# National Communicable Diseases Surveillance Report

# Fortnight 19, 2024 Summary Notes for Selected Diseases

# 02 September 2024 to 15 September 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.

### Mpox

Mpox, or monkeypox virus infection (MPXV), is a viral infection that can be transmitted from person-to-person through prolonged physical contact and commonly presents as a mild illness with a rash. In the past 12 months (16 September 2023 – 15 September 2024), there have been 593 cases of mpox reported to the National Notifiable Diseases Surveillance System (NNDSS). In the past 3 months (18 June 2024 – 15 September 2024), there have been 523 cases of mpox notified compared to 12 cases in the same time period in 2023. In this reporting period (2 September 2024 – 15 September 2024), 194 cases of mpox have been notified (114 in New South Wales, 65 in Victoria, 13 in Queensland and 2 in South Australia). The increase in notifications in the past three months has been driven by an increase in locally acquired cases (cases that were acquired in Australia), predominately reported in New South Wales and Victoria.

### Dengue virus infection

In the past 12 months (16 September 2023 – 15 September 2024) there have been 2,133 notifications of dengue virus infection reported to the National Notifiable Diseases Surveillance System (NNDSS). This is 3.2 times the 5 year historical mean of 673.2 notifications. Dengue virus is not endemic in Australia, but Australia’s staged international border reopening from 1 November 2021, and relaxing of COVID-19 restrictions has led to the return of several internationally acquired notifiable diseases including dengue virus infection. However, there was a locally acquired outbreak in the Torres Strait of 47 confirmed and probable cases between May and July 2024.

***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 (18/06/2024 to 15/09/2024).*

*2The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 15/09/2024. 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 (16/09/2023 to 15/09/2024).*

*4The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 15/09/2024. 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.*