



Epidemiological Unit

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Bacillary Dysentery Fact Sheet

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Introduction

Bacillary dysentery is caused by a gram-negative rod-shaped bacteria called *Shigella*. Four species of the Genus *Shigella*, which are pathogens to both man and other primates are named *Shigella sonnei*, *Shigella flexneri*, *Shigella dysenteriae*, and *Shigella boydii*.

Clinical Features

Shigella infects a large part of the small intestine. The organism invades the cells lining of the bowel and multiplies there, killing the cell; this is the cause of the symptoms produced. The disease typically begins with constitutional symptoms such as fever, anorexia and malaise, diarrhoea initially is watery, but subsequently may contain blood and mucus. Tenesmus is a common complaint. It can last for four to seven days. Rare complications include reactive arthritis and acute kidney disease.

Diagnosis

Clinical features are mainly supportive of the diagnoses. Culture (growing the bacteria in the laboratory) of freshly obtained diarrhoea fluid is the only way to be certain of the diagnosis. But even this is not always positive, especially if the patient is already on antibiotics.

Communicability

Patients can pass the bacterium while they are ill, and until the bacteria are no longer found in the faeces (usually within four weeks after illness).

Mode of transmission

Bacillary dysentery spreads both directly by hand-to-mouth transfer of contaminated faecal matter and indirectly when individuals eat food or drink water contaminated with the bacteria. Further, it could spread during diaper changing and oral-anal sex. A very small number of bacteria (even 10 to 100) can cause the illness. People who have the bacteria, without symptoms also can transmit the disease.

Risk groups

Homeless people, travellers to countries with poor food and hygienic practices, men who have

sex with men as well and people with weakened immune systems are highly likely to get Bacillary Dysentery.

Incubation period

The incubation period ranges from one to seven days, with an average of three days.

Preventive measures

- Wash hands well with soap and water after using the toilet, and always before handling, duration preparation or eating foods.
- Drink boiled cool water.
- Avoid drinks with ice from unknown sources.
- People with shigellosis should not prepare food or pour drinks for others until they can prove they no longer carry the *Shigella* bacteria.
- Wash hands after contact with infected individuals.
- Ensure proper disposal of sewage.
- Protect public water supplies from faecal contamination.
- Consume uncontaminated milk and milk products or pasteurized milk.
- Control flies and avoid contact with food.
- Take precautions regarding food and water when travelling to areas where inadequate sanitary facilities.