was hospitalised during part of the incubation period, CHP staff, for the sake of prudence, visited KWH to investigate and identify the source of the infection.

The other patients who had been hospitalised in the same ward as the patient in question and the medical staff working in the ward were asymptomatic. Arrangements have been made to test stool samples from other patients hospitalised in the same ward and from the healthcare workers responsible for feeding the patient.

The CHP also took environmental samples and samples of the nutritional products consumed by the patient concerned during his stay at KWH. The results showed that all the stool samples from the healthcare workers and patients, and all environmental and nutritional product samples from the ward, were negative for STEC. The CHP has also stepped up surveillance of staff and patients in the ward, and no other cases have been detected. Therefore, the CHP believes that the patient was more likely to have been infected in the community, though the source has not yet been confirmed.

The CHP has recorded one to six cases of STEC infection annually in the past five years (2020 to 2024). The CHP has recorded two cases of STEC infection (including the case announced above) in the first five months of this year. There is no rising trend or abnormal cluster. In general, STEC infections are usually associated with the consumption of contaminated food or water, such as raw or undercooked meat products, contaminated fruits and vegetables, and unpasteurised dairy products. Direct person-to-person transmission through the faecal-oral route can also occur. The public are advised to observe good personal and food hygiene.

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Members of the public may refer to the CHP's [webpage](#) for more information about STEC.