Wisconsin Division of Public Health Communicable Disease Surveillance Guideline

HISTOPLASMOSIS
Last revised May 20, 2011

I. IDENTIFICATION
A. CLINICAL DESCRIPTION: A systemic fungal infection of varying severity caused by *Histoplasma capsulatum*. Infection may be asymptomatic or take one of four clinical forms:
   - **Acute benign respiratory** - mild respiratory illness with general malaise, fever, chills, headache, myalgia, chest pains, nonproductive cough and scattered small calcifications of the lung.
   - **Acute disseminated** - debilitating fever, GI symptoms, bone marrow suppression, lymphadenopathy. Most frequent in children and immunosuppressed; fatal if not treated.
   - **Chronic pulmonary** - clinically and radiologically resembles chronic pulmonary tuberculosis with cavitations, usually in middle-aged and elderly persons with underlying emphysema.
   - **Chronic disseminated** - low-grade fever, weight loss, weakness, liver and spleen enlargement, mucosal ulcers, subacute course with slow progression; fatal if not treated.

B. REPORTING CRITERIA: Laboratory confirmation.

C. LABORATORY CRITERIA FOR CONFIRMATION:
   - Isolation of *H. capsulatum* from culture of bone marrow, sputum, or lesions, OR
   - Histologic demonstration of intracellular yeast cells from bone marrow or tissue biopsy, OR
   - Detection of *H. capsulatum* polysaccharide antigen in urine or serum, OR
   - Rise in CF titers to either histoplasmin or yeast-phase antigen.
   - Positive serology test for anti-H band antibody

D. WISCONSIN CASE DEFINITION: Clinically compatible illness with laboratory confirmation.

II. ACTIONS REQUIRED / PREVENTION MEASURES
A. WISCONSIN DISEASE SURVEILLANCE CATEGORY II: Report to the Local Health Department either electronically through the Wisconsin Electronic Disease Surveillance System (WEDSS), by mail or fax using an Acute and Communicable Disease Case Report (F44151), or by other means within 72 hours upon recognition of a case.

B. EPIDEMIOLOGY REPORTS REQUESTED:
   - *Electronically* Report through WEDSS, along with appropriate disease specific tabs
   - OR
   - *Paper Copy* - Acute and Communicable Diseases Case Report (F44151)

C. PUBLIC HEALTH INTERVENTION:
   In accordance with Wisconsin Administrative rule DHS 145.05, local public health should follow the methods of control recommended in the current edition of Control of Communicable Diseases Manual, edited by David L. Heymann, published by the American Public Health Association.
• Minimize exposure to dust in areas contaminated by bird droppings such as chicken or pigeon coops, bird or bat roosts and surrounding soil.
• Surfaces can be sprayed with water to reduce dust, protective masks should be worn during cleaning. Areas may be chemically decontaminated.
• Identify and decontaminate infectious foci (e.g., attics, bird roosts, barns, etc.).
• No public health intervention for sporadic cases.

III. CONTACTS FOR CONSULTATION


B. BCDER / COMMUNICABLE DISEASE EPIDEMIOLOGY SECTION: (608) 267-9003

C. WISCONSIN STATE LABORATORY OF HYGIENE / MYCOLOGY: (608) 224-6261

IV. RELATED REFERENCES
