

Communicable Diseases Weekly Report

Week 11, 14 March to 20 March 2021

In summary, we report:

- [World Tuberculosis Day](#)
- [Flooding and health risks](#)
- [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.

World Tuberculosis Day 2021

Wednesday, 24 March 2021, marks [World TB Day](#). World TB Day aims to raise public awareness about the devastating health, social and economic impacts of TB, and to increase efforts to end TB, which remains a slowly progressing epidemic in much of the world. To view information on World TB Day 2021 social media campaigns, see the [Stop TB Partnership](#).

On this day in 1882, Dr Robert Koch discovered the bacteria that causes TB, which at the time was causing the deaths of one in seven people in Europe and the Americas. His discovery paved the way towards diagnosing and curing TB.

The global theme this year, “The Clock is Ticking”, carries the notion that the world is running out of time to act on the commitments made by world leaders to end TB. During the current COVID-19 pandemic, in many parts of the world, the progress made to end TB has been put at risk. In line with the World Health Organization’s (WHO) drive towards achieving Universal Health Coverage, more needs to be done to ensure equitable access to TB prevention and care.

[Tuberculosis](#) is a bacterial infection caused by *Mycobacterium tuberculosis*. Symptoms of TB disease include a cough lasting more than three weeks, fever, unexplained weight loss, night sweats, and tiredness. Treatment usually requires a combination of special antibiotics for at least six months.

Despite being a curable illness, TB remains the world’s top infectious killer with an estimated 4,500 deaths each day globally. The WHO estimated that 10 million people fell ill with TB and 1.2 million people died from TB in 2019.

World TB Day highlights the global effort to find, treat and cure the millions of people who fall ill with TB each year. This includes approximately 3.6 million people who don't get the care they need, often due to factors such as poverty, stigma, conflict and lack of access to basic health services.

In Australia, the rate of TB infection in 2020 was 6.3 cases per 100,000 people, one of the lowest rates in the world. In NSW 631 cases of TB were notified, giving a slightly higher rate of 7.8 cases per 100,000 people. The highest population rates for TB were in the Western Sydney, Sydney, and South Eastern Sydney Local Health Districts. Over 90% of these cases were diagnosed in people who were born, or had spent significant amounts of time, in countries with a high prevalence of TB.

Multi-drug resistant TB (MDR-TB) strains are those that are resistant to two of the most effective first line TB drugs, and this is a continuing problem worldwide. There were nine cases notified in NSW in 2020.

In NSW, actions taken to work towards ending TB include the following:

- supporting the screening and prevention of TB in refugees and other immigrants
- using whole genome sequencing technology to improve identification of TB transmission to allow better targeting of public health measures, in order to make NSW “TB transmission free”
- working closely with Aboriginal communities to encourage early diagnosis and treatment of TB among Aboriginal people in NSW.

The [NSW TB Program](#) includes a network of specialised TB services across the state which provide free, confidential and culturally appropriate services to ensure everyone in NSW gets the TB care they need.

Further information

- [NSW Health Tuberculosis epidemiology reports page](#)
- [NSW Health Tuberculosis notification data page](#)

Flooding and health risks

Excessive rainfall in NSW has resulted in widespread flooding across the region. Flooding can cause immediate and devastating effects, but there are several health risks associated with flooding that can persist for weeks.

Health risks during floods:

It is important to listen to local emergency services announcements if flooding is expected in your area. These may include boil water alerts if drinking water is potentially contaminated.

If a boil water alert is issued, cooled boiled water (or bottled water) should be used for:

- Drinking (including pets)
- Cooking
- Washing raw foods
- Brushing teeth

Dishes should be washed with hot water and soap, or in a dishwasher.

In the event of flooding you may need to move stock, equipment, garbage containers and any chemicals to higher ground to avoid loss of property or potential contamination. Follow [tetanus immunisation recommendations](#) and seek medical attention for dirty wounds or wounds where the skin has been penetrated such as with a dirty nail.

