

Appendix A: Disease-Specific Chapters

Chapter: Chancroid

Effective: February 2019

Chancroid

Communicable

Virulent

**Health Protection and Promotion Act:
O. Reg. 135/18 (Designation of Diseases)**

1.0 Aetiologic Agent

Chancroid is caused by *Haemophilus ducreyi*, a gram-negative coccobacillus.¹

2.0 Case Definition

2.1 Surveillance Case Definition

Refer to [Appendix B](#) for Case Definitions.

2.2 Outbreak Case Definition

The outbreak case definition varies with the outbreak under investigation. Please refer to the *Infectious Diseases Protocol, 2018* (or as current) for guidance in developing an outbreak case definition as needed.

The outbreak case definitions are established to reflect the disease and circumstances of the outbreak under investigation. The outbreak case definitions should be developed for each individual outbreak based on its characteristics, reviewed during the course of the outbreak, and modified if necessary, to ensure that the majority of cases are captured by the definition. The case definitions should be created in consideration of the outbreak definitions.

Outbreak cases may be classified by levels of probability (*i.e.* confirmed and/or probable).

3.0 Identification

3.1 Clinical Presentation

An acute bacterial infection localized in the genital area and characterized clinically by single or multiple painful, necrotizing ulcers at the site of infection, frequently accompanied by painful swelling and suppuration of regional lymph nodes.¹

3.2 Diagnosis

See [Appendix B](#) for diagnostic criteria relevant to the Case Definitions.

For further information about human diagnostic testing and laboratory diagnosis, contact the Public Health Ontario Laboratories or refer to the Public Health Ontario

Laboratory Services webpage: <http://www.publichealthontario.ca/en/ServicesAndTools/LaboratoryServices/Pages/default.aspx> and/or the Canadian Guidelines on Sexually Transmitted Infections – Section 3 – Laboratory Diagnosis of Sexually Transmitted Infections (2018, or as current): <https://www.canada.ca/en/public-health/services/infectious-diseases/sexual-health-sexually-transmitted-infections/canadian-guidelines/sexually-transmitted-infections/canadian-guidelines-sexually-transmitted-infections-18.html#a20>.

4.0 Epidemiology

4.1 Occurrence

More often diagnosed in men who are clients of sex trade workers or women working in the sex trade who have multiple partners. It is most prevalent in tropical and subtropical regions of the world; less common in temperate zones and may occur in small outbreaks.¹

Please refer to Public Health Ontario's (PHO) Reportable Disease Trends in Ontario reporting tool and other reports for the most up-to-date information on infectious disease trends in Ontario.

<http://www.publichealthontario.ca/en/DataAndAnalytics/Pages/DataReports.aspx>

For additional national and international epidemiological information, please refer to the Public Health Agency of Canada and the World Health Organization.

4.2 Reservoir

Humans.¹

4.3 Modes of Transmission

Direct sexual contact with discharge from open lesions and pus from buboes. Autoinoculation to non-genital sites may occur in infected people. Sexual abuse must be considered when chancroid is found in children.¹

4.4 Incubation Period

3-5 days up to 14 days.¹

4.5 Period of Communicability

Until lesions are healed and as long as infectious agent persists in the original lesion or discharging regional lymph nodes – up to several weeks or months in the absence of antibiotic therapy.¹

4.6 Host Susceptibility and Resistance

Susceptibility is general; the uncircumcised are at higher risk than the circumcised; there is no evidence of natural resistance.¹

5.0 Reporting Requirements

As per Requirement #3 of the “Reporting of Infectious Diseases” section of the *Infectious Diseases Protocol, 2018* (or as current), the minimum data elements to be reported for each case are specified in the following:

- *Ontario Regulation 569* (Reports) under the *Health Protection and Promotion Act* (HPPA);²
- The iPHIS User Guides published by PHO; and
- Bulletins and directives issued by PHO.

6.0 Prevention and Control Measures

6.1 Personal Prevention Measures

As with other STIs, prevention is mainly through:

- Safer sex education and counselling with emphasis on condom use to decrease transmission;
- Education about the symptoms of chancroid infection and other STIs, and modes of spread; and
- Education about other risk factors and behaviours.

