

National Communicable Diseases Surveillance Report

Fortnight 22, 2022 Summary Notes for Selected Diseases

17 October 2022 to 30 October 2022

Infectious and congenital syphilis

Increases in infectious syphilis notifications are attributed to an on-going outbreak occurring in Aboriginal and Torres Strait Islander people residing in northern and central Australia, continued increases among men who have sex with men (MSM) in urban areas, and increases in women (Aboriginal and Torres Strait Islander and non-Indigenous) predominately residing in urban areas of Australia.

Syphilis response

On 23 March 2021, the Australian Health Protection Principal Committee (AHPPC) endorsed the [National strategic approach for responding to rising rates of syphilis in Australia 2021](#) (Strategic Approach) prepared through the Communicable Diseases Network Australia (CDNA) and BBV STI Standing Committee (BBVSS). The Strategic Approach builds on and intersects with existing national activities related to syphilis and provides specific focus for efforts towards rising rates of syphilis and adverse outcomes in Australia.

The CDNA and BBVSS are, in collaboration, developing priority public health actions, including those related to workforce and community engagement, to ensure progress is made towards reducing the incidence of syphilis and elimination of congenital syphilis in Australia.

For further information on national activities related to syphilis refer to the Department's website <https://www1.health.gov.au/internet/main/publishing.nsf/Content/ohp-syphilis.htm>

Legionellosis

In the past 12 months (31 October 2021 – 30 October 2022), there have been 652 cases of legionellosis reported to the National Notifiable Diseases Surveillance System (NNDSS), which is higher than the historical five-year mean (n=460.6). Of the 652 cases, 271 were *Legionella pneumophila* and 358 were *Legionella longbeachae*. In the historic five-year mean values, the comparable values are 246.6 *L. pneumophila* and 246.0 *L. longbeachae*.

In the past fortnight (17 October – 30 October) there have been 18 cases of legionellosis, when the 5-yearly average for this fortnight is 21.4 cases. Of the cases this notified in this fortnight, 6 (33%) were *Legionella pneumophila*, 11 (61%) were *Legionella longbeachae* and 1 (6%) was unknown. This fortnight had proportionally slightly more *Legionella longbeachae* cases than the average proportion of all cases in the last 5 years where *L. pneumophila* comprised 48.4% of all cases, *L. longbeachae* comprised 48.5% of all cases and other serotypes, including an unknowns, comprised 3.0% of all cases.

The largest proportional increase in cases has come from an increase in *L. longbeachae* in Queensland. Queensland has reported nearly three times as many *L. longbeachae* cases this year (90 cases), compared to a 5-year mean (32.0 cases). *L. pneumophila* cases in Queensland this year (25 cases) have decreased slightly from the 5-year mean (31.0 cases). New South Wales has also reported 21% more cases of legionellosis this year (205 cases) than the 5-year mean (168.6 cases), though the increase in cases in New South Wales is consistent across both *L. longbeachae* (24% increase from the 5-year mean) and *L. pneumophila* (19% increase from the 5-year mean). No outbreaks have been identified.

Interpretative Notes

Selected diseases are chosen each fortnight based on either exceeding two standard deviations from the 90 day and/or 365 day five year rolling mean or other disease issues of significance identified during the reporting period. All diseases reported are analysed by notification receive date. Data are extracted each Monday of a CDNA week.

Totals comprise data from all States and Territories. Cumulative figures are subject to retrospective revision so there may be discrepancies between the number of new notifications and the increment in the cumulative figure from the previous period.

¹*The past quarter (90 day) surveillance period includes the date range (23/07/2022 to 30/10/2022).*

²*The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 30/10/2022. The ratio is the notification activity in the past quarter (90 days) compared with the five year rolling mean for the same period.*

³*The past year (365 day) surveillance period includes the date range (31/10/2021 to 30/10/2022).*

⁴*The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 30/10/2022. The ratio is the notification activity in the past year (365 days) compared with the five year rolling mean for the same period.*

The five year rolling mean and the ratio of notifications compared with the five year rolling mean should be interpreted with caution. Changes in surveillance practice, diagnostic techniques and reporting may contribute to increases or decreases in the total notifications received over a five year period. Ratios are to be taken as a crude measure of current disease activity and may reflect changes in reporting rather than changes in disease activity.