



Diphtheria

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Key facts

- Diphtheria is a highly contagious disease.
- It can be a serious illness, and it is sometimes fatal, especially in children. It requires immediate medical treatment.
- There are two types of diphtherias:
 - Respiratory diphtheria, which affects the nose and the throat
 - Cutaneous diphtheria, which affects the skin.
- Respiratory diphtheria is more frequent, and more severe than cutaneous diphtheria. In severe cases, the diphtheria bacteria make a toxin or poison, that can spread through the bloodstream and cause breathing problems, heart failure, and nerve damage.
- Diphtheria can be prevented by vaccination. Multiple doses and booster doses are needed to produce and sustain immunity.

Transmission

- Diphtheria is spread through close contact with someone who is infected, or through coughs and sneezes.
- People can also get sick from touching infected skin sores or by touching clothing and objects that have bacteria on it.

Symptoms

- It usually takes 2 to 5 days for symptoms to appear after someone has been exposed to the disease.
- The most common symptoms of **respiratory diphtheria** include:
 - Fever
 - Sore throat
 - Swollen glands in the neck
 - Difficulty breathing and swallowing
 - A thick grey-white coating that may cover the back of the throat, nose and tongue

- The most common symptoms of **cutaneous diphtheria** include:
 - Open sore or ulcer with a clear edge
 - Rash with scales or peeling skin
 - Redness
 - Swelling
 - Pain
- Some people may become infected and have no symptoms, but they can still spread the disease.

Vulnerable people

- Unvaccinated or incompletely immunized people, particularly children under 5 and adults over 40 and elderly.
- People living in areas with damaged health systems and limited healthcare services.
- People living with or in close contact with someone who has diphtheria.
- People living in overcrowded environments, such as in refugee camps, IDP camps, or densely populated residential areas.
- People with weak immune systems, such as those on cancer treatment, people who had organ transplants, or people living with HIV.
- People with underlying medical problems like high blood pressure, cardiovascular disease, diabetes, chronic respiratory disease, chronic kidney disease, chronic infectious diseases, cancer and obesity.

What can you do to prevent and control an epidemic?

Monitoring the community and Identifying sick people

- Identify people with suspected diphtheria.
- Isolate sick people before they spread the disease to others. If children need to be isolated, the caregiver may receive prophylaxis for diphtheria from the health facility.

Referral and treatment

- Immediately refer those with suspected diphtheria to health facilities. If diphtheria is suspected, testing to confirm the disease should be done promptly and treatment should be started as soon as possible. Cases of diphtheria are usually treated with diphtheria antitoxin as well as antibiotics. Anyone that has had diphtheria should also receive vaccine after the acute phase of the illness is over. Individuals who have been in contact with cases of diphtheria should be treated with antibiotics to prevent illness.
- In coordination with health authorities, support contact tracing and follow-up of contacts to identify exposed

individuals.

- Provide psychosocial support to the sick person and their family members.

Safe shelters and spaces

- Reduce overcrowding and improve ventilation in living shelters, workplaces and schools if possible

Social mobilization and health promotion

- Find out the specific advice being given by health and other relevant authorities.
- Model following this advice and inform community members of current health practice advice. Activities could for example include:
 - Support awareness campaigns to educate communities about symptoms, transmission and prevention.
 - Promote good hand hygiene (handwashing with soap).
 - Promote respiratory hygiene and coughing etiquette (cover your cough or sneeze using your sleeve or a tissue, wash hands after coughing or sneezing, do not spit onto the ground or in public).
 - Encourage the regular disinfection of surfaces in high-risk areas such as schools, workplaces, shelters, households.
 - Use personal protection (for example, face mask).
 - Encourage the correct use of antibiotics: Ensure that community members understand that antibiotics should only be taken if prescribed by a health professional and should carefully follow instructions on the duration of the antibiotic's administration. This includes completing the antibiotics course even when people are already feeling well. Never share or use left-over antibiotics.
- Offer support and encouragement to follow the advice.
- Try to gain understanding about if and why health practice advice is not being followed.
- With the guidance of your supervisor and health authorities, work with communities to overcome barriers to following health advice and recommended practices.
- Involve the community in managing rumors and misinformation.

Immunization

- Promote routine vaccination programmes for children
- Support mass vaccination campaigns

Mapping and community assessment

- Make a map of the community.
- Mark the following information on the map:
 - How many people have fallen sick with diphtheria? Where?

- How many people have died? Where? When?
- Who and where are the vulnerable people?
- Where are health facilities and services (include traditional healers)
- Record the following information on the back of the map:
 - When did people start to fall sick with diphtheria?
 - How many people live in the affected community? How many are children under five years?
 - Are most children in the community vaccinated against diphtheria?
 - Is there a vaccination campaign planned? If so, when and where?
 - Do people generally have enough food?
 - How common is it for people to live together in crowded spaces? Is there ventilation and fresh air in homes, schools and workplaces?
 - Apart from children, are there other groups (specific ages, occupations, geographic areas, etc.) that are badly affected?
 - What are the community's habits, practices and beliefs about vaccinations? Are there societal, cultural or religious beliefs that prevent people from getting vaccinated?
 - What are the community's habits, practices and beliefs about caring for and feeding sick people? Consider any differences in roles and responsibilities between women and men.
 - When babies and infants are sick, do women continue to breastfeed them?
 - Is a social mobilization or health promotion programme in place?
 - Which sources do people use/trust the most for information?
 - Are there rumours or misinformation about diphtheria or vaccines? What are the rumours?