

Communicable Diseases Weekly Report

Week 1 30 December 2012 – 6 January 2013

In summary, we report:

- [Listeriosis](#) – three new cases reported; new food safety health warning
- [Viral meningitis](#) – continued increase in Emergency Department activity
- [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.

Listeriosis

There were three further cases of listeriosis reported this week in NSW (Table 1). Further laboratory typing is required to establish whether two of these cases are linked to a national outbreak associated with soft cheese. One case is not linked to the outbreak and the source of their infection is unknown.

Listeriosis is an illness usually caused by eating foods contaminated with bacteria known as *Listeria monocytogenes*. Listeriosis is a serious disease in pregnant women and people with weakened immune systems.

People at increased risk of listeriosis include pregnant women and the foetus, newborns, the elderly and people with weakened immune systems (for example: people on cancer treatment or steroids and people with diabetes, kidney disease, liver disease or HIV infection). These people should not eat the following foods:

- pre-packed cold salads, including coleslaw and fresh fruit salad
- pre-cooked cold chicken
- pâté
- sprouted seeds and raw mushrooms
- soft cheeses such as brie, camembert, ricotta, or blue-vein (unless cooked and eaten whilst hot)
- pre-cut fruit
- cold delicatessen meats
- raw seafood
- unpasteurised milk or milk products
- smoked seafood (for example, smoked salmon)

A national investigation is currently underway into a cluster of cases of listeriosis, including at least three cases from NSW, which have been epidemiologically linked to the consumption of certain soft cheeses produced in Victoria and sold at delicatessens and independent supermarkets throughout Australia.

Follow the links for further information:

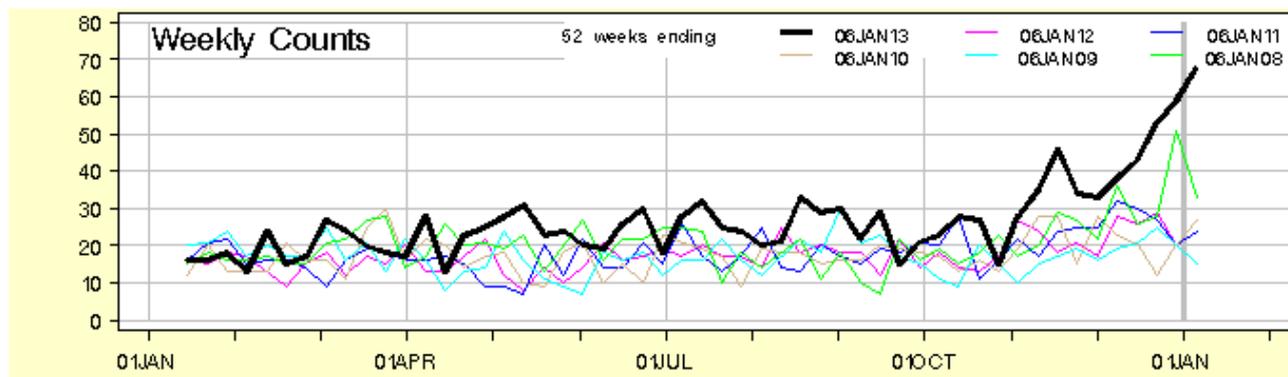
- [NSW Health Listeria Food Safety Warning](#) (updated 9 January).
- Food Standards Australia New Zealand (FSANZ): [Jindi Cheese recall](#).
- NSW Health [listeriosis notifications data](#).

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Viral meningitis

NSW Emergency Department presentations for “meningitis/encephalitis” continued to increase over the week ending 6 January, and were above the usual range for this time of year (Figure 2). Increased activity has been noted in many parts of the state, affecting a wide range of age-groups.

Figure 2. Total weekly counts of Emergency Department presentations for meningitis/encephalitis, from January 2012 – January 2013 (black line), compared with each of the 5 previous years (coloured lines), for 59 NSW hospitals.



The most common diagnosis has been “viral meningitis” and laboratory testing indicates enterovirus infections have been responsible for many cases. A small number of enteroviruses have been further characterised, with echovirus types 30, 6 and 9 most commonly identified.

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 small number of people with enterovirus infections actually develop meningitis. Echovirus 30 is the most common cause of the summer outbreaks of viral meningitis which occur every few years in NSW.

Enteroviruses are most often spread from person to person through faecal contamination (which can occur when changing a nappy or using the toilet and not properly washing hands afterwards). Enteroviruses can also be spread through respiratory secretions (saliva, sputum, or nasal mucus) of an infected person, or through contaminated swimming and wading pools.

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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 31 December 2012 to 6 January 2013 (by date received).

		This week	Last week	Year to Date			Full Year	
				2013	2012	2011	2012	2011
Enteric Diseases	Cryptosporidiosis	17	6	17	4	3	653	353
	Giardiasis	17	11	18	24	26	2011	2376
	Hepatitis A	1	0	1	0	1	42	60
	Listeriosis	3	4	3	1	0	36	20
	Rotavirus	5	0	6	18	10	1761	1207
	STEC/VTEC	1	0	1	2	0	14	9
	Salmonellosis	62	30	62	62	115	2946	3572
Respiratory Diseases	Influenza	14	11	16	15	24	8027	5785
	Legionellosis	1	0	1	5	1	97	96
	Tuberculosis	1	3	1	4	9	297	529
Sexually Transmissible Infections	Chlamydia	176	60	183	233	221	21116	20443
	Gonorrhoea	35	16	35	46	40	4075	2817
Vaccine Preventable Diseases	Meningococcal Disease	1	2	1	3	2	69	70
	Mumps	1	1	1	8	0	103	60
	Pertussis	40	37	40	176	401	5977	13371
	Pneumococcal Disease (Invasive)	11	2	11	6	4	574	527
Vector Borne Diseases	Barmah Forest	4	4	4	1	11	341	472
	Dengue	3	2	3	4	5	265	146
	Malaria	2	1	2	0	2	67	82
	Ross River	4	3	4	4	15	595	589

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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