## **National Communicable Diseases Surveillance Report**

# Fortnight 11, 2024 Summary Notes for Selected Diseases

### 13 May 2024 to 26 May 2024

### Infectious and congenital syphilis

Infectious syphilis notifications are continuing to increase across Australia. Detailed analysis of infectious and congenital syphilis trends in Australia are reported quarterly in the <u>National syphilis</u> <u>surveillance reports</u>.

# Syphilis response

The CDNA and BBV STI Standing Committee (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, including the <u>Don't</u> <u>fool around with syphilis</u> campaign, refer to the <u>National Response to Syphilis</u> webpage on the Department's website.

#### **Pertussis**

Between Monday 1 January 2024 and Monday 26 May 2024 there have been 7,031 cases of pertussis notified in Australia. There were 2,447 notifications of pertussis reported in 2023.

Notifications of pertussis began increasing from the second half of 2023 in Australia after a few years of limited circulation in Australia, particularly during the COVID-19 pandemic 2020 to 2022. High numbers of cases were last seen in Australia in 2015 (22,570) and 2016 (20,117).

Weekly notifications continue to increase in 2024. The increase is driven by Queensland and New South Wales, with notifications from Queensland making up 45% of notifications and New South Wales 40% of notifications. The highest proportion of notifications (47%) has been in school aged children and young adults (aged 10-19 years).

The current situation may be due to several factors including expected epidemic peaks, vaccination coverage, waning immunity and overall population having reduced exposure to pertussis during the COVID-19 pandemic.

## 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.

<sup>1</sup>The past quarter (90 day) surveillance period includes the date range (27/02/2024 to 26/05/2024).

<sup>2</sup>The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 26/05/2024. The ratio is the notification activity in the past quarter (90 days) compared with the five year rolling mean for the same period.

<sup>3</sup>The past year (365 day) surveillance period includes the date range (27/05/2023 to 26/05/2024).

<sup>4</sup>The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 26/05/2024. 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.