UKHSA [Enter HPT]

Telephone number: [Enter HPT contact number]

Email: [Enter HPT contact email]

[www.gov.uk/ukhsa](http://www.gov.uk/ukhsa)

HPZ Reference number:

Date:

Dear Sir/Madam,

You have been identified as having been in contact with someone who had diphtheria, a rare infection in the UK. We are sending you this information as a precaution - **you do NOT meet our definition of a close contact** so please be reassured that the risk to you is very low.

Please read the factsheet attached which gives you information about diphtheria. If you are newly arrived in the UK, please ensure you register with a general practice (GP) to access vaccinations. Please contact your accommodation provider for assistance with registering with a GP.

It is important that you ensure you are up to date with your vaccinations as per the UK schedule, particularly if you are unvaccinated or are unsure of your vaccine history. Once registered with a GP practice, they should be able to advise on vaccinations.

If you are concerned that you or someone close to you has diphtheria, please seek urgent medical attention.

Yours faithfully

Consultant in Health Protection /Health Protection Practitioner

[Enter region] Health Protection Team

**Diphtheria fact sheet**

# Diphtheria

Diphtheria is a contagious infection caused by a toxin (poison) made by bacteria. *Corynebacterium diphtheriae* and *Corynebacterium ulcerans* are the 2 most common bacteria that can cause diphtheria but it can also be caused by *Corynebacterium pseudotuberculosis*, although this is very rare.

# Symptoms of diphtheria

Symptoms usually begin 2 to 5 days after exposure to the diphtheria bacteria. Symptoms will depend on the site of infection but the most severe form of diphtheria affects the throat and tonsils. This is known as **respiratory diphtheria**.

The first symptoms are usually a sore throat, loss of appetite and a mild fever. Within 2 to 3 days, a membrane forms over the throat and tonsils that can make it hard to swallow and breathe. The infection can also cause the lymph glands and tissues on both sides of the neck to swell (sometimes referred to as a "bull neck").

The bacteria responsible for diphtheria can cause small skin sores that form larger ulcers, usually appearing on exposed limbs, particularly the legs. This form of the disease is known as **cutaneous diphtheria.** The sores can be difficult to distinguish from impetigo.

Illness can also occur with non-toxin-producing strains of the diphtheria bacteria; in these cases the disease is generally milder though in some cases it may also be severe.

If you experience a fever, sore throat, swollen neck glands, development of a membrane please see your GP.

# How it is spread

Diphtheria bacteria can live in the mouth, nose, throat or skin of people with the infection. It is commonly spread when a person comes into contact with airborne droplets after an infected person has sneezed or coughed. Less frequently, the infection can be passed on through close contact with skin lesions in a person with the cutaneous form of the illness. Prolonged close contact is normally required for the infection to be transmitted to others.

*Corynebacterium ulcerans* infection has been associated with consumption of unpasteurised milk or through prolonged close contact with animals (for example, through working on a farm or as a veterinarian).

# How it is prevented

Diphtheria vaccination protects against the disease and is very effective. It gives protection against disease by production of antibodies to the diphtheria toxin. The vaccine is produced from purified inactivated toxin from a strain of *C. diphtheriae* and prompts the body to produce antibodies against the diphtheria toxin so that if the person comes into contact with diphtheria later in life, the body’s immune system will be able to protect itself.

Diphtheria vaccination is given as part of the UK’s primary immunisation programme.

All infants should receive the primary immunisation course of 3 doses of a diphtheria-containing vaccine in the first year, usually given at 2, 3 and 4 months of age. Children should receive a first booster dose between 3.5 and 5 years of age and a second booster between 13 and 18 years of age.

Because of this highly effective vaccination program it is uncommon to see diphtheria in the UK nowadays and the majority of cases acquired within the UK now are mild infections in partially immunised individuals or in adults that have been fully immunised but have low levels of immunity.

# How it is diagnosed

Diagnosis is made based on a clinical examination and the testing of swabs, usually taken from the throat but also sometimes from sores in the case of cutaneous diphtheria. Special laboratory tests are needed to detect the toxin and confirm the diagnosis.

# If you or a family member gets diphtheria

A doctor will prescribe antibiotics to treat diphtheria and in some cases they will also administer anti-toxin.

Close contacts, considered to be people who share a house or are in close contact with the infected individual, will be offered screening for diphtheria infection. Close contacts will be treated with antibiotics as well. A person is no longer infectious after they have received a full course of antibiotic treatment.

If you have diphtheria or come into close contact with someone with diphtheria and you have not been vaccinated against the disease, you will be offered a full course of the vaccination. If you have been vaccinated previously but this was more than 12 months ago, you will be offered a booster dose to boost your immunity against the infection.

Diphtheria is a notifiable disease in the UK, which means that when a doctor suspects that someone has diphtheria they must inform the public health authorities.

If you or a close contact has been diagnosed with diphtheria, your local Public Health England Centre will contact you to give advice on actions to protect you and others around you.

# Further information

Online sources of information that you may find helpful:

<https://www.gov.uk/government/collections/diphtheria-guidance-data-and-analysis> <http://www.nhs.uk/conditions/Diphtheria/Pages/Introduction.aspx>

If you are concerned that you or someone close to you has diphtheria, please seek urgent medical attention.