

WEB TABLE I EPIDEMIOLOGY OF CRYPTOSPORIDIUM IN ACUTE DIARRHEA FROM STUDIES WITH NON-DIARRHEAL CONTROLS

Author, year [Ref]	Place of study	Study population	Detection methods	Positivity rates	Associated risk	Clinical associates/Remarks
<i>Hospital-based studies</i>						
Breurec, <i>et al.</i> 2015 [10]	Bangui, Central African republic	Age: < 5yr. Cases- 333 Controls 333	Microscopy followed by multiplex PCR	Cases- 42/333 (12.6) Controls- 9/333 (2.7) Attributable fraction= 10.5 (7.3–11.7)	Young age: Infants adjusted OR= 4.6 (1.8–11.7), toddlers OR= 2.9 (0.6–14.8) , Rainy season	
Nhampossa, <i>et al.</i> 2015 [11]	Rural Southern Mozambique	Age: <5 yr Cases- 784 Controls 1545	Immunoassays	a) 0-11 m- Case- 84/431 (20%), controls 86/861 (10%). b) 12-23 m- Case 44/233 (19%), control 46/502 (9%). c) 24-59 m- Case 11/120 (9%) controls 18/232 (8%)	Infancy: adjusted OR 15.26 (11.96–18.56),	Incidence rate was 2.10 (1.45–2.76) per 100 child years at risk
Tellivik, <i>et al.</i> 2015 [12]	Dar es Salaam, Tanzania	Age <2 yr Case- 701 Controls-588	Multiplex real-time PCR	Cases-16.3%, Controls- 3.1% OR = 6.2; 95% CI: 3.7-10.4; P < 0.001;	Immunodeficiency- HIV positive 24.2, HIV negative 3.9%; OR = 7.9; 95% CI: 3.1–20.5; P < 0.001. Stunting- OR = 2.12; 95% CI: 1.2–3.8, P = 0.011; Rainy season: OR = 2.41; 95% CI: 1.5–3.8, P < 0.001	<i>C. hominis</i> in 84.7% and <i>C. parvum</i> in 7.6%
Vadlamudi, <i>et al.</i> 2013 [13]	Birmingham, Alabama Retrospective 7 year cohort	Age: 3-17 year with inflammatory bowel disease- 7 positive cryptosporidium, 21 negative for infection	Stool rapid immunoassay test with immunocard STAT!®	7/170 (4.1%)	No differences in baseline characteristics	5/7 had severe dehydration 3/5 treated with NTZ recovered within 3 days
Wang, <i>et al.</i> 2013 [14]	China	Age- 1m-18yr Cases- 78 Controls- 499	Not mentioned	Cases-51.4% Controls- 2 %	Not evaluated	Positive had more co-infection than controls with <i>Giardia</i> , <i>E. bieneusi</i> and <i>C. difficile</i>

