

Congress of the United States
Washington, DC 20515

July 17, 2026

The Honorable Jay Bhattacharya, MD, PhD
Acting Director
Centers for Disease Control and Prevention
1600 Clifton Road
Atlanta, GA 30329

The Honorable Kyle Diamantas, JD
Acting Commissioner
U.S. Food and Drug Administration
10903 New Hampshire Avenue
Silver Spring, MD 20993

Dear Acting Director Bhattacharya and Acting Commissioner Diamantas:

We write as members of Congress from Michigan, with serious concerns regarding the outbreak of cyclosporiasis, a foodborne parasitic infection which has now been detected in at least 34 states and continues to spread without an identified source.¹ While cases have been reported nationwide, Michigan has emerged as the epicenter of the outbreak, with thousands of confirmed illnesses and new cases continuing to be identified each day. The rapid increase in cases, coupled with the Trump Administration's efforts to dismantle our nation's public health infrastructure, raises serious questions about the federal government's ability to effectively detect, investigate, and respond to public health emergencies.

Cyclosporiasis is a foodborne illness that causes frequent diarrhea, along with other symptoms which can be severe, including abdominal pain, nausea, fatigue, vomiting, and dehydration. To the best understanding of experts in foodborne illness, infection can occur when people consume food contaminated with infected human fecal matter. It generally does not spread from person to person, and the incubation period can take days to weeks after exposure, making outbreaks difficult to trace and contain. Furthermore, many individuals never receive diagnostic testing, while others experience mild or no symptoms, meaning numerous infections likely go

¹ [What to know about cyclosporiasis, the intestinal illness hitting the U.S.](#), Jose Hernandez, Allison Aubrey, Joseph Kim. *NPR*.

unreported. As a result, the official case numbers may represent only a fraction of the outbreak's actual size.

Michigan has reported more than 3,700 cases — by far the largest concentration identified anywhere in the country — with reported cases increasing by approximately 20 to 30 percent each day. Michigan records roughly 50 cases of cyclosporiasis annually, meaning the current numbers are extremely alarming. The scale of the current outbreak represents one of the largest foodborne illness investigations the state has undertaken in recent years.

The Michigan Department of Health and Human Services (MDHHS) has been working tirelessly to interview individuals testing positive for cyclosporiasis for common food exposures. Their work has pointed to potential sources of illness, including lettuce and salad greens. However, identifying the contaminated product and preventing additional illnesses requires the full capacity of our nation's public health infrastructure, particularly where supply chains cross state and international borders.

To date, the Centers for Disease Control and Prevention (CDC) and the Food and Drug Administration (FDA) — the two regulatory entities primarily responsible for responding to foodborne illness outbreaks — have yet to identify a specific source responsible for the outbreak, meaning Americans searching for the best available guidance from experts on how to keep themselves and their families safe are left without one reliable, central source for information.² It is more important than ever that Americans receive timely, detailed, and science-based guidance on how to reduce their risk of infection and how to best protect themselves and their families.

While the nature of the parasite is likely a factor in a source not yet being identified, staffing cuts at key agencies like CDC and FDA raise serious questions about a lack of necessary expertise and of the ability to adequately respond to the outbreak. Since Fiscal Year 2024, CDC staffing has reportedly declined by about 27 percent, including staff at the National Center for Emerging and Zoonotic Infectious Diseases (NCEZID), which is responsible for preventing the spread of illnesses like cyclosporiasis.³ Likewise, thousands of employees were fired from the FDA in early 2025, including staff from the Human Foods Program, which oversees food safety at the agency.⁴ These cuts have limited agencies' ability to prevent, track, and respond to this kind of outbreak.

We are also concerned by changes that have weakened the nation's foodborne illness surveillance systems. The Administration has made states use of FoodNet, the Foodborne Diseases Active Surveillance Network, optional for all but two pathogens, limiting yet another

² [Can washing produce help prevent cyclosporiasis? What experts recommend.](#), Erica Sloan. *The Washington Post*.

³ [‘A game of musical chairs’: CDC employees say temporary reassignments take priority over hiring after major staffing cuts](#), Jory Heckman. *Federal News Network*.

⁴ [Trump purge at FDA and USDA triggers food safety ‘brain drain’](#), Timothy Inklebarger. *Food Navigator*.

tool we have historically relied on. FoodNet has long provided critical data to help investigators identify, monitor, and track cases of foodborne illness caused by eight specific pathogens including cyclospora. Experts have warned that the loss of this data could hinder health officials' ability to track cases and identify trends that could point to a particular source.⁵

Given the seriousness of this outbreak and the concerns surrounding the ability of CDC and FDA to manage this ongoing outbreak with limited resources, we respectfully request your response to the following questions by July 24, 2026.

1. What is CDC's current assessment of the scope of the ongoing cyclosporiasis outbreak, including the total number of confirmed and suspected cases by state?
 - a. Can you explain what factors may be limiting the ability to obtain an accurate case count?
2. What investigative steps have CDC and FDA taken to identify the source of this outbreak? Has the CDC and FDA met with the Michigan Department of Health and Human Services regarding this outbreak?
3. Do CDC and FDA agree with the assessment of Michigan health officials identifying lettuce or salad greens as the possible source of illness?
4. What barriers are preventing CDC and FDA from acting on leads identified by Michigan investigators?
5. When do CDC and FDA anticipate being able to identify the source of this outbreak?
6. How many CDC and FDA personnel are currently assigned to this investigation, and how does that compare to staffing levels for comparable foodborne illness outbreaks over the past five years?
 - a. Do you plan to hire additional staff to manage and investigate the source of this outbreak?
7. How has making states' participation in FoodNet optional for cyclosporiasis surveillance affected CDC's ability to detect, monitor, and investigate the current outbreak?

⁵ [Not just produce. Where can 'explosive diarrhea' bug hide in Ohio?](#) Mary Walrath-Holdridge, Chad Murphy. *The Columbus Dispatch*.

- a. Is there any plan for CDC to recommend restoring mandatory participation in FoodNet? If not, why?
8. Can you detail the coordination between CDC, FDA, state health departments, and other partners to identify the source of contamination?
9. What steps is CDC advising the public to take to keep themselves safe? Please share the latest food safety guidance that has been issued.
10. What efforts are CDC and FDA taking to spread awareness and educate the public on the risks of illness and preventative measures?

The people of Michigan — and all Americans — deserve confidence that the food they purchase and consume is safe. They also deserve a strong federal public health system that works in close partnership with state and local health departments to rapidly identify foodborne threats, provide clear and timely guidance to the public, and prevent additional illnesses. We appreciate your prompt attention to this matter and look forward to your response.

Sincerely,



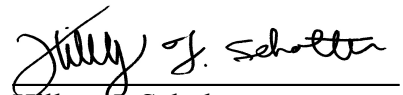
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