

Communicable Diseases Weekly Report

Week 15, 06 April 2015 to 12 April 2015

In summary, we report:

- Influenza Early increase in activity
- <u>Australian Bat Lyssavirus</u> Bat tested positive in Hunter New England
- Food Safety and World Health Day
- Summary of notifiable conditions activity in NSW

For further information on infectious diseases and alerts see the <u>Infectious Diseases</u> webpage.

Follow the <u>A to Z of Infectious Diseases</u> link for more information on specific diseases.

For links to other surveillance reports, including influenza reports, see the <u>NSW Health Infectious</u> <u>Diseases Reports</u> webpage.

Influenza

* Please also note that comprehensive <u>NSW influenza surveillance reports</u> are also published each month by Communicable Diseases Branch.

So far in 2015 there has been an unseasonal increase in the number of influenza cases notified. An upswing in notifications is sometimes seen in January and February associated with overseas travel (Table 1). However in 2015 influenza activity has remained higher than expected during March and April with influenza A/H3N2 being the most common influenza strain identified. Influenza B is also well above usual levels and influenza A/H1N1 continues to circulate, although at lower levels.

	Year	Jan	Feb	Mar	Apr	Мау	Jun	Jul	Aug	Sep	Oct	Nov	Dec	Total
Influenza A	2011	114	97	112	87	132	521	1239	894	385	245	159	76	4061
	2012	32	42	95	85	294	1847	2177	1215	272	93	57	61	6270
	2013	81	114	119	105	107	215	608	1987	1255	421	180	150	5342
	2014	250	191	174	154	191	471	3692	9070	3090	417	138	170	18008
	2015	229	274	309	47									859
Influenza B	2011	12	15	17	24	46	129	368	678	245	62	18	14	1628
	2012	15	23	24	12	37	114	241	452	517	170	78	26	1709
	2013	31	17	34	24	55	123	359	1126	951	210	80	39	3049
	2014	27	16	54	63	59	77	280	997	861	261	64	71	2830
	2015	50	78	120	39									287

Table 1: Influenza notifications in NSW residents, by month of disease onset, January 2011 to 12 April 2015.

Influenza, or flu, is a highly contagious respiratory illness caused by influenza viruses. There are three main types of influenza virus that cause infection in humans - types A, B and C - and many sub-types or strains. Influenza can occur throughout the year but influenza activity usually peaks in winter.

The 2015 seasonal influenza vaccines for Australia have been updated to match the new strains of A/H3N2 and B that have been circulating in the Northern Hemisphere and which circulated in NSW during the 2014 season. Influenza vaccine is available now and is recommended for all people aged 65 years and over, **Aboriginal children aged from 6 months to 4 years (new)**, Aboriginal people aged 15 years and over, pregnant women, and all people aged 6 months and over with medical conditions predisposing to severe influenza. Follow the link for further information on influenza vaccination.

Other practical steps to stop the spread of influenza include:

- Covering your face when you cough or sneeze and throwing used tissues in a rubbish bin.
- Washing your hands thoroughly and often. Wash hands for at least 10 seconds, especially after coughing, sneezing or blowing your nose, or use an alcohol-based hand rub.
- Staying at home until you're well. Wait at least 24 hours after your symptoms resolve so you are less likely to infect other people.

Follow the link for further influenza data.

Follow the link for the influenza homepage.

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Australian Bat Lyssavirus

Biosecurity NSW reported this week that a flying fox found injured in a backyard in the Hunter New England (HNE) region tested positive for Australian bat lyssavirus (ABLV). Originally the report indicated that there was no human exposure to this bat, however a thorough investigation by the HNE Public Health Unit identified that the person who found the injured bat was scratched. Rabies immunoglobulin and a course of rabies vaccine were provided to the injured person.

Wildlife Australia releases a quarterly report on ABLV bat statistics "<u>Bat Stats</u>" by state and territory. In 2014 four grey-headed flying foxes and one unidentified flying fox (*Pteropus* sp.) from NSW were found to be ABLV infected. The flying foxes presented with neurological signs including aggression, biting, vocalisation, a hoarse cry, limb paralysis or weakness, nystagmus, inability to swallow and hypersensitivity, and one was seen to attack a bird. One of these flying foxes was found caught in a fence. The report indicates the number of bats testing positive is increasing however this is likely due to increased awareness and increased testing.

Lyssaviruses are a group of viruses that includes rabies and ABLV. ABLV is found in all species of bats, from the small insectivorous microbats to the larger flying fox species. Rabies is carried by mammals in many overseas countries. Both lyssaviruses are spread by bites and scratches. These diseases can be prevented by rapid and thorough cleaning of the wound and by vaccination. Almost all cases are fatal once symptoms commence.

