Appendix B: Provincial Case Definitions for Diseases of Public Health Significance

Disease: Cryptosporidiosis

Effective: February 2019
Cryptosporidiosis

1.0 Provincial Reporting
Confirmed and probable cases of disease

2.0 Type of Surveillance
Case-by-case

3.0 Case Classification

3.1 Confirmed Case
Laboratory confirmation of infection, with or without clinically compatible signs and symptoms, from an appropriate clinical specimen (e.g., stool, intestinal fluid, small bowel biopsy):
- Demonstration of Cryptosporidium oocysts;
- Detection of Cryptosporidium deoxyribonucleic acid (DNA);
- Demonstration of Cryptosporidium antigen by an approved method (e.g., enzyme immunoassay [EIA], immunochromatographic test [ICT]).

3.2 Probable Case
Clinically compatible signs and symptoms in a person with an epidemiologic link to a laboratory-confirmed case.

4.0 Laboratory Evidence

4.1 Laboratory Confirmation
Any of the following will constitute a confirmed case of Cryptosporidiosis:
- Positive for Cryptosporidium oocysts;
- Positive for Cryptosporidium DNA; or
- Positive for Cryptosporidium antigen.

4.2 Approved/Validated Tests
- Microscopy;
- Direct fluorescent antibody (DFA);
- Nucleic acid amplification test (NAAT) for Cryptosporidium; and
- Cryptosporidium immunoassays (EIA, ICT).
4.3 **Indications and Limitations**

- *Cryptosporidium* oocysts can be recovered from microscopic examination of concentrated material from fecal specimens but it is difficult when the number of oocysts is low.
- Trichrome and iron haematoxylin stains are not the methods of choice. Auramine-rhodamine stains may be useful for screening.
- Presumptive identification should be confirmed by modified acid fast stains (e.g., Safranin) or immunoassays.
- While *Cryptosporidium parvum* and *Cryptosporidium hominis* are the leading causes of cryptosporidiosis, other species are known to cause diarrheal illness in immunocompromised individuals.

5.0 **Clinical Evidence**

Clinically compatible signs and symptoms are characterized by diarrhea (often profuse and watery), abdominal cramps, anorexia, fever, nausea, general malaise, and vomiting.

6.0 **ICD 10 Code(s)**

A07.2 Cryptosporidiosis

7.0 **Sources**


8.0 **Document History**

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<td>April 2015</td>
<td>General</td>
<td>New template.</td>
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<td>Section 9.0 Document History added</td>
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<tr>
<td>April 2015</td>
<td>4.2 Approved/Validated Tests</td>
<td>Entire section revised.</td>
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<td>April 2015</td>
<td>8.0 Sources</td>
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<td>February 2019</td>
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<td>Minor revisions were made to support the regulation change to Diseases of Public Health Significance</td>
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