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CASE SERIES

Diphtheria in two Nigerian Hospitals: What is New and the Implications for Control

Diphthérie dans Deux Hôpitaux Nigériens : Ce Qui est Nouveau et les Implications Pour le Contrôle

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ABSTRACT

We recorded three cases of faucial Diphtheria in two Nigerian hospitals between 2021 and 2022. Hitherto, no infections were documented in these hospitals in the prior ten years. All infected children missed their routine childhood vaccinations and presented with reduced feeding, a bull neck and a light yellowish throat or tonsillar pseudo-membrane. Outcome was fatal in the first case after two weeks of antibiotic treatment. Diphtheria anti-toxoids (DAT); were not available at this time in Osun state, Nigeria. Outcome was good in the other two children following treatment with antibiotics and compatible plasma transfusion as an alternative for DAT. The predominant contrasting colour of our reported pseudo-membrane compared to the grey colour dominantly well-known is highlighted. We also proffer Plasma transfusion as an alternative to DAT when unavailable. Disease resurgence from the other associated missed pentavalent vaccines is a potential risk. **WAJM 2023; 40(7): 769–772.**

Keywords: Paediatric, Diphtheria, Vaccine preventable, Infectious, Re-emerging disease.

RÉSUMÉ

Nous avons enregistré trois cas de diphtérie fauve dans deux hôpitaux nigériens entre 2021 et 2022. Jusqu'à présent, aucune infection n'avait été documentée dans ces hôpitaux au cours des dix années précédentes. Tous les enfants infectés n'avaient pas reçu les vaccinations infantiles de routine et présentaient une alimentation réduite, un cou de taureau et une gorge légèrement jaunâtre ou une pseudo-membrane amygdalienne. L'issue a été fatale dans le premier cas après deux semaines de traitement antibiotique. Les antitoxines diphtériques (DAT) n'étaient pas disponibles à cette époque dans l'État d'Osun, au Nigeria. L'évolution a été bonne chez les deux autres enfants après un traitement antibiotique et une transfusion de plasma compatible en remplacement des DAT.

La couleur contrastante prédominante de la pseudo-membrane que nous avons rapportée, comparée à la couleur grise dominante bien connue, est mise en évidence. Nous proposons également la transfusion de plasma comme alternative à la DAT lorsqu'elle n'est pas disponible. La résurgence de la maladie à partir des autres vaccins pentavalents manqués associés est un risque potentiel. **WAJM 2023; 40(7): 769–772.**

Mots clés: Pédiatrie, diphtérie, maladie infectieuse évitable par la vaccination, ré-émergence.

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