

Post Q Fever Fatigue Syndrome

Possible even in the case of a mild course of the disease

After the acute phase of Q fever persisting clinical symptoms occur in up to 40 % of cases. Patients also suffer from impairments of quality of life, lasting 12-24 months. The following ailments can occur:

Most frequent symptoms:

- Fatigue
- Significant restrictions in carrying out everyday activities of daily living
- Lack of concentration
- Muscle aches
- Night sweats
- Also, the previous level of performance and working is not achieved after one year

Therapeutically, Post Q Fever Fatigue Syndrome is a challenge, because the illness cannot be influenced by administration of antibiotics. Therefore, psychosomatic and behavioural approaches to treat this condition are recommended.

After an acute Q fever infection always bear in mind the possibility of Post Q Fever Fatigue Syndrome.

Further Information Q-GAPS

Q-Fever **Ger**mA**n** Interdisciplinary **P**rogram for **Re**Search

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Contact Q Fever Infections

Please contact your national or local health department or the relevant reference laboratory.

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Q Fever

More than a Flu



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**Information
for the General Public
on Q Fever in Humans**



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What is Q Fever?

Q fever is a disease caused by the bacterium *Coxiella (C.) burnetii*. Humans as well as animals can get ill from Q fever (so-called zoonosis).

In Germany, humans mainly get infected by the pathogen via infected sheep or goats. Cattle, cats and other species are less frequently the source of Q fever infections in humans.

Infected animals shed *C. burnetii* in large quantities especially when giving birth or during abortion. Despite shedding the pathogen sheep and goats do not always show signs for an infection.

Humans can get easily infected by inhaling dust particles containing bacteria. *C. burnetii* is spread by the wind, therefore direct contact with an infected animal is not necessarily required for transmission.



Humans can be easily infected by inhaling dust containing the pathogen.

Acute Q Fever

After an incubation period of 1 – 3 weeks about 40 % of infected people show clinical symptoms, with the infection being asymptomatic in all other cases (60 %).

Often flu-like symptoms like:

- Fever
- Aching limbs
- Chills
- Retroorbital headache (behind the eyes)

Rarely:

- Pneumonia
- Inflammation of liver

Acute Q Fever is frequently asymptomatic/with minor symptoms. Well treatable with antibiotics. Bear in mind risk groups and the possibility of chronic forms.

Should you or your family members show any ailments mentioned above, contact your general practitioner or the local health authorities (bear in mind **risk groups**).

Q fever can be detected by means of a blood test.

When Q fever is detected the disease can be targeted effectively by antibiotics.

For further information see www.q.fever.info or write to info@q-gaps.de

Chronical Q Fever

After 6 months up to 10 years an acute *C. burnetii* infection can lead to chronical Q fever in one percent of cases. Chronical disease mostly requires therapy with antibiotics for several years and mortality is associated with a high complication rate of up to 40 % when not treated.

Typical signs of chronification are:

Frequently:

- Endocarditis

Rarely:

- Inflammation of liver

Risk groups

Due to their profession there is a particular risk of being infected by *C. burnetii* for people being close to sheep, goats, cattle or materials of these animals.

For pregnant women an acute infection and chronic Q fever can increase the risk of still birth or premature birth as well low birth weight. A transmission of the pathogen to the foetus in the womb resulting in long term effects for the child has not been described, as yet.

Patients with pre-existing cardiovascular diseases or severe immune suppression (suppression of the body's own defence system) show a significantly increased risk for a transition to chronic *C. burnetii* infection.

Diagnose Q fever at an early stage and treat it to prevent long-term effects.