

Waiting List Reduction Program

► Continued from page 11

- development of benchmarks for theatre utilisation; and
- reduction of unplanned readmissions.

The new emphasis on waiting times will not only involve inpatient care, but also outpatients and community-based health services. Although much is known about waiting times for inpatient treatment, information on how long people wait for services in outpatient clinics or community health services is limited. It is clear, however, that some people are waiting unacceptably long periods for services such as podiatry, physiotherapy and speech therapy. The Department is undertaking a survey to provide information in this area.

AUDITS

Between March and December 1995, Area and District Health Service compliance with Departmental policy on waiting lists was continually audited by the State Waiting List Auditor.

In addition, an audit and review of NSW public hospital waiting lists conducted by Coopers and Lybrand found, inter alia:

"... no evidence of any material errors or direct manipulation of data ... The figures, results and qualitative statements included in the report were arrived at in accordance with the methodology outlined in the survey and are consistent with previous reports" and "... have been recorded in accordance with the Health Department policies and procedures on waiting lists ..."

"The source data used for reporting purposes was consistent with information contained in DOHRS and WLCOS (Departmental Information Systems). This data was also consistent with unit record information maintained at Area/District Health Service level."

PUBLIC HEALTH EDITORIAL STAFF

The editor of the Public Health Bulletin is Dr Michael Frommer, Director, Research and Development, NSW Health Department. Dr Lynne Madden is production manager.

The *Bulletin* aims to provide its readers with population health data and information to motivate effective public health action. Articles, news and comments should be 1,000 words or less in length and include a summary of the key points to be made in the first paragraph. References should be set out using the Vancouver style, the full text of which can be found in *British Medical Journal* 1988; 296:401-5.

Please submit items in hard copy and on diskette, preferably using WordPerfect, to the editor, NSW Public Health Bulletin, Locked Mail Bag 961, North Sydney 2059. Facsimile (02) 391 9029.

Please contact your local Public Health Unit to obtain copies of the *NSW Public Health Bulletin*.

This issue of the *NSW Public Health Bulletin* contains information on infectious disease notifications for December 1995 and January 1996, as well as cumulative notifications for the 1995 year received to January 31, 1996.

NOTIFICATION TRENDS

In December 1995 notification levels were higher than historical levels for hepatitis A and rubella (Figure 7). Notification trends for rubella were discussed in the August, September and October issues of the *NSW Public Health Bulletin*.

Notification rates were lower than historical levels in December 1995 for foodborne illness (not otherwise specified), gastroenteritis, *Haemophilus influenzae* type b (Hib) infection, measles, meningococcal disease, pertussis and Q fever (Figure 7).

HEPATITIS A

There has been a steady increase in hepatitis A notifications from the inner Sydney area since October 1995 (Figure 8). Of the 162 notifications for hepatitis A received for the period December 1995-January 1996, 82 were residents of Eastern Sydney. Central Sydney Public Health Unit reported a similar but less marked increase.

COMMITTEES OF THE AIDS/INFECTIOUS DISEASES BRANCH

The AIDS/Infectious Diseases Branch provides the secretariat for several key advisory committees on communicable disease issues. The committees bring together a wide range of expertise and their deliberations guide the Department in the development of policy and legislative change. This section of the *Bulletin* will report from time to time on their recommendations. The committees include:

CAS	Ministerial Advisory Committee on AIDS Strategy
HAC	Hepatitis Advisory Committee
ICAG	Infection Control Advisory Group
IDAC	Infectious Diseases Advisory Committee
IAC	Immunisation Advisory Committee
SHAC	Sexual Health Advisory Committee
TBAC	Tuberculosis Advisory Committee
LSAC	Laboratory Surveillance Advisory Committee

