

Shigella Infections among Gay and Bisexual Men

Note: Content below contains mature language.



Gay, bisexual, and other men who have sex with men (MSM)[†] are at risk for *Shigella* infections.

What is *Shigella*?

- Shigellosis is a common diarrheal disease caused by a group of bacteria called *Shigella*. Symptoms of shigellosis typically start 1–2 days after exposure and include:
 - Diarrhea (sometimes bloody)
 - Fever
 - Abdominal pain
 - Tenesmus (a painful sensation of needing to pass stools when bowels are empty)

How is *Shigella* spread?

Shigella germs are present in the feces (poop) of people with shigellosis while they have diarrhea and up to a few weeks after the diarrhea has gone away. *Shigella* is very contagious; exposure to even a tiny amount of fecal matter with *Shigella* in it can cause infection. Symptoms usually start 1–2 days after exposure, but may range from 12–96 hours.

- Transmission of *Shigella* infection occurs in the following ways:
 - Person-to-person contact. *Shigella* passes from stools or soiled fingers of one person to the mouth of another person, which can happen during sexual activity. Oral-anal sex, or oral stimulation (i.e., sucking or licking) of the anus (anilingus or “rimming”), may be especially risky.
 - Eating food contaminated by someone who has shigellosis.
 - Swallowing recreational or drinking water that was contaminated by infected fecal matter.

Why should MSM be concerned about *Shigella*?

- MSM are more likely to acquire shigellosis than the general adult population.
- Many shigellosis outbreaks among MSM have been reported in the United States, Canada, Tokyo, and Europe since 1999.
- MSM are more likely than others to get infected with *Shigella* that is resistant to two antibiotics commonly used to treat adults who have shigellosis. Therefore, MSM who get shigellosis may need to see their healthcare providers repeatedly before receiving treatments that will work. Additionally, they may require injectable antibiotics rather than antibiotics that can be taken by mouth.
- HIV-infected persons can have more severe and prolonged shigellosis, including having the infection spread into the blood, which can be life-threatening.

How will I know if I have a *Shigella* infection?

See your healthcare provider if you have symptoms of shigellosis. Healthcare providers can test your stool to determine if you are infected with *Shigella*. They can order an additional test at the same time to check whether your *Shigella* strain is resistant to antibiotics.

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How can *Shigella* infections be treated?

Diarrhea caused by *Shigella* usually goes away without antibiotic treatment in 5 to 7 days. People with mild shigellosis may need only fluids and rest. However, antibiotics are useful for severe cases of shigellosis because they can reduce the duration of symptoms. Tell your healthcare provider if you do not get better within a couple of days after starting antibiotics. He or she can do additional tests to learn whether your strain of *Shigella* is resistant to the antibiotic you are taking.

I was diagnosed with shigellosis. What can I do to avoid giving it to other people?

- Wash your hands with soap after going to the bathroom.
- Wait to have sex until you no longer have diarrhea. You might have *Shigella* germs in your stool for a few weeks after you recover, so wash your body and hands before sex. During oral-anal sex (anilingus or “rimming”), use barriers, such as condoms, natural rubber latex sheets, dental dams, or cut-open non-lubricated condoms between your rectum and your partner’s mouth. Use condoms during anal sex.
- Do not prepare food for others while you are sick. After you get better, wash your hands carefully with soap before preparing food for others.
- For those who work in healthcare, food service, or childcare, follow your local health department’s guidance about exclusion from work while ill and returning to work after you have recovered.

How can I reduce my risk of getting shigellosis?

- Meticulously washing your hands with soap during key times:
 - Before eating
 - After changing a diaper
 - After helping to clean another person who has defecated (pooped)
- Avoid sexual activity with those who have diarrhea or who recently recovered from diarrhea.
- Reduce fecal-oral exposure during sex:
 - Wash your genitals, anus, and hands before and after sexual activity.
 - Use barriers like condoms or dental dams during oral sex and oral-anal sex and latex gloves during anal fingering or fisting.
 - Use condoms during anal and vaginal sex to prevent other sexually transmitted infections.
- Avoid swallowing recreational (for example, lake or river water while swimming) or drinking water that was contaminated by infected fecal matter.
- When traveling internationally, follow food and water precautions and wash hands with soap frequently.

Where can I get more information?

- CDC’s *Shigella* website: <http://www.cdc.gov/shigella/general-information.html>
- CDC’s Proctitis, Proctocolitis, and Enteritis website: <http://www.cdc.gov/std/treatment/2010/proctitis.htm>
- [Travelers’ health: Safe Food and Water.](#)
- [Travelers’ Health: Yellow Book-Shigellosis.](#)
- [Travelers’ Health: Disease Related to Travel.](#)
- [Healthy Swimming](#)

[†]The term men who have sex with men is used in CDC surveillance systems because it indicates the behaviors that spread *Shigella* infection, rather than how individuals self-identify in terms of their sexuality.