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Amatya, <i>et al.</i> 2011 [15]	Nepal	Age: <15 yr Cases-863 Controls-100	Modified Ziehl Neelsen method	Cases-4.1% Controls- 0%	Age- 6-10 yr	
Opintan, <i>et al.</i> 2010 [6]	Accra, Ghana. Cross sectional <5 years	Age: 0-60 m Cases- 170 (145 AD and 13 PD), Controls-104	Single locus Quantitative qPCR on fecal DNA	Cases- 14/170 (8.2%), Controls- 1/104 (0.9%), OR = 9.244 [95% CI 1.197– 71.4], <i>P</i> = 0.011)	Malnutrition WAZ<-1 OR- 9.244 (1.197–71.371); <i>P</i> =0.011	NA NA
Haque, <i>et al.</i> 2009 [16]	Dhaka hospital Bangladesh	Age: ≤14 yr cases- 1088 ; Controls- 1623	Antigen detection kits, real-time PCR assay,	Cases- 94/2039 (4.6%);controls- 41/1623 (2.5%)	Young age <12m age (57/1088 cases vs 14/485 controls; <i>p</i> =0.037).	Cases less likely to have abdominal pain, than control subjects (15% vs. 37%; <i>P</i> <.001) <i>C.hominis</i> most frequent (61%), followed by <i>C.parvum</i> ,
Abu-Alrub, <i>et al.</i> 2007 [17]	West bank, Palestine Prospective, hospital based	Age: 1m-15 yr 760 cases, 62 ND controls	Modified acid fast staining	Cases- 11.6% Controls- 3.2%	Young age: Incidence 14.4% <5 yr, 7.7% 5 to 10 yr, 5.9% 11 to 15 yr. Rural area or refugee camps than urban area	NA
Mirzaei M, 2007 [18]	City of Shiraz, Fars Province, Iran	Children <15 yr- Cases-51; controls- 38	Ziehl-Neelsen acid-fast staining.	Cases- 18/51 (35.3%) Controls (2.6%)	NA	
Mukhopadhyaya, <i>et al.</i> 2007 [19]	Western Nepal. Prospective (6 years).	Age: Below 5 years AD-155, PD-204, ND control-100	Modified acid fast staining	AD- nil, PD- 2/204 (0.1%), controls- nil	Lack of breastfeeding for PD. No relation with water source/ sanitary practices	
Sanchez-Vega, <i>et al.</i> 2006 [20]	Mexico	Age < 1 year Cases-100 Controls-100	Modified Kinyoun acid- fast technique, and observed by light microscopy at 100×, 400×,1,000×.	Cases- 18% Controls-0%	Incidence higher in males 77.78%. Sanitation and hygiene was adequate	All cases had fever and abdominal distension, none had vomiting and dehydration
Olesen, <i>et al.</i> 2005 [21]	Stool collection centre, Denmark. Prospective	Age: 0-5 years. Cases-424 Controls-870	Ziehl-Neelsen acid fast staining	Cases- 1.7% (6/351), Controls-0%	NA	NA

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Roy, <i>et al.</i> 2004 [22]	Foodborne Diseases Active Surveillance Network (foodnet) across seven states in US	Age <6m->65 yr. *Cases (positive cryptosporidiosis) - 282 ND controls-490	Acid-fast staining, direct fluorescent antibody staining, or commercial ELISA	NA	Risk- international travel OR- 7.7 (2.7 to 22.0), contact with cattle (OR = 3.5; 95% CI = 1.8 to 6.8), contact with persons >2 to 11 years of age with diarrhea (OR = 3.0; 95% CI = 1.5 to 6.2), and freshwater swimming (OR = 1.9; 95% CI = 1.049 to 3.5). Eating raw vegetables was protective (OR = 0.5; 95% CI = 0.3 to 0.7).	
Adjei, <i>et al.</i> 2004 [23]	Accra, Ghana	Age <5yr 277 with AD and 77 ND controls	The modified Ziehl Neelson staining procedure	Cases-- 27.8% Controls- 15.6%	Age- 12-24m. Weight for age deficit >25%. No role of gender, water supply, history of antibiotic therapy or contact with animal	Most common symptom- fever (71-75%), nausea (47% cases)
Khan, <i>et al.</i> 2004 [24]	Dhaka, Bangladesh	Age: <5 yr *Cases- 46 positive for cryptosporidium, 46 controls with negative growth	Modified Acid-fast staining	Prevalence- 47/1672 (2.8%) in stool samples.	No risk with age, gender, breastfeeding, malnutrition (WAZ, HAZ or WHZ), pulse rate, history of contact with animals, water supply	Watery diarrhea (96%) and vomiting (57%) were most common features. Only 11% dehydrated and 13% had fever. PD occurrence was higher in Cases than controls
Al Braiken, <i>et al.</i> 2003 [25]	Jeddah, Saudi Arabia	Age: <5yr Cases-63 Controls-190	Modified Acid-fast staining	Cases-32%, controls-4.7%; P<0.001	No risk with age or gender.	
Nunez, <i>et al.</i> 2003 [26]	Havana City, Cuba	Age: Pediatric age Cases-113 Controls- 288	Modified Ziehl-Neelsen techniques	Cases- 13/113 (11.5%) nil in controls	No difference with age or gender.	Those with cryptosporidial diarrhea had longer diarrhea duration & higher risk for PD than those with isolated cyclospora ($p<0.01$)

