Communicable Diseases Weekly Report

Week 18, 30 April to 6 May 2023

In this report we provide information regarding mpox (formerly monkeypox) and a summary of notifiable conditions activity in NSW over the reporting period Week 18, 30 April to 6 May 2023.

For surveillance data on COVID-19 and influenza please see the latest *NSW Respiratory Surveillance Report*.

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.

Mpox local transmission

There have been two mpox cases notified in NSW recently; one case in this reporting period (30 April – 6 May 2023) and the other in the next reporting period (7 – 13 May 2023). These cases were both vaccinated and likely to have acquired their infection locally. These are the first mpox cases notified in NSW since November 2022. There were 56 cases of mpox notified in NSW in 2022 (Table 1).

Mpox was historically associated with travel to central and west Africa, however, since May 2022, the disease has been reported in non-endemic countries. From 1 January 2022 through 8 May 2023, the World Health Organisation (WHO) have reported a cumulative total of 87,377 laboratory-confirmed cases of mpox, including 140 deaths, across 111 countries.

Mpox is a zoonotic viral infection and is spread through direct skin-to-skin contact, or through contact with bodily fluids or the infected rash or crusts from human or animals. It can also be passed from one person to another through close contact (e.g., inhaling respiratory droplets or direct contact with skin lesions), or direct contact with contaminated objects, such as bedding or clothes. The current global mpox outbreak is being primarily spread through sexual contact.

On July 23, 2022, the WHO declared the global mpox outbreak a Public Health Emergency of International Concern (PHEIC). At the peak of the outbreak in August 2022 there were over 6,000 cases notified globally per week. The majority of cases were reported from America and Europe. By late April 2023, the number of cases globally had dropped significantly to less than 100 per week. The WHO removed the emergency status on 11 May 2023, noting that 90 per cent fewer mpox cases were reported in the past three months than in the previous three months.

In recent weeks there has been a slight increase in cases globally and amongst vaccinated people. Eight countries, including France and several countries in east Asia, have reported an increase in mpox cases. In addition, North America has seen a resurgence of cases in Chicago, many among fully vaccinated people, none of these recent cases have been hospitalised.

Symptoms of mpox include fever, headache, muscle aches, backache, swollen lymph nodes, chills and exhaustion (the prodrome). Within one to three days (sometimes longer) of the onset 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 feature of this international outbreak is that the rash may first appear in the genital area and the prodrome may be very mild or non-existent. 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 mpox 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 NSW have involved mainly, but not exclusively, men who have sex with men. In a recent media release NSW Health urged this group of men to remain vigilant for symptoms of mpox and to see their GP or sexual health clinic should symptoms develop and get a vaccine if they haven't already been vaccinated. Vaccination may not be completely protective against developing mpox, however, vaccinated people may experience less severe symptoms than unvaccinated cases. 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. People with f symptoms should contact their GP or local sexual health clinic or call the NSW Sexual Health Infolink on 1800 451 624.

More information on mpox is available from:

- NSW Health mpox 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 30 April – 6 May 2023, by date received*

		Weekly		Year to date					Full Year			
		This week	Last week	2023	2022	2021	2020	2019	2022	2021	2020	2019
Enteric Diseases	Campylobacter	220	171	4270	4128	4903	3920	4255	13346	13015	11052	12071
	Cryptosporidiosis	14	8	221	163	243	358	354	463	444	548	669
	Giardiasis	48	51	881	459	734	982	1559	1410	1585	1986	3420
	Rotavirus	23	36	1082	137	116	319	225	1802	356	500	1777
	Salmonellosis	69	55	1348	1423	1494	1651	1675	2967	3100	2885	3552
	Shigellosis	12	19	322	84	32	356	304	460	60	494	867
	STEC/VTEC	4	8	71	49	51	41	27	144	126	115	79
	Typhoid	1	0	40	12	0	32	33	47	2	37	64
Other Diseases	Invasive Group A Streptococcus	12	7	220	0	-	-	-	142	-	-	-
	Monkeypox	1	0	1	0	-	-	-	56	-	-	-
Respiratory Diseases	Influenza	950	861	11250	4847	22	7225	11278	116315	125	7481	116402
	Legionellosis	3	5	85	97	84	60	68	268	216	171	154
	Respiratory syncytial virus (RSV)	1452	1387	14269	1	-	-	-	5669	-	-	-
	Tuberculosis	14	11	203	153	210	198	192	526	558	625	589
Sexually Transmissible Infections	Chlamydia	658	463	11058	8450	10465	10476	11219	25857	25298	27214	32466
	Gonorrhoea	290	194	4313	3319	3327	3798	4110	10226	7625	9878	11683
	LGV	2	0	15	7	16	32	20	29	36	44	69
Vaccine Preventable Diseases	Pertussis	6	3	42	13	19	1235	2172	81	44	1400	6387
	Pneumococcal Disease (Invasive)	8	14	143	89	124	129	134	533	386	342	686
Vector Borne Diseases	Barmah Forest	2	0	50	36	52	75	28	89	111	271	63
	Dengue	4	7	115	15	1	75	162	170	4	78	460
	Ross River	4	5	176	457	418	760	275	725	661	1990	596
Zoonotic Diseases	Leptospirosis	2	1	7	15	44	6	4	44	96	12	9
	Q fever	2	0	51	77	81	83	116	197	209	212	249

*** 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.
- Surveillance data on COVID-19 can be found in the *NSW Respiratory Surveillance Report.*
- 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.