

Family and Consumer Sciences

FSFCS04

Foodborne Illness: Debunking the Myths

Denise Brochetti Assistant Professor -Nutrition Foodborne illness is commonly referred to as "food poisoning." It comes from eating or drinking a food or beverage that is contaminated with a disease-causing bacteria, virus, parasite, toxin or chemical. The Centers for Disease Control and Prevention (CDC) report that approximately 76 million Americans get sick and 5,000 die from it each year. To help prevent foodborne illness, we must be able to separate fact from fiction.

Myth #1 – You can tell when food isn t safe to eat because it looks and smells bad.

Fact: Food can look, smell and taste fresh but still contain harmful microorganisms (pathogens). Microorganisms that cause food to spoil are not the same as pathogens that cause foodborne illness, but food spoilage is a warning sign that conditions may be right for pathogens to grow in food, so throw out spoiled food.

Myth #2 – Foodborne illness comes from something I ate at a restaurant.

Fact: Foodborne illness can happen wherever food is prepared or served. Foodborne disease outbreaks have been linked to food that

been linked to food that has been mishandled in restaurants, home kitchens, picnics, barbecues, cafeterias and church kitchens. Learn how to handle food safely and be willing to make changes in what you do to help prevent foodborne illness.

Myth #3 – Foodborne illness happens quickly, and it is caused by the last food or meal I ate.

Fact: Most often, illness occurs within one to three days after eating the contaminated food, but sometimes it happens within 20 minutes or in as long as six weeks. Therefore, it is difficult to determine which food actually caused the illness. You will have eaten a wide range of food, and any of these foods could have been the cause.

Myth #4 – Foodborne illness is no "big deal. If I get it, I II get over it in a day.

Fact: Foodborne illness can produce a wide range of symptoms, depending on the particular pathogen causing the illness and on the general state of health of the individual infected. Symptoms are often flulike and include nausea, vomiting, diarrhea, abdominal cramps and fatigue. Often, foodborne illness is not lifethreatening, and symptoms will subside within one to three days. Sometimes, symptoms can be serious and can include bloody diarrhea, fever, blurred vision, confusion, chest pain, jaundice (vellowing of skin and eyes), seizures, paralysis and death.

Myth #5 – Only infants and young children get severe cases of foodborne illness.

Fact: Some groups of people are at high risk of long-term complications and death from foodborne illness. In addition to infants and young children, this includes older

Arkansas Is Our Campus

Visit our web site at: https://www.uaex.uada.edu

adults, pregnant women and people with chronic illnesses (for example, diabetes, cancer and HIV/AIDS), because of weakened immune systems that cannot fight off pathogens.

Myth #6 – You can t catch foodborne illness from another person.

Fact: People can spread foodborne illness caused by some pathogens, such as Hepatitis A, a serious form of foodborne illness that affects the liver. Hepatitis A, like some other pathogens, is shed from the body of an infected person through the stool. This pathogen is then spread by a type of transmission known as "fecal-oral transmission." In this case, the pathogen is spread by putting something in the mouth that

has been contaminated with the stool of a person infected with Hepatitis A. This usually involves unclean hands, which is why proper handwashing is critical to controlling the spread of Hepatitis A, as well as other forms of foodborne illness.



Myth #7 – If food is handled properly, it is safe to eat.

Fact: This is not true for some people. The U.S. Department of Agriculture (USDA) recommends that people at high risk for developing foodborne illness not eat the following foods: raw or undercooked meat, poultry or seafood (sushi or ceviche); refrigerated smoked fish; precooked seafood (shrimp, crab); unpasteurized milk; foods containing raw or undercooked eggs (Caesar salad dressing, cookie dough, homemade eggnog); unwashed fresh vegetables; soft cheeses (Camembert, Brie, Feta, Queso Fresco); hot dogs and deli meats that have not been reheated; and unpasteurized, refrigerated pâtés or meat spreads.



Myth #8 – Foodborne illness only affects pregnant women, not their unborn children.

Fact: Pathogens that cause foodborne illness can seriously harm the mother and unborn child, because they can cross the placenta. The infected unborn child can experience a wide range of health problems, even death. Pregnant women need to know the risks and learn how to handle food safely.

What should I do if I think I have foodborne illness?

If you think a food or beverage has made you sick, contact your health care provider, especially if you have a high fever, prolonged vomiting or diarrheal illness for three days or more and sooner if you experience more severe symptoms. Your physician will advise you on the medical treatment you will need for recovery. The only way to know for certain if you have foodborne illness is through laboratory tests and cultures, which your health care provider must order.

As soon as possible, contact your county, city or state health department. This is particularly important if you suspect your illness may be related to food you had eaten in a restaurant, from a grocery store deli or at a community event. When you report the illness, you help health officials identify potential foodborne disease problems, and this will help stop a disease outbreak from spreading.

When you call the health department, be prepared to answer questions, but remember, the information you give will be kept confidential. They will ask you for details on the following: all the food, snacks and beverages you have eaten within the last 72 hours; the symptoms you are experiencing; if you have seen a health care provider; where you had traveled recently; what pets you own; and what meetings you have attended recently.

References

Food Safety for Moms-to-Be. Center for Food Safety and Nutrition, U.S. Food and Drug Administration. August 2005. Retrieved May 2009 from http://www.cfsan.fda.gov.

Food Safety for Older Adults. Food Safety and Inspection Service. U.S. Department of Agriculture. February 2008. Retrieved March 2009 from http://www.fsis.usda.gov.

Kitchen Companion: Your Safe Food Handbook. Food Safety and Inspection Service, U.S. Department of Agriculture. February 2008. Retrieved March 2009 from http://www.fsis.usda.gov.

Reporting a Foodborne Illness – General Public.
Centers for Disease Control and Prevention,
Department of Health and Human Services.
October 2008. Retrieved May 2009 from
http://cdc.gov/foodborneoutbreaks.

Printed by University of Arkansas Cooperative Extension Service Printing Services.

DENISE BROCHETTI, Ph.D., RN, is assistant professor - nutrition, University of Arkansas Division of Agriculture, Little Rock.

Issued in furtherance of Cooperative Extension work, Acts of May 8 and June 30, 1914, in cooperation with the U.S. Department of Agriculture, Director, Cooperative Extension Service, University of Arkansas. The Arkansas Cooperative Extension Service offers its programs to all eligible persons regardless of race, color, national origin, religion, gender, age, disability, marital or veteran status, or any other legally protected status, and is an Affirmative Action/Equal Opportunity Employer.