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| Communicable Diseases Network Australia logo | DiphtheriaAustralian national notifiable diseases case definition |

This document contains the surveillance case definition for diphtheria, which is nationally notifiable within Australia. State and territory health departments use this definition to decide whether to notify the Australian Government Department of Health and Aged Care of a case.

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| Version | Status | Last reviewed | Implementation date |
| 2.0 | In Laboratory definitive evidence, added ‘from site of clinical evidence’. In Clinical evidence – confirmed case changed to ‘Clinical evidence – confirmed case’. Replaced ‘Pharyngitis and/or laryngitis (with or without a membrane) OR Toxic (cardiac or neurological symptoms’ with ‘Upper respiratory tract infection OR Skin lesion’.In Laboratory suggestive evidence, added “from a respiratory tract specimen (toxin production unknown)’Added ‘Clinical evidence – probable caseUpper respiratory tract infection with an adherent membrane of the nose, pharynx, tonsils or larynx’ | April 2016 | 1 January 2017 |
| 1.1 | Added at the end of Confirmed case “AND clinical evidence” | April 2013 | 1 July 2013 |
| 1.0 | Initial CDNA case definition | 2004 | 2004 |

Reporting

Both **confirmed cases** and **probable cases** should be notified.

Confirmed case

A confirmed case requires **laboratory definitive evidence** and **clinical evidence**.

Laboratory definitive evidence

Isolation of toxigenic\* *Corynebacterium diphtheriae*or toxigenic\* *C. ulcerans* from site of clinical evidence*.*

Clinical evidence – confirmed case

* Upper respiratory tract infection

OR

* Skin lesion

Probable case

A probable case requires:

* **Laboratory suggestive evidence** AND **clinical evidence**

OR

* **Clinical evidence** AND **epidemiological evidence.**

Laboratory suggestive evidence

Isolation of *C. diphtheriae* or *C. ulcerans* from a respiratory tract specimen (toxin production unknown).

Clinical evidence - probable case

Upper respiratory tract infection with an adherent membrane of the nose, pharynx, tonsils or larynx

Epidemiological evidence

An epidemiological link is established when there is:

Contact between two people involving a plausible mode of transmission at a time when:

1. one of them is likely to be infectious (usually 2 weeks or less and seldom more than 4 weeks after onset of symptoms)

AND

1. the other has an illness which starts within approximately 2-5 days after this contact

AND

At least one case in the chain of epidemiologically linked cases (which may involve many cases) is laboratory conﬁrmed.

\*as indicated by detection of toxin gene by nucleic acid testing