

Communicable Diseases Weekly Report

Week 23 3 June 2013 – 9 June 2013

In summary, we report:

- Legionnaires' disease three new cases reported
- Measles one new case reported
- Cryptosporidiosis increased reports but decreasing trend in notifications
- Summary of notifiable conditions activity in NSW

For further information on communicable diseases in NSW see the <u>NSW Health Infectious</u> <u>Diseases</u> website. Click on the heading of each section to see a related factsheet. Updated data are provided in the links below each section, where available.

<u>Legionnaires' disease</u>

Three new cases of Legionnaires' disease were notified in this reporting week (Table 1). One was caused by infection with the legionella bacteria species known as *Legionella pneumophila* and is believed to have been acquired overseas. The two other cases were caused by *Legionella longbeachae* and are likely due to exposure to potting mix or soil.

Legionnaires' disease usually causes fever, chills, a cough and shortness of breath. Some people also have muscle aches, headache, tiredness, loss of appetite and diarrhoea. People can become very sick with pneumonia; most people recover but the disease is occasionally fatal. Legionnaires' disease is not spread from person to person.

L. longbeachae is common in the soil and potting mix. People can reduce their risk of exposure to potting mix dust by following the manufacturers' warning present on potting mix labels, which advise to:

- Wet down the potting mix to reduce the dust.
- Wear gloves and a special (P2) mask when using potting mix.
- Wash your hands after handling potting mix or soil, and before eating, drinking or smoking.

Follow the link for more information on Legionnaires' disease notifications data.

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Measles

One new case of measles was notified in this reporting week (Table 1). The case was a young adult with a history of recent travel in South East Asia. The local Public Health Unit is currently investigating and managing contacts.

Measles is a serious disease that is easily spread through the air. Immunisation is effective in preventing the disease. All children and adults born during or after 1966 should be vaccinated with two doses of MMR vaccine if not already immune.

Follow the link for further information on measles notifications data.

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Cryptosporidiosis

There were 27 cases of cryptosporidiosis reported this week (Table 1). This was an increase compared to the previous week (15 cases reported) but the overall trend in notifications is down from the peak in February/March (Figure 1). Cryptosporidiosis cases typically peak over the summer and autumn months, with notifications in 2013 exceeding counts for all recent years apart from the 2009 epidemic.

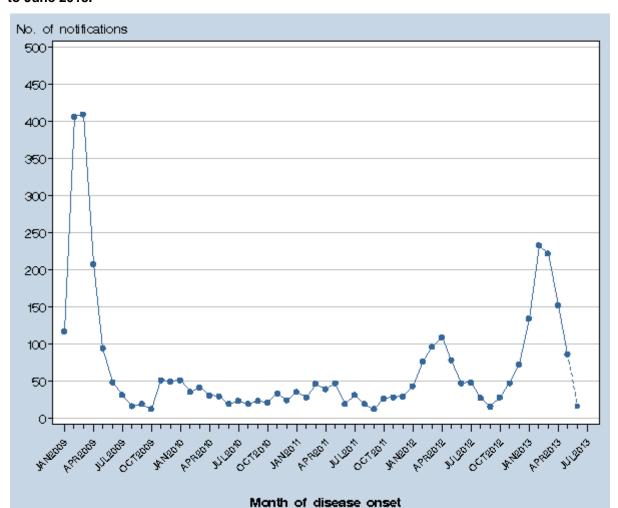


Figure 1. Cryptosporidiosis notifications in NSW residents, by month of disease onset. January 2009 to June 2013.

Cryptosporidiosis is a diarrhoeal disease caused by the parasite *Cryptosporidium* which infects the intestine. Infection occurs when the parasite is ingested. Transmission most often occurs through person-to-person contact, particularly in families and among small children, drinking contaminated water, swimming in contaminated pools, handling infected animals or their manure, and rarely through contaminated food.

Prevention measures including good hand hygiene, not drinking untreated water, avoiding swallowing water when swimming, and not swimming in natural waters (eg rivers, creeks, dams, surf) within a week after heavy rain. To avoid spreading cryptosporidiosis, people with cryptosporidiosis should not swim or share towels or linen for at least two weeks after the diarrhoea has stopped, and not prepare food for at least 48 hours after the diarrhoea has stopped. Children who have diarrhoea should be kept home from school, preschool, childcare or playgroup until 24 hours after the diarrhoea has completely stopped.

Follow the link for further information on <u>cryptosporidiosis notifications data</u>.

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 3 June to 9 June 2013 (by date received).

		This week	Last week	Year to date			Full Year	
				2013	2012	2011	2012	2011
Enteric Diseases	Cryptosporidiosis	27	15	883	410	200	655	35
	Giardiasis	47	52	1163	1108	1324	2015	237
	Listeriosis	1	0	21	18	11	36	2
	Rotavirus	4	3	179	296	349	1761	120
	STECNTEC	1	0	15	9	2	14	
	Salmonellosis	51	71	1906	1554	2316	2942	356
	Shigellosis	2	0	56	64	68	131	12
	Typhoid	2	2	38	27	30	43	4
Respiratory Diseases	Influenza	52	40	750	717	740	8041	579
	Legionellosis	3	2	40	63	59	105	1
	Tuberculosis	5	2	134	175	233	441	5
Sexually Transmissible Infections	Chlamydia	406	441	9497	9971	9060	21262	204
	Gonorrhoea	52	68	1932	1784	1115	4114	28
Vaccine Preventable Diseases	Adverse Event Following Immunisation	5	11	341	153	207	262	3
	Measles	1	0	4	14	53	172	
	Mumps	2	4	41	62	25	110	
	Pertussis	38	50	1093	3328	6194	5996	134
	Pneumococcal Disease (Invasive)	6	16	181	177	174	567	5
	Rubella	1	2	5	7	10	11	
Vector Borne Diseases	Barmah Forest	23	13	250	171	312	344	4
	Dengue	1	1	93	157	77	289	1
	Ross River	18	17	284	408	444	596	5
Zoonotic	Q fever	1	4	58	66	57	123	1

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 <u>Infectious Diseases Data</u> webpage.

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