

Communicable Diseases Weekly Report

Week 13 25 March 2013 – 31 March 2013

In summary, we report:

- [Viral meningitis and Hand Foot and Mouth disease](#) – Update.
- [Avian influenza H7N9 in China](#) – Update.
- [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.

Viral meningitis/encephalitis and hand foot and mouth disease

In the past week, the number of meningitis/encephalitis presentations increased and remained above the usual range for this time of year. There was an increase in presentations among children aged under 5 years (Figure 1A) in the last week.

The Sydney Children’s Hospital Randwick reported that there had been at least ten cases of suspected or confirmed cases of viral meningitis or encephalitis related to enterovirus infections admitted during the reporting period, and 34 cases admitted this year up to 31 March.

Figure 1. Total weekly counts of Emergency Department presentations for meningitis/encephalitis, for March 2013 (black line), compared with each of the 5 previous years (coloured lines), for 59 NSW hospitals.

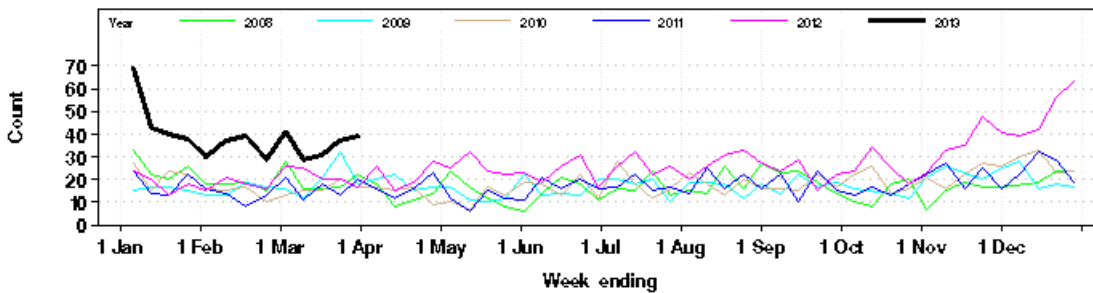
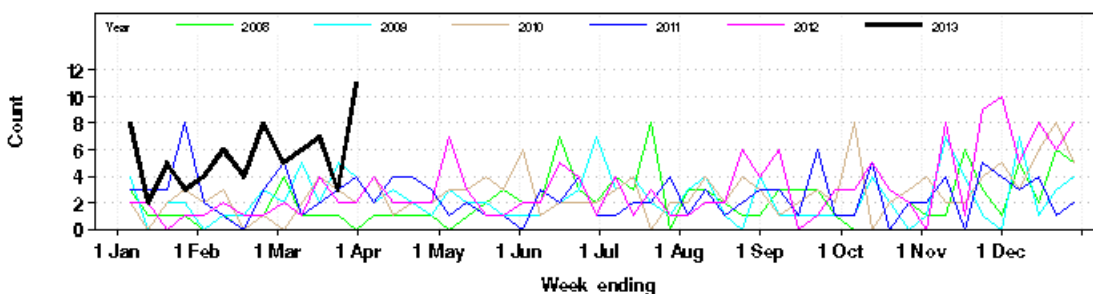
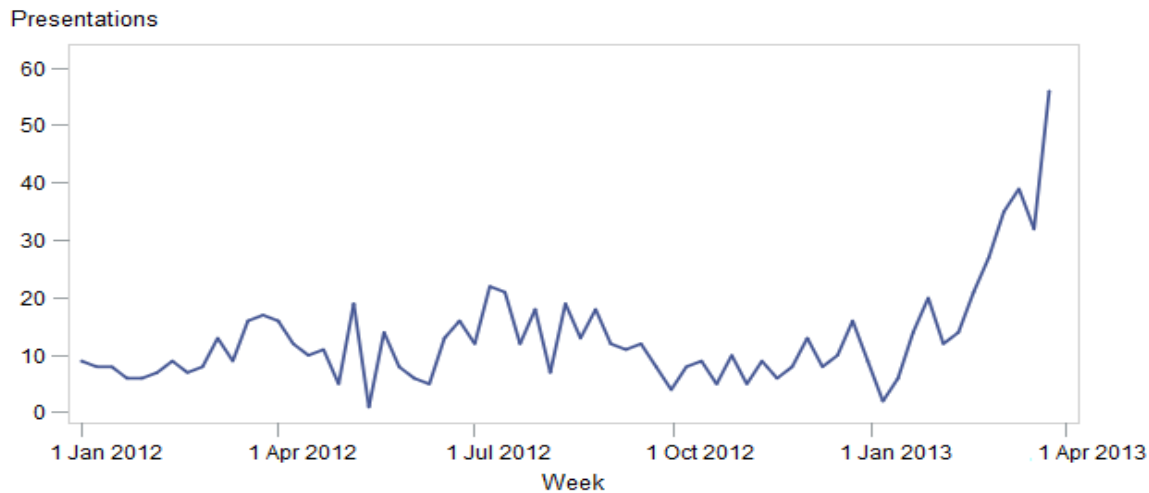


Figure 1A. Total weekly counts of Emergency Department presentations for meningitis/encephalitis, for March 2013 (black line), compared with each of the 5 previous years (coloured lines), children aged under 5 years for 59 NSW hospitals.



