Communicable Diseases Report, NSW, November and December 2012

Communicable Diseases Branch Health Protection NSW

For updated information, including data and facts on specific diseases, visit www.health.nsw.gov.au and click on **Public Health** and then **Infectious Diseases**. The communicable diseases site is available at: http://www.health.nsw.gov.au/ publichealth/infectious/index.asp.

Figure 1 and Tables 1 and 2 show notifications of communicable diseases with onset in November and December 2012 in New South Wales (NSW).

Enteric infections

Outbreaks of suspected foodborne disease

There were seven outbreaks of suspected foodborne disease reported in NSW in the period (two in November and five in December), affecting at least 59 people. All outbreaks were thought to be caused by contaminated restaurant food. Of the seven outbreaks, three were reported directly to Public Health Units by the treating doctors or affected individuals, three were reported to the NSW Food Authority and one was identified from an investigation of *Salmonella* Singapore notifications clustered in time and location.

S. Singapore, S. Typhimurium and *Clostridium perfrin*gens caused illness in one outbreak each. However, despite thorough case interviews, the food vehicles could not be identified in these outbreaks as cases consumed multiple foods in each instance and no leftover foods were available for testing. In the remaining four outbreaks, the causative organism could not be identified due to either lack of stool collection from ill people and/or lack of sampling of suspected food vehicles.

Viral gastrointestinal disease

There were 115 outbreaks of gastroenteritis in institutions reported in NSW in the period (72 in November and 43 in December), affecting at least 1735 people. The previous 5-year average for this period was 51 outbreaks. Of the 115 outbreaks:

- 52 outbreaks (45%) occurred in aged-care facilities;
 41 (79%) of these had one or more stool samples collected norovirus was confirmed in 17 (41%) outbreaks and rotavirus was confirmed in one (2%) outbreak.
- 46 outbreaks (40%) occurred in child-care centres; 7 (15%) of these had one or more stool samples collected rotavirus was confirmed in one (14%) outbreak.
- 15 outbreaks (13%) occurred in hospitals; of these, one or more stool samples were collected in 14 (93%) outbreaks norovirus was confirmed in 11 (79%) outbreaks and rotavirus was confirmed in one (7%) outbreak.
- Two outbreaks (2%) occurred in other health facilities and no stool samples were collected.

A stool specimen was collected in 62 outbreaks (54%); of these, no agent was identified in 32 outbreaks (52%).

Respiratory infections *Influenza*

Influenza, as measured by the number of people who presented with influenza-like illness to 59 of the state's largest emergency departments, continued to circulate at low levels in NSW during November and December 2012. In addition, the number of people who tested positive for influenza A by diagnostic laboratories decreased to preseasonal levels throughout November and December after a peak in late June.

- In November, there were:
- 68 presentations to emergency departments (rate 0.4 per 1000 presentations)
- 70 cases of laboratory-confirmed influenza including:
 - 14 (20%) influenza A
 - 56 (80%) influenza B.

In December, there were:

- 67 presentations to emergency departments (rate 0.4 per 1000 presentations)
- 45 cases of laboratory-confirmed influenza including:
 - 25 (56%) influenza A
 - 20 (44%) influenza B.

For a more detailed report on respiratory activity in NSW see: http://www.health.nsw.gov.au/PublicHealth/Infectious/ influenza_reports.asp.

Vaccine-preventable diseases

Meningococcal disease

Five cases of meningococcal disease were notified in NSW in the period (three in November and two in December), a decrease from nine notified for the same period in 2011. The age of the cases ranged from 2 to 86 years; only one case was aged less than 5 years. An elderly woman from Hunter New England Local Health District died due to meningococcal B infection during this period.

Of the five cases, three (60%) were due to serogroup B (for which there is no vaccine), one (20%) was due to serogroup C, and one (20%) was due to serogroup Y. The notification of invasive meningococcal disease caused by serogroup C was in a 26-year old male traveller who had recently arrived from Europe.

Immunisation against meningococcal C disease is recommended for all children at the age of 12 months, as well as people at high risk of disease.¹

Measles

Two cases of measles were notified in NSW in November and none in December. This was a decrease compared to the 77 notifications in September and October 2012. These two cases were the last associated with the measles virus genotype D8 outbreak that began in April. The outbreak was linked to a young traveller who was infected in Thailand.