The best protection against being exposed to rabies or ABLV is to avoid handling any type of bat in Australia, or any wild or domestic mammal in a rabies endemic country. This includes bats and wild or domestic dogs, cats, and monkeys.

Only people who have been vaccinated against rabies/ABLV and who have been trained in the care of bats should ever handle bats or flying foxes. Anyone who comes across an injured bat should contact the local Wildlife Information Rescue and Education Service (WIRES) network on 1300 094 737. WIRES have trained staff who can deal with bats safely. A veterinarian may also be able to offer assistance and advice. Do not touch the bat and avoid direct contact with any bat saliva.

Follow the link for the <u>Rabies / ABLV</u> factsheet.

Food Safety and World Health Day

April 7th was World Health Day and this year the World Health Organisation highlighted the challenges and opportunities associated with food safety under the slogan "From farm to plate, make food safe", see the media release <u>here</u>. Earlier this year, the NSW Food Authority launched the Food Safety Strategy 2015-2021 which focuses on NSW producing quality food for local and global markets and reducing foodborne illness at the same time. The Strategy can be viewed <u>here</u>.

Food Safety is an important issue. As food production becomes more industrialised and its distribution globalised a food safety problem in one country can lead to outbreaks in other countries. Matters are further complicated when a single package of food contains ingredients from multiple countries. A recent Australia wide outbreak of <u>hepatitis A</u> linked to frozen berries from overseas highlights this issue.

Outbreaks of <u>foodborne disease</u> occur sporadically in NSW. Illness can be caused by a number of different bacteria (e.g. *Salmonella* and *Campylobacter*), viruses (e.g. norovirus and hepatitis A), or toxins (from bacteria such as *Staphylococcus aureus* and *Bacillus cereus* or from seafood). There is an estimated 5.4 million cases of foodborne disease each year in Australia.

Salmonella is one of the most common causes of foodborne disease. Salmonella is a bacterium that is commonly found in poultry and eggs and can be spread when these foods are undercooked or through cross contamination of other foods. Symptoms include fever, stomach cramps, diarrhoea and vomiting. Salmonellosis can be prevented by thorough cooking, good hygiene, adequate storage, and refrigeration of risky food. For more information on *Salmonella* see the <u>factsheet</u>.

The NSW Food Authority provides information on <u>keeping food safe in the home</u>. The key tips include:

- **Keep it cold**: keep the fridge below 5°C; once food is removed from the fridge consume within 2 hours; defrost and marinate meat in the fridge.
- **Keep it clean**: wash and dry hands thoroughly before starting any food preparation; keep benches and kitchen equipment clean; separate raw and cooked foods; avoid making food for others if you are sick with diarrhoea.
- Keep it hot: cook foods to at least 60°C (some foods require hotter temperatures); reheat foods to at least 60°C and they are steaming hot; ensure there is no pink in cooked meat such as mince and sausages; look for clear juices before serving chicken.
- **Check the label**: don't use food past its 'use by' date; follow storage and cooking instructions; be allergy aware; ask for information about unpackaged foods.

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Summary of notifiable conditions activity in NSW

The following table summarises notifiable conditions activity over the reporting period (Table 2).

Table 2. NSW notifiable conditions from 06 April 2015 to 12 April 2015, by date received

		Weekly			Year to date	Full Year		
		This week	Last week	2015	2014	2013	2014	2013
Enteric Diseases	Cryptosporidiosis	24	32	411	179	700	429	1132
	Giardiasis	53	91	1207	1062	838	2942	2242
	Hepatitis A	2	3	41	32	31	80	62
	Rotavirus	5	5	113	114	144	714	508
	Salmonellosis	51	91	1741	1832	1434	4305	3483
	Shigellosis	2	2	58	102	45	210	136
Respiratory Diseases	Influenza	67	94	1189	920	518	20888	8403
	Legionellosis	2	1	27	26	29	72	109
	Tuberculosis	7	2	91	135	131	472	444
Sexually Transmissible Infections	Chlamydia	347	351	6613	7419	6706	22900	2108
	Gonorrhoea	64	89	1543	1514	1413	4878	4267
Vaccine Preventable Diseases	Meningococcal Disease	3	0	10	10	9	37	48
	Pertussis	109	131	1795	611	818	3051	2379
	Pneumococcal Disease (Invasive)	12	5	77	81	95	512	490
Vector Borne Diseases	Barmah Forest	5	16	83	76	168	163	438
	Chikungunya	2	0	15	6	7	27	22
	Ross River	71	92	986	158	160	677	512
Zoonotic	Q fever	2	1	48	65	52	190	163

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 <u>Database of Adverse Event Notifications</u>.
- 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 <u>Infectious Diseases Data</u> webpage.

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