

Communicable Diseases Weekly Report

Epi-Week 8 17 February 2014 – 23 February 2014

In summary, we report:

- [Measles](#) – five new cases reported
- [STEC](#) – two new cases reported
- [Enterovirus-like illness surveillance](#) – increasing Emergency Department activity
- [Summary of notifiable conditions activity in NSW](#)

For further information on infectious diseases and alerts see the [Infectious Diseases](#) webpage.

Follow the [A to Z of Infectious Diseases](#) link for more information on specific diseases.

For links to other surveillance reports, including influenza reports, see the [NSW Health Infectious Diseases Reports](#) webpage.

Measles

Five measles cases were notified in this reporting week (Table 1). All cases were acquired overseas; three in the Philippines and two in Vietnam. The cases were in people aged between 18 and 35 years and all were residents of metropolitan Sydney. Two notifications were in co-travelling unvaccinated siblings, while a Vietnamese-born man was infected with measles while visiting friends and relatives. The ongoing high number of measles importations in NSW from the Philippines is consistent with other jurisdictions; nationally, the majority of measles cases in 2014 have either been imported from or linked to cases infected in the Philippines.

Case investigation and contact tracing conducted by local Public Health Units (PHU) identified one case on an international flight to Sydney who had walked extensively around the cabin while infectious, resulting in the provision of written information to all flight passengers. Another notification was infectious while participating in the “Ground Sounds” music festival at Gosford Showground. Some of these cases also spent time in Marrickville, Bellevue Hill, Enmore, and Chatswood and presented to emergency departments in Canterbury, Bankstown and Camperdown while infectious.

Measles is highly infectious and is spread easily through the air. Symptoms can include fever, tiredness, runny nose, cough and sore red eyes which usually last for several days before a red, blotchy rash appears. Complications can range from an ear infection and pneumonia to swelling of the brain.

NSW Health urges everyone planning international travel to ensure they are up to date with their vaccinations, especially measles, prior to their departure

Children should receive two doses of vaccine, one at 12 months and the second at 18 months. Babies who are travelling before their vaccines are due can be given the first dose **as early as 9 months of age**. Children over 18 months who have not had their second dose of measles vaccine can be vaccinated now.

Anyone born during or after 1966 should have two doses of vaccine (at least 4 weeks apart).

Follow the link for further information on [measles disease notifications](#).

Follow the link for further information on [measles vaccination](#) (external link).

[Back to top](#)

Shiga toxin-producing Escherichia coli (STEC)

Two cases of Shiga toxin-producing *Escherichia coli* (STEC) infection were reported this week (Table 1) in residents of the Hunter New England and Nepean Blue Mountains Local Health Districts. Public health investigations are ongoing into the possible sources of infection.

Escherichia coli (*E.coli*) bacteria are commonly found in the gastrointestinal tract of people and animals. Many types of *E.coli* are harmless, but some can produce toxins, called Shiga toxins or verocytotoxins, which can result in severe disease in humans.

Cattle are the most important source of STEC; other animals including humans can transmit the bacteria and cause human illness. The infection is spread mainly from eating contaminated food and from direct contact with animals. Person to person spread also occurs, particularly within families and childcare centres.

STEC infection is prevented by safe food handling and good hand hygiene:

- Raw foods that won't be cooked before eating should not be allowed to come into contact with raw meat and equipment used to prepare raw meat such as knives and cutting boards should be thoroughly washed immediately after use.
- Foods made from minced meat, such as hamburger patties and sausages should be cooked thoroughly and not eaten if there is any pink meat inside.
- Fruit and vegetables should be washed before eating and unpasteurised dairy products should not be consumed.
- Hands should be washed before eating and preparing food, after touching pets and farm animals, and after using the toilet or changing nappies.

Most cases of STEC infection occur sporadically, but large outbreaks also occur.

Follow the links for further [STEC/VTEC data](#), the [STEC/HUS factsheet](#).

[Back to top](#)

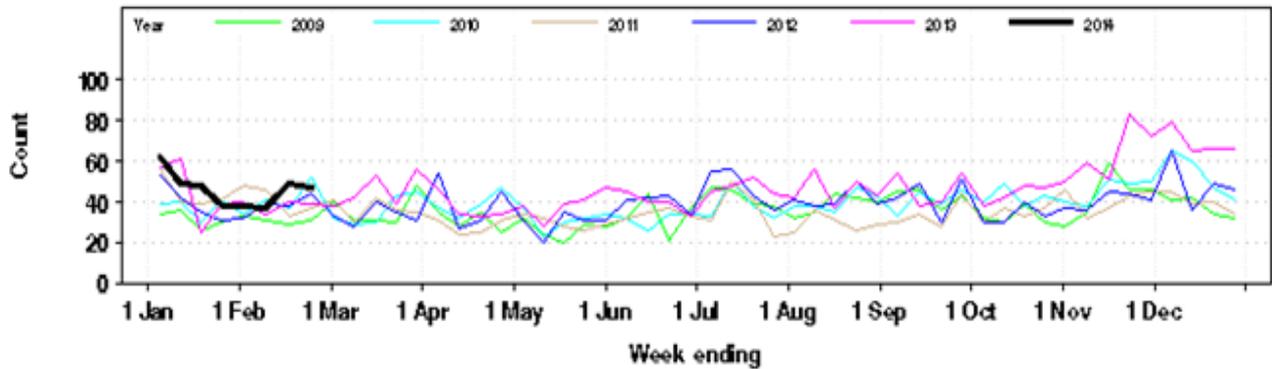
Enterovirus-Like Illness – Emergency Department Surveillance

NSW Health maintains on-going surveillance of emergency department (ED) presentations for illnesses in children that may be due to infections with enteroviruses.¹

During this reporting week the number of presentations for fever or unspecified infection in under 1 year olds increased to 192, which was above the usual range for the time of year. Of these cases, admissions from ED decreased slightly to 47 (Figure 1), which was within usual range for this time of year but below the peak of around 80 in December 2013; there were no critical care admissions.