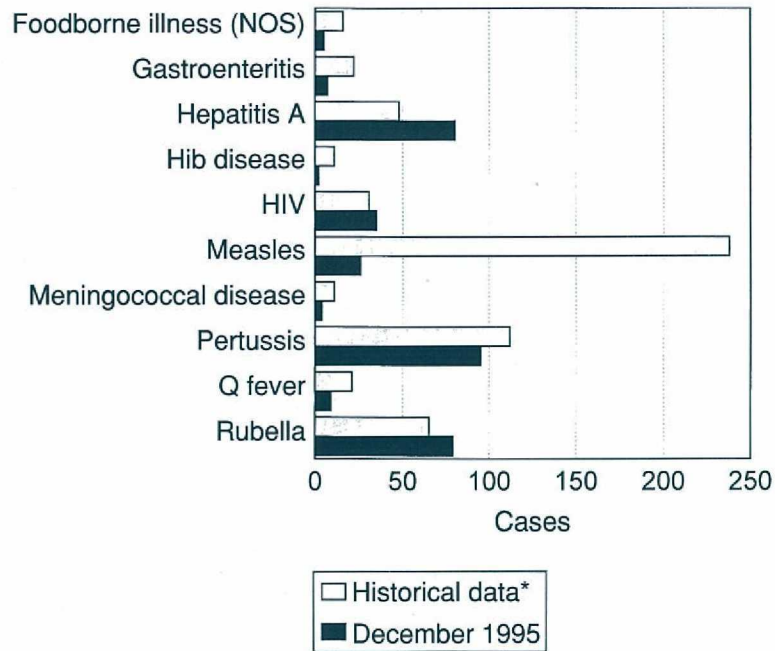
IDAC met for the first time in 1996 on January 31. One of its main roles is to review the Infectious Diseases Notification Schedule and to advise the Department on proposed changes. When the current schedule was introduced in 1991, the main criterion for inclusion of a condition on the list of notifiable diseases was that notification should lead to immediate public health action. For conditions such as meningococcal meningitis, measles and pertussis this has led to consistent action guided by clear protocols. For conditions such as syphilis and hepatitis C the difficulty in distinguishing prevalent and incident cases has made response more difficult. A further consequence of the more limited NSW schedule introduced in 1991 is that data for conditions such as chlamydia and campylobacter are no longer available to complement that of other States.

IDAC has recommended that the criteria for inclusion on the Notification Schedule be reviewed and that the

Continued on page 15 ►

FIGURE 7

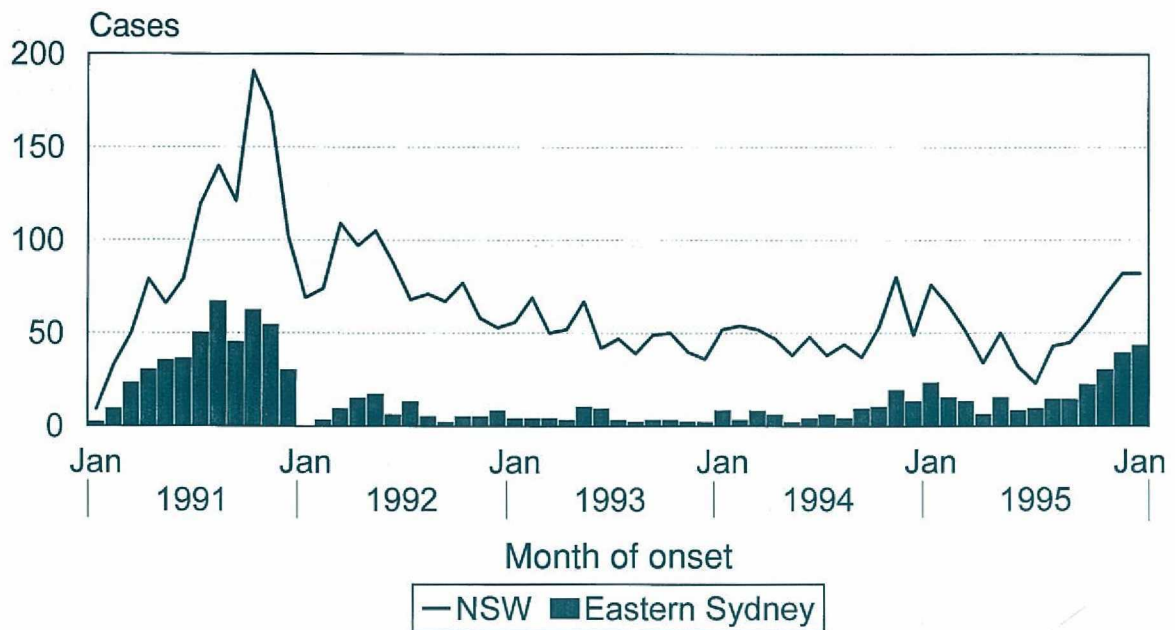
SELECTED INFECTIOUS DISEASES: NSW DECEMBER NOTIFICATIONS, 1995 COMPARED WITH HISTORICAL DATA



