

# Communicable Diseases Weekly Report

## Week 22, 25 to 31 May 2015

In summary, we report:

- [Measles](#) – in an unvaccinated traveller
- [Invasive meningococcal disease](#) – 14 cases in 2015
- [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

One case of measles has been reported this week. The case occurred in an unvaccinated individual who is likely to have acquired the disease in China or Mongolia. So far in 2015 there have been seven confirmed cases of measles in NSW, five of which were acquired outside of Australia (India, Germany and China or Mongolia), one (the second case) was a contact of one of the overseas acquired cases, and the fourth was a contact of the second case (third generation case). Countries in many regions overseas are currently reporting measles outbreaks, including the United States, Germany, Liberia and Vanuatu.

Measles is transmitted by airborne droplets and direct contact with discharges from respiratory mucous membranes of infected persons, and less commonly by articles freshly soiled with nose and throat secretions. It is highly infectious.

Symptoms of measles include fever, runny nose, sore red eyes and cough, followed 3-4 days later by a red blotchy rash spreading from the head and neck to the rest of the body.

Measles can cause serious complications such as pneumonia or encephalitis. It is important that everyone ensures that they, and their family, are up to date with their vaccination, particularly before overseas travel. Anyone born after 1965 should make sure they have had two doses of vaccine. Measles vaccine is available from general practitioners, and is part of the National Immunisation Program for children with doses currently given at 12 and 18 months. Additional doses of measles vaccine are safe, so anyone unsure of their vaccination status should be vaccinated.

For more information see the NSW Health measles [webpage](#).

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### Invasive meningococcal disease

Fourteen cases of invasive meningococcal disease have been reported in 2015, including one case notified this week in an elderly person. Invasive meningococcal disease is more common in younger age groups with peak incidence seen in the under 5 and 15-24 years age groups. Cases can occur in older people, where infection can be associated with higher mortality. In the past ten years there were an average of seven cases occurring in NSW per year in people aged over 65 years.

Invasive meningococcal disease is caused by infection with the bacteria *Neisseria meningitidis*, which can result in meningitis or septicaemia, both of which can be fatal. It is spread by droplets from the upper respiratory tract and has an incubation period of 1-10 days; but usually 3-4 days.

There are several serogroups of *Neisseria meningitidis*. Of the twelve cases typed in 2015, eight were serogroup B, two were serogroup W135, one was serogroup C and one was serogroup Y.

Meningococcal C vaccination is recommended for all children at one year of age and is provided as part of free routine immunisation. There has been a sustained decline in serogroup C meningococcal disease since the vaccine was introduced onto the National Immunisation Program in 2003, and cases are now rare in NSW. A vaccine to protect against meningococcal B is also available in Australia, but is not provided by the National Immunisation Program.

For more information see the NSW Health meningococcal [webpage](#).

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## 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 25 to 31 May 2015, by date received**

		Weekly		Year to date			Full Year	
		This week	Last week	2015	2014	2013	2014	2013
Enteric Diseases	Cryptosporidiosis	14	9	562	235	888	428	1132
	Giardiasis	68	59	1692	1472	1177	2942	2242
	Rotavirus	7	12	151	167	186	714	508
	Salmonellosis	69	60	2303	2465	1947	4304	3483
	Shigellosis	1	2	73	114	58	210	136
Respiratory Diseases	Influenza	83	74	1852	1315	766	20888	8403
	Tuberculosis	14	4	156	186	184	472	443
Sexually Transmissible Infections	Chlamydia	407	445	9729	10521	9637	22899	21086
	Gonorrhoea	51	67	2168	2205	1960	4876	4266
Vaccine Preventable Diseases	Adverse Event Following Immunisation	3	7	83	152	356	255	509
	Meningococcal Disease	1	0	14	14	12	37	48
	Mumps	1	1	18	45	46	82	89
	Pertussis	176	157	2767	834	1115	3051	2379
	Pneumococcal Disease (Invasive)	7	14	139	141	180	512	490
	Rubella	1	0	4	3	5	10	12
Vector Borne Diseases	Barmah Forest	3	1	133	106	251	163	438
	Dengue	3	5	161	222	118	378	303
	Ross River	23	26	1283	289	296	677	512
Zoonotic	Q fever	1	4	86	81	72	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 [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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