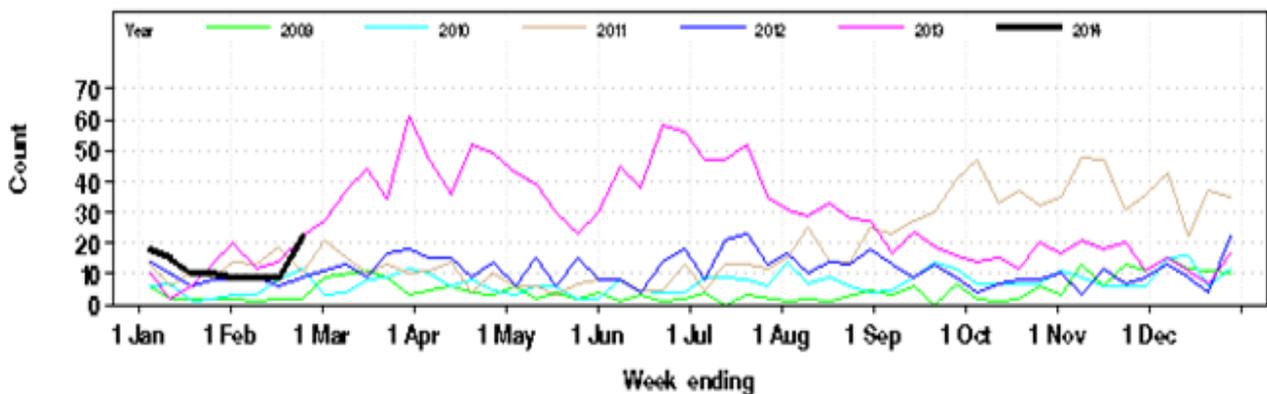
¹ In November 2013, the number of ED presentations and admissions for fever or unspecified infection in infants aged under 1 year and who were admitted increased above usual levels. The increase was associated with parechovirus infections (see the following link for [further information](#)). In late February 2013, the number of ED presentations for hand, foot and mouth disease in children aged under 5 year increased above usual levels and this was later found to be linked to infections with Enterovirus71 and several other enteroviruses (See the following link for [further information](#)).

Figure 1. Total weekly counts of ED presentations for fever or unspecified infection that were admitted, for 2014 (black line), compared with each of the 5 previous years (coloured lines), children aged under 1 year, for 59 NSW hospitals



In the past week, the number of hand, foot and mouth disease presentations in all ages increased to 26, which was above the usual range for this time of year. Of these, 22 were in under-5 year-olds and are part of a rising trend over the past few weeks (Figure 2).

Figure 2. Total weekly counts of ED presentations for hand, foot and mouth disease, for 2013 (black line), compared with each of the 5 previous years (coloured lines), children aged under 5 years, for 59 NSW hospitals.



For further information see the [parechovirus alert](#) and [enterovirus alert](#).

[Back to top](#)

Summary of notifiable conditions activity in NSW

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

Table 1. NSW notifiable conditions from 17 February to 23 February 2014, by date received.*

		This week	Last week	Year to date			Full Year	
				2014	2013	2012	2013	2012
Enteric Diseases	Cryptosporidiosis	9	16	107	320	109	1132	655
	Giardiasis	108	67	463	470	407	2243	2012
	Haemolytic Uremic Syndrome	1	0	4	6	2	9	8
	Hepatitis A	2	3	16	26	4	62	41
	Rotavirus	7	3	54	93	126	508	1758
	STEC/MTEC	2	0	16	7	5	24	14
	Salmonellosis	115	95	892	894	707	3486	2941
	Shigellosis	10	11	66	25	36	136	131
	Typhoid	1	2	11	14	6	58	43
Respiratory Diseases	Influenza	46	50	478	279	125	8400	8038
	Tuberculosis	2	5	46	72	78	436	468
Sexually Transmissible Infections	Chlamydia	498	484	3711	3888	4059	21072	21259
	Gonorrhoea	85	111	787	795	739	4271	4116
Vaccine Preventable Diseases	Adverse Event Following Immunisation	5	6	32	104	45	508	269
	Measles	5	2	20	3	2	33	174
	Mumps	2	1	15	15	20	86	110
	Pertussis	48	47	328	566	1695	2379	5998
	Pneumococcal Disease (Invasive)	4	3	35	59	41	491	564
Vector Borne Diseases	Barmah Forest	5	5	37	98	63	441	343
	Dengue	4	6	58	46	64	294	285
	Malaria	3	2	16	21	12	93	68
	Ross River	12	9	62	101	113	512	596
Zoonotic	Q fever	2	3	34	26	27	154	124

* 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.

[Back to top](#)