

## V1.0 VARIANT CREUTZFELDT – JAKOB DISEASE

Version	Status	Last reviewed	Endorsement date	Implementation date
1.0	Initial CDNA case definition	CDWG November 2009	CDNA 16 December 2009	1 July 2010

### Reporting

Confirmed and probable cases should be notified. (NB: a “confirmed” case is equivalent to the ANCJDR classification of “definite”)

### Confirmed case

A confirmed case requires laboratory definitive evidence AND clinical evidence

### Laboratory definitive evidence

Neuropathological confirmation of vCJD

### Clinical evidence

Progressive neuropsychiatric disorder

### Probable case

A probable case requires clinical definitive evidence

OR

Clinical suggestive evidence AND laboratory suggestive evidence.

### Clinical definitive evidence

1. Progressive neuropsychiatric disorder AND duration of illness greater than six months AND routine investigations do not suggest an alternative diagnosis AND no history of potential iatrogenic exposure AND no evidence of a familial form of TSE

AND

2. Four of the following symptoms:
  - a. Early psychiatric symptoms
  - b. Persistent painful sensory symptoms
  - c. Ataxia
  - d. Myoclonus or chorea or dystonia
  - e. Dementia

AND

3. Bilateral pulvinar high signals on magnetic resonance imaging (MRI) scans

AND

4. Electroencephalogram (EEG) which does not exhibit the typical appearance of classic CJD

### Clinical suggestive evidence

1. Progressive neuropsychiatric disorder AND duration of illness greater than six months AND routine investigations do not suggest an alternative diagnosis AND no history of potential iatrogenic exposure AND no evidence of a familial form of TSE

### Laboratory suggestive evidence

1. A PrP<sup>Sc</sup> positive tonsil biopsy