

Communicable Diseases Weekly Report

Epi-Week 14 31 March 2014 - 6 April 2014

In summary, we report:

- Gastroenteritis outbreaks in institutions seasonal increase in child care centres
- Measles four new cases
- Ross River virus increase in notifications
- Summary of notifiable conditions activity in NSW

For further information on infectious diseases and alerts see the <u>Infectious Diseases</u> webpage.

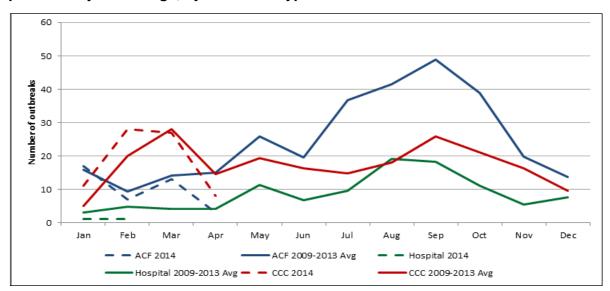
Follow the A to Z of Infectious Diseases link for more information on specific diseases.

For links to other surveillance reports, including influenza reports, see the <u>NSW Health Infectious</u> <u>Diseases Reports</u> webpage.

Gastroenteritis outbreaks in institutions

There were nine outbreaks of gastroenteritis in an institution reported in this period affecting at least 49 people (Figure 1). The previous five-year average for April is eight outbreaks per week. One outbreak occurred in an aged care facility and eight occurred in child care centres. All outbreaks appeared to have been caused by a virus and spread from one person to another but no stool specimens have been collected for identification of the pathogen.

Figure 1. Gastroenteritis in institutions: outbreaks in 2014 (dotted lines) compared to the previous 5-year average, by institution type.



The majority of notified gastroenteritis outbreaks in institutions at the beginning of the year occur in child care centres. This is likely due to the large intake of new children into child care at this time exposing them to a large number of new people and new viruses to which they are likely to be susceptible.

Infections in small children may then spread to their other contacts. It is very important to keep small children with gastroenteritis at home, and to not visit family in aged care facilities or hospitals while they are sick, to prevent introducing viral gastroenteritis to these vulnerable people.

Follow the link for further information on viral gastroenteritis.

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Measles

Four notifications of measles were reported this week (Table 1). Three of the cases were unvaccinated siblings of a previously confirmed case who had been in home quarantine. The fourth case was in a student visiting from Indonesia. Close contacts of this case have been follow-up by the local public health unit.

With continuing local measles activity in NSW it is especially important that everyone checks that they, and their family, are up to date with their vaccinations. Anyone born during or after 1966 should make sure they have had two doses of vaccine (at least four weeks apart). Measles vaccine is available from general practitioners. Extra doses of measles vaccine are safe and do not cause any additional side effects, so anyone who is unsure of their vaccination status should be vaccinated.

Children should receive two doses of vaccine, one at 12 months of age and the second at 18 months. Babies who are travelling before their vaccines are due can be given the first dose as early as nine months of age. Children over 18 months who have not had their second dose of measles vaccine should be vaccinated now.

Follow the link for further information on measles disease notifications.

Follow the link for further information on measles vaccination (external link).

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Ross River virus

There were 16 notifications of Ross River virus (RRV) infection reported this week (Table 1), an increase over the six notifications in the previous week. RRV notifications this year have been mainly in residents of the Hunter New England (coastal part), Mid North Coast, and North Coast Local Health Districts, areas which have historically had higher rates of infection in the population compared to the state average.

Ross River virus is one of a group of viruses called arboviruses (or arthropod-borne viruses), which are spread by the bite of infected mosquitoes. RRV infections are the most common mosquitoborne infection in Australia, and infections occur in many rural areas in NSW. Infections are uncommon in major cities and towns. Outbreaks can occur when local conditions of rainfall, tides and temperature promote mosquito breeding.

Symptoms usually develop about 7-10 days after being bitten by an infected mosquito. Some people will have flu-like symptoms that include fever, chills, headache and aches and pains in the muscles and joints. A general feeling of being unwell, tired or weak may also occur at times during the illness.

The majority of people recover completely in a few weeks but some people experience symptoms such as joint pain and tiredness for many months.

There is no vaccine to protect against RRV so prevention relies on measures to avoid being bitten by mosquitoes. Mosquitoes that carry the virus are usually most active in the hours after sunset and again around dawn.

Follow the link for the Mosquitoes are a health hazard factsheet.

Follow the link for further information RRV notifications data.

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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 31 March to 6 April 2014, by date received.*

		This week	Last week	Year to date			Full Year	
				2014	2013	2012	2013	2012
Enteric Diseases	Cryptosporidiosis	8	9	162	645	234	1132	655
	Giardiasis	76	95	922	777	741	2240	2012
	Rotavirus	6	8	98	140	218	508	1758
	Salmonellosis	122	101	1617	1345	1151	3486	2942
	Shigellosis	2	4	97	44	52	136	131
	Typhoid	2	0	17	23	17	58	43
Respiratory Diseases	Influenza	65	54	800	481	275	8401	8038
	Legionellosis	1	1	20	25	45	104	107
	Tuberculosis	5	8	103	119	132	440	469
Sexually Transmissible Infections	Chlamydia	491	514	6574	6252	6624	21077	21261
	Gonorrhoea	99	108	1335	1332	1148	4270	4115
Vaccine Preventable Diseases	Adverse Event Following Immunisation	11	13	92	278	93	508	269
	Measles	4	0	50	3	4	33	174
	Pertussis	26	29	521	772	2387	2378	5998
	Pneumococcal Disease (Invasive)	5	10	74	89	73	490	564
Vector Borne Diseases	Barmah Forest	3	6	63	153	119	440	352
	Dengue	3	12	129	80	102	298	287
	Malaria	1	2	28	29	15	93	68
	Ross River	16	6	128	151	227	513	596
Zoonotic	Q fever	2	1	51	43	46	155	124

* 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.

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