Cholera surveillance for health care workers



Module 2

GLOBAL TASK FORCE ON CHOLERA CONTROL

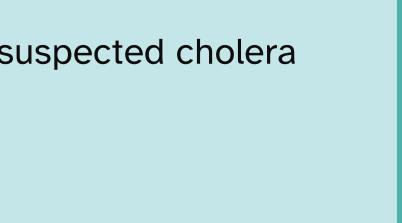
Cholera surveillance for health care workers

Key principles

What will you learn?



- **Collect standard information** on patients with suspected cholera
- Test patients with suspected cholera



Cholera signs and symptoms

Photo adapted from: WHO/Mulugeta Ayene

Acute Watery Diarrhoea

A sign to suspect cholera is Acute Watery Diarrhoea (AWD)

AWD is not any type of diarrhoea

Acute: Lasts for less than 7 days

Watery: Stools are non-bloody and liquid (and may contain mucous)

Diarrhoea: There are ≥3 loose stools within a 24-hour period





AWD & dehydration

Health care workers assess the level of dehydration of patients with AWD and determine the rehydration plan accordingly

A patient has severe dehydration if

One or more danger signs

- Lethargic or unconscious
- Absent or weak pulse
- Respiratory distress

Or

At least two of the following

- Sunken eyes
- Not able to drink or drinks poorly
- Skin pinch goes back very slowly



Other patients with AWD are treated with oral rehydration solution

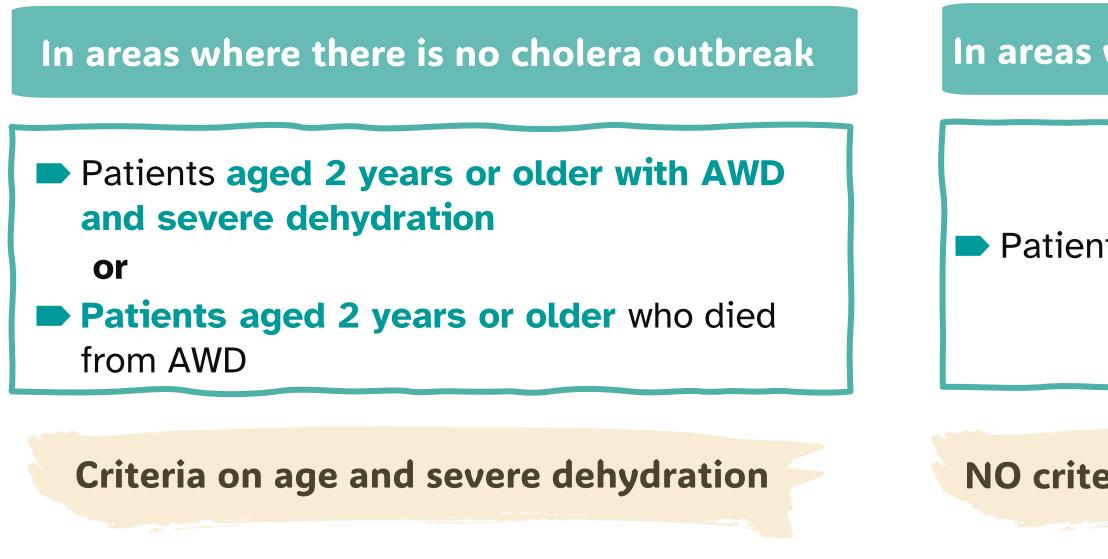
Patients with severe dehydration need intravenous rehydration

Patients with Suspected cholera

Photo adapted from: Raissa Karama Rwizibuka/Wellcome Trust

Cholera case definitions

Depending on the cholera situation, different cholera case definitions apply



- Limit false suspected cholera outbreaks
- **Avoid overwhelming early detection systems**

In areas where there is a cholera outbreak

Patients with AWD (or who died from AWD)

NO criteria on age and severe dehydration

• For sensitive monitoring

Information collection

TC

11000

Photo adapted from: WHO/Nitsebiho Asrat

na

Collection of information

When a patient who meets the cholera case definition is identified, standard information is collected with a case report form or a line list

Patient information

- Age
- Sex
- Place of residence

Clinical information

- Date of symptom onset
- Hospitalisation
- Dehydration level
- Outcome (alive, died after arriving at health facility, died before reaching the health facility,

