HEALTH ADVISORY: Suspected Foodborne Botulism

Dallas County Health and Human Services has been notified of a confirmed case of botulism, occurring in an adult who sought medical attention for symptoms on October 11th and progressed to respiratory failure. This patient was treated with heptavalent botulinum antitoxin. Investigation is ongoing into the source of the botulinum toxin, and testing of multiple food items is in progress. This advisory is to ascertain whether additional possibly related cases may have been noted recently.

Botulism is a rare illness that is often mistaken for other diseases, such as myasthenia gravis. Healthcare providers should consider botulism and obtain a food history for patients with compatible symptoms. Affected patients are afebrile, and illness typically manifests as bilateral cranial nerve weakness (e.g. blurred vision, diplopia, ptosis, dysphagia, dysarthria, impaired gag reflex, and facial weakness), followed by progressive descending flaccid weakness and respiratory failure.

Botulism is caused by ingestion of a toxin which is produced by the bacterium Clostridium botulinum, and can be associated with consumption of foods which have not been properly refrigerated. Symptoms can begin 6 to 36 hours after eating contaminated food. To prevent botulism, consumers are reminded to carefully read safety labels and discard food that has been improperly stored.

Treatment with heptavalent botulinum antitoxin is most effective when administered early in a suspected patient’s clinical course, in order to reduce symptom progression and severity. Treatment with botulinum antitoxin should not wait for laboratory confirmation. Supportive care is the mainstay of treatment. Clinicians are requested to be aware of the following recommendations:

- Be alert for possible cases of foodborne botulism in any patient with a compatible clinical presentation. Clinicians caring for patients with suspected botulism should immediately contact:
  - Dallas County Health and Human Services at (214) 819-2004; after hours, call (877) 605-2660 to reach the on-call epidemiologist. Supporting information can be faxed to: (214) 819-1933. Public health staff involvement is necessary to facilitate laboratory testing at the state health department and release of antitoxin treatment from CDC.
  - Hospital infection control practitioner for notification.

- Following notification of DCHHS, physicians can obtain direct clinical consultation regarding potential cases by reaching the 24/7 CDC Botulism Clinical Consultation and Antitoxin Release Service, through the CDC Emergency Operations Center at (770) 488-7100 and asking for the clinical emergency botulism officer on call.

Additional information about botulism is available at: [www.cdc.gov/botulism/health-professional.html](http://www.cdc.gov/botulism/health-professional.html) and [emergency.cdc.gov/agent/Botulism/clinicians/treatment.asp](http://emergency.cdc.gov/agent/Botulism/clinicians/treatment.asp).