



Merlin disease code: 02700 Listeriosis

[Paper case report form](#), [Spanish](#) required



Isolates for all cases must be sent to the Bureau of Public Health Laboratories

Merlin extended data required

## Clinical criteria for case classification

### Invasive listeriosis

- Systemic illness caused by *Listeria monocytogenes* manifests most commonly as bacteremia or central nervous system infection. Other manifestations can include pneumonia, peritonitis, endocarditis, and focal infections of joints and bones.
- Pregnancy-associated listeriosis has generally been classified as illness occurring in a pregnant woman or in an infant  $\leq 28$  days old. Listeriosis may result in pregnancy loss (fetal loss before 20 weeks gestation), intrauterine fetal demise ( $\geq 20$  weeks gestation), pre-term labor, or neonatal infection, while causing minimal or no systemic symptoms in the mother. Pregnancy loss and intrauterine fetal demise are considered to be maternal outcomes.
- Neonatal listeriosis commonly manifests as bacteremia, central nervous system infection, or pneumonia, and is associated with high fatality rates. Transmission of *Listeria* from mother to baby transplacentally or during delivery is almost always the source of early-onset neonatal infections (diagnosed between birth and 6 days), and the most likely source of late-onset neonatal listeriosis (diagnosed between 7 and 28 days).

### Non-invasive *Listeria* infections

- *Listeria* infection manifesting as an isolate from a non-invasive clinical specimen suggestive of a non-invasive infection includes febrile gastroenteritis, urinary tract infection, and wound infection.

## Laboratory criteria for case classification

### Confirmatory:

Isolation of *L. monocytogenes* from one or more of the following:

- A normally sterile site reflective of an invasive infection (excluding sources such as urine, stool, or external wounds);
- **Or** products of conception (e.g., chorionic villi, placenta, fetal tissue, umbilical cord blood, amniotic fluid) collected at the time of delivery for pregnancy loss, intrauterine fetal demise, or birth;
- **Or** a non-sterile neonatal specimen (e.g., meconium, tracheal aspirate, but not products of conception) collected within 48 hours of delivery.

### Presumptive:

Detection of *L. monocytogenes* by culture-independent diagnostic testing from one or more of the following:

- A normally sterile site reflective of an invasive infection;
- **Or** products of conception collected at the time of delivery for pregnancy loss, intrauterine fetal demise, or birth;
- **Or** a non-sterile neonatal specimen collected within 48 hours of delivery.

### Supportive:

Isolation of *L. monocytogenes* from a non-invasive clinical specimen (e.g., stool, urine, wound, or other specimen not specified in confirmatory laboratory criteria).

## Epidemiological criteria for case classification

One or more of the following:

- A neonate whose mother has confirmatory or presumptive laboratory criteria from products of conception
- **Or** both of the following:
  - A clinically compatible neonate
  - **Whose** mother has confirmatory or presumptive laboratory criteria from a normally sterile site,
- **Or** both of the following:
  - A mother who gave birth to a neonate with confirmatory or presumptive laboratory criteria
  - **And** the neonatal specimen was collected up to 28 days after birth.

## Case classification

### Confirmed:

A person with confirmatory laboratory criteria.

### Probable:

Either of the following:

- A person with presumptive laboratory criteria
- **Or** a mother or neonate with epidemiologic criteria.

### Suspect:

A person with supportive laboratory criteria.

## Criteria to distinguish a new case from previous reports

There is currently insufficient data available to support a routine recommendation for criteria to distinguish a new case of listeriosis from prior reports or notifications. Duplicate or recurring reports of listeriosis in an individual should be evaluated on a case by case basis.

## Comments

Meningitis due to *L. monocytogenes* should be reported as listeriosis (Merlin disease code: 02700) and not as bacterial or mycotic meningitis (Merlin disease code: 32090).