The first case was a 13-year-old male from metropolitan Sydney with an unknown vaccination history. He was epidemiologically linked to his sister, who had previously been notified with laboratory-confirmed measles (measles virus genotype D8). The second case, the last of the outbreak, was a 14-year-old unvaccinated male from Sydney. The source of infection for this serologicallyconfirmed measles infection remains unknown.

Two doses of measles-mumps-rubella vaccine are recommended for all children (at 12 months and at 4 years of age),¹ as well as all young adults planning international travel.

Pertussis

There were 741 pertussis notifications in NSW during the reporting period (430 in November and 311 in December). This is approximately one-third of the 2120 cases notified for the same period in 2011, and represents the lowest number of notifications for this 2-month period since polymerase chain reaction diagnostic testing became

widely adopted in 2008. Most cases were in the 5–9-year age group (n = 212), followed by the 10–14 (n = 153) and 0–4-year age groups (n = 117).

Direct protection for young infants remains available through free vaccination for pertussis that is administered at 2, 4 and 6 months of age. The first dose can be provided as early as 6 weeks of age. There is also a booster dose at $3\frac{1}{2}$ to 4 years. New parents and grandparents should also discuss the benefits of pertussis vaccination for themselves with their general practitioner.

Sexually transmissible infections and bloodborne viruses Chlamydia

After reaching a peak of 2047 notifications in February 2012, the number of monthly chlamydia notifications has decreased. There were 3291 notifications in NSW in November and December 2012, identical to the same period in 2011. A spike in chlamydia notifications is often seen at the beginning of the year, though it was particularly high in 2012.

Gonorrhoea

There were 635 confirmed cases of gonorrhoea notified in NSW in November and December, an increase of 5.8% compared to the same period in 2011 (n = 600). The majority of notifications were in males (n = 508), and the most commonly notified age group was 20–24 years (n = 134).

Syphilis

There were 58 syphilis notifications in NSW in November and 30 in December, a decrease since the monthly peak of 78 notifications in July. Delayed reporting may account for some of this decrease.

Lymphogranuloma venereum

There was an increase in the number of notifications of lymphogranuloma venereum in the second half of 2012. There were 11 notifications in NSW in November and December, which is higher than the same period in 2011 (n = 4). Of the 11 notifications, all were male, ranging in age from 18 to 75 years.

Reference

1. National Health and Medical Research Council. The Australian Immunisation Handbook. 9th ed. Canberra: Australian Government Department of Health and Ageing; 2008.



Table 1. Notifications of scheduled medical conditions with an onset date in November 2012 by Local Health District, NSW

