



DATE: June 27, 2025
TO: Healthcare Providers
FROM: Dr. Maggie Park, Public Health Officer

Please distribute to all clinicians and medical staff.

HEALTH ADVISORY
Legionella in Lodi

This advisory is being issued to the healthcare community with a focus on healthcare providers in the City of Lodi.

Situation:

On August 21, 2024, San Joaquin County Public Health Services (SJCPHS) issued a Health Alert, informing healthcare providers that SJCPHS and the California Department of Public Health (CDPH) were investigating 7 cases of Legionnaire's disease among residents of and travelers to the city of Lodi. A total of 8 cases were identified by the end of 2024, and 2 more cases in Lodi have occurred in 2025 thus far. After an investigation, a common exposure source was confirmed for 3 of the cases. A source of exposure has not been identified for the remainder of cases.

Background:

Legionella is a bacteria that is naturally found in freshwater environments and poses a threat when it gets into and grows in human-made water systems, such as shower heads and sink faucets, hot tubs, cooling towers, hot water tanks, decorative fountains, and large buildings with complex water systems.

Legionella does not usually spread from person to person. Exposure occurs when people inhale small water droplets or mist containing Legionella.

Most people exposed to the bacteria do not become ill, but serious infections can occur in people with certain risk factors:

- People 50 years of age and older
- Current and former smokers
- People with chronic lung disease (emphysema and chronic obstructive pulmonary disease)
- People with cancer or weakened immune systems
- People with underlying diseases such as diabetes, kidney failure, liver failure, or heart disease



Clinical Presentation:

Legionnaire's disease is a respiratory infection with symptoms usually beginning 2 to 14 days after exposure (incubation period). Symptoms can range from mild to severe, and most patients require hospitalization. The overall fatality rate is around 10% and can be as high as 25% in those at highest risk.

Symptoms can include:

- Cough
- Shortness of breath
- Fever
- Chills
- Headaches
- Muscle aches
- Nausea
- Vomiting
- Diarrhea
- Confusion

ACTIONS REQUESTED OF CLINICIANS:

- **Consider** Legionnaire's disease in any patient with clinically compatible symptoms
- Indications that warrant testing include:
 - Patients who fail outpatient antibiotic therapy for community-acquired pneumonia
 - Patients with severe pneumonia, and particularly those requiring intensive care
 - Immunocompromised patients with pneumonia
 - Patients with pneumonia who reside in Lodi or have travel history to Lodi
- Collect **urine antigen test** from patients with suspected Legionnaire's disease
- In addition to urinary antigen testing, order **lower respiratory cultures** on selective media such as Buffered Charcoal Yeast Extract (BCYE agar). Lower respiratory tract samples such as sputum or bronchial wash specimens or lung tissue or pleural fluid specimens should be collected before treatment is started. If legionella culture is not available at the clinical laboratory, order nucleic acid amplification testing (e.g., PCR) and retain lower respiratory specimen to be sent to the public health laboratory for culture ID confirmation if the UAT or PCR tests are positive.
- If you suspect a patient has Legionnaire's disease, **immediately notify** the facility infection control program and SJCPHS by calling (209) 468-3822.

Resources:

- CDC <https://www.cdc.gov/legionella/index.html>
- CDPH [https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Legionellosis\(Legionella\).aspx](https://www.cdph.ca.gov/Programs/CID/DCDC/Pages/Legionellosis(Legionella).aspx)