

Diphtheria Fact Sheet

1. **What is Diphtheria?** - Diphtheria is an acute bacterial disease caused by toxin-producing strains of *Corynebacterium diphtheriae* that usually affects the tonsils, throat, nose or skin. It is extremely rare in the United States. There have been only three cases of Diphtheria reported in Pennsylvania since 1980.
2. **What are the symptoms of Diphtheria?** - There are two types of Diphtheria. One type involves the nose and throat, and the other involves the skin.
 - a. Respiratory Diphtheria presents as a sore throat with low-grade fever and an adherent membrane of the tonsils, pharynx, or nose. Neck swelling is usually present in severe disease.
 - b. Cutaneous Diphtheria occurs as infected skin lesions without any special visible characteristics.
3. **Who is a most risk of becoming infected?** Diphtheria occurs more frequently in parts of the world where vaccination levels are low. It remains a serious disease throughout much of the world. Most life-threatening cases occur in unvaccinated or inadequately immunized persons.
 - a. Travelers to areas where the disease is present are at increased risk for exposure to Diphtheria when travel is for extended periods, when there is contact with children, or when conditions are crowded or foster sharing of respiratory secretions.
 - b. Children traveling to countries where the risk of Diphtheria is high should be vaccinated according to the Recommended Childhood Immunization Schedule.
4. **How is Diphtheria spread?** - Diphtheria is transmitted to others through close contact with discharge from an infected person's nose, throat, eyes and skin lesions. Diphtheria is most common where people live in crowded conditions.
5. **How soon do symptoms appear?** - Symptoms usually appear two to four days after infection, with a range of one to ten days
6. **What are the complications of Diphtheria?** – In respiratory Diphtheria, heart muscle and nerve inflammation and airway obstruction are common complications. Death occurs in 5%-10% of cases. Complications and deaths are much less frequent with the skin form.
7. **When and for how long is a person able to spread Diphtheria?** - People who are infected with Diphtheria are contagious for up to two weeks, and rarely for four weeks or longer. If the patient is treated with appropriate antibiotics, the contagious period can be limited to less than four days.

8. **Does past infection with Diphtheria make a person immune?** - No, recovery from Diphtheria is not followed by lasting immunity.

9. **Is there a vaccine for Diphtheria?**
 - a. In children, Diphtheria vaccine is usually combined with tetanus vaccine and acellular pertussis vaccine to form a triple vaccine known as DTaP. This vaccine should be given at two, four, six and 15-18 months of age, and between four and six years of age. A booster shot is recommended every 10 years.
 - b. In 2005, a new combination tetanus, Diphtheria and acellular pertussis vaccine (Tdap) was approved for use in adolescents and adults. Tdap is recommended for use in all 11-12 year olds.
 - c. In adults a Diphtheria-containing vaccine should be given every 10 years to maintain immunity. The next one of these doses should be Tdap if it has not been given previously..
 - d. Tdap is recommended for all pregnant women during the third trimester or late in the second trimester to protect the newborn from pertussis (whooping cough).

10. **How can Diphtheria be prevented?** - The single most effective control measure is maintaining the highest possible level of immunization in the community. Travelers who are recommended to have the vaccine for travel to high risk areas require a booster dose every ten years if a primary course has previously been given. Other methods of control include prompt treatment of cases and a community surveillance program.

11. **What is the treatment for Diphtheria?** - Certain antibiotics, such as penicillin and erythromycin, can be prescribed for the treatment of Diphtheria. A Diphtheria antitoxin is also used for treatment.

12. **What can be the effect of not being treated for Diphtheria?** - If Diphtheria goes untreated, serious complications such as paralysis, heart failure and blood disorders may occur. Death occurs in approximately 5 to 10 percent of all cases.

13. **Should people who have been around a person infected with Diphtheria be treated?** - People who live in the same household with a person with Diphtheria and people who have close contact with a Diphtheria patient should receive antibiotics to prevent disease. These people should be tested for Diphtheria and examined every day for 7 days for signs of disease. Also, some may need to be immunized with Diphtheria vaccine.

14. **For more information about Diphtheria:**
http://www.cdc.gov/ncidod/dbmd/diseaseinfo/diphtheria_t.htm

This fact sheet provides general information. Please contact your physician for specific clinical information.