Condition			:					Local Hea	Ith District		;			:	:		To	tal
	Murrumpiagee (including Albury)	NSW	NSW	vest E	New ngland	NSW	Mild North Coast	Coast	Sydney	south Eastern Sydney	Illawarra Shoalhaven	syaney	soutn Western Sydney	Viestern Sydney	nepean Blue Mountains	Health	Nov ^b	rear to date ^b
Bloodborne and sexually transmissible Chancroid ^a	I	,	I	,	1	,	I	I	I	1	I	I	I	1	1	I	1	1
Chlamydia (genital) ^a Gonorrhoea	55 -	46	69	8 0	272 26	82 5	21	85 10	159 29	353 129	85 9	182 75	166 26	174 44	80 6	m = ۳	1851 373	19 801 3826
Hepatitis B – acute viral ^a Homatitis B – acute viral ^a	ו כ		110		200			<u>-</u> 1	ן י ג ו א	<u>i</u> - 5		1 4	2 1 6	: - 6	שופ) -	22	22
Hepatitis C - acute Hepatitis C - acute viral ^a	4 I ;	•	י - נ			1 7	I I C	- ' १	2 I ;	- • • •	n I Ļ			4 I C	o ← ć	- ' ;	1000	47
Hepatitis C – other Hepatitis D – unspecified ^a	<u> </u>	4 1	- 1	7 1	3.2	2 1	×ι	77	= '	<u>+</u>	<u>ט</u> ו	- 24	ŧ '	- 78	2 1	ς, I		3009 5
Lymphogranuloma venereum Syphilis	1 1	1 1	1.1	1-1		1 1	I I	I 	14	۳ 17 ع	4	12 -	- 12	- 1	I -	1-1	584	28 739
Vectorborne Barmah Eoract virue ^a	ç	1	-		;	۲ او	~	1	1		I		1				35	212
Barrian Forest virus Ross River virus ^a	10	-	- 9	I I	<u>v</u> 1	<u>0</u> ∞	14	5	1 1	I I	1 1		1 1	1 1	5	1 1	37	563
Arboviral infection (other) ^a Malaria ^a	1-1	I -	1-1	1-1		m Ι	I –	1-1	4	4	1-1	1-1	I I	0 M	- I	1.1	15 6	265 67
Zoonoses																		
Antnrax ⁻ Brucellosis ^a	1 1	1 1	1 1	1 1	I -	1 1	1 1	I I	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	ı ←	4
Leptospirosis ^a	I	I.		I.	I.	I.	i.	I	I.	I.	ı.	I.	I	i.	I	I	-	18
Lyssavirus Psittacosis ^a O fever ^a	1 1 1	1 1 00			ı ı .	ı ı .	I I .				I I -						1 1 0	98 13
Respiratory and other					. ,			,	,	,		, ,	,		,		, ç	
blood lead level ⁻ Influenza ^a	o m	- 0	04	o m	n Oč	- ∞	- 7		- 0	32 3		n 01	- 12	۱ <u>۳</u>	- 9	1 1	133 133	232 7896
Invasive pneumococcal infection ^a	2	-	m	-	4	I I	-	7	m	4	m I	4	9	9-	5		45	531 24
Legionella pneumophila infection	I	I.	I	i.	I.	I.	T	I	m	-	I	1	I	- 7	I	I.	- 9	57
Legionnaires' disease (other)" Lenrosv	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1		20 I
Meningococcal infection (invasive) ^a Tuberculosis		1.1	1 1	1.1		1.1	1 1	1 1	I -	- 4	I -	4		- ~	1 1	1 1	3 26	63 357
Vaccine-preventable Adverse event after immunication					6			-	4				6	~		'	1	181
H. influenzae b infection (invasive) ^a	I	I	I	ī	11	I	ī	• 1	• 1	I	I	I	1 I -	11-	I	I		22
Mumps ^a	I I	L L	I I	1.1	1.1	L L	1 1	I I		L L	I -	1.1.	- 1	- 1	I –	1 1	70	66
Pertussis Rubella ^a	35	1 0	23 -	1.1	1 28	<u>0</u> 1	ΩI	21 -	55	84	- 29	б I	- 17	44 -	19 -	1 1	430 -	5498 10
Tetanus	I	ı.	I.		ı.	ı.	ī	ī	ı.	I.	ı.	ı.	ı.	ı.	ı.	I.		
Enteric Botulism	I	,	I	ī	I	,	I	I	I	I	I	I	I	I	I	I	I	I
Cholera ⁴ Cryptosporidiosis ^a		1 1	I m	1 1	4	10	1 1	I -	I m	1 8	I -		I m	10	- 0	1 1	47	611 611
Giardiasis	· m	e	7	i.	16	11	ı.	·Ω	23	35	6	21	9	17	10	I	155	1879
naemoiyuu uraemic synarome Hepatitis A ^a	1 1	1 1	I -	1 1	1 1	1 1	1 1	1 1	1 1	1 1	1 1	- 7	۱m		1 1	1 1	9	4 م 40
Hepatitis E ^a	1	I I	L	L	L	L	1	I	I I	L	1	-	L	-	I	I	2	10
Listeriosis Rotavirus	17	141	l ro		32	9		I - 1	1 10	12	r ri	10	12	1	I N I	1 1	127	1707
Salmonellosis" Shinellosis"	['		12	1 1	37	15	91	10	£ «	25 4	۲۱ د	16	22 °	24 -	17	1 1	256 15	2638 117
Typhoid ^a Verotovin-producing E coll ^a	1 1	1.1	1.1		1.1			· -		. 1 1		1.1		- 1		1.1		36
Miscellaneous								-									-	2
Creutzfeldt–Jakob disease Meningococcal conjunctivitis	1.1	1-1	1-1	1.1	1-1	1.1	1-1	1-1	1-1	1-1	1.1	1-1	1-1	1-1	1-1	1.1	1.1	
^a Laboratory-confirmed cases only. ^b Includes case	s with unknown pos	code.																
NB: Data are current and accurate as at the prep Data are reported by Local Health District of resi Source: Notifiable Conditions Information Manac	aration date. The nur dence (geocoded to jement System, NSW	ber of cases 2011 bounda Ministry of H	reported is, ries). ealth.	however, s	ubject to cl	nange, as cas	es may be	entered at	a later date	or retracted	upon further inv	vestigation.						

