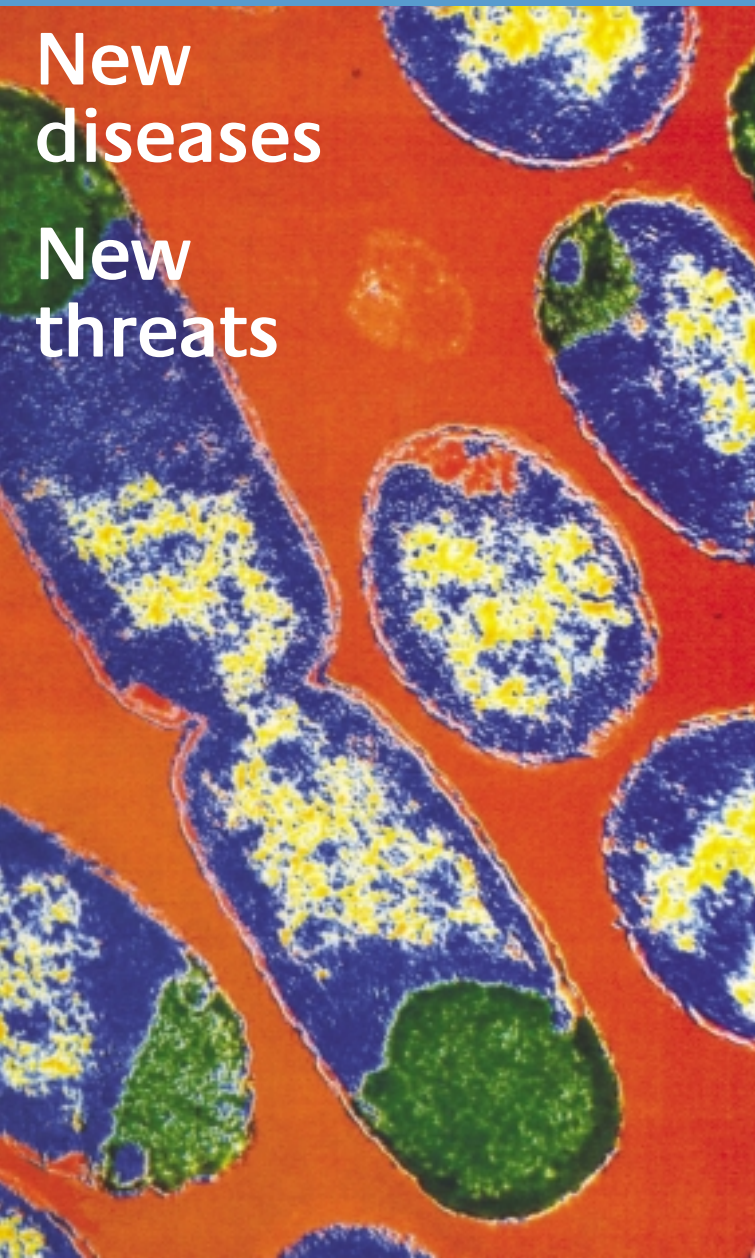




**New
diseases**

**New
threats**



Severe respiratory symptoms

Raised temperature



Will & Deni McIntyre / Science Photo Library

Shortness of breath



Raised pulse rate



RESPIRATORY SYMPTOMS ARE EXTREMELY COMMON

Severe symptoms could indicate:

- influenza
- pneumonia
- atypical pneumonia
- SARS

Unusually, these could also indicate:

- inhalation anthrax
- exposure to chemicals
- pneumonic plague

If symptoms and or signs are difficult to explain, please contact your local Health Protection Team.

Skin lesions

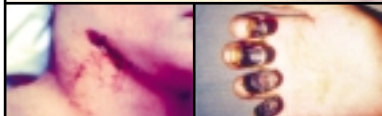
Cutaneous anthrax

- Black eschar, with considerable oedema
- Consider possible occupational exposure – if not likely, call
- Lesion, usually painless



Plague

- Buboes – discharging lymphadenopathy
- Inguinal or axillary – depending on flea bite
- Pyrexia
- If inhaled, leads to pneumonia



Smallpox

- Febrile episode with severe prostration, followed by rash:
- vesicular
- single crop
- dense distribution face and peripheral, particularly palms and soles

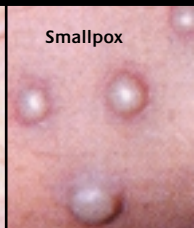


© CDC

How chickenpox differs from smallpox

Chickenpox presents with:

- Mild prodrome
- History of exposure
- Several crops of vesicles occurring at different times
- Largely on trunk, sparing palms & soles
- Superficial lesions



If symptoms and or signs are difficult to explain, please contact your local Health Protection Team.

