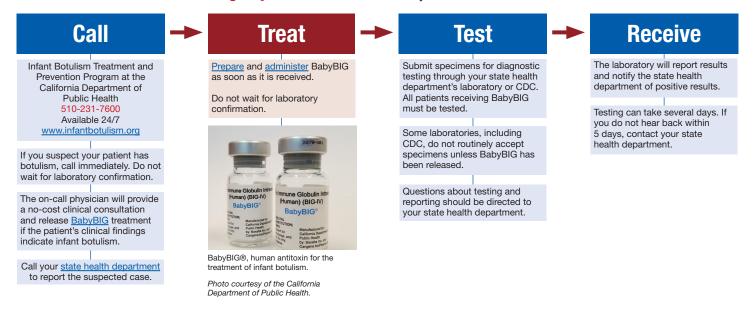
Infant Botulism: Consultation, Treatment, and Testing Steps

Infant botulism is a medical emergency. Do not wait for laboratory confirmation to initiate consultation or treatment.



Consultation

If the patient's clinical findings are consistent with infant botulism, immediately contact the Infant Botulism Treatment and Prevention Program (IBTPP) at the California Department of Public Health for a free clinical consultation at 510-231-7600 (24/7).

After consulting with the IBTPP, call your state health department immediately to:

- Receive guidance on specimen collection, storage, and submission (Also refer to the IBTPP collection guidance.)
- · Ask questions about testing methods
- Learn about mandatory reporting

If clinical consultation supports botulism, request treatment immediately and administer it as soon as it's available.

Do not wait for laboratory confirmation.

Diagnostic Testing

A stool or enema specimen is required for definitive diagnosis of infant botulism. Enemas should be performed with sterile, non-bacteriostatic water. Stool specimens can be collected before or after antitoxin administration. Botulinum toxin can still be detected in the stool after BabyBIG administration because BabyBIG does not kill or prevent the growth of *Clostridium botulinum*, inhibit the formation of botulinum toxin in the large intestine, or neutralize botulinum toxin present in the lumen of the

intestine. Instead, BabyBIG neutralizes toxin present in blood, which can reduce complications and shorten hospital stay.

Diagnostic testing, including at CDC, is coordinated through the state health department's laboratory. Follow up with your state health department if you do not receive test results within 5 days.



U.S. Department of Health and Human Services Centers for Disease Control and Prevention

What Is Infant Botulism?

Infant botulism is an intestinal toxemia. The disease results after spores of the bacterium *Clostridium botulinum* or related species are swallowed, temporarily colonize an infant's large intestine, and produce botulinum neurotoxin. The neurotoxin binds to cholinergic nerve terminals and cleaves intracellular proteins necessary for acetylcholine release, resulting in bulbar palsies, hypotonia, and a symmetric, descending, flaccid paralysis.

Notification and Reporting

Infant botulism is a notifiable disease in the United States.

Physicians must promptly notify the state health department of suspected cases, and laboratories must notify the state health department of all confirmed cases. As a courtesy, IBTPP notifies the state health department after BabyBIG infusion is completed.

State health departments report confirmed cases to CDC through the <u>National Notifiable Diseases Surveillance</u> System.

Signs and Symptoms

Patients with infant botulism may present with some or all the following signs and symptoms:

- Constipation
- Poor feeding
- Ptosis
- Sluggish pupils
- Flattened facial expression
- Diminished suck and gag reflexes
- Weak and altered cry
- · Respiratory difficulty and possibly respiratory arrest



Patient recovering from infant botulism displaying continued neck muscle weakness and improved muscle tone, ptosis, and facial

Photo courtesy of the California Department of Public Health.

Treatment

If clinical consultation supports botulism, request treatment immediately and administer it as soon as it's available. Do not wait for laboratory confirmation.

Who Do I Call?

To report suspected cases of infant botulism:

- Immediately contact the Infant Botulism Treatment and Prevention Program (IBTPP) at the California Department of Public Health for a free clinical consultation at 510-231-7600 (24/7). The IBTPP is available for additional consultation and information-sharing with state and local health departments 24/7, as needed.
- After speaking to the IBTPP, immediately contact your state health
 department to receive information on collecting, storing, and submitting
 specimens for analysis to the state public health laboratory or CDC. CDC
 accepts specimens for analysis from state public health laboratories and
 other federal agencies. Private healthcare providers and institutions may
 submit specimens directly to CDC with authorization from their state
 health department.

After consulting with IBTPP, call your state health department.
After-hours and emergency numbers can be found on CSTE's website >



To report suspected cases of other kinds of botulism:

- Immediately contact your state health department.
- If no one answers, contact CDC's Clinical Emergency Botulism Service at 770-488-7100 (24/7).

For more information, visit cdc.gov/botulism.