# National Communicable Diseases Surveillance Report

# Fortnight 16, 2024 Summary Notes for Selected Diseases

# 22 July 2024 to 04 August 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 [National syphilis surveillance reports](https://www.health.gov.au/resources/collections/national-syphilis-monitoring-reports).

## *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 [*Don’t fool around with syphilis*](https://www.health.gov.au/dont-fool-around-with-syphilis) campaign, refer to the [*National Response to Syphilis*](https://www.health.gov.au/our-work/national-response-to-syphilis) webpage on theDepartment’s website.

## Gonococcal infection

Gonorrhoea is highly infectious bacterial infection usually transmitted through unprotected sexual activity with an infected person. In the past 12 months (5 August 2023 – 4 August 2024), there have been 44,422 cases of gonorrhoea reported to the National Notifiable Diseases Surveillance System (NNDSS), which is higher than the historical five-year mean (n=32,255). In the past 3 months (7 May 2024 – 4 August 2024), there have been 11,018 cases of gonorrhoea reported to the NNDSS, which is 34% higher than the historical five-year mean for this period (n=8,196). Increases in antimicrobial resistance (AMR) in gonococcal isolates have also been reported. Further information on AMR surveillance for gonorrhoea is available in the Australian Gonococcal Surveillance Program quarterly and annual reports published in the [*Communicable Diseases Intelligence*](https://www1.health.gov.au/internet/main/publishing.nsf/Content/cda-pubs-cdi-cdicur.htm)*.*

## Legionellosis

Legionellosis (Legionnaire’s disease) is an environmentally-acquired pneumonia caused by the bacteria *Legionella*. In the past 12 months (8 August 2023 – 4 August 2024), there have been 838 cases of legionellosis reported to the National Notifiable Diseases Surveillance System (NNDSS). In this reporting period (22 July 2024 – 4 August 2024), 120 cases of legionellosis were notified—this is higher compared to the 31 cases reported in the previous reporting period (8 July 2024 – 21 July 2024). This increase is largely driven by an increase in in *Legionella pneumophila* notifications in Victoria associated with a recent outbreak. For further updates please refer to jurisdictional health department websites.

## Pertussis

Between 1 January 2024 and 4 August 2024 there have been 18,016 cases of pertussis notified in Australia, compared to 2,451 cases for all of 2023. In 2024, notification rates have been highest in New South Wales, followed by Queensland. Increases have been observed in other jurisdictions, although substantially lower numbers and notification rates. In the year to date, notification rates have been highest in children aged 10–14 years, followed by children aged 5–9 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.*

*1The past quarter (90 day) surveillance period includes the date range (07/05/2024 to 04/08/2024).*

*2The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 04/08/2024. The ratio is the notification activity in the past quarter (90 days) compared with the five year rolling mean for the same period.*

*3The past year (365 day) surveillance period includes the date range (05/08/2023 to 04/08/2024).*

*4The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 04/08/2024. 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.*