Symptoms you may never have seen

Liquid mustard

- Small blisters begin to appear, filled with fluid
- Inflammation, particularly around the buttocks, genitals and inner thighs



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Tularaemia

- Not endemic in UK, but occurs in Scandinavia, North America and Eastern Europe
- Transmitted by close contact with rabbits
- Presents with pyrexia and either as ulcers with lymphadenopathy, or pneumonia, if inhaled



Radiation burns

- Associated with systemic upset



© IAEA

West Nile Fever

- Causes encephalitis and is transmitted from animals via mosquitoes

Botulinum toxin

- Descending paralysis is characteristic eg ptosis, blurred vision, difficulty in swallowing, dysphonia
- Immobility

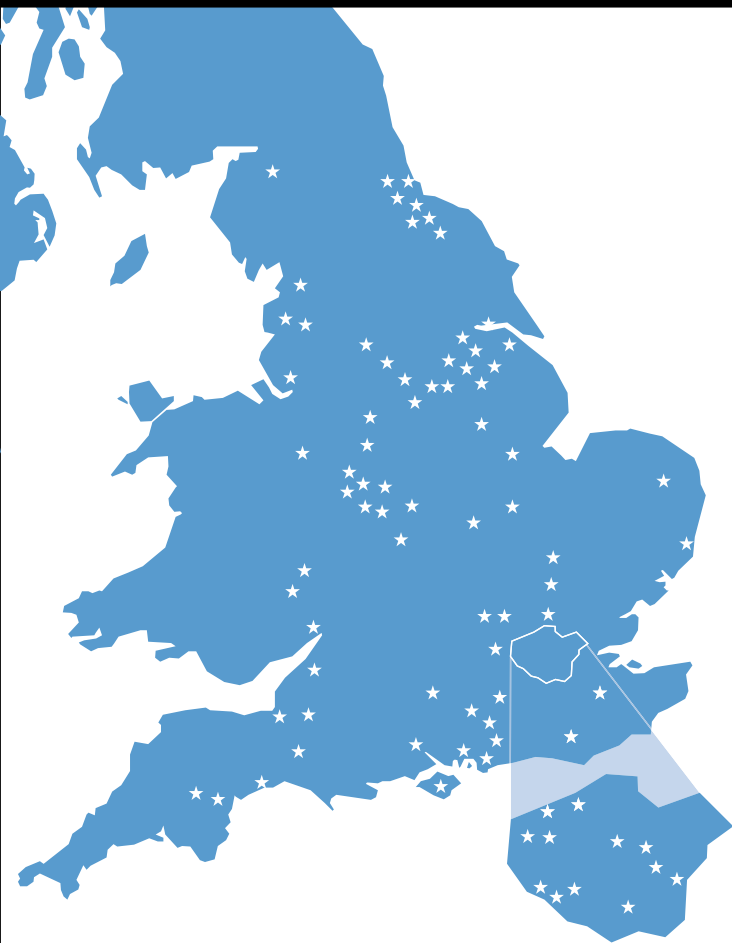
NOTE: THESE ARE NOT TRANSMISSIBLE PATIENT TO PATIENT AND ARE UNLIKELY TO BE MANAGED DIFFERENTLY FROM NATURALLY-OCCURRING DISEASE. WOULD REQUIRE LABORATORY/HOSPITAL DIAGNOSIS

If symptoms and or signs are difficult to explain, please contact your local Health Protection Team.



If a patient presents with symptoms or signs that are difficult to explain, please contact your local Health Protection Team.

If you don't have contact information for your local Team, please call: 01980 612 100



For further information online: www.hpa.org.uk/infections/topics_az/deliberate_release/menu.htm