

Epidemic Potential: Medium

SURVEILLANCE		Sample Collection		Diagnosis	
The causal organism can be isolated from blood during the early stages of the disease and in later stages from feces.		Stool or blood sample		Rapid Diagnostic Test (RDT)	Culture
				Several Non-prequalified commercial tests	Antiserum and AMS required

PREVENTION & CONTROL	Vaccine
<p>Transmission occurs through ingestion of feces and urine contaminated food and water, hence good personal hygiene is critical. WHO recommends vaccination to control endemic typhoid fever and for outbreak control. Among the available typhoid vaccines, TCV is preferred at all ages in view of its improved immunological properties, suitability for use in younger children and expected longer duration of protection.</p>	<p>1 oral vaccine (Ty21a) 2 injectable vaccine (TCV, ViPS)</p>

CASE MANAGEMENT	Treatment
Patients should receive antibiotics. Ciprofloxacin is the first-line choice, however close attention should be given to local antimicrobial resistance.	Aetiological
	Ciprofloxacin/ Azithromycin [take local antimicrobial resistance into account]

- **Aetiological treatment** to reduce mortality

INTERVENTION		COMMODITY	TECHNICAL DESCRIPTION	
SURVEILLANCE	Sample Collection	Triple packaging boxes	Triple packaging boxes for transport	Guidance on regulations for Transport of Infectious Substances 2017 - 2018 [LINK]
		Tubes, blood collection, EDTA	Vacuum tube used for blood collection with EDTA, sterile, capped with vacuum seal. Material: plastic. 4 ml and 6 ml	
		Tubes, blood collection, serum	Vacuum tube used for serum collection, sterile, capped with vacuum seal. Material: plastic. 4 ml and 6 ml	
		Tubes, blood collection, plain/dry	Vacuum tube used for plain/dry blood collection without anticoagulant, sterile, capped with vacuum seal. Material: plastic. 4 ml and 6 ml	
		Sharps container boxes	Puncture resistant container for collection and disposing of used, disposable and auto-disable syringes, needles. 5 L capacity accommodating approximately 100 syringes. Boxes prominently marked.	<ul style="list-style-type: none"> • WHO performance specification E10/IC.1 • WHO/UNICEF standard E10/IC.2 or equivalent
		Stool - Swabs	CultureSwab, Cary-Blair Agar, single swab	
		Faeces collection container	125ml with screw cup	
	Diagnostics	Criteria for selection of specific diagnostic tests may include historical efficacy, adherence to any existing Target Product Profiles, ease of use, necessary throughput, distribution and logistics requirements, and manufacturer production capacity. For some pathogens, consideration may need to be given to the presence of mutations in targeted gene sequences or proteins. WHO can advise on the selection of tests on a case by case basis as determined by a specific event.		
PREVENTION & CONTROL	Vaccine	On EML for some high-risk populations in accordance with WHO Vaccine Policy Paper		
		Typhoid Vaccines: WHO Position Paper - March 2018 [LINK]		
CASE MANAGEMENT	Aetiological Treatment	Ciprofloxacin/ Azithromycin	Pediatric and adult formulation per WHO guidelines. On EML as a WATCH group AB Resistance to Ciprofloxacin widespread. Azithromycin resistance still limited. Cipro not currently listed as first or second choice for typhoid fever. Expert committee expected to consider AB treatment for this indication in 2019.	