

## **Epidemiological Update Diphtheria**

22 August 2017

## Diphtheria in the Americas - Summary of the situation

- From epidemiological week (EW) 1 to EW 32 of 2017, three countries in the Americas reported suspected and confirmed diphtheria cases: Brazil (1 case), Haiti (80 cases), and the Bolivarian Republic of Venezuela (123 cases).
- In 2016, three countries in the Americas reported 78 confirmed diphtheria cases: the Dominican Republic (2 cases), Haiti (56 cases), and Venezuela (20 cases).
- In 2015, five countries in the Americas reported 49 confirmed diphtheria cases: Brazil (12 cases), Canada (3 cases), the Dominican Republic (1 case), Guatemala (1 case), and Haiti (32 cases).

In Brazil, in EW 30 of 2017, a diphtheria case was confirmed in the state of Roraima, which likely was infected in Venezuela. There were no secondary cases related to this case.

In **Haiti**, between EW 1 and EW 30 of 2017, a total of 72 probable diphtheria cases<sup>1</sup> were reported. Most (74%) of the cases are aged zero to 10 years and 60% are women. Of the total cases, 22 were laboratory confirmed, including 3 deaths (case fatality rate of 13.6 % among confirmed cases). Vaccination status is unknown for 54.5% of the confirmed cases, 18.2% were vaccinated, and 27.3% were not vaccinated. The confirmed cases come from four departments: Artibonite, Centre, Ouest, and Sud Est.

In Venezuela, between EW 28 of 2016 and EW 24 of 2017, a total of 447 suspected diphtheria cases (324 in 2016 and 123 in 2017) were reported, of which 51 were laboratory confirmed, including 7 deaths [Anzoátequi (2 fatal cases), Bolívar (1 fatal case), Monagas (3 fatal cases), and Sucre (1 fatal case)); the cumulative case fatality rate among confirmed cases is 20%. The cases were reported by 17 federal entities: Anzoátegui (37 cases), Apure (19 cases), Barinas (2 cases), Bolívar (282 cases), Carabobo (1 case), Cojedes (6 cases), Distrito Capital (9 cases), Merida (3 cases), Miranda (29 cases), Monagas (26 cases), Nueva Esparta (1 case), Portuguesa (2 cases), Sucre (10 cases), Trujillo (3 cases), Vargas (5 cases), Yaracuy (4 cases), and Zulia (8 cases). Of the 51 laboratory confirmed cases, 55% are women and 47% correspond to the age group 5 to 19 years. With regard to the vaccination status of the confirmed cases, 78% had an incomplete schedule, 15% were not vaccinated, and for 7% the vaccination status is unknown.

<sup>1</sup> According to the Haiti Ministry of Public Health and Population, a probable case is defined as a person, regardless of age, with laryngitis, pharyngitis, or tonsillitis with adherent pseudomembranes on tonsils, pharynx, and/or nostrils in conjunction with neck edema.

## **Guidelines for Member States**

The Pan American Health Organization / World Health Organization (PAHO/WHO) urges Member States to continue their efforts to ensure high rates of vaccination coverage, using strategies allowing them to reach the appropriate levels in all their territorial entities.

PAHO/WHO also recommends that Member States strengthen their surveillance systems for the early detection of suspected cases, in order to initiate timely treatment, including of contacts, and ensuring the provision of diphtheria antitoxin.

## References

 PAHO/WHO. 2016. Number of Vaccine Preventable Disease (VPD) cases in the Americas. Available at: <a href="http://ais.paho.org/phip/viz/im-vaccinepreventablediseases.asp">http://ais.paho.org/phip/viz/im-vaccinepreventablediseases.asp</a>