NATIONAL INSTITUTE FOR COMMUNICABLE DISEASES
Division of the National Health Laboratory Service

CHOLERA OUTBREAK ALERT FOR HEALTHCARE WORKERS

Centre for Enteric Diseases and
Outbreak Response Unit, Division of Public Health Surveillance and Response

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Alert to clinicians - Cholera outbreak in South Africa

All healthcare workers must consider cholera in any person with (or dying from) acute watery diarrhoea.

Case Definition:

For cases of acute watery diarrhoea:

- Collect a stool or rectal swab specimen and request culture for cholera (in addition to other microbiological tests as indicated).
- Where possible, collect specimens before antibiotic treatment is given.
- Notify any suspected cholera case on NMC immediately; do not wait for laboratory results.

Transmission of cholera

- Cholera is transmitted through contaminated water or food, or less commonly person-to-person.
- Cholera bacteria also can live in brackish (slightly salty) and coastal waters. Eating raw shellfish can cause cholera.

Management

The mainstay of cholera treatment is fluid replacement. Mild to moderate cases may be treated with oral rehydration fluid. Severe cases require admission and intravenous administration of fluid. Antibiotic treatment (ciprofloxacin) is recommended for patients with moderate to severe dehydration, as it reduces disease severity and the risk of further transmission.

Communities are urged to drink water from safe water sources, ensure good hand hygiene before and after using the toilet, and before and after handling food.

Additional resources

NICD website

- Guidance on collection of specimens for cholera testing can be found here
- The cholera diagnosis and case management summary can be found here
- The national guidelines for cholera management and control can be found here

NICD hotline (health workers only): 0800 212 552