Communicable Diseases Weekly Report

Week 33, 9 August to 15 August 2020

In summary, we report:

- **Invasive meningococcal disease (IMD)** – one new case
- **Novel coronavirus 2019 (COVID-19)**

*Please note there is no table of NSW notifiable conditions data included in this week’s report due to a current technical problem with notifiable disease data reporting.

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.

**Invasive meningococcal disease (IMD)**

One new case of invasive meningococcal disease was notified in this reporting week in an adult from a regional area of NSW. Testing has identified that the infection was caused by meningococcal serogroup B.

The person was at increased risk of infection due to a pre-existing medical condition and had received an incomplete course of meningococcal B vaccine.

Invasive meningococcal disease (IMD) is a rare but serious and sometimes fatal infection caused by *Neisseria meningitidis* bacteria. There are six serogroups of meningococcal bacteria associated with IMD in humans (A, B, C, W, X, Y), of which four (B, C, W, Y) cause almost all IMD in Australia.

Cases of meningococcal disease occur year-round but tend to increase in late winter and early spring. Meningococcal disease can and does affect people of any age, however children less than 5 years and people 15-24 years of age are at highest risk of meningococcal disease. People with medical conditions which result in immune suppression or compromise (either directly or because of medications) are also at increased risk of meningococcal disease.

Meningococcal disease usually begins with the sudden onset of fever, often with headache, nausea and drowsiness. Neck stiffness, dislike of bright lights and a rash of reddish-purple spots or bruises may develop rapidly. Babies with the infection may be irritable, not feed properly and have an abnormal cry. The initial symptoms of IMD are non-specific and often mimic other illnesses such as respiratory or gastrointestinal infections, making diagnosis difficult.

People with IMD can become very unwell very quickly, and the disease can be fatal within hours of the first symptom appearing. Anyone who thinks they, or someone they care for, might be experiencing symptoms of meningococcal disease, should seek urgent medical care.

The National Immunisation Program (NIP) provides meningococcal ACWY vaccine to babies at 12 months, adolescents, and people of all ages with asplenia, hyposplenism, complement deficiency, and people being treated with eculizumab. In NSW, the adolescent dose is delivered through the school vaccination program in Year 10. People aged 14-19 years who are not enrolled in school, or who miss out on the school vaccination can access free vaccine from their GP.

Meningococcal B vaccine is provided free under the NIP for Aboriginal infants and people with asplenia, hyposplenism, complement deficiency, and people being treated with eculizumab.

Meningococcal B vaccine requires multiple doses to ensure protection, with the number required depending on age at administration.
Doses for Aboriginal infants are delivered at 6 weeks, 4 months, and 12 months of age. Catch up vaccine is available for Aboriginal children under 2 years of age until 30/06/2023.

For those not covered by the NIP, meningococcal vaccines can be purchased via private prescription via General Practitioners.

Further information
- NSW Health meningococcal disease website and meningococcal disease factsheet
- The Australian Immunisation Handbook for more information on meningococcal vaccines
- NSW meningococcal disease data.

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
Please note that there is no table of NSW notifiable conditions data included in this week’s CDWR, due to the fact that we are currently experiencing a technical problem with notifiable disease data reporting which is affecting all diseases and all time periods.