Tetanus – A Department of Health Case Study

The Department of Health was notified of a confirmed tetanus case diagnosed on the classic clinical presentation of opisthotonos. Opisthotonos is a posture taken due to generalised muscular spasm in which there is extreme hyperextension of back muscles. The case was an 86 year old man, born in Italy. He had no evidence of previous tetanus vaccination. He received a splinter under his thumbnail while gardening on 1 July.

He visited his GP and received antibiotics but no tetanus-containing vaccination or tetanus immunoglobulin. About five days later he developed jaw pain, difficulty closing his mouth and swallowing. This was followed by stiffness in his upper and lower limbs. He presented to a Melbourne hospital on 10 July with the classic symptoms of opisthotonos. He received tetanus immunoglobulin and required ICU admission and intubation for management.

Tetanus is a disease that results from wound infection from the spores of the bacteria Clostridium tetani found in manured soil. The injury may be as trivial as a splinter. At the site of infection the spores germinate. Tetanus toxin is released and reaches the central nervous system where it becomes fixed to gangliosides in the spinal cord and brain stem and causes clinical disease. The disease occurs after an incubation period of usually three to 21 days (range one day to several months).

References and further reading

The Australian Immunisation Handbook 10th Edition