

MONTHLY COMMUNICABLE DISEASE REPORT

AUGUST 2025

Volume 9, Issue 8: September 15, 2025

BARTONELLA QUINTANA INFECTION

Bartonella are gram-negative bacteria. There are at least fifteen different species of *Bartonella* bacteria that can cause infection and illness in humans. Infection with any *Bartonella* species is known as bartonellosis. *Bartonella quintana* bacteria are spread to humans via the bite of an infected human body louse. Illness caused by *Bartonella quintana* was first described in 1915 in World War I soldiers. It was given the name Trench Fever due to infections among soldiers living in crowded and unhygienic conditions. Because body lice infestations are more likely to occur in areas of dense population and inadequate sanitation, populations at higher risk for infection today include people experiencing homelessness and those living in crowded conditions without access to laundry or bathing facilities.

Symptoms of *B. quintana* bartonellosis include fever that may be relapsing; bone pain mostly in the shins, neck, and back; and skin lesions known as bacillary angiomatosis. Untreated infection with *B. quintana* can lead to infection of the heart valves known as endocarditis. Because the bacteria are difficult to culture, *Bartonella*-related endocarditis can be difficult to diagnose and lead to extended hospital stays, surgeries, and death. Antibody tests for *B. quintana* are available, but cross-reactivity with other *Bartonella* species like *B. henselae* (the bacteria responsible for Cat Scratch Disease) can occur. Molecular testing, such as PCR, can be helpful in cases of culture-negative endocarditis. Antibiotics used to treat *B. quintana* infection include tetracyclines, aminoglycosides, and macrolides. Multiple antibiotics are often used in combination.

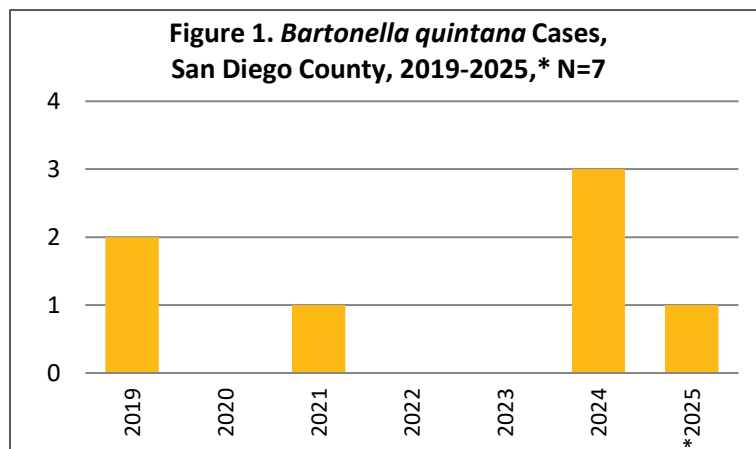
B. quintana infection can be prevented by avoiding exposure to body lice. Actions that prevent the infestation of body lice include not sharing clothing, beds, bedding, or towels with someone who may have body lice; regular access to showers and laundry services for people who live in group settings like shelters; washing any clothes or bedding potentially infested with body lice in hot water (55 degrees Celsius/130 degrees Fahrenheit) and drying on high heat; sealing clothing and items that cannot be washed in a plastic bag for two weeks; and fumigating or dusting with appropriate chemical insecticides. If an individual contracts body lice, treatment includes improving personal hygiene as described above. Pediculicides can be prescribed if deemed medically necessary by a healthcare provider.

B. quintana infection is not currently nationally notifiable, but was made locally reportable in San Diego County in October 2019. Since 2019, 16 reports have been received, of which 7 had symptoms and epidemiology consistent with *B. quintana* illness (Figure 1). All 7 were male and 5 were adults aged 40-59 years. Four had a history of experiencing homelessness. Risk factors for the others were not identified, though 2 were immunosuppressed. Five developed endocarditis, including one death.

Resources

- [Centers for Disease Control and Prevention \(CDC\) *Bartonella quintana* website](#)
- [CDC Body Lice website](#)
- [California Department of Public Health Body Lice Fact Sheet](#)

Suggested citation: Stous S, Nelson JA. *Bartonella quintana* Infection. County of San Diego Monthly Communicable Disease Report 2025; 9(8):1.



