

Communicable Diseases Weekly Report

Week 10, 6th March to 12th March 2022

In summary, we report:

- [Antimicrobial-resistant gonorrhoea](#)
- [Novel coronavirus 2019 \(COVID-19\)](#)
- [Japanese encephalitis](#)
- [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.

Antimicrobial-resistant gonorrhoea

Two cases of gonorrhoea with high-level resistance to azithromycin, one of the two main antibiotics used to treat gonorrhoea, were notified during March 2022. Both people with infections were residents of metropolitan Sydney. One person reported recent sexual exposures in South America, and likely transmitted the infection to a partner on return to New South Wales (NSW). The infections were both susceptible to ceftriaxone, the other (primary) antibiotic used to treat gonorrhoea in Australia.

Gonococcal infections with antimicrobial resistance are of major public health concern, as they may increase the number of people with long-term complications, often require complex treatment, and lead to increased health care costs. Victoria and Queensland also reported cases of gonococcal infection with reduced susceptibility to ceftriaxone in March 2022, but these cases are not linked to any NSW cases.

In Australia, resistance to ceftriaxone and high-level resistance to azithromycin are rarely observed, with antimicrobial-resistant gonococcal strains detected locally typically resulting from overseas travel. Although the number of gonorrhoea notifications has been relatively low during 2020 and 2021, the reopening of international borders has increased the risks of importation.

Gonorrhoea is a sexually transmissible infection caused by *N. gonorrhoeae* bacteria. It can infect the throat, anus, urethra (urine passage), cervix (neck of the womb) and eyes. People with gonorrhoea often have no symptoms, and can pass the infection on to others unknowingly. If untreated, the infection can spread via the bloodstream to the skin, joints, heart valves and lining of the brain (meningitis). Untreated gonorrhoea in women can also spread to the womb and fallopian tubes (pelvic inflammatory disease or PID) and this can result in infertility or a pregnancy in the fallopian tube (ectopic pregnancy). Infertility can also occur in men if the infection spreads down the urethra and into the testes.

Those most at risk of gonorrhoea are men who have unprotected sex with men, and men and women who have unprotected heterosexual sex. Gonorrhoea can be prevented by using condoms for vaginal and anal sex, and dental dams for oral sex.

For free and confidential sexual health support and information people can contact the Sexual Health InfoLink (SHIL) on 1800 451 624. SHIL is a NSW Ministry of Health funded information and referral telephone line that is staffed by specialist sexual health nurses from 9:00am to 5:30pm weekdays.

Follow the links for more information on [gonorrhoea](#) and [gonorrhoea notifications](#).

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](#).

Japanese encephalitis

For up-to-date information regarding the Japanese encephalitis outbreak and the NSW response, please visit the [NSW Health Japanese encephalitis 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 6th March – 12th March month 2022, by date received*

		Weekly		Year to date				Full Year			
		This week	Last week	2022	2021	2020	2019	2021	2020	2019	
Enteric Diseases	Campylobacter	191	215	2140	2512	2228	2499	11183	9457	11179	
	Cryptosporidiosis	7	2	75	188	242	239	442	549	669	
	Giardiasis	26	26	236	390	610	912	1501	1868	3322	
	Hepatitis A	1	0	5	0	15	19	7	18	61	
	Hepatitis E	1	0	1	0	6	3	1	14	24	
	Paratyphoid	1	0	2	0	10	19	1	17	39	
	Rotavirus	9	14	71	59	273	145	356	500	1777	
	STEC/VTEC	2	3	24	28	23	20	127	115	79	
	Salmonellosis	90	90	831	985	1173	1032	3097	2884	3555	
Shigellosis	9	6	47	17	289	184	60	494	867		
Respiratory Diseases	Influenza	23	18	79	14	5835	5276	124	7487	116434	
	Legionellosis	2	3	46	55	24	41	211	170	153	
	Tuberculosis	6	9	72	106	91	99	558	624	589	
Sexually Transmissible Infections	Chlamydia	521	501	4484	6200	6688	6385	25353	27248	32478	
	Gonorrhoea	179	190	1705	1877	2330	2267	7629	9887	11690	
Vaccine Preventable Diseases	Pertussis	2	2	7	6	841	1275	43	1404	6386	
	Pneumococcal Disease (Invasive)	5	2	35	68	85	70	390	359	690	
Vector Borne Diseases	Japanese Encephalitis	1	1	2	0	0	0	0	0	0	
	Ross River	8	46	281	226	44	117	654	1990	593	
Zoonotic Diseases	Leptospirosis	1	0	4	7	2	3	94	12	9	
	Q fever	1	2	23	44	57	70	177	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.
- 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.