Communicable Diseases Weekly Report

Week 20, 15 May to 21 May 2022

In this report we provide information regarding one case of Monkeypox and a summary of notifiable conditions activity in NSW over the reporting period Week 20, 15 May to 21 May 2022.

Due to the rapidly evolving nature of the situation, data on **COVID-19** notifications can be found separately on the NSW Health Latest Updates on COVID-19 page.

For up-to-date information regarding the **Japanese encephalitis** outbreak and the NSW response, please visit the NSW Health Japanese encephalitis page.

Information on notifiable conditions is available at the 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.

Monkeypox

One case of monkeypox was notified in this reporting week. The case is an adult from metropolitan Sydney, who recently returned from Europe.

Since May 2022, there has been a global increase in monkeypox cases reported from countries that are not endemic for monkeypox virus. There have been two confirmed monkeypox cases in Australia, one in Victoria and one in NSW (mentioned above). Cases associated with this international outbreak are mainly men who have sex with men (MSM) with no associated travel to an endemic country, indicating local community transmission.

Monkeypox is a zoonotic viral infection that is usually associated with travel to Central and West Africa and spread through contact with bodily fluids or ingestion of wild animals. It can also be passed on from one person to another through prolonged close contact (i.e. inhaling respiratory droplets), or direct contact with infected bodily fluids, lesions or scabs on the skin or contaminated objects, such as bedding or clothes. It may also be passed on by direct contact during sex.

Symptoms of monkeypox normally begins with fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion. Within 1 to 3 days (sometimes longer) after the appearance of fever, a rash appears, often beginning as sores in the mouth and on the face then spreading to other parts of the body. A symptom among MSM is that the rash may first appear in the genital area. Lesions start as a macular rash that develops into papules, vesicles, then pustules, which crust and fall off. The number of lesions can vary from a few to several thousand.

Infection with monkeypox virus is usually self-limiting and most people recover within a few weeks. However, severe illness can occur in a small percentage of people.

A large proportion of cases detected in this multi-country outbreak are among men who had sex with men. NSW Health is urging people who have recently returned from overseas and have attended large parties or sex on premises venues to watch for symptoms. If symptoms appear, contact your GP or local sexual health clinic by phone or telehealth or call the NSW Sexual Health Infolink on 1800 451 624.

More information on monkeypox is available from:

- NSW Health Monkeypox fact sheet
- NSW Health infectious disease alerts

Summary of notifiable conditions activity in NSW

The following table summarises notifiable conditions activity over the reporting period alongside reports received in the previous week, year to date and in previous years (Table 1).

Table 1. NSW Notifiable conditions from 15 May – 21 May 2022, by date received*

		Weekly		Year to date				Full Year		
		This week	Last week	2022	2021	2020	2019	2021	2020	2019
Bloodborne	Hepatitis C - Newly Acquired	1	0	4	4	7	13	13	17	29
Enteric Diseases	Campylobacter	207	206	4003	5002	3727	4672	11954	10008	11482
	Cryptosporidiosis	9	7	181	248	373	375	443	549	669
	Giardiasis	32	25	492	790	967	1700	1504	1871	3328
	Hepatitis E	1	0	2	1	11	10	1	14	24
	Paratyphoid	1	0	6	0	16	32	1	17	39
	Rotavirus	5	7	149	127	329	267	356	500	1777
	STEC/VTEC	1	1	51	54	42	29	126	115	79
	Salmonellosis	46	51	1528	1577	1738	1841	3096	2884	3555
	Shigellosis	10	10	104	36	356	357	60	494	867
	Typhoid	4	0	16	0	32	36	2	37	64
Respiratory Diseases	Influenza	6048	3336	15135	32	7252	13688	124	7488	116431
	Legionellosis	7	4	98	96	72	71	213	170	153
	Tuberculosis	8	11	174	234	206	212	557	625	589
Sexually Transmissible Infections	Chlamydia	490	585	9572	11860	11159	12517	25369	27243	32475
	Gonorrhoea	194	244	3790	3724	4046	4635	7624	9883	11688
Vaccine Preventable Diseases	Pneumococcal Disease (Invasive)	9	9	110	150	137	153	386	358	690
Vector Borne Diseases	Dengue	1	4	15	1	73	182	4	76	456
	Ross River	16	19	485	457	1093	318	659	1990	595
Zoonotic Diseases	Q fever	1	1	68	81	90	123	185	206	248

*** 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.
- Due to the rapidly evolving nature of the situation, data on COVID-19 notifications can be found separately on the NSW Health Latest Updates on COVID-19 page.
- 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.
- 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, the HIV Surveillance Data Reports and the Hepatitis B and C Strategies Data Reports webpages.
- Notification is dependent on a diagnosis being made by a doctor, hospital or laboratory. Changes in awareness and testing patterns influence the proportion of patients with a particular infection that is diagnosed and notified over time, especially if the infection causes non-specific symptoms.