*2025 data are year-to-date; current as of 9/15/2025. Data are provisional and subject to change as additional information becomes available. Grouped by CDC disease years.

The Monthly Communicable Disease Surveillance Report is a publication of the County of San Diego Public Health Services Epidemiology and Immunization Services Branch (EISB). EISB identifies, investigates, registers, and evaluates communicable, reportable, and emerging diseases and conditions to protect the health of the community. The purpose of this report is to present trends in communicable disease in San Diego County. To subscribe to this report, visit the [Data and Reports](#) page on the Epidemiology Program website (www.sdepi.org) and click on the subscribe link.

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Table 1. Select Reportable Diseases		2025			Prior Years		
		August	July	January-August (YTD)	2024 YTD	Avg YTD, 2022-2024	2024 Total
Disease and Case Inclusion Criteria (C,P,S)							
Botulism (Foodborne, Infant, Wound, Other)	C,P	0	0	3	4	2.0	5
Brucellosis	C,P	0	0	0	1	2.0	1
Campylobacteriosis	C,P	113	137	724	788	724.0	1,127
<i>Candida auris</i>	C	15	8	113	88	59.3	151
Chickenpox, Hospitalization or Death	C,P	0	0	1	3	3.7	3
Chikungunya	C,P	0	0	0	2	1.3	2
Coccidioidomycosis	C	49	59	491	422	340.7	649
Cryptosporidiosis	C,P	9	23	82	97	80.7	129
Dengue Virus Infection	C,P	1	1	11	31	17.3	64
Encephalitis, All	C	1	2	20	31	22.7	49
Giardiasis	C,P	11	21	157	163	151.7	244
Hepatitis A, Acute	C	1	0	5	7	20.0	17
Hepatitis B, Acute	C	1	1	12	12	10.0	18
Hepatitis B, Chronic	C,P	46	67	442	406	482.3	633
Hepatitis C, Acute	C,P	2	8	51	76	71.3	94
Hepatitis C, Chronic	C,P	113	131	1,040	1,267	1,644.0	1,880
Legionellosis	C	1	7	43	49	55.0	83
Listeriosis	C	0	1	5	8	11.0	10
Lyme Disease	C,P	1	1	3	5	6.3	6
Malaria	C	1	4	10	10	7.7	19
Measles (Rubeola)	C	1	0	1	4	1.3	4
Meningitis, Aseptic/Viral	C,P,S	3	15	47	77	55.0	106
Meningitis, Bacterial	C,P,S	3	3	28	28	27.3	44
Meningitis, Other/Unknown	C	2	5	22	21	18.0	25
Meningococcal Disease	C,P	2	0	9	4	3.0	5
Mumps	C,P	2	3	6	1	1.3	2
Pertussis	C,P	7	19	244	458	188.3	729
Rabies, Animal	C	5	6	13	3	4.0	13
Rocky Mountain Spotted Fever	C,P	0	0	1	3	2.3	3
Salmonellosis (Non-Typhoid/Non-Paratyphoid)	C,P	98	75	628	491	437.3	747
Shiga toxin-Producing <i>E. coli</i> (including O157)	C,P	12	34	166	188	158.3	262
Shigellosis	C,P	36	45	250	321	300.3	471
Typhoid Fever	C,P	0	0	1	3	6.7	4
Vibriosis	C,P	4	4	30	39	28.0	53
West Nile Virus Infection	C,P	0	0	0	0	0.7	2
Yersiniosis	C,P	15	13	112	100	59.7	135
Zika Virus	C,P	0	2	2	0	0.3	1

Case counts are provisional and subject to change as additional information becomes available. Cases are grouped into calendar months and calendar years on the basis of the earliest of the following dates: onset, lab specimen collection, diagnosis, death, and report received. Counts may differ from previously or subsequently reported counts due to differences in inclusion or grouping criteria, late reporting, or updated case information. Inclusion criteria (C,P,S = Confirmed, Probable, Suspect) based on Council of State and Territorial Epidemiologists/Centers for Disease Control and Prevention (CSTE/CDC) surveillance case criteria. Includes San Diego County resident cases only.