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Tumwine, <i>et al.</i> 2003 [27]	Uganda	Age: 0-60m Cases (AD/ PD)- 1779 Controls-667	modified acid fast staining and PCR-RFLP for <i>C.parvum</i> only.	Cases- 444 (25.0%) Controls- 57 (8.5%); ($r^2=80.2$, $P = 0.0001$)	Higher if low maternal education. Risk if, wasting (OR 1.59, 1.27–1.99), underweight (OR 1.42 1, 1.14–1.78), stunting (OR 1.31 1.04–1.64) No difference with gender, or if breastfed
Kirkpatrick, <i>et al.</i> 2002 [28]	Port-au-Prince, Haiti. Prospective	Age: <18 months in 3 groups. 17 with cryptosporidial diarrhea, 17 with non-cryptosporidial diarrhea, 15 as healthy controls	Ziehl-Nielsen modified acid-fast Stain and Gram stain,	Cases- 28/60 (46%)	Lack of breast feeding, low HAZ ($p=0.03$) low WAZ ($p=0.01$), vitamin A deficiency ($p=0.04$). No association with low WHZ
Bern, <i>et al.</i> 2000 [29]	Guatemala Stool surveillance	Age: 3 months-19 years Cases- 697 Controls- 2709	Modified AFB staining, ultraviolet epifluorescence. Direct IFA with <i>Cryptosporidium</i> -specific OW50 monoclonal antibody.	Cases- 7.1% Controls- 5.3% (p -NS)	Young age <2yr; $p=0.03$). Seasonality-rainy season.
Albert, <i>et al.</i> 1999 [30]	Dhaka, Bangladesh	Age <5 yr Cases- 814 with age matched ND controls.	Modified acid fast staining	Cases- 11(1.4%) Controls-3(0.4%) ; $p=0.03$	Anthropometry comparable between two groups
Cegielski, <i>et al.</i> 1999 [31]	Tanzania.	Age: 15-60 months Cases- 55 with AD, 59 with chronic diarrhea, 20 controls	Kinyoun and auramine-rhodamine stains and direct fluorescent monoclonal antibodies	Cases:AD- 7/55 (13%), Chronic diarrhea 5/59 (8%) Controls- Nil	Young age ($p0.4$) Malnutrition Seropositivity- No relation Environmental hygiene- no relation
Iqbal, <i>et al.</i> 1999 [32]	Rawalpindi, Pakistan	Aged <5yr Cases-475 Controls-150	For <i>C.parvum</i> only-modified Ziehl-Neelsen stain	Cases- 10.3%; controls-3.3%	Young age: 19–24 months of age (21.8% cases and 10% controls). No association with gender, Sociodemographic Information, drinking water supply, and contact with domestic animals

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Katsumata, <i>et al.</i> 1998 [33]	Surbaya, Indonesia-hospital and community based	Age: 0 to ≤60 mo <i>Hospital based-</i> Cases- 917 AD Controls-1043 <i>Community-</i> Cases- 257 AD Control- 4111	Phase-contrast Microscopy at 6003 magnification followed by Kinyoun staining	<i>Hospital based-</i> cases- 2.8% Controls- 1.4% <i>Community:</i> Cases-8.2% Controls- 0.7%	Young Age <2 years (OR-0.95, 0.89-0.99), Rainy season (OR-10.65, 1.38-82.17), contact with cats (7.05, 3.61-13.76), overcrowding (OR-1.46,1.19-1.79). No relation with gender, drinking water supply, bathing in public bath	NA
Chacin Bonilla, <i>et al.</i> 1997 [34]	Maracaibo, Zulia State, Venezuela.	Age:0-60 mo Cases- 310 Controls-150	Modified Ziehl-Neelsen stain	Cases-11.2% Controls- 6%	No age differences or difference in malnutrition prevalence. No effect of breastfeeding	Duration of AD 5-16 days. Dehydration seen in 91.2% positive cases. Mostly stools were watery
<i>(b) Community-based studies</i>						
Mills, <i>et al.</i> 2015 [35]	Multicentric- 8 sites - Dhaka, Bangladesh; Fortaleza, Brazil; Vellore,India; Bhaktapur, Nepal; Loreto, Peru; Naushero Feroze, Pakistan; Venda, South Africa; and Haydom, Tanzania	Age: 17 day till 24 months Prospective 2145 children: 7318 diarrhoeal and 24 310 non-diarrhoeal stools	Enzyme immunoassay	Attributable fraction - 2.0 (1.3-2.6) in <12 months; highest; and 3.8% (2.8-4.7)in 12-24 months	Maximum isolation of cryptosporidium coincided with peak diarrheal season at each site	
Bodhidatta, <i>et al.</i> 2010 [36]	Western Thailand. Prospective	Age-3m-5 year old Cases-236, Controls-236	ELISA based kits	Cases- 4/207 (2%) Controls-12/227 (5%); p-NS	NA	NA

