

(Foodborne, Wound, Infant and Colonization)

Case Definition--Foodborne

Confirmed Case:

Laboratory confirmation of intoxication with clinical evidence:

- Detection of *botulinum* toxin in serum, stool, gastric aspirate or food.
- OR**
- Isolation of *Clostridium botulinum* from stool or gastric aspirate.

Clinical evidence¹ & indication that the client ate the same suspect food as an individual with laboratory confirmed botulism.

Probable Case:

A probable case requires clinical evidence and consumption of a suspect food item in the incubation period (12-48 hours).

Case Definition--Wound

Confirmed Case:

Laboratory confirmation of infection:

- Detection of *botulinum* toxin in serum.
- OR**
- Isolation of *C. botulinum* from a wound.
- AND**
- Presence of a freshly infected wound in the 2 weeks before symptoms and no evidence of consumption of food contaminated with *C. botulinum*.

Case Definition--Infant

Confirmed Case:

Laboratory confirmation with symptoms compatible with botulism¹ in a person less than 1 year of age:

- Detection of *botulinum* toxin in stool or serum.
- OR**
- Isolation of *C. botulinum* from stool or at autopsy.

Case Definition--Colonization

Confirmed Case:

Laboratory confirmation with symptoms compatible with botulism in a patient aged 1 year or older with severely compromised gastrointestinal tract functioning (i.e. abnormal bowel) due to various diseases, such as colitis, or intestinal bypass procedures, or in association with other conditions that may create local or widespread disruption in the normal intestinal flora:

- Detection of *botulinum* toxin in stool or serum.
- OR**

¹ See Clinical Evidence section.

- Isolation of *C. botulinum* from stool or at autopsy.

Clinical Evidence

Foodborne:

- Characterized by blurred vision, dry mouth and difficulty swallowing and speaking. Descending and symmetric paralysis may progress rapidly, often requiring respiratory support.

Wound:

- Characterized by diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

Infant:

- Characterized by constipation, loss of appetite, weakness, altered cry and loss of head control.

Reporting Requirements

Report confirmed and probable cases **immediately** to DHW Surveillance via Panorama and the Surveillance Inbox.

Select appropriate initial staging option in the “staging” field in Panorama.

- Update the staging field if/when new information becomes available.

Additional Forms

None.