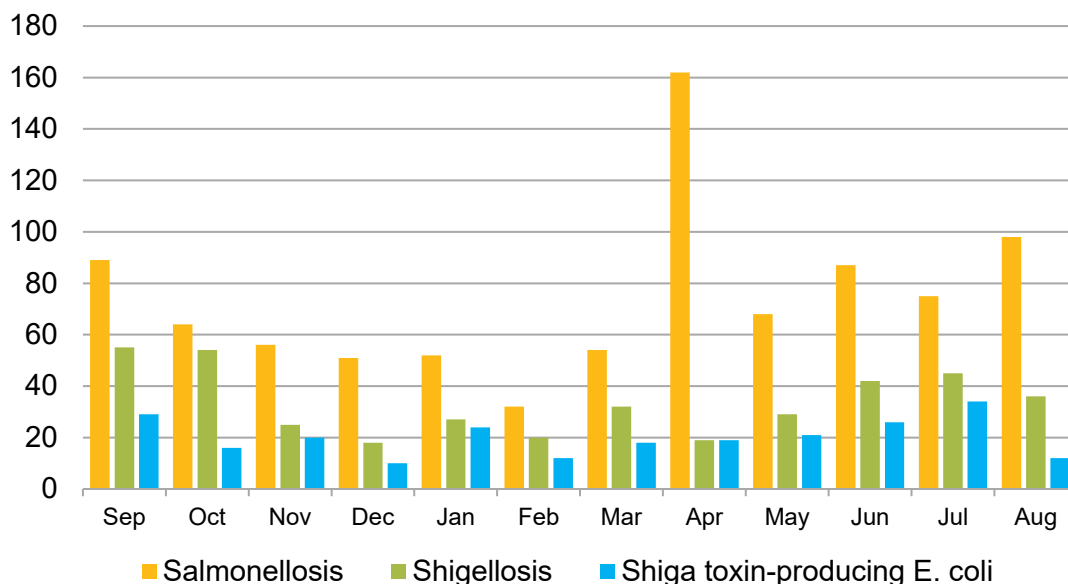
[San Diego County Sexually Transmitted Infection Data](#) | [San Diego County Tuberculosis Data](#)

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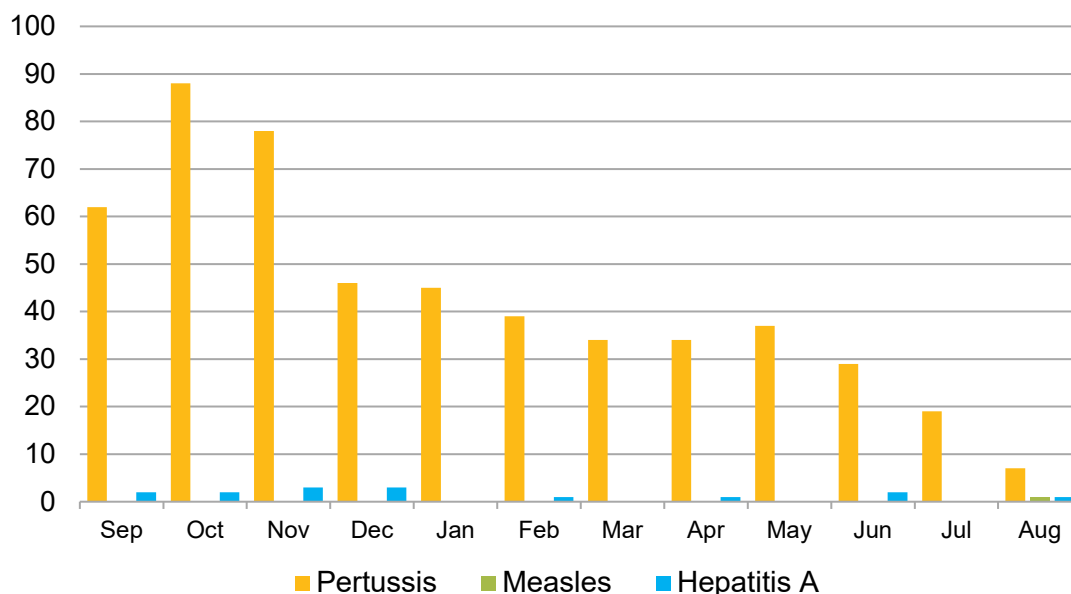
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**Figure 2. Select Enteric Infections by Month
September 2024 – August 2025**



