Communicable Diseases Weekly Report

Week 25 17 June 2013 – 23 June 2013

In summary, we report:

- **Salmonellosis** – increase in *S*. Typhimurium cases
- **Measles** – three new cases reported and travel warning
- **Adverse events following immunisation** – notes on increased reporting
- **Summary of notifiable conditions activity in NSW**

For further information on infectious diseases see the NSW Health Infectious Diseases webpage.

Follow the Infectious Disease Factsheets and Disease Data links for more information on specific infectious diseases.

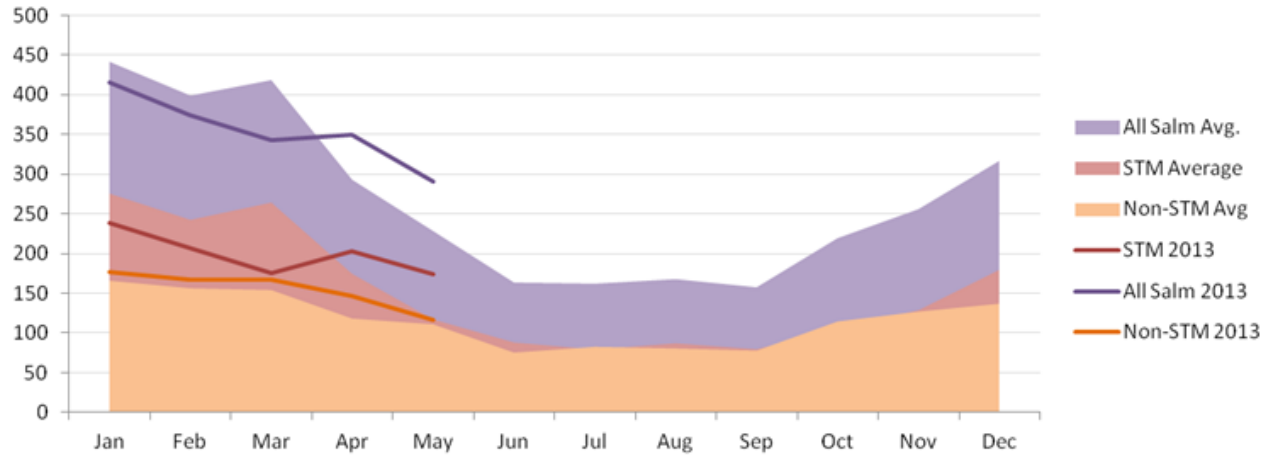
For links to other surveillance reports, including influenza and enterovirus surveillance reports, see the NSW Health Infectious Diseases Reports webpage.

Salmonellosis

A total of 48 cases of salmonella infection (salmonellosis) were reported in this reporting week (Table 1). Salmonellosis notifications were well above the seasonal range in April and May, due primarily to an increase in reports of infection due to the *Salmonella* Typhimurium (STM) serovar (Figure 1).

Although the increase is predominantly due to sporadic STM cases, several possible clusters have been identified by genetic typing and investigations into these are being conducted by Local Public Health Units. No recent clusters have been attributed to a definitive source as yet.

Figure 1: Salmonellosis notifications in 2013 compared to previous 4-year average, and compared by serotype (STM status).



Follow the link for more information on salmonellosis notifications data.

back to top

Measles

Three new cases of measles were notified in this reporting week (Table 1). Two of the cases were locally acquired from a sibling reported as a case last week. The third case was part of a family cluster of cases who had all recently travelled in South East Asia. The local Public Health Units are currently investigating these cases and managing contacts.

So far in 2013 there have been six cases of measles in travellers returning from Asia, four of whom reported recent travel to Thailand where an outbreak is thought to be occurring in tourist areas including Bangkok and Phuket. Other Australian states have also identified measles cases in travellers returning from Thailand in recent weeks.

Measles transmission continues to occur in many parts of the world, including Asia and Europe, so all international travellers must ensure they are protected prior to travel. People planning international travel and who have not already been immunised are strongly encouraged to be immunised before travel.

Infants travelling to countries in which measles is endemic, or where measles outbreaks are occurring, may be given MMR vaccine from as young as nine months of age, after an individual risk assessment. In these cases, a further two doses of MMR area still required, commencing at 12 months of age (Reference: Australian Immunisation Handbook, 10th Edition).

All children and adults born after 1965 should be vaccinated with two doses of MMR vaccine if not already immune.

Follow the link for further information on measles notifications data.

back to top

Adverse Events Following Immunisation

Adverse events following immunisation are reported to NSW Health by doctors, public health units or patients where there is any symptom or sign that occurs after a vaccination. Reporting of any health effect, whether mild or more severe, and whether likely to be incidental or related to vaccination is encouraged.

All reported suspected adverse events are referred to the Therapeutic Goods Administration for investigation. This allows early detection of any unforeseen events related to vaccination.

The adverse event reporting in this report includes suspected adverse events. Once assessed by the TGA the number of confirmed adverse events will be much lower.

In the first term of 2013 the human papillomavirus (HPV) vaccine was introduced in the school program for adolescent boys. In order to monitor this new program, the Australian Department of Health and Ageing has requested enhanced adverse events surveillance. This includes reporting of any occurrence where an adolescent boy fainted after receiving the HPV vaccination.

As brief fainting is quite common in adolescents receiving vaccination, this accounts for most of the increased number of adverse events reported in the early months of 2013 (Table 1).

back to top

Summary of notifiable conditions activity in NSW

The following table summarises notifiable conditions activity over the reporting period (Table 1). See explanatory notes below.

Table 1. NSW Notifiable Conditions activity for the period 17 June to 23 June 2013 (by date received).

		This week	Last week	Year to date			Full Year	
				2013	2012	2011	2012	2011
Enteric Diseases	Cryptosporidiosis	13	11	907	427	208	655	354
	Giardiasis	37	32	1234	1180	1408	2015	2377
	Haemolytic Uremic Syndrome	1	0	4	5	3	8	4
	Hepatitis A	1	1	37	19	36	41	60
	Hepatitis E	1	0	11	4	13	10	21
	Rotavirus	6	2	188	326	379	1761	1208
	STEC/VTEC	1	1	16	9	4	14	9
	Salmonellosis	48	54	2006	1622	2414	2942	3566
	Shigellosis	1	0	57	68	72	131	126
Respiratory Diseases	Influenza	80	44	876	1335	952	8041	5790
	Legionellosis	1	3	45	67	61	105	104
	Tuberculosis	6	3	146	190	243	441	538
Sexually Transmissible Infections	Chlamydia	386	335	10225	10696	9895	21262	20449
	Gonorrhoea	86	53	2078	1937	1225	4114	2817
Vaccine Preventable Diseases	Adverse Event Following Immunisation	2	3	347	160	218	262	352
	Measles	3	3	10	18	53	172	88
	Meningococcal Disease	1	1	14	29	33	68	71
	Mumps	2	3	46	65	31	110	61
	Pertussis	27	27	1151	3485	6580	5996	13410
	Pneumococcal Disease (Invasive)	9	10	200	207	198	567	530
Vector Borne Diseases	Barmah Forest	12	14	276	184	330	344	472
	Dengue	2	1	98	173	78	289	148
	Malaria	1	0	40	26	38	68	82
	Ross River	16	9	311	422	460	596	591
Zoonotic Diseases	Q fever	2	2	63	71	62	123	144

Notes on Table 1: NSW Notifiable Conditions activity

- 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.
- 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.
- Only conditions for which at least one case report was received appear in the table. HIV and other blood-borne virus case reports are not included here but are available from the Infectious Diseases Data webpage.

back to top