CORRIGENDA, 13 February 2024

Laboratory testing for diphtheria in outbreak settings:
interim guidance, 26 January 2024

(WHO/Diph/Laboratory/2024.1)

Page 9, Lines 25–31

Delete:  As the outbreak continues, it may be necessary to consider further decentralization of testing to subnational laboratories, to relieve demands on the NRL to both support the national network and provide confirmatory testing. This is especially relevant in settings where the NRL is located far from the epicentre of the outbreak, leading to greater challenges in maintaining specimen viability during prolonged or suboptimal transportation conditions. The type of testing that could be decentralized will depend on the epidemiological features of the outbreak, and the resources available in the country, but may include (in additional to primary culture and presumptive biochemical identification) Elek testing, AST or PCR techniques for tox gene detection of identification. However, decentralization should only be considered for a limited number of subnational laboratories that are capable of supporting the outbreak response owing to their proximity or available expertise.

Insert:  As the outbreak continues, it may be necessary to consider further decentralization of testing to subnational laboratories, to relieve demands on the NRL to both support the national network and provide confirmatory testing. This is especially relevant in settings where the NRL is located far from the epicentre of the outbreak, leading to greater challenges in maintaining specimen viability during prolonged or suboptimal transportation conditions. The type of testing that could be decentralized will depend on the epidemiological features of the outbreak, and the resources available in the country, but may include (in additional to primary culture and presumptive biochemical identification) Elek testing, AST or PCR techniques for tox gene detection or identification. However, decentralization should only be considered for a limited number of subnational laboratories that are capable of supporting the outbreak response owing to their proximity or available expertise.

Page 10, Lines 2–6

Delete:  Laboratories should follow national reporting requirements, with all test results immediately reported to national authorities. Reported cases and incidence of diphtheria are collected annually through the WHO/United Nations Children’s Fund (UNICEF) Joint Reporting Form on Immunization (JRF). In addition, States Parties to the International Health Regulations (IHR) (2005) have an obligation to share with WHO relevant public health information for events for which they notified WHO, using the decision instrument in Annex 1 of the IHR (2005), for more timely detection of, and response to, diphtheria outbreaks (31).

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These corrections have been incorporated into the electronic file.