

Communicable Diseases Factsheet

Tetanus is a severe disease that can result in serious illness and death. Tetanus vaccination protects against the disease.

Tetanus

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What is tetanus?

Tetanus (sometimes called lock-jaw) is a disease caused by the bacteria tetani. Toxin made by the bacteria attacks a person's nervous system.

What are the symptoms?

- Early symptoms of tetanus include:
- Painful muscle spasms that begin in the jaw (lock jaw)
- · Stiff neck, shoulder and back muscles
- Difficulty swallowing
- · Violent generalized muscle spasms
- Convulsions
- Breathing difficulties

A person may have a fever and sometimes develop abnormal heart rhythms. Complications include pneumonia, broken bones (from the muscle spasms), respiratory failure and cardiac arrest.

How is it spread?

- The disease usually occurs after an incubation period of 3 to 21 days (average 10 days).
- Tetanus is sometimes found in dust and animal faeces. Infection may occur after minor injury (sometimes unnoticed punctures to the skin that are contaminated with soil, dust or manure) or after major injuries such as open fractures, dirty or deep penetrating wounds, and burns.
- Tetanus is not passed on from one person to another.
- Neonatal tetanus (affecting new born babies) can occur in babies born to inadequately immunised mothers, especially after unsterile treatment of the umbilical cord stump.

Who is at risk?

- In Australia, tetanus mostly occurs in older adults who were not adequately immunised.
- In poor countries, with lower immunisation rates, newborn children, and young adults are also at risk.
- Injecting drug users may have a greater risk of being infected with the bacteria from contaminated injection sites.

How is it prevented?

- Immunisation protects against tetanus. Tetanus vaccine is given at 2, 4 and 6 months of age, with boosting doses at 4 years, and between 12 to 17 years.
- Adults who haven't had a booster in the last ten years should get one when they turn 50.
- Individuals, who received a primary course of 3 doses as adults, should receive booster doses 10 and 20 years after the primary course.
- Adults who have sustained tetanus prone wounds (e.g. open fractures, bite wounds, deep penetrating wounds, contaminated wounds or burns) should disinfect the wound and seek medical attention and receive a boosting dose of tetanus vaccine if more than 5 years have elapsed since their last dose. See Immunisation Handbook
- Overseas travellers often need a booster check with your doctor.

How is it diagnosed?

A doctor can diagnose tetanus from the symptoms, and an examination.

How is it treated?

Treatment may include antitoxin, antibiotics, surgical treatment of the infected area and prolonged treatment in the intensive care unit of a hospital.

What is the public health response?

Hospital staff must confidentially notify cases of tetanus to the local public health unit. Public health unit staff will talk to the treating doctor and patient or their carer to identify risk factors that the patient may have, and to enquire about vaccination history. Information on the number of people who get tetanus and their risk factors helps find better ways to prevent the illness.

Updates and other links

Vaccine information for women who are breast feeding: /resources/publichealth/infectious/diseases/pertussis/pregnant_women_info_dtpa.pdf

For further information please call your local Public Health Unit on 1300 066 055 or visit the New South Wales Health website www.health.nsw.gov.au

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