

## Anthrax – Quick Reference

(Updated 01/09/02)

**Any suspected case of anthrax (*Bacillus anthracis*) MUST BE TREATED AS A PUBLIC HEALTH EMERGENCY and reported to the Infection Control practitioner Sasha Madison (1-6167) or Tammy Schaffner (1-6163) and the Santa Clara County Health Department (408) 885-4214 after hours (408) 299-2501 immediately.**

### **Bioterrorism Epidemiology:**

- Inhalation anthrax: most likely disease presentation if bacilli intentionally aerosolized
- Person to person transmission does NOT occur

### **Incubation Period:**

- Average 1 – 6 days
- Up to 6 weeks following a bio-aerosol release

### **Clinical Disease:**

- Gastrointestinal: abdominal pain, bloody diarrhea, hematemesis
- Cutaneous: pruritic skin lesion with black eschar and tissue edema,
- Inhalation: Bi-phasic illness
  - Initial phase: flu-like symptoms, low grade fever, non-productive cough, malaise, fatigue, myalgias, mild chest discomfort followed by a short period (several hours to days) of improvement
  - Acute phase: abrupt onset of respiratory distress with dyspnea, stridor, cyanosis, high fever, shock and death within 24 – 36 hours

### **Diagnosis:**

- Presumptive diagnosis based on characteristic skin lesion (cutaneous), intestinal bleeding (gastrointestinal) and respiratory failure with widening mediastinum (inhalation)

### **Treatment:**

- Ciprofloxacin, Penicillin G (if susceptible), Doxycycline

### **Prophylaxis:**

- Ciprofloxacin, Doxycycline

### **Isolation:**

- Inhalation: Standard Precautions
- Cutaneous and gastrointestinal: Standard and Contact Precautions

Reference: Cahill, Christine K., MS, RN, CIC, Infection Control Consultant, California Department of Health Services. Licensing & Certification Program. [California Hospital Bioterrorism Response Planning Guide](#), Section 2-A-1 – Anthrax (*Bacillus anthracis*)