

Module: Public Health Disaster Planning for Districts

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Resource Title: Extension Activity 1.2: Examples of Standard Case Definitions for Epidemic Prone Diseases

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Polio: Any case of sudden onset of flaccid or floppy paralysis affecting either one or two limbs, in a child less than 15 years of age for which no other cause is apparent, **or** a patient of any age in which a clinician suspects poliomyelitis; Polio should be suspected at the community level if there is sudden weakness or paralysis in the legs and or arms, in a child less than 15 years of age.

Measles: Any child with fever, a rash, Red eyes, Red lips, cough, runny nose or the mother gives history of measles in the last three months; Measles should be suspected at the community level for any person with fever and a rash.

Neonatal Tetanus: A history of normal newborn sucking and crying for the first two days of life AND a history of onset of illness between 3 and 28 days of age, AND a history of inability to suck followed by stiffness and spasms sparked off by light or touch; Neonatal tetanus should be suspected at the community level for any newborn child born normal, who stopped sucking and developed stiffness and /or jerking muscles and/or who died during the first month of life

Acute Viral Hepatitis: An acute illness typically including acute jaundice, dark urine, anorexia, malaise, extreme fatigue and right upper quadrant tenderness. Biological signs include increased urine urobilinogen and over two-and-a-half times the upper limit of liver enzymes in the blood. Most infections occur during early childhood. When it occurs in adulthood, many are asymptomatic.

Bacterial Meningitis: A disease characterized by acute onset of fever, headache and one of the following signs: neck stiffness, altered consciousness or other meningeal signs. Haemophilus influenza type B, meningococcal meningitis and pneumococcal meningitis cannot be differentiated on clinical grounds alone.

Whooping Cough (Pertusis): It is a case diagnosed as Pertusis by a physician or a person with cough lasting at least two weeks with at least one of the following symptoms: Paroxysms (i.e. fits) of coughing, 'whooping' when breathing in, vomiting immediately after coughing without any other apparent cause; It is confirmed with a positive blood test for antibodies.

Cholera: In an area where the disease is not known to be present, a patient aged 5 years or more develops severe dehydration or dies from acute watery diarrhoea; in an area where there is a cholera epidemic, a patient aged 5 years or more develops acute watery diarrhoea, with or without vomiting. A case of cholera is confirmed when *Vibrio cholerae* O1 or O139 is isolated from any patient with diarrhoea.

Ebola: A person sudden onset high fever with three or more of the following symptoms: headache, vomiting, loss of appetite, weakness, fatigue, abdominal pain, body aches, difficult breathing and bleeding tendencies or sudden un-explained death. During an epidemic, they may have history of contact with another person with Ebola Hemorrhagic Fever; a case of Ebola is confirmed when positive for the antigens, antibodies or PCR in a laboratory test.