ANTHRAX

IMMEDIATE NOTIFICATION

EPIDEMIOLOGY PROGRAM

Event Name:	ANTH							
Event Time Period:	1 year							
Clinical Description (CDC 2024):	Death of an unknown cause with organ involvement consistent with anthrax;							
	OR							
	In the absence of another more likely etiology,							
	At least one of the following specific signs and symptoms:							
	Evidence of pleural effusion							
	Evidence of mediastinal widening or hemorrhagic mediastinal lymphadenopathy on imaging							
	Blood in the CSF							
	Painless or pruritic papular or vesicular lesion or eschar, may be surrounded by edema or erythema							
	• Pneumonia							
	OR							
	At least two of the following non-specific signs and symptoms:							
	Abdominal pain, abdominal swelling, abnormal lung sounds, altered mental status, ascites, cervical lymphadenopathy/swelling of the neck, coagulopathy, cough, diarrhea, difficulty swallowing, dyspnea, edema, fever, headache, hemoptysis, hypotension, lymphadenopathy, meningeal signs, nausea/vomiting, sore throat, tachycardia, tachypnea							
	Note: Additional information is available on the position statement (<u>link</u>)							
Vital Records Criteria (CDC 2024):	A person whose death certificate lists anthrax as a cause of death or a significant condition contributing to death.							
Epidemiologic Linkage Criteria (CDC 2024):	• Exposure to environment, food, animal, materials, or objects that is/are suspected or confirmed to be contaminated with <i>B. anthracis</i> or anthrax toxin-producing <i>Bacillus</i> spp.; OR							
(020 2021).	 Exposure to the same environment, food, animal, materials, place of occupation, or objects as another person who has laboratory-confirmed anthrax. 							

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CDC Event Classification	Confirmed	Meets the clinical criteria AND meets confirmatory laboratory evidence, OR meets vital records criteria AND meets confirmatory laboratory evidence:				
(2024):		• Culture and identification of <i>B. anthracis</i> or <i>Bacillus</i> spp. expressing anthrax toxins from clinical specimens by Laboratory Response Network (LRN); OR				
		• Evidence of a four-fold rise in antibodies to protective antigen (PA; one of the anthrax toxins) between acute and convalescent sera collected two-four weeks apart using quantitative anti-PA IgG ELISA testing in an unvaccinated person; OR				
		 Evidence of a four-fold change in antibodies to protective antigen (one of the anthrax toxins) in paired convalescent sera collected two-four weeks apart using quantitative anti-PA IgG ELISA testing in an unvaccinated person; OR 				
		Detection of B. anthracis or anthrax toxin genes by the LRN-validated polymerase chain reaction and/or sequencing in clinical specimens collected from a normally sterile site (such as blood or CSF) or lesion of other affected tissue (skin, pulmonary, reticuloendothelial, or gastrointestinal); OR				
		Detection of lethal factor (LF) in clinical serum specimens by LF mass spectrometry.				
	Probable	Meets the clinical criteria AND meets presumptive laboratory evidence, OR meets vital records criteria AND meets presumptive laboratory evidence, OR meets the clinical criteria AND meets epidemiologic linkage criteria:				
		Demonstration of <i>B. anthracis</i> antigens in tissues by immunohistochemical staining; OR				
		Gram stain demonstrating Gram-positive rods, square-ended, in pairs or short chains; OR				
		Positive result on an anthrax test with established performance in a CLIA-accredited laboratory.				
	Suspect	Meets vital records criteria only.				
Massachusetts Event Classification:	Follows CD	DC event classification.				

ANTHRAX (continued)

Report Type	Test Type	Source	Result	New event or beyond report period?	Data Entry		
Laboratory report OR Boston Reporting Card		Clinical Specimen	eimen	Yes	New event SUSPECT		
				No	Same event		
Select:	Microorganism: Pt: x						
Laboratory report OR Boston Reporting Card	IFA	Clinical Specimen	Bacillus anthracis	Yes	New event SUSPECT		
				No	Same event		
Select:	Bacillus anthracis Ag: ACnc: Pt: xxx: Ord: IF						
Laboratory report OR Boston Reporting Card	Quick ELISA Anthrax PA OR	Clinical Specimen	Positive	Yes	New event SUSPECT		
	Anti-PA antibodies			No	Same event		
Select:	Bacillus anthracis anti-PA Ab: Titr: Pt: Ser: Qn: ELISA						
Laboratory report OR Boston Reporting Card	Lethal Factor	Serum	Positive	Yes	New event SUSPECT		
				No	Same event		
Select:	Bacillus anthracis let	hal factor: ACnc:	Pt: xxx: Qn: Mass Sp	ectrometry			
Laboratory report OR Boston Reporting Card	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	Clinical specimen	Gram positive rod	Yes	New event SUSPECT		
				No	Same event		
Select:	Microscopy: Prld: Pt: xxx: Nom: xxx stain						
Laboratory report OR Boston Reporting Card	Malachite green Stain	te green Clinical specimen	Positive	Yes	New event SUSPECT		
		_		No	Same event		
Select:	Spore identification: Prld: Pt: xxx: Nom: Malachite green stain						
Laboratory report OR Boston Reporting Card	PCR	Clinical specimen	Positive	Yes	New event SUSPECT		
1 0				No	Same event		
Select:	Bacillus anthracis DNA: ACnc: Pt: xxx: Ord: Probe.amp.tar						
Laboratory report OR Boston Reporting Card	RedLine Alert Test C	Clinical specimen	Positive	Yes	New event SUSPECT		
				No	Same event		
Select:	Bacillus anthracis Ag: ACnc: Pt: xxx: Ord: IF						

ANTHRAX (continued)

Report Type	Test Type	Source	Result	New event or beyond report period?	Data Entry
Laboratory report OR	Anthrax EITB	Serum	Positive	Yes	DO NOT ENTER
Boston Reporting Card	Reaction			No	Same event

Data entry note:

Results where a *Bacillus* bacteria is identified and is being sent to the State Lab to rule out anthrax should <u>not</u> be entered. Bacillus is a very common bacteria and the great majority of the time it will not be *anthracis*. These results should only be entered if a specific result of *Bacillus anthracis* is identified. If there are any questions, please speak with the Epi Liaison.