Ensure you keep essential medications and portable medical devices accessible, and with you. See your GP to ensure you have an adequate supply of essential medication at all times.

Floodwaters are extremely dangerous. Do not enter or drive into floodwaters.

For help or assistance:

- If you need emergency assistance in a flood or storm, call the State Emergency Service (SES) on 132 500.
- For a medical, police or fire emergency call Triple Zero (000).
- Health advice is also available 24 hours a day from Healthdirect Australia on 1800 022 222
- A number of resources are available for [mental health advice](#) during and after emergencies.

Health risks after floods:

Food and medicine safety:

Flooding often results in extended power outages, which can lead to food and medicine spoilage. Any food or medicine that has been in contact with floodwater should be discarded.

The [NSW Food Authority](#) provides advice on food safety after floods and power outages.

Medications that have been contaminated by floodwater should not be used, and medications that require refrigeration may need to be discarded after power outages (unless essential to sustain health, in which case the medicine should be used until a new supply is available). For information on medications affected by power outages or floodwater, speak to your pharmacist or doctor, or contact Healthdirect on 1800 022 222.

Water-borne disease risks:

Floodwater may be contaminated by sewage, manure, chemicals and harmful debris – for this reason, you should **never swim in flood waters**. Flooding can also cause contamination of drinking water and natural water sources such as creeks, rivers and the ocean. This increases the risk of water-borne disease such as [cryptosporidiosis](#). It can also increase the risk of [leptospirosis](#), which can be associated with exposure to flood water contaminated with urine from infected animals.

- Natural water sources should not be used for swimming for a week after heavy rain.
- While swimming, avoid swallowing water.
- Water from natural sources should not be drunk unless it has been boiled to a rolling boil.

Entering floodwater, even for the purposes of clean up, should be avoided at all costs.

Mosquito-borne risks:

After flooding, mosquito activity generally increases due to the presence of standing water. Increased mosquito activity can be a nuisance, but can also increase the risk of viruses transmitted by mosquitos such as [Ross River Virus](#) and [Barmah Forest Virus](#).

To avoid mosquito bites and reduce the risk of virus transmission:

- Empty out containers which may have become filled with water during rain or flooding.
- Avoid being outdoors at dawn and dusk when mosquitoes are most active.
- If you are outdoors, wear loose-fitting long sleeves and pants, and apply an appropriate mosquito repellent.
- Use mosquito netting around beds, following safety guidelines.

Further information

- [Emergency preparedness – storms and floods](#)
- [Mosquito control and floods](#)

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 14 March – 20 March 2021, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2021	2020	2019	2020	2019
Enteric Diseases	Cryptosporidiosis	6	13	194	273	257	550	669
	Giardiasis	46	48	433	658	1009	1791	3271
	Listeriosis	1	1	4	2	2	20	16
	Rotavirus	1	6	49	277	154	463	1755
	STEC/VTEC	3	5	31	32	23	113	80
	Salmonellosis	94	94	1076	1293	1125	2888	3556
	Shigellosis	3	3	21	310	197	494	867
Respiratory Diseases	Legionellosis	5	1	55	26	45	168	153
	Tuberculosis	12	4	118	107	116	631	590
Sexually Transmissible Infections	Chlamydia	572	655	6743	7309	7091	27282	32498
	Gonorrhoea	182	159	2069	2529	2509	9907	11702
	LGV	2	0	8	23	14	44	69
Vaccine Preventable Diseases	Haemophilus influenzae type b	1	0	3	1	2	6	11
	Pneumococcal Disease (Invasive)	6	9	77	95	74	360	691
Vector Borne Diseases	Barmah Forest	5	2	32	26	13	271	63
	Ross River	21	23	233	49	144	1987	593
Zoonotic Diseases	Brucellosis	1	0	1	0	2	4	4
	Leptospirosis	1	0	8	3	3	12	9
	Q fever	3	4	43	59	73	206	248

* 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.
- Due to the rapidly evolving nature of the situation, data on COVID-19 notifications can be found separately on the NSW Health [Latest Updates on COVID-19](#) page.
- 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.