

Communicable Diseases Weekly Report

Week 30 20 July - 26 July 2015

In summary, we report:

- [Influenza](#) – increased reporting; predominance of influenza B.
- [MERS-CoV](#) – situation update.
- [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.

Influenza

* Please also note that comprehensive [NSW influenza surveillance reports](#) are also published each week by Communicable Diseases Branch.

Influenza activity has increased further with 692 laboratory notifications this week. Most parts of NSW are experiencing at least moderate influenza activity. It is too early to say if this year's influenza season will be as severe as the season in 2014.

Influenza B strains continue to be the most commonly identified strains in NSW; this is unusual in that influenza B activity historically tends to increase late in the season and is usually lower overall than influenza A strains. Influenza A(H3N2) is the dominant circulating influenza A strain (Table 1).

Table 1: Influenza notifications in NSW residents by month of disease onset, January 2011 - 26 July 2015.

	Year	Jan	Feb	Mar	Apr	May	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	3693	9070	3090	417	138	170	18009
	2015	229	274	317	252	209	432	545						2258
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	124	148	206	598	1016						2220

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.

It is not too late to get vaccinated. Influenza vaccine is available 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 for the public to stop the spread of influenza include the advice below:

- 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 if you're unwell. Wait at least 24 hours after your symptoms resolve so you are less likely to infect other people.

Follow the link for further [influenza notifications data](#).

Follow the link for the [influenza homepage](#).

[Back to top](#)

MERS coronavirus (MERS-CoV)

As of 24 July 2015 the World Health Organization (WHO) has been notified of 1,374 laboratory-confirmed cases of infection with MERS-CoV, including at least 490 related deaths, since the first cases were reported in September 2012. For the latest updates from WHO see the [WHO Coronavirus infections](#) website.

Republic of Korea outbreak: no additional cases of infection and no new deaths related to MERS-CoV were reported this week from Korea. To date, a total of 186 MERS-CoV cases, including 36 deaths, have been linked to this outbreak. All cases have been linked to a single chain of transmission and were associated with health care facilities.

The last case in Korea was reported on 4 July 2015 and all identified close contacts have now completed their period of quarantine monitoring. The outbreak is likely to be officially declared over when 28 days have passed since the last case was reported.

Travel Advice: WHO does not recommend the application of any travel restrictions to affected countries but have provided [travel advice for people making pilgrimages in Saudi Arabia](#). Also see the NSW Health [Hajj Travel Advice factsheet](#) with information for pilgrims travelling to Saudi Arabia to perform the Hajj or Umrah.

Camels in the Middle East are suspected to be the primary source of infection for humans but the exact ways that infection is acquired, either by direct or indirect exposure to infected animals, are still not fully understood and further studies are needed. WHO advises that people should avoid drinking raw camel milk or camel urine, or eating camel meat that has not been properly cooked.

For further information for NSW Health Professionals see the following links:

- NSW Health [MERS-CoV Update for Clinicians](#) [11 June 2015]
- NSW Health [MERS-CoV updated advice for General Practitioners](#) [10 June 2015]

[Back to top](#)

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 20 July to 26 July 2015, by date received.

		Weekly		Year to date			Full Year	
		This week	Last week	2015	2014	2013	2014	2013
Enteric Diseases	Cryptosporidiosis	11	6	641	282	967	429	1132
	Giardiasis	60	69	2171	1838	1459	2942	2242
	Hepatitis A	1	1	53	44	45	80	62
	Rotavirus	7	10	202	263	243	714	508
	STEC/VTEC	1	0	12	27	18	31	24
	Salmonellosis	39	48	2726	2899	2310	4302	3483
	Shigellosis	4	2	99	137	74	210	136
Respiratory Diseases	Influenza	692	434	4716	5124	1913	20888	8403
	Legionellosis	2	3	61	47	62	72	109
	Tuberculosis	7	7	227	259	245	473	443
Sexually Transmissible Infections	Chlamydia	398	376	13006	13917	12762	22897	21089
	Gonorrhoea	75	93	3015	2926	2635	4876	4266
Vaccine Preventable Diseases	Adverse Event Following Immunisation	1	8	111	180	400	256	509
	Pertussis	197	192	4309	1183	1406	3051	2379
	Pneumococcal Disease (Invasive)	13	11	243	273	282	512	490
Vector Borne Diseases	Dengue	2	4	197	290	183	378	303
	Ross River	17	7	1379	375	371	677	512
Zoonotic	Q fever	3	2	119	109	99	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.

[Back to top](#)