*Historical data: the average number of notifications diagnosed in the same month in the previous three years. Source: IDSS

FIGURE 8

HEPATITIS A NOTIFICATIONS FOR NSW 1991-1996, BY DATE OF ONSET



Source: IDSS

Infectious diseases

► Continued from page 13

Infectious Diseases Manual used by Public Health Units clearly distinguish between conditions for which an immediate response is required and those being notified to provide surveillance data to inform longer-term public health planning. The committee also recommended that the revision of the NSW schedule be carried out in consultation with the other States and Territories in support of a National Communicable Disease Surveillance Strategy.

Feedback by readers of the *Public Health Bulletin* to IDAC's recommendations would be welcome. Comments, criticisms and suggestions should be relayed to John Rooney, Specialist Medical Adviser, AIDS/Infectious Diseases Branch (e-mail jrooe@doh.health.nsw.gov.au, or fax (02) 391 9189).

TABLE 3

SUMMARY OF NSW INFECTIOUS DISEASE NOTIFICATIONS
DECEMBER 1995

Condition	Number of cases notified			
	Period		Cumulative	
	Dec 1994	Dec 1995	Dec 1994	Dec 1995
Adverse reaction	6	2	43	34
AIDS	46	20	598	413
Arboviral infection	9	15	384	542
Brucellosis	—	—	4	2
Cholera	—	—	—	1
Diphtheria	—	—	—	—
Foodborne illness (NOS)	14	5	232	389
Gastroenteritis (inst.)	35	7	310	1,374
Gonorrhoea	30	37	364	431
H influenzae epiglottitis	—	—	21	6
H influenzae B – meningitis	1	—	17	11
H influenzae B – septicaemia	1	1	12	9
H influenzae infection (NOS)	2	1	11	4
Hepatitis A	49	80	598	623
Hepatitis B	383	298	4,726	4,941
Hepatitis C	650	624	9,412	8,334
Hepatitis D	1	2	20	21
Hepatitis, acute viral (NOS)	—	—	2	2
HIV infection	20	35	428	452
Hydatid disease	1	2	20	18
Legionnaires' disease	4	7	61	74
Leprosy	—	—	3	2
Leptospirosis	1	1	14	6
Listeriosis	2	2	9	13
Malaria	14	4	187	96
Measles	266	26	1,505	599
Meningococcal meningitis	6	4	81	73
Meningococcal septicaemia	3	—	41	23
Meningococcal infection (NOS)	2	—	21	18
Mumps	1	1	11	14
Mycobacterial tuberculosis	28	19	415	427
Mycobacterial – atypical	45	3	523	395
Mycobacterial infection (NOS)	2	8	39	88
Pertussis	81	95	1,423	1,358
Plague	—	—	—	—
Poliomyelitis	—	—	—	—
Q fever	25	9	268	202
Rubella	27	79	234	1,103
Salmonella infection (NOS)	107	93	1,086	1,275
Syphilis	64	40	1,072	902
Tetanus	—	—	4	—
Typhoid and paratyphoid	5	5	36	39
Typhus	—	—	—	—
Viral haemorrhagic fevers	—	—	—	—
Yellow fever	—	—	—	—

