Botulism

Merlin disease code=00510 Botulism, Foodborne
Merlin disease code=00511 Botulism, Infant
Merlin disease code=00513 Botulism, Wound
Merlin disease code=00512 Botulism, Other
Case report forms (CRFs):
1. Botulism Alert Summary
2. National Outbreak Reporting System CDC Form 52.13 (Foodborne only)
PAPER CRF REQUIRED

Background
Botulism has several distinct clinical forms:

- **Foodborne:** An illness caused by ingestion of botulinum toxin with variable severity. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

- **Infant:** An illness of infants <12 months of age, characterized by constipation, poor feeding, and “failure to thrive” that may be followed by progressive weakness, impaired respiration, and death.

- **Wound:** An illness resulting from toxin produced by *Clostridium botulinum* that has infected a wound. A history of a fresh, contaminated wound during the 2 weeks before onset of symptoms should be present. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

- **Other, Unspecified:** An illness in a patient aged >12 months of age who has no history of ingestion of suspect food and has no wounds. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

**Botulism, Foodborne**

Clinical criteria for case classification
Ingestion of botulinum toxin results in an illness of variable severity. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

Laboratory criteria for case classification
Either of the following:

- Detection of botulinum toxin in a clinical specimen or food for foodborne botulism
- Or isolation of *Clostridium botulinum* from a clinical specimen.

Epidemiological criteria for case classification
Confirmatory:
A person who ate the same food as persons who have laboratory-confirmed botulism.

Presumptive:
A person with an epidemiological link, e.g., ingestion of a home-canned food within the 48 hours prior to onset.

Case classification
Confirmed:
One of the following:

- A clinically compatible illness in a person with laboratory evidence
- Or a clinically compatible illness in a person with confirmatory epidemiologic criteria.
**Probable:**
A clinically compatible illness in a person with presumptive epidemiologic criteria.

**Criteria to distinguish a new case from previous reports**
Not applicable.

**Comments**
Note that this is one of the few diseases in which an epi-linked case without laboratory confirmation is considered confirmed.

Specimens (food or clinical) must be sent to Bureau of Public Health Laboratories for laboratory diagnosis (toxin testing) from suspected cases of botulism and must be cleared through the Bureau of Epidemiology (850) 245-4401. Heptavalent botulinum antitoxin is available through the Bureau at the above telephone number, 24 hours per day. This condition has been identified as a potential bioterrorism agent by the CDC.

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**Botulism, Infant**

**Clinical criteria for case classification**
An illness of infants, characterized by constipation, poor feeding, and “failure to thrive” that may be followed by progressive weakness, impaired respiration, and death.

**Laboratory criteria for case classification**
Either of the following:
- Detection of botulinum toxin in stool or serum
- Or isolation of *Clostridium botulinum* from stool.

**Epidemiological criteria for case classification**
Not applicable.

**Case classification**
Confirmed:
A clinically compatible illness in a child <1 year old with laboratory evidence.

**Criteria to distinguish a new case from previous reports**
Not applicable.

**Comments**
Specimens (food or clinical) must be sent to Bureau of Public Health Laboratories for laboratory diagnosis (toxin testing) from suspected cases of botulism and must be cleared through the Bureau of Epidemiology (850) 245-4401. Heptavalent botulinum antitoxin is available through the Bureau at the above telephone number, 24 hours per day. This condition has been identified as a potential bioterrorism agent by the CDC.
**Botulism, Wound**

**Clinical criteria for case classification**
An illness resulting from toxin produced by *Clostridium botulinum* that has infected a wound. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

**Laboratory criteria for case classification**
Either of the following:
- Detection of botulinum toxin in serum
- Or isolation of *Clostridium botulinum* from wound.

**Epidemiological criteria for case classification**
A person with both of the following:
- No suspected exposure to contaminated food and
- And either of the following:
  - A history of a fresh, contaminated wound during the 2 weeks before onset of symptoms
  - Or a history of injection drug use within the 2 weeks before onset of symptoms.

**Case classification**

**Confirmed:**
A clinically compatible illness in a person with laboratory evidence and epidemiological criteria

**Probable:**
A clinically compatible illness in a person who epidemiological criteria.

**Criteria to distinguish a new case from previous reports**
Not applicable.

**Comments**
Specimens (food or clinical) must be sent to Bureau of Public Health Laboratories for laboratory diagnosis (toxin testing) from suspected cases of botulism and must be cleared through the Bureau of Epidemiology (850) 245-4401. Heptavalent botulinum antitoxin is available through the Bureau at the above telephone number, 24 hours per day. This condition has been identified as a potential bioterrorism agent by the CDC.
Botulism, Other

Clinical criteria for case classification
An illness in a patient aged ≥12 months of age who has no history of ingestion of suspect food and has no wounds. Common symptoms are diplopia, blurred vision, and bulbar weakness. Symmetric paralysis may progress rapidly.

Laboratory criteria for case classification
Either of the following:
- Detection of botulinum toxin in clinical specimen
- Or isolation of Clostridium botulinum from clinical specimen.

Epidemiological criteria for case classification
A person ≥1 year old with no history of ingestion of suspect food and no wounds.

Case classification
Confirmed:
A clinically compatible illness in a person with laboratory evidence and epidemiologic criteria.

Criteria to distinguish a new case from previous reports
Not applicable.

Comments
Specimens (food or clinical) must be sent to Bureau of Public Health Laboratories for laboratory diagnosis (toxin testing) from suspected cases of botulism and must be cleared through the Bureau of Epidemiology (850) 245-4401. Heptavalent botulinum antitoxin is available through the Bureau at the above telephone number, 24 hours per day. This condition has been identified as a potential bioterrorism agent by the CDC.

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