A report from the Communicable Diseases Network Australia  
1 October to 31 December 2005

The Communicable Diseases Network Australia (CDNA) consists of communicable disease authorities from various Australian Government agencies and state and territory health authorities, in addition to expert bodies and individuals in specific areas of communicable disease epidemiology, clinical management, disease control and laboratory diagnosis. The CDNA provides national public health leadership and co-ordination on communicable disease surveillance, prevention, and control, and offers strategic advice to governments and other key bodies on public health actions to minimise the impact of communicable diseases in Australia and the region.

Refugee health

CDNA endorsed the Pre-Departure Health Screening Protocols For Refugees Arriving From Africa (February 2006). The Department of Immigration and Multicultural Affairs had been trialling an interim protocol since April 2005 which provided valuable feedback used to refine and finalise the protocol. The protocol can be viewed on the Communicable Diseases Australia website at: http://www.health.gov.au/cdna

Guidelines for the Prevention and Control of Influenza Outbreaks in Residential Care Facilities in Australia

This document is to provide national best practice guidelines for staff of public health units and aged care facilities for preventing, defining and managing outbreaks of influenza in residential care facilities in Australia during interpandemic periods. CDNA members endorsed the guidelines which are to be published on the Australian Government Department of Health and Ageing Communicable Diseases Australia website with limited copies to be printed and distributed to jurisdictional health authorities.

Tuberculosis treatment and management

CDNA endorsed the two papers developed by the National Tuberculosis Advisory Committee—a CDNA sub-committee:

- **BCG Vaccine: Information and Recommendations for Use in Australia** – provides recommendations for the use of the Bacille Calmette-Guérin vaccine in the Australian community.
- **Guidelines for Australian Mycobacteriology Laboratories** – practical guidelines for Australian laboratories performing tuberculosis microscopy and culture.

Both of these documents have been published in this issue of *Communicable Diseases Intelligence* pp 109–115 and pp 116–128. These will also be available on the Communicable Diseases Australia website.

**Therapeutic Guidelines: Antibiotic version 13**

CDNA endorsed the Guidelines making artemether + lumefantrine the first line of treatment for uncomplicated *Plasmodium falciparum* malaria, where previously the first line treatment was quinine.

**Treatment of severe malaria**

CDNA resolved to encourage the Therapeutic Goods Administration to make parenteral Artesenate available for the treatment of severe malaria in Australia.
Pandemic influenza

Jurisdictional representatives from CDNA continue to be involved in planning for possible pandemic influenza. National Influenza Pandemic Action Committee CDNA jurisdictional representatives have met frequently via teleconference to consider issues relating to communication strategies, antiviral availability and registers, social distancing, border screening and other issues which will be directly relevant at the jurisdictional level. The continued involvement of CDNA jurisdictional members is anticipated.

Exercise Eleusis

CDNA played an active part in Exercise Eleusis ‘05, a desktop exercise run by the Australian Government Department of Agriculture, Fisheries and Forestry which included simulated human H5N1 cases. The objective of the exercise was to test the preparedness of Australia’s animal and human health agencies should pandemic influenza enter Australia.

CDNA played a pivotal role in the exercise and demonstrated the systems and processes are in place for CDNA to effectively respond during a pandemic.

Biosecurity Surveillance System

CDNA continues to provide policy and implementation advice to the Biosecurity Surveillance System project team and the Australian Government Department of Health and Ageing. Issues surrounding surveillance, privacy, outbreak case reporting and user testing are focus points for CDNA members, in particular the CDNA jurisdictional representatives.

2006

In 2006 CDNA will continue to meet via teleconference on a fortnightly basis, with face-to-face meetings to be conducted in May and in the latter half of 2006.

Erratum

The article Salmonella Typhimurium phage type 170 in a tertiary paediatric hospital with person-to-person transmission implicated published in the last issue of Communicable Diseases Intelligence (Commun Dis Intell 2005;29:374–378) contained an error.

In the first paragraph of the introduction the sentence ‘The most commonly reported phage type (PT) among Salmonella Typhimurium is PT170’ is incorrect. It was only 2004 that PT 170 was the major phage type replacing the most dominated PT135 for the first time since the National Enteric Pathogens Surveillance System records began (Dr. Diane Lightfoot, personal communication, 24 January 2006).

Therefore, the first introduction should read:

’Salmonella species are a common cause of gastrointestinal illness in humans. Salmonella enterica serotype Typhimurium (STm) is the most frequently notified serotype in Australia. One of the most commonly reported phage types (PT) among S. Typhimurium is PT170. Notifications of STm 170 have increased in eastern Australia since 2002 and comprised 16 per cent of all salmonellosis notifications in New South Wales in 2004.’"