Introduction:
Worldwide, the prevalence of tetanus has decreased. However, even if progress has been made in the combat to eradicate tetanus it may be a cause of admission to intensive care. The objectives of our study are to determine epidemiological, clinical and prognostic characteristics for severe tetanus in our unit.

Methods:
We conducted a retrospective study in the medical intensive care unit of Ibn Rushd hospital in Casablanca in Morocco from 2010 to 2016. We studied the epidemiological, clinical and prognostic characteristics of the patients who were admitted for severe tetanus.

Results:
The incidence of severe tetanus was 2.04% affecting male in 100%. 41.9% were aged between 31 and 40 years old. In 85.7% there were an integumentary portal of entry. Contractures were present in 69% of the cases. At intensive care unit admission, 21.4% of the patients were sedated. The anti-tetanus vaccination was never updated. According to the Dakar score, 28.6% of the patients were listed Dakar 1, 54.8% Dakar 2 and 16.6% Dakar 3. For the Mollaret score, the crude form was found in 44.2%, the acute generalized form was found in 32.6% and the severe form in 20.9% of the cases. Mechanical ventilation was necessary in 83.3%. Diazepam and baclofen were used in 92.9%, phenobarbital in 76.2% and propofol in 42.85%. A serotherapy was used for all the patients and a preliminary vaccination dose for 26.9%. All the patients received antibiotics, penicillin G 33.33% and metronidazole 76.2%. The mortality was 61.9%. The length of intensive care stay was significantly higher. The need for an intubation, its duration and the occurrence of autonomic dysfunction have significantly influenced the mortality.

Conclusion:
To improve the prognosis in these serious forms of tetanus, it is highly important to identify the warning signs and refer patients in intensive care for early and appropriate management in intensive care.