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Abstract 15

Case Series of Membrane over the Tonsils in a Tertiary Care Infectious Diseases Hospital in Mumbai

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Abstract

Background and aims: To document the case profile of suspected diphtheria – a re-emerging infection with changing epidemiology in the vaccination era. We present a series of four cases of membrane over tonsils (WHO case-definition for suspected diphtheria) with their various parameters on history and examination. All cases were admitted over the past three months from various areas of Mumbai

Methods: Clinical profile of four cases with membrane over the tonsils were documented prospectively and the findings presented.

Results: Table 1

Conclusions: Vaccination with diphtheria may not always prevent the disease, especially when booster doses are lacking. Case presentation of diphtheria has not changed compared to the pre-vaccination era. However, disease outcome is better in children who are even partially immunized. Efforts must be directed towards better immunization coverage. There is an upward age trend in the susceptible population and thus boosters must be emphasized. Outcome is better when early treatment is instituted and early diagnosis requires a high index of suspicion on part of the clinician. Early administration of anti-diphtheric serum (ADS) is imperative to improve survival and thus earlier referral to centers with ADS availability and wider availability of ADS would help reduce mortality. All cases of diphtheria should receive carnitine supplementation in addition to ADS, as it reduces the incidence and mortality of myocarditis in this “strangling angel of children”.

Table 1: Profile of all children



No	Age/ Sex	Immu- nizati- on status	Duration of illness at presentat- ion	Contact history	Symptom	Signs	Compli- cations	Microbiology	Treatment	Outcome
1	3/F	No	5 days	None	Fever, drooling, swelling over neck	Bull neck, cervical LDN, <u>stridor</u> , membrane (L+P+T)	Shock, AKI, MODS	Smear negative; culture negative (Ab treatment <u>outside</u>)	CP, ADS, <u>Carnitine</u> , mech. Ventilation, fluids, <u>inotropes</u>	Death on day 7 of illness
2	5.5/F	Partia- l	3 days	None	Fever, drooling, inability to speak	Enlarged tonsils, Membrane (T)	none	Smear negative; culture positive	CP, ADS, <u>Carnitine</u> , fluids, <u>anti-secretory</u> agent	Recovered, immunized
3	7/M	Full	3 days	None	Fever, throat pain, swelling over neck	cervical LDN, Enlarged tonsils, Membrane (T)	none	Smear positive, culture awaited	CP, ADS, <u>Carnitine</u> , fluids, <u>anti-secretory</u> agent, blood transfusion	Under treatment
4	9/M	Full	4 days	None	Fever, cough, difficulty in swallowi- ng	Enlarged tonsils, <u>stridor</u> , Membrane (T + P)	none	Smear negative; culture negative (Ab treatment <u>outside</u>)	CP, ADS, <u>Carnitine</u> , mech. Ventilation, fluids, <u>anti-</u> <u>secretory</u> agent	Recovered, discharged