



Indiana State
Department of Health
Epidemiology Resource Center

Quick Facts: Diphtheria

What is diphtheria?

Diphtheria is a disease caused by the bacteria *Corynebacterium diphtheriae*. It affects the tonsils, throat, larynx (voice box), and nose. Respiratory diphtheria is a serious disease that can be deadly. About 1 in 10 adults and 1 in 5 children under 5 who get this type of diphtheria die. Less severe diphtheria disease may affect other parts of the body, such as the skin, the eye, or genitals. Diphtheria is very rare in the United States. It is still common in other areas of the world. The last case of diphtheria in Indiana was in 1996.

What are the symptoms of diphtheria?

Respiratory diphtheria usually starts slowly with headache, fever, sore throat and swollen glands in the neck. It may look like there is a gray film covering the back of the throat. Some types of this bacterium may emit a toxin into the blood that can cause the infection to spread in the body, leading to more severe symptoms, including extreme weakness, paleness, and rapid heartbeat. There may be a scaly rash or blisters that become painful open sores on other parts of the body. The time from contact with the bacteria to start of symptoms is 2-5 days.

How is diphtheria spread?

Respiratory diphtheria is spread by contact with the nose or throat droplets of an infected person. This can happen when someone coughs or sneezes near someone else or when someone touches objects with nose or throat droplets on them. Touching infected sores on the body of a person with diphtheria can also spread the disease. A person can spread the disease for up to 2 weeks after infection or until 48 hours after beginning treatment with antibiotics.

Who is at risk for diphtheria?

People who are not up-to-date on their shots are at risk for diphtheria. The risk is low in the United States, but unvaccinated people traveling to or from other countries may accidentally bring the disease here, where it can spread to unvaccinated U.S. residents. Getting a diphtheria vaccine every ten years will keep you protected.

How do I know if I or my child has diphtheria?

See your doctor. If you or your child has been around someone with diphtheria or if either of you have symptoms that match those described above, your doctor may test for the

disease. Many other diseases can cause throat infections. If you have received a vaccine to prevent diphtheria in the past, it is very unlikely that you have the disease.

How can diphtheria be treated?

Since diphtheria is caused by bacteria, it can be treated with antibiotics. People with diphtheria may also be given medicine to reverse the effects of toxins released by the bacteria. Your doctor will decide which treatment is best for you.

How can diphtheria be prevented?

Vaccines can prevent diphtheria. Diphtheria vaccine is combined with tetanus and pertussis vaccines for children and adults. Adults should receive routine tetanus-diphtheria (Td) every ten years. Tdap vaccine, which also protects against pertussis (whooping cough), should be used to replace one routine Td dose for adults and teens. Children should receive doses of DTaP, Tdap, DT, or Td vaccines on the correct schedule. Talk to your doctor to decide which vaccine is right for you or your child.

For Travelers: Diphtheria is a common problem in other parts of the world, especially more temperate regions. Though diphtheria vaccination is a part of the routine vaccination schedule, it is a good idea to check the [CDC travel guidelines](#) for the country or countries you will be visiting and ensure you are up-to-date on your routine and travel vaccinations and 10-year boosters before travelling.

All information presented is intended for public use. More information on diphtheria can be found at:

- <http://www.cdc.gov/diphtheria/index.html>
- <https://www.cdc.gov/diphtheria/vaccination.html>
- <http://www.cdc.gov/vaccines/hcp/acip-recs/vacc-specific/tdap-td.html>