Information on tests

- Tests performed/requested
- Results

Learn where to access standard data collection tools in Module 6



Testing



1 Goars

CONTAINER

20320

Photo adapted from: Raissa Karama Rwizibuka/Wellcome Trust

Testing for cholera

Why to test for cholera

For surveillance

- AWD can be caused by different diseases
- Testing is necessary to characterize the cholera situation

But not for treatment

- Cholera test results **do not influence the treatment**
- Treatment depends on dehydration level

Who to test for cholera

- Patients who meet the definition of a suspected cholera case
- Among those, which patients to test depends on the cholera situation



Rapid Diagnostic Tests

RDTs are useful screening tools but cannot be used to confirm cholera



on RDT use in Module 6

RDTs

- Can be performed at health facility level
 - Rapid and easy to use
- Performed
 - On stool samples
 - From patients with suspected cholera Ο

RDT results

- Learn where to access information **Negative: sufficient to rule out cholera**

Used to **triage samples** for laboratory confirmation (i.e., RDT+)

Recorded with standard information (i.e., pos and neg results)

Laboratory confirmation

For cholera to be confirmed, samples are sent to a laboratory for confirmatory testing (culture/PCR)



- Samples for confirmatory testing
 - Fresh stools
 - **Rectal swabs**
- Sample collection

 - **Before antibiotic** therapy

Learn where to access information on how to handle samples in Module 6

Within the **first 4 days of illness**

Do NOT wait for the results to initiate treatment



- Cholera causes Acute Watery Diarrhoea (AWD) and may lead to severe dehydration
- **Standard information** is recorded on any patient with suspected cholera
 - Case report form or line list
- To confirm cholera, stool samples are sent to a laboratory for testing
- If RDTs are available, confirmatory testing is on samples tested positive by RDT





Question 1



What is Acute Watery Diarrhoea (AWD)? Select all that apply

Acute

- a) It is acute if it lasts for less than 14 days
- b) It is acute if it lasts for less than 7 days

Watery

- d) It is watery if stools don't contain mucous

Diarrhoea

- e) It is diarrhoea if there are \geq 3 loose stools within a 48-hour period
- It is diarrhoea if there are \geq 3 loose stools within a 24-hour period f)

c) It is watery if stools are non-bloody and liquid (and may contain mucous)

Question 1 – Answers



- What is Acute Watery Diarrhoea (AWD)? Acute
 - a) It is acute if it lasts for less than 14 days
 - b) It is acute if it lasts for less than 7 days Watery

 - d) It is watery if stools don't contain mucous

Diarrhoea

- e) It is diarrhoea if there are \geq 3 loose stools within a 48-hour period
- It is diarrhoea if there are ≥3 loose stools within a 24-hour period **f**)

c) It is watery if stools are non-bloody and liquid (and may contain mucous)

Question 2



How is standard information on suspected cholera cases tested by Rapid Diagnostic Test (RDT) recorded?

- tested positive by RDT
- b) Standard information on suspected cholera cases is always recorded regardless of the RDT result

a) Standard information on suspected cholera cases is only recorded on patients

Question 2 – Answer



How is standard information on suspected cholera cases tested by Rapid Diagnostic Test (RDT) recorded?

- a) Standard information on suspecte tested positive by RDT
- b) Standard information on suspective regardless of the RDT result

a) Standard information on suspected cholera cases is only recorded on patients

b) Standard information on suspected cholera cases is always recorded

Question 3



What is the recommended approach for samples tested negative by Rapid Diagnostic Test (RDT)?

- retested by culture / PCR
- culture / PCR samples tested negative by RDT

a) RDTs are screening tests, therefore samples tested negative by RDT should be

b) RDTs can be used to rule out cholera, therefore it is not necessary to retest by

Question 3 – Answer



What is the recommended approach for samples tested negative by Rapid Diagnostic Test (RDT)?

- a) RDTs are screening tests, therefore samples tested negative by RDT should be retested by culture / PCR
- by culture / PCR samples tested negative by RDT

b) RDTs can be used to rule out cholera, therefore it is not necessary to retest

Together we can #Endcholera



N DL