



CDC Health Advisory

Increase in Extensively Drug-Resistant Shigellosis in the United States

March 6, 2023

On February 24, the Centers for Disease Control and Prevention (CDC) issued a health advisory on [extensively drug-resistant \(XDR\) shigellosis](#). The advisory includes important recommendations for clinicians who may see patients with *Shigella* infection, including patients who may be at increased risk of XDR shigellosis such as men who have sex with men (MSM) and persons experiencing homelessness (PEH).

The percentage of shigellosis cases in the U.S. that are XDR is estimated to have increased from 0% in 2015 to 5% in 2022; these cases are resistant to azithromycin, ciprofloxacin, ceftriaxone, trimethoprim-sulfamethoxazole, and ampicillin. In California, multiple strains of XDR *S. sonnei* and *S. flexneri* have been detected. Most individuals infected with *Shigella* do not require antibiotic treatment, but antimicrobial treatment may be indicated to shorten duration of illness or prevent complications in those with more severe infection or who are immunocompromised (including people living with HIV).

Sending stool specimens for culture and antimicrobial susceptibility testing is crucial if using antibiotics for shigellosis, as is monitoring for treatment failure. Take a complete social history and document where the patient resides and their sexual orientation, gender identity, and gender of sex partners. If sexually acquired shigellosis is suspected, consider testing for HIV and STIs, offering PrEP if HIV-negative, and administering mpox vaccination if not yet received. [Counsel patients](#) on how to [prevent spreading](#) *Shigella* to their sex partners and other close contacts.

For more information, see also the February 28 [CDC continuing education presentation](#) for clinicians on XDR shigellosis.