

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).