Diphtheria

Draft recommendations

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Disease surveillance and reporting

All efforts should be made to encourage countries to report all available data on diphtheria cases, including:

– reporting data from their integrated disease surveillance and response databases;
– on diphtheria caused by *C. diphtheria* (and *C. ulcerans*, where available) for countries with established laboratory confirmation.

Standard guidelines for the investigation and reporting of diphtheria cases, including during outbreaks, should be facilitating pooled analysis:

– Guidelines should include standard formats for age and immunization status categorization.
Immunization schedules

- Re-emphasize the need for a primary series of 3 doses of diphtheria toxoid containing vaccines, administered in the first year of life.

- 3 booster doses should be administered until adolescence, preferably at 12-23 months, 4-7 years and 9-15 years of age:
  - in combination with tetanus toxoid (TT) and age-appropriate further vaccines.
  - During all other opportunities when TT vaccines are indicated in older age groups, a combined tetanus-diphtheria vaccine should be used.

- Available data suggest protection until at least mid-adulthood, likely longer. Therefore, further booster doses are not recommended.
  - Further studies, including serosurveys, are required to generate information on the duration of protection and the potential need for booster doses in older age groups.
Availability of Diphtheria Antitoxin (DAT)

- In the short term, WHO should consider the establishment/replenishment of equine DAT stockpiles, which appears feasible but will require:
  - Better data on requirements of doses, i.e. annual number of cases (linked to improved reporting of case data);
  - Process for initiation of production and procurement of DAT;
  - Process for pre-qualification and management of the stockpile;
  - Process for facilitation of expedited importation of DAT when cases occur.

- In the long term, WHO should advocate for and support the development of affordable and sustainable supplies of novel products currently under development (such as monoclonal antibodies).