Cyclosporiasis outbreak sickens thousands in Michigan and across the US

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One of the largest outbreaks of cyclosporiasis in US history is sweeping the country, sickening nearly 7,000 people and hospitalizing 141, with Michigan the current epicenter. This outbreak is unfolding as the federal public health apparatus that would ordinarily trace and stop it has been systematically gutted by the Trump administration and Health and Human Services Secretary Robert F. Kennedy Jr.

The Centers for Disease Control and Prevention (CDC) issued a health alert Tuesday reporting 1,645 laboratory-confirmed cases across 34 states since May 1, with more than 5,100 further illnesses awaiting analysis. Those sickened range in age from 2 to 95. The confirmed total is more than six times the 249 cases reported by the same date last year, and state-level data show that infections this year have already surpassed the previous US record of roughly 4,700 cases, set in 2019, with six weeks of the season still to run.

After weeks in which it maintained that it had no evidence the illnesses were connected, the agency conceded Tuesday that more than 400 cases across Michigan, Ohio, West Virginia and Kentucky constitute a single multistate outbreak with a likely common source. Multiple additional clusters remain under investigation. The Michigan Department of Health and Human Services (MDHHS) reported 3,309 cases as of Tuesday, more than half the national total and some 65 times the 40-50 cases the state records in a typical year, while Ohio has reported 364 and New York City 403.

Even these numbers are a fraction of the true toll, for structural reasons the CDC itself acknowledged in its alert. Standard stool examinations “might not detect it reliably,” and physicians must specifically request testing for Cyclospora when they suspect it. The test is expensive, and many laboratories do not perform it, and because the parasite is shed intermittently, a single negative result proves nothing. Those who get counted are overwhelmingly the people sick enough, and for long enough, to return to a doctor who finally thinks to look, after weeks of illness no other diagnosis explains. Everyone who endures days of diarrhea at home, unwilling to lose wages or face an emergency room bill, goes uncounted in the totals.

“There is a lot of underreporting when it comes to this,” said Melanie Firestone, a foodborne illness researcher at the University of Minnesota. Michigan’s place at the center of the outbreak may itself reflect the relative strength of its testing and reporting, as much as the true geography of the disease.

Federal and state officials have not yet identified a contaminated product, grower or supplier, and no recall has been issued. Michigan investigators, drawing on interviews with more than 1,000 patients, have named leafy lettuce as the leading suspected source. “Early information has shown lettuce as a common product that regularly comes up during the investigation,” said Natasha Bagdasarian, the state’s chief medical executive, who stressed that other foods could not be ruled out.

Federal and Michigan authorities are investigating whether Taco Bell restaurants played a role, the *Washington Post* reported. Notices at some Detroit-area outlets said the chain could not sell lettuce, cilantro, onion, pico de gallo and guacamole “due to a nationwide recall,” which the company called a voluntary precaution. Some of those sickened had eaten there; others had not, indicating the outbreak reaches beyond any single chain.

Cyclospora cayetanensis is a microscopic parasite that infects the small intestine, producing watery, often explosive diarrhea that can persist for weeks and return after an apparent recovery. It spreads through food or water contaminated with human feces and does not pass from person to person; because it must mature in the environment for one to two weeks before infecting a new host, contamination is traced to the food supply. Treated with the antibiotic Bactrim, it resolves in days; untreated, it can last a month or longer.

Previous outbreaks in the US and Canada have been traced repeatedly to the same narrow list of raw produce: bagged salad mixes and kits, romaine and other leafy greens, fresh cilantro, fresh basil, raspberries, snow peas and green onions. What unites them is that each is eaten uncooked, and each offers the parasite a surface to grip. The tough-walled oocysts lodge in the hairlike projections on raspberries and cilantro, and in the folds and layers of leafy greens, where rinsing often cannot reach them. Whether produce is eaten skin-intact is decisive: no commercially frozen, cooked, or peeled produce has ever been implicated in a cyclosporiasis outbreak, and MDHHS notes that peeling is highly effective because the parasite sits on the outer surface.

Washing is of limited use, a fact largely absent from press coverage and everyday food-handling advice. A 2021 study found that a minute under a cold tap removed at least 80 percent of two related parasites from berries, but that Cyclospora clung more stubbornly than either, with removal poorest on raspberries. The Food and Drug Administration (FDA) acknowledges that even commercial chlorine washes are not proven effective against it.

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Michigan states plainly that “pre-washed” guarantees nothing and that rewashing bagged lettuce is unlikely to remove the parasite. Only heat is reliable: cooking to 158 degrees kills it. The public is instructed, in other words, to compensate at the kitchen sink for a food system it does not control and which is increasingly unregulated and dangerous.

