Mycobacterial Disease Other Than Tuberculosis (MOTT)

REPORTING INFORMATION

- **Class B:** Report the case, suspected case, and/or a positive laboratory result to the county local health department where the patient resides by the close of the next business day. If patient residence is unknown, report to the local public health department in which the reporting health care provider or laboratory is located.

- **Reporting Form(s) and/or Mechanism:** The Ohio Disease Reporting System (ODRS) should be used to report lab findings to the Ohio Department of Health (ODH). For healthcare providers without access to ODRS, you may use the Ohio Confidential Reportable Disease Form (HEA 3334, rev. 1/09 [http://www.odh.ohio.gov/pdf/forms/hea3334.pdf](http://www.odh.ohio.gov/pdf/forms/hea3334.pdf)).

- **Electronic Lab Reporting (ELR), or telephone.** Local public health departments report the case, suspected case and/or a positive laboratory result to the Ohio Department of Health (ODH) via the Ohio Disease Reporting System (ODRS) by the end of the next business day.

- **Key fields for ODRS reporting include:** laboratory date collected, specimen type, test name, result, organism, and result date.

AGENTS

There are hundreds of mycobacteria that may be pathogenic to humans. MOTT includes all mycobacteria other than those belonging to *M. tuberculosis* complex (i.e. *M. tuberculosis, M. bovis, M. bovis BCG, M. africanum, M. microti, M. canetti, M. pinipedii*) and *M. leprae*, which causes Hansen Disease (*leprosy*).

CASE DEFINITION (ODH, 2009)

The Centers for Disease Control and Prevention has not established a case definition for MOTT. Reports should be based upon the clinical signs and symptoms and the laboratory criteria described below.

**Clinical Description**

A bacterial infection caused by mycobacteria other than those belonging to *M. tuberculosis* complex and *M. leprae*, other separately reportable Class B diseases.

**Laboratory Criteria for Diagnosis**

- Isolation of a MOTT from a clinical specimen or
- Demonstration of a MOTT from a clinical specimen by nucleic acid amplification

**Case Classification**

- **Suspect:** A clinically compatible case without laboratory confirmation.
- **Confirmed:** A clinically compatible case that is laboratory confirmed.
- **Not a Case:** This status will not generally be used when reporting a case, but may be used to reclassify a report if investigation revealed that it was not a case.

**SIGNS AND SYMPTOMS**

Indications of a MOTT infection will vary depending on the MOTT and the part of the body infected.
DIAGNOSIS
The definitive diagnosis of MOTT requires the isolation of a MOTT from the patient. MOTT may infect any part of the body.

EPIDEMIOLOGY
Source
MOTT are found in humans, animals, and the environment.

Occurrence
Present in all parts of the world.

Mode of Transmission
Dependent upon the MOTT involved; transmission may be person-to-person, animal-to-person, or environmental (e.g. waterborne).

Period of Communicability
Dependent upon the MOTT involved.

Incubation Period
Dependent upon the MOTT involved.

PUBLIC HEALTH MANAGEMENT
Case
Management of MOTT infection is handled in the private sector; public health is not involved unless the person is also infected with M. tuberculosis complex or M. leprae.

Outbreaks
Outbreaks of MOTT infections are reportable to the local health department. Outbreak technical assistance is provided by the Tuberculosis and Healthcare Associated Infection group (614) 995-5599.

Prevention and Control
Dependent upon the MOTT involved; may involve respiratory and contact precautions.