

SUMMARY

Disease	Botulism
Agent	Botulinum toxin
Indications of Terrorist Release versus Natural Incidence	In a bioterrorism attack, botulinum toxin would likely be released as an aerosol, hence respiratory symptoms could accompany neurological manifestations (gastrointestinal symptoms may be present as well)
Possible Means of Exposure	Inhalation, ingestion of contaminated food or water, contamination of an open wound by live bacteria
Incubation	Inhalational: 12-72 hrs Foodborne: 2 hrs to 8 d
Primary Symptoms of Inhalational Botulism	Increasing muscle weakness and paralysis beginning in the face and progressing down the body symmetrically, chest pain and nonproductive cough; consider botulism in any cluster of pts w/ sudden weakness or paralysis w/o headache or fever
Diagnostic Tool of Choice	Mouse bioassay (must be sent to New York City or state health department, or CDC)
Treatment	Antitoxin: trivalent (types A, B, E) equine serum
Post-Exposure Prophylaxis	To preserve scarce supplies of antitoxin, asymptomatic exposed persons should delay prophylactic Rx and remain under observation
Vaccine	Under development