

Appendix B: Provincial Case Definitions for Reportable Diseases

Disease: Cryptosporidiosis

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
OR
- Detection of *Cryptosporidium* deoxyribonucleic acid (DNA)
OR
- 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
- Positive for *Cryptosporidium* antigen

4.2 Approved/Validated Tests

- Microscopy
- Direct fluorescent antibody (DFA)
- Nucleic acid amplification test (NAT) for *Cryptosporidium*
- *Cryptosporidium* immunoassays (EIA, ICT)

4.3 Indications and Limitations

- *Cryptosporidium* oocysts can be recovered from microscopic examination of concentrated material from faecal 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 Code(s)

6.1 ICD-10 Code(s)

A07.2 Cryptosporidiosis

6.2 ICD-9/ICD-9CM Code(s)

007.4 Cryptosporidiosis

7.0 Comments

N/A

8.0 References

- Acha PN, Szyfres B. Zoonoses and communicable diseases common to man and animals. 3rd ed. Volume III. Parasitoses. Washington DC: Pan American Health Organization; 2003.
- National Notifiable Diseases Surveillance System. Case Definitions. [Internet]. Cryptosporidiosis; 2009. Atlanta, GA: Centers for Disease Control and Prevention (CDC); 2009. [cited 2009 Feb 12]. Available from http://www.cdc.gov/ncphi/diss/nndss/casedef/cryptosporidiosis_2009.htm.
- Nationally Notifiable Diseases Case Definitions with Canadian Public Health Laboratory Network (CPHLN) and Epidemiologic Group Draft Edits. March 2007. Based on case definitions as written in the: Health Canada. Case definitions for diseases under national surveillance. Can Commun Dis Rep. 2000; 26 Suppl 3:i-iv 1-122. Available from <http://www.phac-aspc.gc.ca/publicat/ccdr-rmtc/00pdf/cdr26s3e.pdf>.
- Heymann D, editor. Control of communicable diseases manual. 18th ed. Washington: American Public Health Association; 2004.
- Ministry of Health and Long-Term Care, Public Health Division. iPHIS manual. Toronto, ON: Queen's Printer for Ontario; 2005.

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