

Communicable Diseases Weekly Report

Week 19, 5 May to 11 May 2019

In summary, we report:

- [Cholera](#) – one new case
- [Measles](#) – one new case
- [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.

Cholera

One case of *Vibrio cholerae* infection was notified in this reporting week in an adult who developed diarrhoea and lethargy shortly after returning from the Philippines and Thailand. The isolate was identified as *V. cholerae* O1 or serotype Ogawa, but the test for the cholera toxin gene was negative. As such, this case does not appear to meet the national case definitions for cholera, but will undergo further laboratory testing (whole genome sequencing) to determine if the strain is toxigenic.

Cholera is typically a severe diarrhoeal illness caused by infection with cholera bacteria, *V. cholerae*. In Australia, the spread of toxigenic strains (serogroups O1 and O139) have been eliminated by modern water and sewage treatment systems and food safety programs. Most infections occur in travellers to developing countries, including those visiting friends or relatives. The bacteria is spread through drinking contaminated water, eating raw or undercooked seafood from contaminated waters, or eating other contaminated foods.

Only toxigenic strains of serogroups O1 and O139 cause widespread epidemics; however, non-toxigenic strains within these serogroups also exist in the environment, and may cause sporadic cases of disease. Similarly, non-epidemic strains (non-O1/O139) are ubiquitous to a variety of aquatic ecosystems worldwide (including Australia), and occasionally infect humans causing a relatively milder disease.

To prevent cholera infections, travellers to developing countries should drink only bottled or boiled water, avoid ice and drinks that may have been made with untreated water, avoid uncooked foods including fruit and vegetables unless you are able to peel them yourself, avoid raw or undercooked seafood, avoid eating from street vendors, protect food from flies, and always practice good hygiene by thoroughly washing hands with soap and running water before meals and after using the toilet.

A cholera vaccine is available but is generally only recommended for travellers at increased risk of the infection because of a pre-existing medical condition, or for humanitarian disaster workers deployed to regions with endemic cholera.

Follow the links for further information on [cholera](#).

Measles

A new case of measles was notified in this reporting week (Table 1). This was in a young woman who acquired the infection while travelling in South East Asia. While infectious, this person spent time in the Sydney central business district (CBD) around Haymarket, and on public transport between Town Hall Station and Artarmon in Northern Sydney.

The incubation period for measles (the time between exposure to an infectious case and the onset of symptoms) is typically around 10 days, but can be anywhere between 7 and 18 days. People who may have been exposed to this recent cases are advised to watch for signs and symptoms of measles up to at least 24 May.

[Measles alerts](#) are issued in NSW when an infectious case has potentially exposed members of the public to the virus. For the purpose of public awareness, alerts are considered active for 18 days after the last time the infectious person was potentially at risk of infecting others, as this is the time period within which susceptible people exposed to the case are most likely to develop symptoms.

The only other active alert is for cases recently reported from Western NSW. People in the same locations (specific sites in [Dubbo](#), [Parkes](#), [Wagga Wagga](#), and [Walgett](#)) at the same time as these cases should be alert for signs and symptoms of measles until at least 18 May 2019.

Measles is a serious viral illness and one of the most highly communicable infectious diseases. The measles virus is usually spread through coughing or by contact with the nasal or throat secretions of an infected person.

The symptoms of measles usually start 7 to 18 days after exposure to someone who has measles. They include fever, cough, runny nose, conjunctivitis (red, watery eyes) and feeling unwell. After three to five days a rash with flat red spots breaks out, usually starting on the face before spreading to the rest of the body. People are usually infectious from around four days before the onset of the rash until four days after it appears.

People are considered immune to measles if they have had a documented measles illness in the past or have evidence of having received two doses of a measles-containing vaccine. People born before 1966 are also considered immune as they are highly likely to have had measles infection as a child.

While one dose of vaccine induces effective protection in 95% of people, two doses are recommended as this provides long-term protection in 99% of people.

People who think they might have measles should avoid public places and see a doctor, but should call ahead to ensure they do not come in to contact with other people in the waiting areas.

Further information

- NSW Health [measles website](#) and [measles factsheet](#).
- [The Australian Immunisation Handbook](#) for more information on measles vaccine recommendations.

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 5 May 2019 – 11 May 2019, by date received*

		Weekly		Year to date			Full Year	
		This week	Last week	2019	2018	2017	2018	2017
Enteric Diseases	Cholera	1	0	1	0	0	0	1
	Cryptosporidiosis	8	8	352	384	928	708	1266
	Giardiasis	41	65	1356	1196	1486	2937	3135
	Haemolytic Uremic Syndrome	1	0	2	2	2	4	2
	Hepatitis A	1	1	33	51	10	86	71
	Paratyphoid	1	0	30	13	8	34	17
	Rotavirus	7	10	218	359	241	808	2319
	Salmonellosis	90	86	1750	1615	1990	3342	3681
	Shigellosis	26	21	326	85	78	531	236
	Typhoid	1	0	33	28	33	58	55
Respiratory Diseases	Influenza	951	844	12007	3981	3199	17423	103852
	Legionellosis	3	2	68	64	49	171	138
	Tuberculosis	7	19	198	182	180	509	542
Sexually Transmissible Infections	Chlamydia	589	711	11726	11841	11177	31197	29006
	Gonorrhoea	224	243	4306	3951	3658	10622	9160
	LGV	1	1	20	33	10	85	50
Vaccine Preventable Diseases	Measles	1	2	35	6	25	18	32
	Pertussis	134	111	2279	1441	2338	6281	5366
	Pneumococcal Disease (Invasive)	12	11	150	127	129	686	683
Vector Borne Diseases	Barmah Forest	1	2	27	35	37	74	127
	Dengue	5	8	153	123	128	299	306
	Malaria	3	1	23	22	27	66	68
	Ross River	17	27	273	218	1189	570	1653
Zoonotic Diseases	Psittacosis	1	0	4	3	6	7	9
	Q fever	2	2	106	70	87	227	210

* 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.
- 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.
- 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](#).
- 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](#) and the [HIV Surveillance Data Reports](#) webpages.