URGENT – FOR IMMEDIATE DISTRIBUTION TETANUS

Severe Weather Reminders: Tetanus

Severe weather conditions in the Southeast pose an increased risk of injury to the population in the effected areas. The risks stem from flying debris during the storms and sharp debris on the ground following the storms, when cleanup efforts begin. As a result, more people may be exposed to the tetanus bacteria. Emergency physicians and health care workers should therefore be aware of the correct tetanus prophylaxis protocol. A study in the *Annals of Emergency Medicine*[1] recently found that nearly 43% of patients who presented to Emergency Departments with wounds did not receive appropriate tetanus prophylaxis. It should be noted that even minor wounds can present a danger of tetanus, especially in areas affected by floods that carry contaminated soil. According to the Centers for Disease Control and Prevention (CDC), in recent years there has been an increase in the number of cases of tetanus acquired through minor wounds.

While tetanus is now rare in the United States, it is still a present danger. Between 1991 and 2000, according to CDC data, the median hospital stay for tetanus was 16 days, and the case fatality rate was 19%. According to Dr. Martha Roper (*Ann Emerg Med*. 2004;43:315-317), "The vast majority of reported cases and nearly all deaths occur in individuals who are unvaccinated or inadequately vaccinated and thus were potentially preventable." ED physicians should review the Advisory Committee on Immunization Practices'guidelines for tetanus wound management and follow them rigorously, paying special attention to groups that are least likely to be protected. These groups include elderly people (over age 70), immigrants from outside North America or Western Europe, and people with limited education (not beyond grade school).

Tetanus Wound Management (Persons over age 7)

Td=Adult Diphteria / Tetanus Toxoids (ages > 7) TIG=Tetanus Immune Globulin

Vaccination History	Clean, minor wounds		All other wounds	
	Td	TIG	Td	TIG
Unknown or <3 doses	Yes	No	Yes	Yes
3+ doses	No*	No	No**	No

* Yes, if >10 years since last dose
** Yes, if >5 years since last dose

Source: CDC. *MMWR* 1998;47(SS-2):1

1. Study report: *Study report: Talan D. et al. Ann Emerg Med. 2004;43:305-314.*

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