

Communicable Diseases Weekly Report

Week 23, 04 to 10 June 2017

In summary, we report:

- [Listeriosis](#) – two cases
- [Hepatitis A](#) – two cases
- [Summary of notifiable conditions activity in NSW](#)

For further information on infectious diseases on-line see [NSW Health Infectious Diseases](#). Also see [NSW Health Infectious Diseases Reports](#) for links to other surveillance reports.

Listeriosis

Two new cases of *Listeria* infection (listeriosis) were reported this week ([Table 1](#)) in a woman and her still-born baby. The woman had presented with abdominal pain, headache and mild fever in the third trimester of pregnancy and was delivered by Caesarean section, however the baby had already succumbed to the infection. The woman is recovering.

This is the third case of pregnancy-related listeriosis in NSW in 2017, however there are no links between the three cases. Over the last five years, there has been an average of one case of pregnancy-related listeriosis each year.

Listeriosis is a rare illness caused by eating food contaminated with a bacterium called *Listeria monocytogenes*. This bacterium is widespread throughout nature, being commonly carried by many species of both domestic and wild animals.

Eating foods that contain *Listeria* bacteria does not cause illness in most people, but in some higher risk groups, can result in severe illness and death. Outbreaks of listeriosis have been associated with the consumption of unpasteurised milk, soft cheeses, pre-prepared salads (for example, from salad bars), unwashed raw vegetables, pâté, cold diced chicken and pre-cut fruit and fruit salad. *Listeria* survives refrigeration but is sensitive to cooking temperatures.

Pregnant women are at increased risk from listeriosis because their immune systems tend to be suppressed, and infection in the mother can be passed on to the developing fetus or newborn. Listeriosis during pregnancy may cause stillbirth or premature delivery.

Other people at increased risk of listeriosis include older people and people with weakened immune systems; for example, people on cancer treatment or corticosteroids, or people with diabetes, kidney disease, liver disease or people living with HIV infection. Listeriosis may be severe in these individuals.

People at increased risk of listeriosis should not eat pre-packed cold salads including coleslaw and fresh fruit salad, pre-cut fruit, pre-cooked cold chicken, cold delicatessen meats, pâté, raw seafood, uncooked smoked seafood (e.g. smoked salmon), unpasteurised milk or milk products, soft cheeses (e.g. brie, camembert, ricotta or blue-vein), sprouted seeds or raw mushrooms.

Fruit and vegetables eaten raw should be thoroughly washed prior to eating to reduce the risk of *listeria* contamination.

Follow the links for further NSW Health [listeriosis data](#) and the NSW Health [listeriosis factsheet](#).

Also see the NSW Food Authority Authority [Listeria and pregnancy - the foods you should avoid and why](#) publication and the [Food safety during pregnancy brochure](#).

Hepatitis A

Two new cases of locally-acquired hepatitis A infections were reported this week (Table 1). The cases were in adults in the same household. Their only reported exposure risk was the consumption of shellfish in the 50 days before onset of symptoms, however other people who shared the shellfish have not become ill, so this is unlikely to be the source of their illness.

There is currently a multi-jurisdictional outbreak investigation into locally-acquired cases of hepatitis A with possible frozen berry consumption. As a precaution, Food Standards Australia New Zealand (FSANZ) issued a consumer level food recall on 2 June 2017 for the Creative Gourmet brand of Mixed Frozen Berries 300g with a best before date of 15 January 2021. Consumers are advised to return any opened or unopened product to the place of purchase for a full refund or dispose of them.

There have been a total of three locally-acquired hepatitis A cases in NSW this year. None of these cases have reported consumption of frozen berries prior to their illness.

Hepatitis A is a viral infection of the liver. Symptoms include feeling unwell, aches and pains, fever, nausea, lack of appetite, and abdominal discomfort, followed by dark urine, pale stools and jaundice (yellowing of the skin and eyes). The illness usually lasts from one to three weeks. People who experience these symptoms are advised to see their healthcare professional.

Infected people can transmit the virus to others from two weeks before the development of symptoms until one week after the appearance of jaundice. The virus is spread by the faecal-oral route, including through the consumption of contaminated food or water or by direct contact with an infected person.

There is no specific treatment for hepatitis A and people sometimes require hospitalisation for supportive care. A safe and effective vaccine is available. People exposed to hepatitis A can be protected from developing the disease if they receive the vaccine or protective antibodies within two weeks of exposure. Hepatitis A vaccination is routinely recommended for people at higher risk of infection and those who are at increased risk of severe liver disease. These include travellers to countries where hepatitis A is common (most developing countries), some occupational groups, men who have sex with men, people with developmental disabilities and people with chronic liver disease.

Follow the links for NSW Health [hepatitis A notification data](#) and NSW Health [hepatitis A fact sheet](#).

Follow the link for more information on the [FSANZ recall of Creative Gourmet Frozen Mixed Berries](#).

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 04 – 10 June 2017, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2017	2016	2015	2016	2015
Enteric Diseases	Cryptosporidiosis	13	18	1001	682	578	1184	1040
	Giardiasis	73	50	1721	1948	1796	3481	3413
	Hepatitis A	2	1	13	22	48	41	72
	Listeriosis	2	0	9	23	14	36	26
	Rotavirus	12	16	305	233	159	751	1033
	STEC/VTEC	3	0	29	21	11	65	29
	Salmonellosis	60	57	2245	2549	2360	4543	4022
	Shigellosis	6	8	97	140	78	310	172
Respiratory Diseases	Influenza	419	289	4398	3486	2149	35538	30301
	Legionellosis	2	5	58	68	51	134	96
	Tuberculosis	12	3	188	211	188	532	443
Sexually Transmissible Infections	Chlamydia	495	565	13330	11815	10458	25991	22525
	Gonorrhoea	157	155	4367	3067	2401	7006	5397
Vaccine Preventable Diseases	Adverse Event Following Immunisation	3	4	151	132	95	257	186
	Mumps	2	1	62	16	24	67	65
	Pertussis	107	98	2743	5280	3083	10957	12079
	Pneumococcal Disease (Invasive)	18	16	190	165	161	543	494
Vector Borne Diseases	Barmah Forest	6	6	49	22	134	35	184
	Dengue	4	6	151	266	177	481	344
	Malaria	1	1	32	20	20	59	47
	Ross River	21	38	1227	315	1245	540	1635
Zoonotic Diseases	Q fever	3	2	95	106	106	230	264

* 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.