KS-HAN

Kansas Department of Health and Environment

Date: August 4, 2026
From: Kansas Department of Health and Environment – Division of Public Health
To: Local Health Departments, Healthcare Providers
RE: Laboratory Testing for Cyclosporiasis

Background

Cyclosporiasis is an intestinal illness caused by the parasite *Cyclospora cayetanensis*. Infection occurs via the ingestion of contaminated food or water. Because oocysts require days to weeks in the environment to become infectious, direct person-to-person transmission is considered unlikely. Symptoms typically begin one week after exposure but can occur from two days to two weeks following infection. Cyclospora outbreaks in the United States have been linked to various types of imported fresh produce and cases are also more commonly seen among persons who traveled internationally prior to illness onset.

From May 1 – July 27, 2026, 6,707 cyclosporiasis cases have been reported in 45 states, with an additional 11,500 cases still under investigation and analysis. A subset of these cases is part of a multistate outbreak affecting nine states linked to iceberg lettuce. This product has been recalled, but other products may be contributing to the broader national increase in cases.

In Kansas, an average of 44 cases is reported each year, and in 2025 only 31 cases were reported. So far this year, 461 cases have been reported in Kansas.

Symptoms of cyclosporiasis include prolonged watery diarrhea, loss of appetite, abdominal cramping, nausea, weight loss, fatigue, and occasionally a low-grade fever. Illness can be prolonged or relapsing if untreated, sometimes persisting weeks to months. Severe disease is uncommon, but dehydration can occur, particularly among young children, older adults, and immunocompromised individuals.

Testing recommendations:
Molecular methods are the preferred diagnostic modality due to superior sensitivity and specificity compared to microscopy and offer significantly shorter turnaround time. According to U.S. Centers for Medicare and Medicaid Services (CMS) national coverage determinations, gastrointestinal (GI) pathogen panels testing for 12 or more targets are considered medically reasonable and necessary only for patients with an immunocompromising condition presenting with acute or persistent diarrhea. Testing may not be covered for immunocompetent patients. Commercial insurers are likely to follow the same restrictive guidance.

Recommendations for Healthcare Providers
If cyclosporiasis is suspected in an insured and immunocompetent patient, providers should choose a commercial laboratory offering *Cyclospora* testing and request insurance preapproval.

Specify the 11-target BioFire® FilmArray GI Panel Mid panel rather than the full 22-target BioFire® assay, as commercial insurance more often approves coverage on the smaller panel in immunocompetent patients; note that some large commercial laboratories may not offer this 11-target panel. For insured and immunocompromised patients, both the 11-target and 22-target tests may be covered by insurance.

If your patient does not have insurance coverage for these tests, you may refer them to their county local health department for testing at the Kansas Health and Environment Laboratory (KHEL).

Recommendations for Local Health Departments

Local health departments should ensure that their stool specimen collection kits are not expired and should keep between two to five stool collection kits on hand. Fill out the Specimen Kit and Supplies Request Form or contact KHEL Customer Service (785-296-1620) to order stool collection devices, Cary Blair stool specimen tubes, specimen transport bags, and small cold shippers.

Local health departments should send specimens to KHEL for testing when a patient meets **both** of the following:

- New onset of non-bloody diarrhea (defined as ≥ three unformed stools in a 24-hour period) lasting for at least five days, or relapsing watery diarrhea; **and**

- Lack of access to testing due to insurance restrictions, absence of insurance, or cost.

Stool specimens should be placed in Cary Blair transport media and shipped to KHEL. Specimens must be received within four days of collection. On the KDHE Universal Laboratory Specimen Submission Form, select Molecular GI Screen under Epidemiology Approval. You do not need to call the KDHE Epidemiology Hotline prior to specimen submission. KHEL will be testing specimens on the full 22-target BioFire® assay.

Local health departments should refer those that test positive and continue to experience prolonged symptoms, have an immunocompromising condition, or are experiencing moderate to severe symptoms to their primary care provider or other healthcare provider to ensure appropriate clinical management.

Resources

Centers for Disease Control and Prevention, Surveillance of Cyclosporiasis
https://www.cdc.gov/cyclosporiasis/php/surveillance/index.html
Kansas Reportable Infectious Disease Dashboard
https://www.kdhe.ks.gov/2388/Kansas-Reportable-Infectious-Disease-Das
Kansas Cyclosporiasis Surveillance Data
https://www.kdhe.ks.gov/2458/Cyclosporiasis-Surveillance-Data