

Communicable Diseases Weekly Report

Week 28, 5 July to 11 July 2020

In summary, we report:

- [Listeriosis](#) – two new cases
- [Novel coronavirus 2019 \(COVID-19\)](#)
- [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 infections caused by *Listeria monocytogenes* (listeriosis) were reported this week ([Table 1](#)). The first case was an 85-year-old woman who had a history of multiple comorbidities and was on an immunocompromising medication at time of diagnosis. She had onset of fever and chills in late June and subsequently sustained a fall at home which led to hospital admission, where *Listeria* was isolated on blood culture. She had consumed a number of high-risk foods within her exposure period including a variety of soft and hard cheeses such as ricotta, mozzarella and bocconcini, meats such as BBQ chicken and cold cooked chicken, and fruit such as pre-cut watermelon, rockmelon, mandarin, grapes, and tomatoes. She remains in hospital. The infection was typed as binary type 158.

The second case was a 77-year-old woman who had onset of diarrhoea and vomiting in late May, which progressed to fever, decreased level of consciousness, and confusion in early July. She was admitted to hospital, where *listeria* was isolated on blood culture. While in hospital, she was also diagnosed with a condition which would impair her immune system. The woman had consumed numerous foods which are a risk for listeriosis within her exposure period, including fruits such as watermelon, apple, and pear, home grown goods including shallots and parsley, dairy goods such as ice cream and yoghurt, and meats which included BBQ chicken, ham, and salami. The woman remains in hospital and is clinically improving. The infection was typed as binary type 82.

The typing results indicate that these cases are unrelated to each other. Both isolates will undergo whole genome sequencing to establish whether they are related to any previous cases in NSW or across Australia.

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. *Listeria* survive refrigeration but are killed at cooking temperatures.

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, pre-cut fruit, fruit salad and most recently rockmelon.

Babies can be born with listeriosis if their mothers eat contaminated food during the pregnancy.

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.

People at increased risk of listeriosis should not eat the following foods:

- rockmelon (cantaloupe)
- pre-cut fruit, including fruit salad
- pre-packed cold salads, including coleslaw
- frozen vegetables, unless cooked prior to consumption
- pre-cooked cold chicken, cold delicatessen meats, paté or meat spreads
- raw seafood, smoked seafood (unless cooked and served hot), chilled seafood
- unpasteurised milk or milk products
- soft cheeses such as brie, camembert, ricotta, or blue-vein cheese
- soft serve ice cream
- sprouted seeds.

Fruit and vegetables eaten raw should be thoroughly washed prior to eating.

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

Novel coronavirus 2019 (COVID-19)

For up-to-date information regarding the COVID-19 outbreak and the NSW response, please visit the [NSW Health COVID-19 page](#).

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 5 July to 11 July 2020, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2020	2019	2018	2019	2018
Enteric Diseases	Cryptosporidiosis	3	9	409	426	470	669	708
	Giardiasis	21	21	1122	2143	1648	3271	2937
	Listeriosis	2	0	9	6	16	16	19
	Rotavirus	4	3	364	404	465	1755	808
	STEC/VTEC	1	0	50	36	33	80	57
	Salmonellosis	26	36	2040	2238	2041	3561	3336
	Shigellosis	4	3	380	473	145	868	530
Respiratory Diseases	Influenza	9	12	7338	56504	5369	116444	17409
	Legionellosis	2	3	85	97	86	153	171
	Tuberculosis	11	8	298	312	260	594	508
Sexually Transmissible Infections	Chlamydia	453	453	14827	17297	17260	32451	31178
	Gonorrhoea	192	224	5549	6444	5680	11719	10604
Vaccine Preventable Diseases	Meningococcal Disease	1	2	12	21	31	59	72
	Pertussis	6	21	1342	3371	2127	6386	6280
	Pneumococcal Disease (Invasive)	9	8	180	281	275	692	681
Vector Borne Diseases	Barmah Forest	8	5	171	47	48	63	74
	Ross River	29	29	1736	418	383	577	571
Zoonotic Diseases	Q fever	1	4	115	148	106	248	228

* 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](#), the [HIV Surveillance Data Reports](#) and the [Hepatitis B and C Strategies Data Reports](#) webpages.
- Notification is dependent on a diagnosis being made by a doctor, hospital or laboratory. Changes in awareness and testing patterns influence the proportion of patients with a particular infection that is diagnosed and notified over time, especially if the infection causes non-specific symptoms.