TABLE 4

INFECTIOUS DISEASE CUMULATIVE NOTIFICATIONS FOR NSW, 1995
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	U/K	Total
AIDS	6	97	1	152	14	6	32	2	37	—	23	—	15	9	4	15	—	413
Arboviral infection	8	5	1	8	14	25	215	47	6	156	5	17	3	2	26	4	—	542
Brucellosis	1	—	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	2
Cholera	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	—	—	1
Gonorrhoea infection	5	71	14	179	7	17	19	12	20	8	23	1	17	4	23	11	—	431
Hepatitis B – acute viral	1	7	1	16	—	—	7	2	—	1	3	1	4	—	16	6	—	65
Hepatitis B – chronic/carrier	20	1	20	301	—	—	12	10	4	—	23	4	—	10	9	117	—	531
Hepatitis C – unspecified	32	539	12	58	102	101	61	17	547	34	681	16	1,439	45	13	648	—	4,345
Hepatitis C – acute viral	1	—	1	7	—	—	—	—	—	1	—	—	—	2	48	3	—	63
Hepatitis C – unspecified	211	918	340	1,186	505	494	842	237	590	276	530	237	930	195	38	739	—	8,271
Hepatitis D – unspecified	—	—	—	2	—	—	5	1	—	—	3	1	3	—	—	3	—	21
Hepatitis, acute viral (NOS)	—	—	—	1	—	—	—	—	—	—	—	—	—	—	—	1	—	2
HIV infection	12	81	3	177	18	11	7	2	26	1	12	5	30	7	1	20	39	452
Hydatid disease	—	1	1	1	1	1	1	—	1	2	3	2	3	—	—	1	—	18
Legionnaires' disease	2	3	—	6	15	6	1	3	9	—	2	—	3	3	2	19	—	74
Leprosy	—	1	—	—	—	—	—	—	1	—	—	—	—	—	—	—	—	2
Leptospirosis	—	—	—	—	1	—	2	2	—	—	—	1	—	—	—	—	—	6
Malaria	4	7	—	9	10	4	9	1	24	3	3	3	4	4	—	11	—	96
Meningococcal infection (NOS)	1	—	—	3	1	—	3	—	—	—	4	2	2	—	2	—	—	18
Meningococcal meningitis	8	1	5	5	11	11	4	4	8	4	3	—	5	1	—	3	—	73
Meningococcal septicaemia	—	4	—	—	5	1	2	1	2	1	1	1	3	2	—	—	—	23
Mycobacterial atypical	13	56	4	80	24	6	19	9	46	4	38	3	47	13	6	26	—	395
Mycobacterial infection (NOS)	7	14	—	3	2	—	4	—	11	1	17	—	19	2	—	8	—	88
Mycobacterial tuberculosis	6	42	1	27	8	6	5	3	49	2	54	4	113	6	5	96	—	427
Q fever	—	1	12	—	15	6	49	32	—	28	—	4	1	—	53	1	—	202
Syphilis infection	6	131	11	179	19	18	62	47	41	8	60	6	129	17	108	60	—	902
Vibrio infection (non cholera)	—	—	—	1	1	—	—	—	—	—	—	—	—	—	—	—	—	2

TABLE 5

VACCINE PREVENTABLE AND RELATED CONDITIONS, CUMULATIVE NOTIFICATIONS FOR NSW, 1995
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	Total
Adverse event after immunisation	—	1	—	1	1	—	7	2	—	6	4	4	—	4	—	4	34
H. influenzae epiglottitis	—	—	1	1	—	—	1	—	—	—	2	—	—	—	—	—	6
H. influenzae infection (NOS)	1	—	—	—	1	—	1	—	—	—	—	—	—	—	1	—	4
H. influenzae meningitis	—	1	—	—	—	—	4	1	—	—	—	—	—	1	—	—	11
H. influenzae septicaemia	—	—	2	—	1	—	1	—	1	1	1	—	1	—	—	1	9
Measles	14	29	14	61	65	78	52	47	16	8	48	18	46	40	7	56	599
Mumps	—	—	—	2	—	2	3	—	2	1	2	—	—	—	—	2	14
Pertussis	39	26	23	35	77	100	342	18	114	46	70	123	88	119	12	126	1,358
Rubella	33	123	114	29	104	63	130	22	55	8	60	4	20	58	59	221	1,103

TABLE 6

FOODBORNE INFECTIOUS DISEASE CUMULATIVE NOTIFICATIONS FOR NSW, 1995
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	Total
Foodborne illness (NOS)	16	9	3	3	188	1	3	3	4	—	1	8	101	—	26	23	389
Gastroenteritis (instit)	40	155	61	77	213	—	47	—	132	15	141	36	68	206	2	181	1,374
Hepatitis A – acute viral	15	93	39	207	26	10	32	4	53	2	43	11	44	5	3	38	625
Listeriosis	—	1	1	3	—	—	—	1	1	1	2	1	1	—	—	—	13
Salmonella (NOS)	29	69	32	94	93	63	132	77	139	43	127	28	110	70	44	125	1,275
Typhoid & paratyphoid	—	3	—	8	—	—	3	—	4	1	7	—	7	1	—	5	39

Abbreviations used in this Bulletin:

CSA Central Sydney Health Area, SSA Southern Sydney Health Area, ESA Eastern Sydney Health Area, SWS South Western Sydney Health Area, WSA Western Sydney Health Area, WEN Wentworth Health Area, NSA Northern Sydney Health Area, CCA Central Coast Health Area, ILL Illawarra Health Area, HUN Hunter Health Area, NC North Coast Public Health Unit, ND Northern District Public Health Unit, WN Western New South Wales Public Health Unit, CW Central West Public Health Unit, SW South West Public Health Unit, SE South East Public Health Unit, OTH Interstate/Overseas, U/K Unknown, NOS Not Otherwise Stated.

