

TOXIC SHOCK SYNDROME **(Staphylococcal or Streptococcal)**

Last revised July 29, 2011

I. IDENTIFICATION

- A. **CLINICAL DESCRIPTION:** Toxic shock syndrome (TSS) is a severe toxin-mediated illness associated with invasive or noninvasive infection by *Staphylococcus aureus* or, as in the case of Streptococcal Toxic Shock Syndrome (STSS), by group A *Streptococcus* (*Streptococcus pyogenes*). Streptococcal toxic shock syndrome (STSS) is most often associated with infection of a cutaneous lesion and is characterized by a rapidly progressing clinical course. Toxic shock syndrome due to staphylococcal infection has been associated with tampon and intravaginal contraceptive use, recent childbirth or abortion, and complication of surgical or non-surgical wounds. The case fatality rate (CFR) for TSS due to *Staphylococci* is about 5%; however, the CFR for STSS may exceed 50%.
- B. **REPORTING CRITERIA:** Clinical diagnosis.
- C. **LABORATORY CRITERIA FOR CONFIRMATION:** Please see Toxic Shock Syndrome Case Criteria Worksheet.
- D. **WISCONSIN CASE DEFINITION:** Due to extensive and complex case definition criteria for both TSS and STSS, please use the Toxic Shock Syndrome Case Criteria Worksheet to determine if case meets confirmatory criteria.

II. ACTIONS REQUIRED / PREVENTION MEASURES

- A. **WISCONSIN DISEASE SURVEILLANCE CATEGORY II:**
Report to the patient's 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 ([F-44151](#)), or by other means within 72 hours upon recognition of a case or suspected case.
- B. **EPIDEMIOLOGY REPORTS REQUIRED:**
- *Electronically* – Report through WEDSS, including appropriate disease-specific tabs
OR
 - *Paper Copy* – Acute and Communicable Diseases Case Report ([F-44151](#)) AND Toxic Shock Syndrome Case Criteria Worksheet
- C. **PUBLIC HEALTH INTERVENTIONS:**
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.

III. CONTACTS FOR CONSULTATION

- A. **LOCAL HEALTH DEPARTMENT – REGIONAL OFFICES – TRIBAL AGENCIES:**
<http://www.dhs.wisconsin.gov/localhealth/index.htm>
- B. **BCDER / COMMUNICABLE DISEASE EPIDEMIOLOGY SECTION:** (608) 267-9003

C. WISCONSIN STATE LABORATORY OF HYGIENE / BACTERIOLOGY: (608) 263-3421

IV. RELATED REFERENCES

- Council of State and Territorial Epidemiologists. Nationally Notifiable Infectious Conditions: Toxic-Shock Syndrome 2011 Case Definition.
http://www.cdc.gov/osels/ph_surveillance/nndss/casedef/toxicsscurrent.htm
- Council of State and Territorial Epidemiologists. Nationally Notifiable Infectious Conditions: Streptococcal Toxic-Shock Syndrome 2010 Case Definition.
http://www.cdc.gov/osels/ph_surveillance/nndss/casedef/streptococcalcurrent.htm
- Heymann DL, ed. Toxic Shock Syndrome. In: *Control of Communicable Diseases Manual*. 19th ed. Washington, DC: American Public Health Association, 2008:576-577
- Pickering LK, ed. Staphylococcal infections and group A streptococcal infections. In: *Red Book: 2009 Report of the Committee on Infectious Diseases*. 28th ed. Elk Grove Village, IL: American Academy of Pediatrics, 2009:601-628
- The working group on severe streptococcal infections. Defining the group A streptococcal toxic shock syndrome: rationale and consensus definition. *JAMA*, 1993;269:390-391
- Wharton M, Chorba TL, Vogt RL, Morse DL, Buehler JW. Case definitions for public health surveillance. *MMWR Recommended Reports*, 1990;39(RR-13):1-43