Background:
Toxins purified from *Clostridium perfringens* may be used in biochemical warfare. The epsilon toxins are most likely to be delivered as an aerosol, although water-borne disease is conceivable. The epsilon toxins change cell membrane integrity and cause intracellular electrolyte disturbances, which lead to cell dysfunction and death. All suspected or confirmed cases of *clostridium perfringens* must be reported to the local department of public health and the Illinois Department of Public Health (IDPH).

Incubation Period:
Usually 1 to 6 hours post exposure.

Signs/Symptoms:
1) Pulmonary: May see respiratory irritation, cough, bronchospasm, with severe cases developing ARDS and respiratory failure.
2) Cardiac: Tachycardia and/or hypotension may be seen.
3) GI: Nausea, vomiting and diarrhea may potentially be seen with food/water-borne contamination (much like *C. perfringens*-induced food poisoning).
4) CNS: The *C. perfringens* epsilon toxin is a potent neurotoxin which can cause vacuoles to form in nerve and brain cells resulting in dysfunction and death. Weakness, dizziness, ataxia, and coma leading to death may occur.
5) Pancytopenia may be a late complication of severe exposure with resultant bleeding, bruising and immunosuppression.

Treatment:
No antidote exists for these toxins. Standard supportive care with airway precautions is the mainstay of treatment.