Coxiella burnetii in 3 Species of Turtles in the Upper Midwest, United States

Appendix

Q fever has been a nationally reportable disease in the United States since 1999 (1). Since then, cases continue to increase every year, and there is an estimated overall seroprevalence of 3.1% (1). Surveillance and reporting of Q fever are key components of public health education and disease prevention efforts (1). As a zoonotic disease, persons at particular risk for Q fever include farmers, veterinarians, and abattoir workers because they have the highest level of contact with goats, sheep, and cows. However, additional case reports have emerged for persons who do not have these occupations. This fact is particularly concerning for persons who have meningoencephalitis or myocarditis, in whom Q fever can be severe and not self-limiting, as it is in many persons (2). For most persons, the disease does not show symptoms, but some persons might have fever, pneumonia, or hepatitis (2).

The main sources for *Coxiella burnetii* in persons are domestic ruminants, including goats, sheep, and cows; the highest shedding occurs in birth products, followed by urine, feces, and milk (*3*). Infected animals might not show or show clinical signs, including infertility, stillbirth, abortion, and mastitis (*4*). There are many identified reservoirs for *C. burnetii*, including many species of mammals, birds, and arthropods (*4*). Wildlife can constitute a reservoir with documented cases from kangaroo and wallabies in Australia (*5*) and the 3-toed sloth in French Guiana (*6*). Because *C. burnetii* has been isolated from many arthropods, including 40 hard tick species, 14 soft tick species, bed bugs, flies, and mites, these arthropods might play a role in transmission of the infectious agent (*7*).

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