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** NOTICE: This health alert provides written guidance for health care professionals and others who may need to take action to prevent or control a notifiable condition. It is not intended to provide guidance for the general public.*

Cutaneous Diphtheria Increase in Thurston County

Actions Requested:

- Be aware of the uptick in Cutaneous Diphtheria reported in Thurston County, specifically affecting our houseless population.
- Consider in patients with compatible clinical presentation
 - Scaling rash or ulcers
 - Presence of chronic skin lesions
 - Skin wounds may be painful, swollen and reddened
- Take a history for risk factors for Diphtheria exposure in patients with compatible clinical presentation.
 - Incubation period: 1-10 days
 - Risk factors: overcrowded or unsanitary living environment, poor hygiene, travel, lack of immunization, contact with a confirmed case.
- Gather information regarding international travel and potential household contacts including shelter or encampment contacts for those experiencing houselessness if possible. Close contacts of confirmed cases are recommended to receive a diphtheria containing vaccine if they are not up to date. Close contacts of individuals with toxigenic *C. diphtheriae* need to be screened for respiratory diphtheria.
- All positive specimens should be forwarded to the Washington State Public Health Laboratory for confirmation and toxigenicity testing.
- Positive diphtheria culture results are immediately notifiable. Contact Thurston County Public Health and Social Services for positive cases.
 - Monday – Friday (8am-5pm) call the Communicable Disease Reporting Line at 360-786-5470
 - Fax case information to 360-867-2601
 - If you would like to speak to a member of the Communicable Disease Team, call 360-867-2610.
 - For weekend reporting call the afterhours line at 1-800-986-9050.

Background:

Although diphtheria is rare in the United States, cutaneous diphtheria due to nontoxigenic strains is known to occur, particularly among homeless persons. Transmission can occur through contact with discharge from skin lesions, or articles soiled with discharge from lesions of an infected person. Skin infections with *C. diphtheriae* are common in tropical climates, environments of poverty, poor hygiene, and overcrowding. In Seattle, Washington from 1972-1982 there were 3 outbreaks of cutaneous

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diphtheria, the first was due to a toxigenic strain while those following were due to nontoxigenic strains. Disease among vaccinated individuals is usually mild, with fewer complications.

Resources:

Diphtheria Information:

- Diphtheria| Centers for Disease Control and Prevention:
<https://www.cdc.gov/vaccines/pubs/surv-manual/chpt01-dip.html>
- Diphtheria| Centers for Disease Control and Prevention:
<https://www.cdc.gov/vaccines/pubs/pinkbook/dip.html>
- Diphtheria | Washington State Department of Health: <https://doh.wa.gov/you-and-your-family/illness-and-disease-z/diphtheria>
- Diphtheria Notifiable Condition Guideline| Washington State Department of Health: <https://doh.wa.gov/sites/default/files/legacy/Documents/5100/420-052-Guideline-Diphtheria.pdf?uid=64516cc80668f>

Situational Awareness:

- *HAN Alert- Risk for new Mpox Cases:*

A cluster of 12 confirmed cases of mpox in Chicago have occurred from April 17-May 5th, 2023. All cases were symptomatic, and men. Of the cases, 69% had received 2 JYNNEOS vaccine doses. None of the cases have been hospitalized. CDC has established that new cases among previously vaccinated people are expected to occur, and vaccine-induced immunity is not complete. However, vaccination is one of the most important prevention methods and patients may experience less severe symptoms if vaccinated. Overall, Spring and Summer season has introduced a risk for resurgence of cases as social events increase. There is a potential for new clusters and outbreaks of mpox to occur. Please review the links below for resources on clinical evaluation, treatment, vaccination, and testing.

- Quick Clinical Guidance CDC: <https://www.cdc.gov/poxvirus/mpox/clinicians/clinical-guidance-quick-reference.html>
- Considerations in People with HIV: <https://www.cdc.gov/poxvirus/mpox/clinicians/people-with-HIV.html>
- Vaccination: <https://www.cdc.gov/poxvirus/mpox/clinicians/vaccines/vaccine-basics-healthcare.html>
- Case Definition: <https://www.cdc.gov/poxvirus/mpox/clinicians/case-definition.html>
- Clinical Recognition: <https://www.cdc.gov/poxvirus/mpox/clinicians/clinical-recognition.html>
- Treatment: <https://www.cdc.gov/poxvirus/mpox/clinicians/treatment.html>
- Washington State Department of Health Resources: <https://doh.wa.gov/you-and-your-family/illness-and-disease-z/mpox/provider-and-partner-resources>

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TO REPORT A NOTIFIABLE CONDITION IN THURSTON COUNTY	
Voice mail for reporting notifiable conditions that are not immediately reportable (24 hours a day): Reporting a Notifiable Condition (thurstoncountywa.gov)	Phone: 360-786-5470 Fax: 360-867-2601
Day time immediately reportable conditions – Calls are answered during business hours and routed to the appropriate communicable disease team member.	Phone: 360-867-2610
After hours immediately and 24-hour reportable conditions or a public health emergency	Call 1-800-986-9050
No one is available with Thurston County Public Health and condition is immediately notifiable	1-877-539-4344

Communicable Disease Updates are posted online at: [Communicable Disease Updates \(thurstoncountywa.gov\)](#)

THANK YOU FOR REPORTING