

Botulism

Provider Information Sheet

Pre-formed bacterial toxin

Unique Epidemiological Characteristics

- Natural reservoir for the bacteria is soil
- A newly reported case should be urgently investigated considering:
 - Foodborne (intentional or unintentional)
 - Wound
 - Aerosol (intentional)
- Incubation: 12-72 hours; sometimes longer
- No person-to-person transmission
- Mortality: very high (without therapy) due to respiratory muscle paralysis - *Dire emergency*
- Environmental:
 - Aerosolized toxin decays at about 1-4% per minute - not environmentally stable
 - Foods can continue to be a source as long as they are in circulation
- Prophylaxis - not available
- Treatment - antitoxin + artificial respiration - effective if initiated early

Lab confirmation

- Virginia State Health Department
- Implications: *Use a clinical case definition early in the investigation: diplopia, dysarthria, dysphonia, dysphagia*

Infectious Disease Epidemiology Program

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Public Information Sheet



Employee Health Considerations

- Exposed employees should be placed under surveillance for development of symptoms
- Standard precautions for work with affected individuals

Lifesaving interventions - in order:

Recognition / reporting / case finding + early and appropriate therapy

- Collect and analyze risk information to identify source AND
- Remove source (e.g., food) from the environment AND
- Identify the exposed population to be placed under surveillance.

Training considerations

- Physicians: recognition / treatment / reporting
- ICPs: reporting, active surveillance procedures
- Labs: procedure for referral of specimens
- Local health departments, regional epidemiologists: investigation
- IDEP / DSDC / BPH: employee health / investigation / priorities for control
- Environmental Health: sampling of foods and other environmental specimens

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