

## CASE DEFINITION FOR SURVEILLANCE OF ANTHRAX IN SIERRA LEONE

## Suspected case

Any person residing in Port Loko, Kambia, Bombali, Tonkolili, Falaba, Koinadugu, Karene and Western Areas (Urban and Rural) or have travelled to these districts since March 2022, presenting with acute onset of illness characterized by the following clinical features:

- a. Cutaneous form: Any person with skin lesion evolving over 1 to 6 days from a papular through a vesicular stage, to a depressed black eschar invariably accompanied by oedema that may be mild to extensive.
- Gastro-intestinal: Any person with abdominal distress characterized by nausea, vomiting, anorexia and followed by fever
- c. Pulmonary (inhalation): any person with brief prodromal resembling acute viral respiratory illness, followed by rapid onset of hypoxia, dyspnoea and high temperature, with X-ray evidence of mediastinal widening
- d. Meningeal: Any person with acute onset of high fever possibly with convulsions, loss of consciousness, meningeal signs and symptoms; commonly noted in all systemic infections, but may present without any other clinical symptoms of anthrax.

AND has an epidemiological link to confirmed or suspected animal cases or contaminated animal products

## Confirmed case

A confirmed case of anthrax in a human can be defined as a clinically compatible case of cutaneous, inhalational or gastrointestinal illness that is laboratory-confirmed by:

 (a) Isolation, culture and identification of B. anthracis from an affected tissue or site; (b) Demonstration of B. anthracis antigens in tissues by immunohistochemical staining using both B. anthracis cell wall and capsule monoclonal antibodies;

or

Other laboratory evidence of *B. anthracis* infection based on at least two supportive laboratory tests

## Note: Epidemiological Link can be defined as:

- Exposure to environment, food, animal, materials, or objects that is suspect or confirmed to be contaminated with B. anthracis;
- Exposure to the same environment, food, animal, materials, or objects as another person who has laboratory-confirmed anthrax;
- Consumption of the same food as another person who has laboratory-confirmed anthrax.

Presumptive laboratory criteria for Bacillus anthracis or Bacillus cereus expressing anthrax toxins:

Gram stain demonstrating Gram-positive rods, square-ended, in pairs or short chains.