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Samie , <i>et al.</i> 2009 [37]	Vhembe district, South Africa Cross sectional	Age 5-15 years. Case- 39 Controls- 256	The modified Ziehl Neelson staining procedure	Cases- 17.9% Controls- 14.4% ; P=0.56	NA	NA
Wongstitwilairoong , <i>et al.</i> 2007 [38]	Sangkhlaburi, Thailand. Prospective	Age:3m- 5year 236 cases of diarrhea and 236 ND controls	DMSO-MAFB staining and prospect <i>Giardia/Cryptosporidium</i> Microplate Assay, an enzyme immunoassay	Detection- 0.8% cases vs 2.5% controls	No gender differences	Only 4 detected by smear and additional 12 by EIA assay
Robertson , <i>et al.</i> 2002 [39]	Melbourne and Adelaide, Australia.	Aged 0-18 years *Cases (positive cryptosporidiosis) -335 Control (healthy)-1331	Detection confirmed by accredited Pathology laboratory	NA	Swimming in public pool OR- 2.7 (1.9-3.8), contact with <6 yr old with diarrhea OR-7.4 (4.0-13.8), drinking unboiled water OR-3.1 (1.5-6.5), calf contact OR- 5.1 (1.5-17.3)	NA
Peuch , <i>et al.</i> 2001 [40]	New South Wales, Australia. Telephonic interview	Age: < 15 years. Cases- 100 Controls-200	NA	NA	Risk if swimming in untreated water 4.8 (1.1-20.3) or public pool 2.7 (1.4-5.1). Protective-bottled water 0.4 (0.2-0.9) No difference with gender, childcare contact, contact with pets.	Abdominal cramps frequent in cases.
Newman , <i>et al.</i> 1999 [41]	Fortaleza, Northeastern Brazil Prospective 4 year cohort	Age: Birth till 4 years. Total 1054 stool samples from 189 children	Modified Acid-fast and auramine stains	Cases: AD- 8.4%, PD- 16.5%, Control- 4%	Low B.wt, overcrowding. Malnutrition, age or gender- No increased risk	Vomiting, mild fever common. Dehydration rare 15 cases of recurrent cryptosporidium infection.
Nath , <i>et al.</i> 1999 [42]	Sunderpur, Varanasi	Age: < 5yr Cases- 607 Controls- 529	Safranin-methylene blue stain.	Cases- 23/607 (3.8%), Controls- 9/529 (1.7%)	Age: 49-60m and 13-24m. No gender risk.	Majority (63.3%) were mucoid stools. None positive for RBC or WBC
Agnew , <i>et al.</i> 1998 [43]	Fortaleza, Brazil.	Age: 3-27 months. Total 154: 43 Cases: positive cryptosporidium,	Modified acid-fast and auramine stains	Cases: 43/154 (27.9%) Controls: NA	Young age <1 yr (p<0.05). Lower HAZ (p<0.01)	Mean duration of cryptosporidial diarrhea 12.3± 2.0 days. Significant lower

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Checkley, <i>et al.</i> 1995 [44]	Lima, Peru. Prospective cohort over 2 years.	207 children aged 0-3 months	Light microscopy followed by both acid-fast and monoclonal Antibody fluorescent- labeled stains	Detection rate 45% (94/207); 63% in asymptomatic infection.	Higher risk of asymptomatic infection in 0-5 months old	Weight gain in symptomatic infection - 338 gm less; asymptomatic infection- 154gm less than those without diarrhea and not infected.
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IFA- Immunofluorescence Assay, qPCR- real time polymerase chain reaction, PCR-RFLP- Polymerase chain reaction- restriction fragment length polymorphism, ELISA- enzyme-linked immunosorbent assay, HAZ- Height for Age Z score, WAZ- weight for age Z score, AD- Acute diarrhea, ND- Non-diarrhea, PD- Persistent diarrhea.