

Communicable Diseases Weekly Report

Week 18, 28 April to 4 May 2019

In summary, we report:

- [Listeriosis](#) – two new cases
- [Measles](#) – two new cases
- [Summary of notifiable conditions activity in NSW](#)

For further information see NSW Health [infectious diseases page](#). This includes links to other NSW Health [infectious disease surveillance reports](#) and a [diseases data page](#) for a range of notifiable infectious diseases.

Listeriosis

Two new cases of *Listeria* infection (listeriosis) were reported this week ([Table 1](#)). One case was in a man in his seventies who was reported to have consumed numerous foods considered higher risk for *Listeria* infection, including cold meats and sandwiches purchased outside of the home in the risk period prior to his illness. The man has since recovered.

The second case was in a woman in her nineties who unfortunately passed away due to her illness. This woman's family members reported that she was likely to have eaten a large number of high risk foods in the risk period prior to her illness, including fresh fruits, bagged lettuce, semi-soft cheeses, cold meats and sandwiches purchased outside the home. Further laboratory typing, including whole genome sequencing, is pending on both cases.

Listeriosis is a rare illness caused by eating food contaminated with a bacterium called *Listeria monocytogenes*. This bacterium is widespread throughout nature, being commonly carried by many species of both domestic and wild animals. Outbreaks of illness have been associated with raw milk, soft cheeses, pre-prepared salads (for example, from salad bars), unwashed raw vegetables, pâté, cold diced chicken and pre-cut fruit and fruit salad. Babies can be born with listeriosis if their mothers eat contaminated food during the pregnancy. *Listeria* bacteria survive refrigeration but can be killed through cooking.

People at increased risk of listeriosis include pregnant women and their unborn child, newborns, older people and people with weakened immune systems; for example, people on cancer treatment or steroids, or people with diabetes, kidney disease, liver disease or living with HIV infection. Listeriosis may be severe in these individuals, and infections during pregnancy may cause still birth or premature delivery.

NSW Health recommends that people at increased risk of listeriosis do not eat rockmelon, pre-cut fruit or pre-prepared fruit, pre-packed cold salads, frozen vegetables unless cooked and served hot, pre-cooked cold chicken, cold delicatessen meats, paté and/or meat spreads, raw seafood, smoked seafood unless cooked and served hot, chilled seafood (for example, ready-to-eat prawns), unpasteurised milk or milk products, soft cheeses (for example, camembert, ricotta, or blue-vein), soft serve ice cream, or sprouted seeds. Fruit and vegetables eaten raw should be thoroughly washed prior to eating.

Further information

Follow the links for further [listeriosis data](#), the [listeriosis factsheet](#) and the NSW Food Authority [Food safety during pregnancy brochure](#).

Measles

Two new cases of measles were notified in this reporting week (Table 1). One was a man in his thirties and the other a man in his forties. Both men live in regional NSW and their movements during their exposure period for measles were able to be linked to the case reported in Dubbo in [Week 16](#). These new cases mean that there have been 40 people (of which 35 are counted as NSW cases) with measles in NSW from 15 December 2018 to 4 May 2019.

Of the 35 NSW cases, 60% have acquired their infection overseas. Of the 14 cases who have acquired their infection within NSW, 79% have been linked epidemiologically to an overseas acquired case. Investigations into the sources of the remaining locally acquired cases are ongoing.

Measles is a serious viral illness and one of the most highly communicable infectious diseases. The measles virus is usually spread through coughing or by contact with the nasal or throat secretions of an infected person.

The symptoms of measles usually start 7 to 18 days after exposure to someone who has measles. They include fever, cough, runny nose, conjunctivitis (red, watery eyes) and feeling unwell. After three to five days a rash with flat red spots breaks out, usually starting on the face before spreading to the rest of the body. People are usually infectious from around four days before the onset of the rash until four days after it appears.

People are considered immune to measles if they have had a documented measles illness in the past or have evidence of having received two doses of a measles-containing vaccine. People born before 1966 are also considered immune as they are highly likely to have had measles infection as a child.

While one dose of vaccine induces effective protection in 95% of people, two doses are recommended as this provides long-term protection in 99% of people.

People who think they might have measles should avoid public places and see a doctor, but should call ahead to ensure they do not come in to contact with other people in the waiting areas.

Further information

- NSW Health [measles website](#) and [measles factsheet](#).
- [The Australian Immunisation Handbook](#) for more information on measles vaccine recommendations.

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 28 April – 4 May 2019, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2019	2018	2017	2018	2017
Enteric Diseases	Cryptosporidiosis	8	1	343	373	904	708	1266
	Giardiasis	61	38	1311	1144	1431	2938	3135
	Hepatitis A	1	2	32	47	10	86	71
	Listeriosis	2	0	4	15	6	19	20
	Rotavirus	10	10	211	341	222	808	2319
	STEC/VTEC	1	1	27	23	23	57	53
	Salmonellosis	86	46	1662	1538	1925	3343	3681
	Shigellosis	20	10	302	80	77	531	236
Respiratory Diseases	Influenza	796	533	11003	3897	3025	17423	103852
	Legionellosis	2	0	65	61	47	171	138
	Tuberculosis	18	5	189	173	165	510	542
Sexually Transmissible Infections	Chlamydia	676	312	11069	11232	10603	31197	29006
	Gonorrhoea	236	147	4067	3726	3509	10622	9160
	LGV	1	0	19	31	10	85	50
Vaccine Preventable Diseases	Measles	2	1	34	6	25	18	32
	Meningococcal Disease	1	0	10	23	24	72	91
	Pertussis	109	61	2153	1350	2213	6281	5366
	Pneumococcal Disease (Invasive)	11	2	137	119	119	686	683
Vector Borne Diseases	Barmah Forest	2	0	26	35	33	74	127
	Dengue	8	5	147	116	124	299	306
	Malaria	1	0	20	21	26	66	68
	Ross River	27	3	254	197	1141	570	1653
Zoonotic Diseases	Q fever	2	3	104	69	83	227	210

* Notes on Table 1: NSW Notifiable Conditions activity

- Only conditions which had one or more case reports received during the reporting week appear in the table.
- 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 (i.e. by report date).
- Note that [notifiable disease data](#) available on the NSW Health website are reported by onset date so case totals are likely to vary from those shown here.
- Cases involving interstate residents are not included.
- The shigellosis case definition changed on 1 July 2018 to include probable cases (PCR positive only), hence case counts cannot be validly compared to previous years.
- 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](#).
- Chronic blood-borne virus conditions (such as HIV, Hepatitis B and C) are not included here. Related data are available from the [Infectious Diseases Data](#) and the [HIV Surveillance Data Reports](#) webpages.