

# Communicable Diseases Weekly Report

Week 20 13 May 2013 – 19 May 2013

In summary, we report:

- [STEC/VTEC](#) – one new case reported
- [LGV](#) – one new case reported
- [Q Fever](#) – one new case reported
- [Summary of notifiable conditions activity in NSW](#)

For further information on communicable diseases in NSW see the [NSW Health Infectious Diseases](#) website. Click on the heading of each section to see a related factsheet. Updated data are provided in the links below each section, where available.

## [STEC/VTEC](#)

One new case of shiga toxinogenic Escherichia coli (STEC) infection was notified in this reporting week (Table 1). The most likely source of exposure was believed to have been through handling raw kangaroo meat on a rural property.

STEC is carried by animals, such as cattle. People are infected when they come into contact with the faeces of an infected animal or person, either directly or indirectly. STEC is most commonly spread through:

- consuming contaminated food (e.g. undercooked burgers, unwashed salad vegetables, and unpasteurised milk or milk products)
- drinking or swimming in contaminated water
- person-to-person contact, for example contact with faeces of an infected person when changing a nappy
- person-to-animal contact on farms or petting zoos, for example contact with cattle that carry the infection.

STEC (also known as VTEC) infection can cause serious disease, including bloody diarrhoea, and sometimes haemolytic uraemic syndrome (HUS). The principles of STEC prevention are safe food storage, handling and preparation, and good hand hygiene.

Follow the link for further information on [STEC notifications data](#).

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## [LGV](#)

One new case of lymphogranuloma venereum (LGV) infection was notified in this reporting week (Table 1) in a male who is believed to have acquired the infection in NSW. Lymphogranuloma venereum, or LGV, is a sexually transmitted infection. The bacteria that cause LGV are rare types of chlamydia that cause a more aggressive disease than common chlamydia infection.

In the past, most LGV infections were acquired overseas. More recently, local transmission has become more common, where it has mainly affected men who have sex with men. LGV is spread through unprotected anal, oral or vaginal sexual contact, especially if there is trauma to the skin or mucous membranes. The risk of LGV is minimised through practicing safe sex.

Follow the link for more information on [LGV notifications data](#).

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## Q Fever

One new case of Q fever was notified in this reporting week (Table 1). This person had not been vaccinated against Q fever but had worked on a cattle farm.

Q fever is an illness caused by the bacterium *Coxiella burnetii*. Q fever is spread to humans from infected animals. The bacteria survive for long periods in the environment as they are resistant to heat, drying and many disinfectants.

Q fever is usually an acute (immediate) infection but it can sometimes lead to a chronic (long-term) illness. Acute Q fever can cause a severe flu-like illness that is sometimes associated with hepatitis (inflammation of the liver) and pneumonia. Chronic Q fever most commonly results in inflammation of the heart (endocarditis) and people who already have heart valve disease are at increased risk.

A vaccine (Q-Vax®) is available to protect people against Q fever. Vaccination is recommended for all people who are working in, or intend to work in, a high-risk occupation. Workplaces at risk should have a vaccination program.

People who work with animals or materials that may carry the Q fever bacteria should use appropriate protective equipment and be aware of the steps required to stop the spread of the bacteria.

Follow the link for more information on [Q fever notifications data](#).

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## Summary of notifiable conditions activity in NSW

The following table summarises notifiable conditions activity over the reporting period (Table 1). See explanatory notes below.

**Table 1. NSW Notifiable Conditions activity for the period 13 May to 19 May 2013 (by date received).**

		This week	Last week	Year to date			Full Year	
				2013	2012	2011	2012	2011
Enteric Diseases	Cryptosporidiosis	27	33	815	366	175	655	354
	Giardiasis	37	40	989	975	1184	2015	2377
	Hepatitis A	1	0	32	15	31	41	60
	Hepatitis E	1	0	9	3	10	10	21
	Rotavirus	8	6	168	259	308	1761	1208
	STEC/MTEC	1	0	14	9	2	14	9
	Salmonellosis	73	87	1692	1460	2171	2943	3566
	Shigellosis	4	5	54	61	63	131	126
	Typhoid	2	1	32	23	29	43	45
Respiratory Diseases	Influenza	38	23	623	403	592	8041	5790
	Tuberculosis	3	5	115	154	203	438	538
Sexually Transmissible Infections	Chlamydia	344	345	8013	8696	7886	21263	20447
	Gonorrhoea	80	87	1717	1519	964	4114	2817
	LGV	1	2	14	5	21	28	36
Vaccine Preventable Diseases	Adverse Event Following Immunisation	4	10	317	130	184	262	352
	Mumps	1	2	28	49	22	110	60
	Pertussis	42	61	962	2983	5483	5993	13410
	Pneumococcal Disease (Invasive)	6	17	132	124	133	567	530
Vector Borne Diseases	Barmah Forest	14	8	206	148	286	344	472
	Chikungunya	1	0	7	0	4	1	11
	Dengue	3	2	83	146	66	287	146
	Malaria	1	1	38	23	33	68	82
	Ross River	14	30	217	358	410	596	591
Zoonotic Diseases	Q Fever	1	0	44	56	45	121	138

**Notes on Table 1: NSW Notifiable Conditions activity**

- Data cells represent the number of case reports received by NSW Public Health Units and recorded on the NSW Notifiable Conditions Information Management System (NCIMS) in the relevant period.
- Data cells in the 'Adverse Event Following Immunisation' category refer to suspected cases only. These reports are referred to the Therapeutic Goods Administration (TGA) for assessment. Data on adverse events following immunisation is available online from the TGA [Database of Adverse Event Notifications](#).
- Only conditions for which at least one case report was received appear in the table. HIV and other blood-borne virus case reports are not included here but are available from the [Infectious Diseases Data](#) webpage.

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