

# DIPHTHERIA

## Case Definition

### Confirmed Case:

Clinical illness or systemic manifestations compatible with diphtheria in a person with an upper respiratory tract infection or infection at another site (e.g. wound, cutaneous) PLUS at least one of the following:

- Laboratory confirmation of infection:  
Isolation of *Corynebacterium diphtheriae* with confirmation of toxin from an appropriate clinical specimen, including the exudative membrane.  
**OR**
- Isolation of other toxigenic *Corynebacterium* species (*C. ulcerans* or *C. pseudotuberculosis*) from an appropriate clinical specimen, including the exudative membrane.  
**OR**
- Histopathologic diagnosis of diphtheria.  
**OR**
- Epidemiologic link (contact within 2 weeks prior to onset of symptoms) to a laboratory-confirmed case.

## Clinical Evidence

Characterized as an upper respiratory tract infection (nasopharyngitis, laryngitis or tonsillitis) with or without an adherent nasal, tonsillar, pharyngeal and/or laryngeal membrane plus at least one of the following:

- Gradually increasing stridor.
- Cardiac (myocarditis) and/or neurologic involvement (motor and/or sensory palsies) 1-6 weeks after onset.
- Death, with no known cause.

## Reporting Requirements

- Report confirmed cases **immediately** to DHW Surveillance Team.
- Enter into Panorama.
- Select appropriate initial staging option in the “staging” field in Panorama
  - Update the staging field if/when new information becomes available

## Additional Forms

None.

## Data Entry

Complete data entry in Panorama.