**Figure 3. Select Vaccine-Preventable Infections by Month
September 2024 – August 2025**



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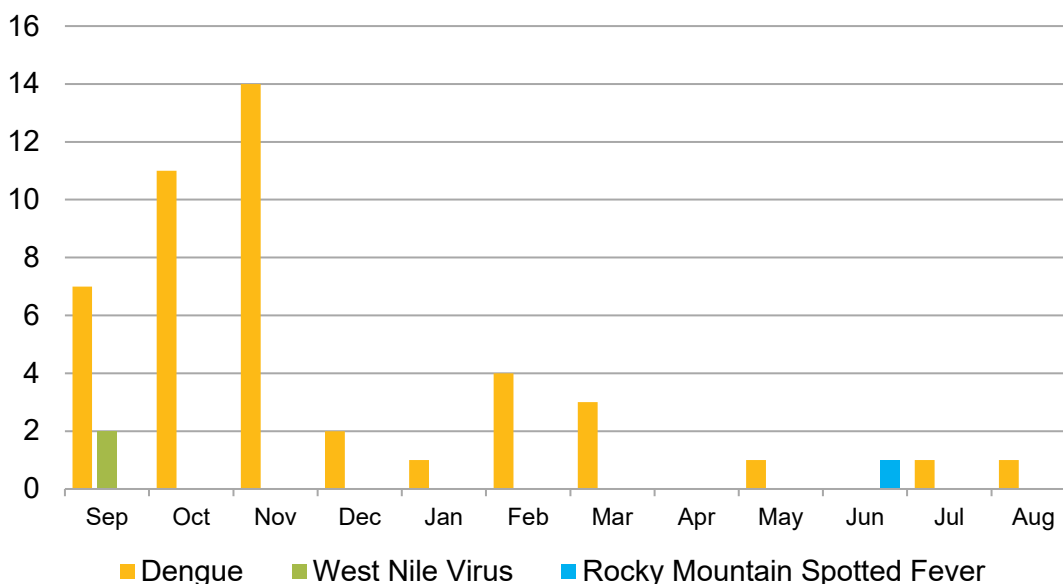


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**Figure 4. Select Vector-Borne Infections by Month
September 2024 – August 2025**



See the County disease-specific webpages, for more information on [West Nile virus](#) and [Dengue](#).

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Disease Reporting in San Diego County

San Diego County communicable disease surveillance is a collaborative effort among Public Health Services, hospitals, medical providers, laboratories, and the [San Diego Health Connect](#) Health Information Exchange (HIE). The data presented in this report are the result of this effort.

Reporting is crucial for disease surveillance and detection of disease outbreaks. Under the California Code of Regulations, Title 17 (Sections [2500](#), [2505](#), and [2508](#)), public health professionals, medical providers, laboratories, schools, and others are mandated to report more than 80 diseases or conditions to San Diego County Health and Human Services Agency.

To report a communicable disease, contact the Epidemiology Program by phone at (619) 692-8499 or download and print a Confidential Morbidity Report form and fax it to (858) 715-6458. For urgent matters on evenings, weekends or holidays, dial (858) 565-5255 and ask for the Epidemiology Program duty officer. For more information, including a complete list of reportable diseases and conditions in California, visit the Epidemiology Program website, www.sdepi.org.

Tuberculosis, sexually transmitted infections, and HIV disease are covered by other programs within Public Health Services. For information about reporting and data related to these conditions, search for the relevant program on the Public Health Services website, <http://www.sandiegocounty.gov/content/sdc/hhsa/programs/phs.html>.