in 1978, TSS can cause acute multisystem organ failure and a clinical picture that resembles septic shock. TSS became well known in 1980 because of the striking relationship between the disease and tampon use (Nakase, 2000). An aggressive health education campaign about the dangers of prolonged tampon use and a change in the chemical composition of tampons have markedly reduced the incidence of TSS in menstruating women. Cases of TSS have also been reported in men, older women, and children.

Diagnostic Evaluation

Diagnosis is established on the basis of the criteria established by the Centers for Disease Control and Prevention's toxic case definition (Box 23-16). A history of tampon use contributes to the diagnosis. Additional laboratory tests include cultures from blood, the vagina, the cervix, and any discharge. Other laboratory tests are those that facilitate the management of shock.

Box 23-16

Criteria for Definition of Toxic Shock Syndrome

Toxic Shock Syndrome (Other Than Streptococcal)

2011 Case Definition

Clinical Criteria

An illness with the following clinical manifestations:

- Fever: Temperature ≥102.0° F (≥38.9° C)
- Rash: Diffuse macular erythroderma
- Desquamation: 1 to 2 weeks after onset of rash
- Hypotension: Systolic blood pressure (BP) ≤90 mm Hg for adults or less than fifth percentile by age for children younger than 16 years old
- Multisystem involvement (three or more of the following organ systems):