Please note that the data contained in this Bulletin are provisional and subject to change because of late reports or changes in case classification. Data are tabulated where possible by area of residence and by the disease onset date and not simply the date of notification or receipt of such notification.

TABLE 7

SUMMARY OF NSW INFECTIOUS DISEASE NOTIFICATIONS
JANUARY 1996

Condition	Number of cases notified	
	Period	
	Jan 1995	Jan 1996
Adverse reaction	3	5
AIDS	45	17
Arboviral infection	21	22
Brucellosis	—	—
Cholera	—	—
Diphtheria	—	—
Foodborne illness (NOS)	17	12
Gastroenteritis (instit.)	2	—
Gonorrhoea	34	33
H influenzae epiglottitis	—	—
H influenzae B – meningitis	2	—
H influenzae B – septicaemia	—	—
H influenzae infection (NOS)	—	1
Hepatitis A	76	82
Hepatitis B	411	171
Hepatitis C	789	325
Hepatitis D	2	—
Hepatitis, acute viral (NOS)	—	3
HIV infection	50	40
Hydatid disease	—	1
Legionnaires' disease	16	2
Leprosy	1	—
Leptospirosis	1	2
Listeriosis	—	2
Malaria	22	18
Measles	98	18
Meningococcal meningitis	2	4
Meningococcal septicaemia	1	—
Meningococcal infection (NOS)	3	1
Mumps	2	3
Mycobacterial tuberculosis	50	6
Mycobacterial – atypical	47	1
Mycobacterial infection (NOS)	6	7
Pertussis	84	45
Plague	—	—
Poliomyelitis	—	—
Q fever	21	9
Rubella	34	21
Salmonella infection (NOS)	150	67
Syphilis	91	29
Tetanus	—	—
Typhoid and paratyphoid	6	6
Typhus	—	—
Viral haemorrhagic fevers	—	—
Yellow fever	—	—

TABLE 8

INFECTIOUS DISEASE NOTIFICATIONS FOR NSW, 1996
BY SELECTED MONTH OF ONSET FOR NOTIFICATIONS
RECEIVED BY JANUARY 31, 1996

Condition	Oct	Nov	Dec	Jan	Total
Adverse event after immunisation	3	1	2	5	11
AIDS	41	28	20	17	106
Arboviral infection	7	22	15	22	66
Foodborne illness (NOS)	61	9	5	12	87
Gastroenteritis (instit.)	120	74	7	—	201
Gonorrhoea infection	37	37	37	33	144
H. influenzae infection (NOS)	—	1	1	1	3
H. influenzae meningitis	1	2	—	—	3
H. influenzae septicaemia	—	2	1	—	3
Hepatitis A – acute viral	56	70	80	82	288
Hepatitis B – acute viral	2	5	11	4	22
Hepatitis B – chronic/carrier	46	38	30	18	132
Hepatitis B – unspecified	396	363	257	149	1,165
Hepatitis C – acute viral	1	4	5	—	10
Hepatitis C – unspecified	678	666	619	325	2,288
Hepatitis D – unspecified	3	1	2	—	6
Hepatitis, acute viral (NOS)	1	—	—	3	4
HIV infection	29	37	35	40	131
Hydatid disease	2	2	2	1	7
Legionnaires' disease	3	3	7	2	15
Leptospirosis	0	1	1	2	4
Listeriosis	1	1	2	2	6
Malaria	2	4	3	18	27
Measles	52	36	26	18	132
Meningococcal infection (NOS)	3	—	—	1	4
Meningococcal meningitis	5	8	4	4	21
Meningococcal septicaemia	—	1	—	—	1
Mumps	—	4	1	3	8
Mycobacterial atypical	26	10	3	1	40
Mycobacterial infection (NOS)	9	13	8	7	37
Mycobacterial tuberculosis	39	22	19	6	86
Pertussis	146	122	95	45	408
Q fever	14	16	9	9	48
Rubella	199	157	79	21	456
Salmonella (NOS)	100	130	93	67	390
Syphilis infection	85	69	40	29	223
Typhoid and paratyphoid	2	1	5	6	14
Vibrio infection (non cholera)	—	—	1	—	1