For NSW as a whole, Emergency Department surveillance indicates that the number of patients assigned a diagnosis of hand, foot and mouth disease had peaked in the previous increased and remained well above usual levels. These cases were predominantly in the in the under-5 year-old age group, (Figure 1B) and may in part be due to recent public communications regarding the risk of neurological disease associated with enterovirus infection.

Figure 1B. Total weekly numbers of emergency department presentations assigned a diagnosis of hand, foot and mouth disease, persons 0-5 years of age, 59 NSW Emergency Departments, 1 January 2012 to 30 March 2013.



Viral meningitis is generally less severe than bacterial meningitis and resolves without specific treatment. In Australia, most viral meningitis cases in the summer months are caused by enteroviruses. Only a very small number of people with enterovirus infections develop meningitis, encephalitis or other serious complications.

Hand, foot and mouth disease is generally a mild illness caused by enteroviruses, particularly coxsackieviruses. It is not usually a serious illness and is not related to the foot and mouth disease that affects animals. It mainly occurs in children under 10 years of age but can also occur in older children and adults.

Enteroviruses are most often spread from person to person through faecal contamination (such as by not washing hands properly after using the toilet). Enteroviruses can also be spread through respiratory secretions (saliva, sputum, or nasal mucus) of an infected person, and possibly through contaminated swimming and wading pools.

See the [NSW Health Enterovirus Alert page](#) for more information on enterovirus neurological disease.

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Avian Influenza H7N9 in China

The World Health Organization (WHO) has reported a number of human infections with avian influenza A (H7N9) viruses in three provinces in China. The first cases were announced by WHO on 1 April 2013. The WHO is providing regular updates on the [WHO website](#).

This is the first time avian influenza A (H7N9) viruses have been detected in humans. The infections so far have resulted in severe respiratory illness and, in some cases, death. According to WHO, there has been no person-to-person transmission identified to date, and the cases do not have a known epidemiological link to one another. An investigation by Chinese health officials is ongoing to determine the source of infection and detect any additional cases.

NSW Health is following this situation closely and coordinating with national and state disease control partners to make a knowledgeable public health risk assessment and provide appropriate advice, particularly to clinicians. Laboratory specialists are reviewing posted genetic information on the new H7N9 viruses to assess whether existing influenza diagnostic tests need to be enhanced or new ones developed. All of these actions are routine preparedness measures taken whenever a new novel influenza virus is detected in humans. As this an evolving situation, NSW Health will provide updated information and as it becomes available.

Any suspected cases identified in NSW should be reported to your local public health unit on **1300 066 055**.

Further information about avian influenza viruses and how they spread is available at the [Avian Influenza \(“Bird Flu”\) factsheet](#).

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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 18 March to 24 March 2013 (by date received).

		This week	Last week	Year to date			Full Year	
				2013	2012	2011	2012	2011
Enteric Diseases	Cryptosporidiosis	43	58	541	184	101	655	354
	Giardiasis	43	46	668	648	824	2015	2376
	Hepatitis A	2	0	31	10	23	41	60
	Hepatitis E	1	0	6	1	8	10	21
	Rotavirus	7	6	113	196	210	1761	1207
	Salmonellosis	62	78	1152	1037	1635	2947	3571
	Shigellosis	3	1	36	48	46	131	126
	Typhoid	4	0	22	15	22	43	45
Respiratory Diseases	Influenza	24	42	411	217	405	8041	5790
	Legionellosis	2	2	21	41	25	103	101
	Tuberculosis	8	3	76	109	137	438	538
Sexually Transmissible Infections	Chlamydia	338	399	5350	5843	5266	21264	20448
	Gonorrhoea	64	92	1128	1023	645	4114	2817
Vaccine Preventable Diseases	Adverse Event Following Immunisation	15	40	229	75	99	261	343
	Pertussis	33	31	678	2203	3898	5992	13407
	Pneumococcal Disease (Invasive)	3	8	80	62	74	569	529
Vector Borne Diseases	Barmah Forest	13	10	130	98	233	344	472
	Dengue	1	3	49	96	55	287	146
	Malaria	3	1	24	13	23	68	82
	Ross River	8	7	125	189	273	598	590

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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