

Gastro outbreak learning opportunity for medical community

By Anneke Smith

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One of the largest gastro outbreaks in the country has given the medical community the chance develop a better picture of the long-term effects of campylobacter.

Hawke's Bay District Health Board medical officer of health Dr Caroline McElnay said while Guillain Barre and reactive arthritis were known complications of campylobacter the extent of these complications was not well understood.

"There hasn't been a whole heap of research in this area. We, unfortunately for the community, have now got an extensive number of cases. So we've got the opportunity to look and see what the complications are," she said.

"What we're doing now is really trying to complete to the whole picture of campylobacter."

The HBDHB conducted surveys, which included questions about complication symptoms, shortly after the outbreak was confirmed.

Dr McElnay said the research was currently tracking in the range of 4 per cent of people who may contract reactive arthritis as a result of campylobacter; equating to 200 people if multiplied across a sample size of 5000.

The research has also highlighted the severity of campylobacter on the elderly.

"We're hearing that some of our elderly community have been, after they've had campylobacter, have been just a little bit more frailer. We're able to understand that a bit more and make sure that the care and the services that those older people need to maintain their wellness," she said.

Te Mata Peak Practice general practitioner Dr Peter Culham was the GP rostered on the weekend of the 13th and 14th of August last year.

"From a GP perspective the learning for us is all based around how we managed this I think, and how we managed to keep people out of the hospital and deal with large amounts of people who had a dreadful illness," he said.

Dr Culham said the practice's approach to the outbreak was telephone consultations which proved to be safe, time-effective and cost effective.

"We really can no longer have every single person in front of us all the time and do the traditional consultation because there's too many people and not enough doctors and this was a classic example," he said.

Dr Culham said replacing face to face consultations with telephone ones throughout the gastro outbreak proved "extremely successful".



Dr Caroline McElnay said the extent of the complications of campylobacter is being studied by the medical community.

"The silver lining is that we can now disseminate this information to other GP practices and primary care around the country; that if they're ever faced with a similar situation then telephone conversations are a way to go," he said.

Dr McElnay said the research will also contribute to informed conversations around the cost of preventing another outbreak and the cost of treating one.

"It's not just a couple of days off work and then people are back and they're fully recovered. For some people it's been longer and they've developed these sort of other symptoms. Again, the percentages might be low but because we've got so many affected you maybe have 200 people with reactive arthritis well what will the cost of managing that arthritis be?" she said.

Dr McElnay said the research would "definitely" help communities in New Zealand and around the world better understand the long-term effects of campylobacter.

"While it won't be much relief to somebody who had been ill what it does is it adds to the medical knowledge about diseases like campylobacter and the consequences.. it actually confirms that we need to do everything we can to prevent people from getting campylobacter because it can be nasty and it can have long lasting complications that affect the health of particularly our more-vulnerable in the community. So we do need to take it seriously," she said.

The research, which will be released in February this year, has already conclusively said that water care is worth investing in, Dr McElnay said.

"It says at the end of the day that campylobacter is a serious infection and we don't want it to happen. From a research point of view and a health services point of view it really supports the fact that it is worth investing in whatever way to you can to make sure that people are protected from getting campylobacter," she said.

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