

## Salad Bar Salmonella Report

Similar intentional foodborne outbreaks are certainly possible today. Obtaining bacterial isolates, despite strict commercial regulations, is not a difficult task. Samples may be acquired from clinical samples or raw foods that are derived from animals. Furthermore, the culture and growth of pathogenic strains of bacteria for the purpose of deliberate contamination is a simple and low-cost process.<sup>1</sup> The anthrax attacks of 2001 were a series of similar incident, indicating the need to ramp up efforts against bioterrorism in the U.S..<sup>2</sup>

The initial management of this case, regardless of the mechanism of contamination, would have involved a stringent epidemiological investigation to determine the source and methods of transmission, as was carried out at the time. However, once determined through surveillance that there were two waves of the outbreak, there may have been a quicker identification of religious cult members as having been the deliberate sources of contamination had there been a higher index of suspicion with regards to terrorism.<sup>1</sup> The involvement of the Federal Bureau of Investigation (FBI) and the Centers for Disease Control and Prevention (CDC) certainly makes the use of the term “public health disaster” appropriate for describing the outbreak of Salmonellosis in this case, since the resources that were utilized reached beyond those provided by the State of Oregon alone.

The investigation in the above-mentioned case was hampered due to the lack of reciprocal trust and cooperation between public health institutions, law enforcement, and government officials. Despite a local Congressman’s concerns that the Rajneeshi religious group was involved in the 1984 Salmonella outbreak, the CDC reiterated that the contamination resulted from improper management by food handlers, disregarding the fact that their own reports excluded these handlers from being the likely culprits due to various findings.<sup>2</sup> If I were a public health professional tasked with managing the case, I would want to conduct a thorough epidemiological survey in order to identify the source of the contamination, transmission methods, as well as contact tracing, in order to adequately identify individuals who have been affected, are likely carriers, and need to be observed for the development of symptoms and consequently illness. I believe this was carried out expertly by the public health agencies involved in the case in 1984; however, the inefficient coordination with law enforcement impeded the detection of the source of the outbreak.<sup>1,2</sup> Another important role of a public health practitioner in such cases is the appropriate and timely communication of messages to the public, in order to keep the community informed and aware of the circumstances, equipping them with the information needed to seek prompt treatment, and obtaining any useful data that may assist in solving the case.

References:

1. Török TJ. A large community outbreak of salmonellosis caused by intentional contamination of restaurant salad bars. *JAMA: The Journal of the American Medical Association*. 1997;278(5):389-395. doi:10.1001/jama.1997.03550050051033
2. 25 years to oregon salmonella bioterrorism: Homeland security newswire. 25 years to Oregon salmonella bioterrorism | Homeland Security Newswire. October 7, 2009. Accessed October 16, 2023. <https://www.homelandsecuritynewswire.com/25-years-oregon-salmonella-bioterrorism?page=0%2C0>