Table 2. Notifications of scheduled medical conditions with an onset date in December 2012 by Local Health District, NSW

Condition	Murrumbidgee (including Albury)	Southern NSW	Western NSW	Far West E	Hunter I New ingland	Northern NSW	Mid North Coast	Local He Central Coast	alth Distric Northern Sydney	t South Eastern Sydney	Illawarra Shoalhaven	Sydney	South Western Sydney	Western Sydney	Nepean Blue Mountains	Justice Health	Tot For Dec ^b	tal Year to date ^b	
Bloodborne and sexually transmissible Chancroid ^a Chancroid ^a Gonorrhoea ^a Hepatitis B – acute viral ^a Hepatitis B – acute viral ^a Hepatitis C – acute viral ^a Hepatitis C – other ^a Hepatitis D – unspecified ^a Lymphogranuloma venereum Syphilis	10-10-11		57	10-1-1-11		1001811-	1001114111	7.1	123 14 25 12 12	- 022 - 042 - 8 - 5 - 8 5	w 5 - 5 3		126 - 133 - 20 - 333 - 1 20 -	142	100	15-10-8111	1440 - 262 - 262 - 224 - 224 - 224 - 224 - 224 - 30	21241 290 290 2290 2290 3233 3233 3233 769	
Vectorborne Barmah Forest virus ^a Ross River virus ^a Arboviral infection (other) ^a Malaria ^a Anthrax ^a Brucellosia ^a	1001111		1411 11		200- 11	11 1000	יו וו – ט	N -	-04		m 0 − 1 − 1 1		I – V I I I		1011		- 533 1333 1 1	343 598 69 69 4	
Leptospirosis ^a Lyssavirus ^a Psittacosis ^a Q fever ^a	1111				0	–	I I I ←	1 1 1 1			1 1 1 1						<u>م</u> ا ا –	19 - 13 103	
Respiratory and other Blood lead level ^a Blood lead level ^a Influenza ^a Invasive pneumococcal infection ^a <i>Legionella pneumophila</i> infection ^a Legionnaires' disease (other) ^a Leprosy Meningococcal infection (invasive) ^a			N 4		o = n				÷= 0 · 0 · · · · ·	33	ויייי	ι ω ι ι ι ι ι − ω	- 10	-441-11-	mmm		19 388 18 2 - 4 23 18 2 4 32	551 7984 563 563 24 61 61 65 8 375	
Vaccine-preventable Adverse event after immunisation <i>H. influenzae</i> b infection (invasive) ^a Mumps ^a Petrussis Rubella ^a Tetanus			2 5			6		111411		I I I – ∞ I I		<u>.</u>			<u>.</u>		311 311	188 2 173 104 5809 10	
Enteric Boculism Coculism Conolena Cryptosporidiosis ^a Cryptosporidiosis ^a Cryptosporitis Latentis Latentis Hepatitis E ^a Hepatitis E ^a Retenvirus ^a Salmonellosis ^a Typhoid ^a Typhoid ^a Verotoxin-producing <i>E. colf</i> ^a		- m m m	\UDA M \UDA			၊ ၊ 4 – ၊ ၊ ၊ ၊ ကစ် – ၊ ၊	–	. ∾ <u>0</u>	31-1-12-1	1 1 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2 2	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1		207-112-28	1 1 V 70 1 1 4 80 1 1	 .		- 27 27 300 45 56 10 27 27 27 27 27 27 27 27 27 27 27 27 27	2006 680 42 1752 1752 2938 121 121 11	
Miscellaneous Creutzfeldt-Jakob disease Meningococcal conjunctivitis	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	1.1	~ -	
^a Laboratory-confirmed cases only. ^b Includes c NB: Data are current and accurate as at the pre Data are reported by Local Health District of re Source: Notifiable Conditions Information Man	ses with unknown po eparation date. The nu sidence (geocoded to agement System, NSV	stcode. mber of case: 2011 bounds / Ministry of F	s reported is, aries). Health.	however,	, subject to	change, as c	ases may	be entered	at a later date	e or retracted	upon further in	vestigation.							

Communicable Diseases Report