6.2 Infection Prevention and Control Strategies

Refer to PHO’s website at www.publichealthontario.ca to search for the most up-to-date information on Infection Prevention and Control.

6.3 Management of Cases

In addition to the requirements set out in the Requirement #2 of the “Management of Infectious Diseases – Sporadic Cases” and “Investigation and Management of Infectious Diseases Outbreaks” sections of the *Infectious Diseases Protocol, 2018* (or as current), the board of health shall provide appropriate counselling; advise that infected persons with genital ulcers should be tested for herpes, syphilis, HIV and other STIs.

Treatment and follow up is under the direction of the attending health care provider.

Refer to the *Sexual Health and Sexually Transmitted/Blood-Borne Infections Prevention and Control Protocol, 2018* (or as current) for more information, and the Canadian Guidelines on Sexually Transmitted Infections (2018, or as current).^{3,4}

6.4 Management of Contacts

Refer to the *Sexual Health and Sexually Transmitted/Blood-Borne Infections Prevention and Control Protocol, 2018* (or as current) for more information, and the Canadian Guidelines on Sexually Transmitted Infections (2018, or as current).^{3,4}

6.5 Management of Outbreaks

Please see the *Infectious Diseases Protocol, 2018* (or as current) for the public health management of outbreaks or clusters in order to identify the source of illness and manage the outbreak.

7.0 References

1. Heymann DL, editor. *Control of Communicable Diseases Manual*. 20 ed. Washington, D.C: American Public Health Association; 2015.
2. Health Protection and Promotion Act, R.S.O. 1990, Reg. 569, Reports, (2018). Available from: <https://www.ontario.ca/laws/regulation/900569>
3. Public Health Agency of Canada. *Canadian Guidelines on Sexually Transmitted Infections* [Internet]. Ottawa, ON: Her Majesty the Queen in Right of Canada; 2018 [cited May 15, 2018]. Available from: <https://www.canada.ca/en/public-health/services/infectious-diseases/sexual-health-sexually-transmitted-infections/canadian-guidelines/sexually-transmitted-infections.html>
4. Ontario, Ministry of Health and Long-Term Care. *Sexual Health and Sexually Transmitted/ Blood-Borne Infections Prevention and Control Protocol, 2018*. Toronto, ON: Queen's Printer for Ontario; 2018. Available from: http://www.health.gov.on.ca/en/pro/programs/publichealth/oph_standards/protocolsguidelines.aspx

8.0 Document History

Table 1: History of Revisions

Revision Date	Document Section	Description of Revisions
January 2014	General	New template. Title of Section 3.6 changed from “Susceptibility and Resistance” to “Host Susceptibility and Resistance” Title of Section 4.2 changed from “To Public Health Division (PHD)” to “To the Ministry of Health and Long-Term Care (the ministry) or Public Health Ontario (PHO), as specified by the ministry” Section 8.0 Document History added.
January 2014	1.2 Outbreak Case Definition	Entire section revised.

Revision Date	Document Section	Description of Revisions
January 2014	2.1 Clinical Presentation	First paragraph added "...frequently accompanied by painful swelling and suppuration of regional lymph nodes."
January 2014	2.2 Diagnosis	Entire section revised.
January 2014	3.1 Occurrence	Second paragraph changed from "There have been no reported cases of Chancroid in Ontario since 1997." to "As of the end of 2012, there have been no reported cases of chancroid in Ontario since 1997." Addition of the third paragraph: "For further information..."
January 2014	5.2 Infection Prevention and Control Strategies	Entire section revised.
January 2014	5.3 Management of Cases	Removed first paragraph. Second paragraph changed from "Provide appropriate counselling; advise that infected persons with genital ulcers should be tested for herpes, syphilis and HIV." to "Provide appropriate counselling; advise that infected persons with genital ulcers should be tested for herpes, syphilis, HIV and other STIs." Third paragraph changed from "Treatment and follow up is under the direction of the attending physician." to "Treatment and follow up is under the direction of the attending health care provider."
January 2014	5.5 Management of Outbreaks	Entire section revised.
January 2014	6.0 References	Updated.
January 2014	7.0 Additional Resources	Updated.
February 2019	General	Minor revisions were made to support the regulation change to Diseases of Public Health Significance, the epidemiology section and references were updated and Section 8.0 Additional Resources was deleted.