According to epidemiologists, contamination enters the food chain in one of two ways: in the field, through irrigation water fouled with human waste or the denial of sanitation to the workers who harvest the crop; or later, through contaminated water at washing and packing. US outbreaks have been linked to growers both foreign and domestic, and whether the contamination now circulating originated abroad or at home is not known. In either case the parasite is a product of how the food system treats those who grow its produce, and of supply chains built to deliver cheap fresh vegetables year-round with minimal inspection. The outbreaks recur because nothing is done to prevent them.

The danger falls hardest on the most vulnerable. Young children, pregnant women, the elderly, and the immunocompromised are the most likely to suffer severe dehydration or prolonged illness, a threat compounded by extreme heat. Metro Detroit, the center of the outbreak, has also been an epicenter of this summer’s heat waves. An extreme heat warning ran from June 30 to July 3, when the heat index approached 110° Fahrenheit (43° Celsius), and a second ongoing heatwave this week has driven temperatures toward 100°. Fluid loss from days of diarrhea and dehydration from soaring temperatures compound one another, bearing down hardest on those without air conditioning.

The failure to name a source for the outbreak points to the deeper crisis of public health in the US. The machinery built over decades to detect foodborne outbreaks and trace them to their origin has been deliberately dismantled. In the purge of April 1, 2025, the Department of Health and Human Services announced 3,500 job cuts at the FDA, 2,400 at the CDC, 1,200 at the National Institutes of Health, and 300 at the Centers for Medicare and Medicaid Services, part of a plan to shrink the department by nearly a quarter. Jim Jones, the FDA’s top food safety official, had resigned weeks earlier over the “indiscriminate” firing of 89 staff in the agency’s Human Foods Program.

Last August, the administration decapitated the CDC’s leadership, firing Director Susan Monarez weeks after her confirmation and forcing out Daniel Jernigan, head of the center responsible for tracking foodborne and zoonotic outbreaks. The agency’s Division of Parasitic Diseases and Malaria, whose remit included Cyclospora, was quietly dissolved. The FDA has pushed back the food-traceability rule meant to speed the tracing of contaminated produce from 2026 to 2028.

In 2025 the same assault reached the CDC’s FoodNet program, whose active surveillance was cut from eight pathogens to two, ending mandatory tracking of cyclosporiasis after nearly three decades. “CDC is backing off on one of their best surveillance systems,” said J. Glenn Morris, director of the Emerging Pathogens Institute at the University of Florida, who helped create the program.

FoodNet was designed to follow long-term trends rather than to detect outbreaks in real time, but the cut is of a piece with the destruction of the government’s capacity to respond. The CDC can now meet only about 40 percent of state requests for help with foodborne disease surveillance and response. Even Robert Redfield, who directed the CDC under Trump’s first administration and oversaw its criminal mishandling of the start of the COVID-19 pandemic, told CNN, “I don’t think it’s in our country’s interest to cut these programs back.”

The officials responsible have made no secret of their aims. As the mass firings began in April 2025, the anti-vaccine quack Kennedy proclaimed, “The revolution begins today.” HHS spokesman Andrew Nixon defended the cuts on the grounds that the department “became a bloated bureaucracy” and was closing “wasteful and duplicative entities.” FDA Commissioner Marty Makary pledged to review the layoffs that gutted his agency’s food programs, and never did.

The cyclosporiasis outbreak is the latest expression of a collapse of public health that has unfolded over six years and that the Trump-Kennedy regime has qualitatively accelerated. It began with the ruling class response to COVID-19 in 2020 and the bipartisan embrace, under both Trump and Biden, of “let it rip” and “forever COVID,” which normalized the mass infection and deaths that continue today. It runs through the worst measles epidemic in 35 years, which has produced 2,231 cases this year alone and has put the country on course to lose in November the elimination status it won in 2000. It encompasses the Ebola epidemic in the Congo which is on track to become the worst in history.

The working class can place no confidence in either of the two big business parties, which have jointly presided over the destruction of public health, nor in a profit system that treats human health as an expendable cost. What is required is the reorganization of society on socialist foundations: a public healthcare system funded and staffed to detect and stop outbreaks, the expropriation of the agribusiness and food-processing monopolies, and globally coordinated pathogen surveillance, since the food chain and the parasites that surface in it recognize no borders. The defense of public health, like the defense of science itself, is inseparable from the struggle against the capitalist system and for socialism.

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