

Communicable Diseases Weekly Report

Week 8, 16 to 22 February 2015

In summary, we report:

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- [Tuberculosis](#)
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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.

[Salmonella Bovismorbificans](#)

An outbreak of salmonellosis has been affecting aged care facilities in NSW and ACT over the past month.

The serotype of *Salmonella* involved in this outbreak has been identified as *Salmonella* Bovismorbificans. *Salmonella* Bovismorbificans is rare in NSW with an average of three cases per month.

As at 25 February 2015, 10 facilities have confirmed cases with a total of 28 laboratory confirmed *Salmonella* cases.

The affected facilities are located in Illawarra Shoalhaven Local Health District (n=6), South Eastern Sydney Local Health District (n=2) and the Australian Capital Territory (n=2).

Twelve of the 28 confirmed cases have been hospitalised. Two deaths have been reported in confirmed cases.

NSW Food Authority, Illawarra Shoalhaven Local Health District, ACT Health and Health Protection NSW are currently investigating the outbreak.

About salmonellosis

Salmonellosis is a form of gastroenteritis caused by *Salmonella* bacteria, which are commonly found in animals. Symptoms of salmonellosis include fever, headache, diarrhoea, abdominal pain, nausea, and vomiting. Symptoms usually start around six to 72 hours after ingestion of the organism. Symptoms typically last for four to seven days, but can continue for much longer. Occasionally hospitalisation is required for management of dehydration, particularly in young babies, elderly people and those with weakened immune systems.

Salmonella notifications usually begin to climb steeply in December each year and peak over summer because *Salmonella* flourishes in warmer weather so is able to produce an infective dose in contaminated food in a shorter time. Products containing undercooked eggs are the most common source of outbreaks of salmonellosis in NSW. Restaurants, cafes, bakeries, caterers and manufacturers that make raw egg dressings, desserts and sauces need to follow safe food handling practices. They should try to use alternatives to raw eggs in foods which are not subsequently cooked. Alternatives include commercially produced dressings and sauces, or pasteurised egg products.

Follow the link for further information on [safe handling of raw egg products](#) from the NSWFA.

Follow the links for further information on [salmonellosis notifications](#) or the [salmonellosis factsheet](#)

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Tuberculosis

The NSW Tuberculosis (TB) Program has responded to a case of TB in a childcare centre, offering TB screening (by tuberculin skin test) to over 100 people within the childcare centre community. There were no cases of TB disease identified within the centre during this first round of screening. A second tuberculin skin test is required for all children and staff in 10 weeks' time. The rationale for repeating the test is to allow the body's immune system time to develop a response to any recent TB exposure.

TB is a disease caused by infection with bacteria from the *Mycobacterium tuberculosis* complex. TB can damage a person's lungs or other parts of the body and cause serious illness. TB is spread through the air when a person with TB in the lungs or throat coughs, sneezes or speaks, sending bacteria into the air. When other people breathe in these bacteria they can become infected. TB disease is treated with a combination of special antibiotics for at least six months. People with TB can be cured if they complete treatment.

Australia has one of the lowest rates of TB in the world. In NSW there were 418 cases of TB reported in 2014. However globally, TB remains a significant public health problem. The World Health Organization estimates that 9 million people developed TB in 2013.

Further information is available from the [NSW TB Program website](#).

Hepatitis B

Two new cases of acute hepatitis B were reported this week. The local public health units are investigating the potential sources of infection. The cases do not appear to be linked.

Hepatitis B is a viral infection of the liver. Most people have no symptoms when they are first infected with hepatitis B. If there are symptoms, they usually develop within one to three months of infection and can include: a mild flu-like illness, a yellowing of the skin and eyes (jaundice), abdominal pain, loss of appetite, nausea, dark urine and fatigue. Symptoms can last from days to a few weeks.

Most adults who get hepatitis B recover or 'clear' the infection without specific treatment. They are no longer infectious, and have lifelong immunity. However, about five to ten people in every 100 infected do not clear the virus, and remain infectious for many years. They have chronic (long-term) hepatitis B infection. Chronic hepatitis B infection slowly damages the liver, so people with this condition may eventually suffer liver failure or cancer of the liver.

The hepatitis B virus is spread through contact with body fluids (blood, semen, saliva or vaginal fluid) of an infected person. This can occur in different ways, including: having sex without a condom, sharing contaminated equipment for injecting drugs, and coming into contact with infected blood through open cuts. Mothers who have hepatitis B can pass the virus to their babies or children either during birth or shortly after if preventive measures are not employed.

Vaccination offers the best protection against hepatitis B, and is part of the infant vaccination program. It is also available from local doctors, and is offered free at sexual health clinics and some other venues for people at higher risk of infection.

In addition to vaccination, hepatitis B can be avoided by: always using condoms with new or casual sexual partners; never sharing needles, syringes and other injecting equipment; and ensuring tattoo, acupuncture, and body piercing equipment are sterile.

Further information is available from the NSW [Hepatitis B website](#)

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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 16 to 22 February 2015, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2015	2014	2013	2014	2013
Enteric Diseases	Cryptosporidiosis	32	39	180	111	320	427	1132
	Giardiasis	97	108	632	521	471	2938	2242
	Hepatitis A	6	3	21	20	26	79	62
	Listeriosis	1	0	4	7	12	23	33
	Rotavirus	10	11	74	63	93	709	508
	STEC/VTEC	1	1	5	16	7	31	24
	Salmonellosis	118	131	1015	1006	895	4297	3483
	Shigellosis	3	8	36	64	25	207	136
	Typhoid	1	1	9	13	14	44	58
Respiratory Diseases	Influenza	71	79	533	552	279	20750	8403
	Legionellosis	1	2	17	9	14	72	108
	Tuberculosis	8	6	41	76	72	466	439
Sexually Transmissible Infections	Chlamydia	459	506	3563	4198	3894	22883	21089
	Gonorrhoea	113	133	848	872	795	4863	4267
Vaccine Preventable Diseases	Adverse Event Following Immunisation	3	2	19	43	104	246	509
	Pertussis	132	137	943	405	566	3032	2378
	Pneumococcal Disease (Invasive)	6	6	41	39	59	509	490
	Rubella	1	1	2	2	1	10	12
Vector Borne Diseases	Barmah Forest	2	5	26	41	97	163	438
	Dengue	7	7	58	86	48	377	303
	Malaria	1	2	8	18	21	87	93
	Ross River	93	79	363	72	101	677	512
Zoonotic	Q fever	5	2	26	52	31	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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