

CRITERIA FOR CLINICAL DIAGNOSIS OF CRIMEAN-CONGO HAEMORRHAGIC FEVER

R Swanepoel, J H Mynhardt and S Harvey - 1987

	Incubation period following known or potential exposure:	
	<1 week	≥1 week or undetermined
I. HISTORY OF EXPOSURE TO INFECTION:		
Bitten by tick/s or crushed tick/s with bare hands	3	2**
OR		
Had direct contact with fresh blood or other tissues of live stock or game animals	3**	2***
OR		
Had direct contact with blood, secretions or excretions of confirmed or suspected CCHF patient (including needle pricks)	3	2
OR		
Resided in or visited a rural environment where contact with livestock or ticks was possible, but a specific incident constituting exposure cannot be identified	2	1
II. SIGNS AND SYMPTOMS:		
Sudden onset		1
Fever ≥ 38°C on at least one occasion		1
Severe headache		1
Myalgia		1
Nausea and/or vomiting		1
Bleeding tendency: petechial rash, ecchymoses, epistaxis, haematemesis haematuria or melaena		3
III. CLINICAL PATHOLOGY DURING FIRST 5 DAYS OF ILLNESS:		
Leukopaenia or leukocytosis		1
WCC < 3 x 10 ⁹ /l or ≥ 9 x 10 ⁹ /l		
Thrombocytopaenia		
Platelets < 150 x 10 ⁹ /l		1
Platelets < 100 x 10 ⁹ /l		2
OR		
≥ 50% decrease in either WCC or platelet counts within 3 days		1
Abnormal PI		1
Abnormal PTT		1
Raised transaminases		
AST ≥ 100 U/l		1
ALT ≥ 100 U/l		1

*South African tick-borne typhus and ehrlichiosis must be excluded.

**Rift Valley fever and anthrax must be excluded.

***Brucellosis, Q fever and anthrax must be excluded.

A total score of 12 points or more constitutes an indication for treating a patient as a case of CCHF.