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Session: 139. Adult Viral Infection
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Background. Norovirus is the leading cause of acute gastroenteritis (AGE) outbreaks in the United States; however, little data exist on the burden of endemic norovirus disease among US adults. Robust estimates of the norovirus disease burden among US adults are needed to inform assessment of potential norovirus vaccines, which are currently in development.

Methods. We conducted active surveillance for AGE at the Michael E. DeBakey VA Medical Center, Houston, Texas, and provided a stool specimen. Among cases, 201 (93%) were male, and 94 (44%) were ≥65 years (15/100,000). Of 22 norovirus positive specimens genotyped, 13 (59%) were associated with rotavirus infection and 132 (14%) had evidence of chronic excretion (132 days). This patient had a hematologic malignancy. Of 7 patients with astrovirus, 48 patients with norovirus, 16 (33%) had evidence of chronic excretion. Overall, 20 (31%) patients additionally tested positive for another gastrointestinal pathogen, most commonly enteropathogenic E. coli and C. difficile.

Conclusion. Norovirus remains common in this immunocompromised patient population, and both sapovirus and astrovirus are present. Additional follow-up in this and other cohorts with new molecular tools will enable more complete description of the prevalence, excretion duration, and clinical features of infection with these enteric viruses.

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1046. Incidence of Norovirus-Associated Acute Gastroenteritis in Four Veteran’s Affairs Medical Center Populations in the United States, 2011–2015
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Background. In the USA, norovirus is an important cause of epidemic acute gastroenteritis (AGE) as well as a leading cause of pediatric AGE. However, the burden of sporadic norovirus disease in US adults has not been well documented. Our objective was to estimate the incidence of outpatient visits and hospitalizations for community-acquired norovirus AGE at four Veteran’s Affairs Medical Centers (VAMCs) and their associated outpatient clinics in Atlanta, GA; Bronx, New York; Houston, TX; and Los Angeles, CA.

Methods. From November 2011 to September 2015, stool specimens collected for clinician-requested diagnostic testing within 7 days of AGE symptom onset and with reported vomiting or diarrhea were tested for norovirus by real-time RT-PCR and positive samples were genotyped by Sanger sequencing. Incidence of norovirus-associated outpatient visits and hospitalizations were calculated by multiplying the prevalence of norovirus among tested specimens by AGE-coded outpatient encounters and inpatient discharges, and dividing by the unique patients served at each VAMC.

Results. 1,620 stool specimens were tested from all 4 sites. Seven percent of outpatient (n = 795) samples (annual range: 3%–10%; range by site: 3%–6%) and 6% of inpatient (n = 825) patients from hospitalized patients tested positive for norovirus (annual range: 3%–8%; range by site: 3%–10%). Forty-four percent of norovirus-positive specimens were typed as GIL4. Seventy-four percent of norovirus-positive specimens were collected between November and April. From 2011 to 2015, outpatient norovirus incidence was 250/100,000 population (annual range: 129 to 426/100,000; range by site: 87 to 428/100,000), and the incidence of norovirus hospitalizations was 28/100,000 population (annual range: 19 to 39/100,000; range by site: 14 to 57/100,000). By age group and setting, the highest incidence was observed in 45- to 64-year-old outpatients (470/100,000 population), and 85+-year-old inpatients (63/100,000 population).

Conclusion. This study provides estimates of the incidence of norovirus AGE outpatient visits and hospitalizations across multiple years among a geographically distributed VA population, highlighting the substantial burden of norovirus in US adults.

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1047. Wu Polyomavirus Associated with Severe Respiratory Failure in Children
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Background. Wu polyomavirus (WUPyV) is a relatively new virus associated with respiratory infections. However, its role is unclear in children with severe