

CHANCROID

- A. Causative agent:** *Haemophilus ducreyi*, a gram-negative, facultative anaerobic bacillus. Requires hemin (X-factor) for growth.
- B. Usual sources and routes of infection:** Direct sexual contact with discharges from open lesions and pus from buboes. The probability of transmission during a single sexual exposure is estimated at 0.35. Autoinoculation to non-genital sites can occur in infected persons. Trauma or abrasion is necessary for organisms to penetrate the epidermis.
- C. Incubation period:** Usually 4 to 7 days, rarely less than 3 or more than 10 days.
- D. Period of communicability:** Until healed and as long as the agent persists in lesions or discharging regional lymph nodes – up to several weeks or months without treatment. The duration of infectivity in the absence of treatment for women is estimated at 45 days.
- E. Investigation of a Reported Case:**
- 1. Form(s):** See Section VI, Investigation and Report Forms by Disease or Condition.
 - 2. Investigation should include:**
 - Patient interview and contact tracing for should be done aggressively using applicable CDC guidelines, which may be found in *Recommendations for Partner Services Programs for HIV Infection, Syphilis, Gonorrhea, and Chlamydial Infection*, available at <http://www.cdc.gov/mmwr/pdf/rr/rr57e1030.pdf>.
 - Completion and mailing, faxing, or secure electronic upload of the Idaho STD/HIV Investigation Form (See Section VI: Investigation Forms) according instructions within one week of notification of the case. Submitting this form is a requirement of the STD/HIV Prevention Contract.
 - Contact/partner investigations: the Idaho STD/HIV Investigation Form should be initiated on all sexual partners and other contacts identified in interviews. Each contact should be listed, and ultimately, a disposition posted on the form. Identified suspects and associates also should have the Idaho STD/HIV Investigation Form initiated and be listed on the original patient's form. Sex partners having contact with an infected individual during the 10 days prior to symptoms and before treatment should receive examination and treatment.
 - The Idaho STD/HIV Investigation Form should be dispositioned within one week from date initiated, and forwarded to the OEFI Epidemiology Program. Maintain a copy for your records.
- F. Laboratory Testing and Criteria Needed for Confirmation:** Verifying diagnosis is of interest when investigating chancroid; however chancroid testing availability is limited. Serologic testing is unavailable for chancroid and culture requires special media which is not widely available. Even using these media, sensitivity is $\leq 80\%$.

The Idaho Bureau of Laboratories (IBL) has arranged with the Centers for Disease Control and Prevention (CDC) to perform PCR testing on specimens collected from suspected chancroid lesions. This is a multiplex PCR test that will also detect Herpes,

Treponema pallidum, Lymphogranuloma venereum, and gonococcus. Published sensitivity is 100% for *H. ducreyi*. Specificity is generally 100%, as well, for PCR assays.

Specimens must be kept cool and tested within 24 hours **-or-** can be tested at >24 hours if frozen at -70C. Specimens must be on a dry swab placed in a sterile vial, and kept cold. Collection kits will be supplied by IBL and each district should have 4 on hand.

Additional information on specimen collection and shipping is available in Section VII.

Because definitive chancroid testing can be problematic, a report is usually made based on clinical criteria. Patients should be tested for other causes of genital ulcers, including serologic tests for syphilis and a test for HSV on ulcer exudate.

G. Disease Trends in Idaho: See website at www.epi.idaho.gov.

H. Treatment: Refer to the most recent CDC Sexually Transmitted Diseases Treatment Guidelines for recommended and alternative regimens, information on follow-up, recommended testing for other STD, and other patient considerations, including pregnancy and HIV infection. The most recent version is available at <http://www.cdc.gov/std/treatment/2010/toc.htm> or visit the CDC web site (www.cdc.gov) and run a search for the guidelines.

Successful treatment for chancroid cures the infection, resolves the clinical symptoms, and prevents transmission to others. HIV and syphilis testing is recommended. Patients should be re-examined 3-7 days after initiation of treatment.

I. References (including treatment recommendations):

Sexually Transmitted Diseases Treatment Guidelines 2010. These are available at <http://www.cdc.gov/std/treatment/2010/toc.htm> or go to the CDC web site (www.cdc.gov) and run a search for the guidelines.

Centers for Disease Control and Prevention. Recommendations for Partner Services Programs for HIV Infection, Syphilis, Gonorrhea, and Chlamydial Infection. MMWR Early Release 2008;57 October 30, 2008. Available at <http://www.cdc.gov/mmwr/pdf/rr/rr57e1030.pdf>

Centers for Disease Control and Prevention. Case definitions for infectious conditions under public health surveillance. MMWR 1997;46(No.RR-10):34-38. Available at: http://www.cdc.gov/osels/ph_surveillance/nndss/casedef/chancroid_current.htm

Instructions and Code Descriptions for the Idaho STD/HIV Investigation Form. Please contact OEFI Epidemiology Program for a copy if you do not have this resource available at your office.