TABLE 9

INFECTIOUS DISEASE CUMULATIVE NOTIFICATIONS FOR NSW, 1996
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	U/K	Total
AIDS	1	-	-	2	1	-	1	-	11	-	-	-	1	-	-	-	-	17
Arboviral infection	1	-	-	-	2	-	13	-	-	1	-	4	-	-	1	-	-	22
Gonorrhoea infection	-	7	-	15	-	-	2	-	-	-	1	-	-	1	6	1	-	33
Hepatitis B - acute viral	-	-	-	3	-	-	-	-	-	-	-	-	-	-	-	1	-	4
Hepatitis B - chronic/carrier	5	-	-	8	-	-	1	-	-	-	-	-	-	-	1	3	-	18
Hepatitis B - unspecified	1	31	-	14	3	-	3	-	27	-	16	-	26	4	-	24	-	149
Hepatitis C - unspecified	6	44	2	52	21	3	44	1	39	6	12	17	17	25	2	34	-	325
Hepatitis, acute viral (NOS)	-	-	1	1	-	-	1	-	-	-	-	-	-	-	-	-	-	3
HIV infection	-	1	-	3	-	-	-	-	-	-	2	-	3	1	-	1	29	40
Hydatid disease	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1
Legionnaires' disease	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	2
Leptospirosis	-	-	1	-	-	-	1	-	-	-	-	-	-	-	-	-	-	2
Malaria	-	1	-	2	3	1	-	-	6	1	1	-	-	-	1	2	-	18
Meningococcal infection (NOS)	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1
Meningococcal meningitis	-	-	-	-	1	1	-	-	-	-	1	-	-	-	-	1	-	4
Mycobacterial atypical	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1
Mycobacterial infection (NOS)	2	-	-	-	2	-	1	-	-	-	-	-	-	-	-	2	-	7
Mycobacterial tuberculosis	-	-	-	1	-	-	-	-	2	-	1	-	-	-	-	2	-	6
Q fever	-	-	2	-	-	-	1	-	-	-	-	-	-	-	6	-	-	9
Syphilis infection	-	4	3	4	1	1	1	-	6	2	1	-	-	-	2	4	-	29

TABLE 10

VACCINE PREVENTABLE AND RELATED CONDITIONS, CUMULATIVE NOTIFICATIONS FOR NSW, 1996
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	Total
Adverse event after immunisation	-	-	2	-	-	-	-	-	-	2	-	-	-	1	-	-	5
H. influenzae infection (NOS)	-	-	1	-	-	-	-	-	-	-	1	1	3	-	1	1	7
Measles	-	-	-	-	-	4	-	-	-	1	-	-	-	-	-	-	18
Mumps	-	-	-	-	-	-	-	-	3	-	-	-	-	-	-	-	3
Pertussis	-	-	-	2	8	-	9	-	4	3	-	12	-	1	3	3	45
Rubella	-	7	-	-	-	-	1	-	-	-	1	-	-	1	-	11	21

TABLE 11

FOODBORNE INFECTIOUS DISEASE CUMULATIVE NOTIFICATIONS FOR NSW, 1996
BY PUBLIC HEALTH UNIT, RECEIVED BY JANUARY 31, 1996

Condition	CCA	CSA	CW	ESA	HUN	ILL	NC	ND	NSA	SE	SSA	SW	SWS	WEN	WN	WSA	Total
Foodborne illness (NOS)	-	-	-	-	-	-	-	-	-	-	-	2	7	-	3	-	12
Hepatitis A - acute viral	-	15	-	43	4	1	2	-	6	1	2	-	-	-	-	8	82
Listeriosis	-	-	-	-	-	-	-	-	-	1	-	-	1	-	-	-	2
Salmonella (NOS)	3	4	1	1	10	1	10	-	10	1	4	5	7	1	7	2	67
Typhoid and paratyphoid	-	2	-	-	1	-	-	-	-	-	-	-	2	-	-	1	6