

National Communicable Diseases Surveillance Report

Fortnight 22, 2025 Summary Notes for Selected Diseases 13 October 2025 to 26 October 2025

Infectious and congenital syphilis

On 7 August 2025, the Chief Medical Officer declared syphilis a [Communicable Disease Incident of National Significance \(CDINS\)](#). The CDINS will bring together national efforts to coordinate an enhanced national response to syphilis, working closely with the states and territories and other key stakeholders, to work on key actions in the [National Syphilis Response Plan](#).

Declaration of a syphilis CDINS follows continued reporting of infectious syphilis notifications at high levels across Australia, including among women* of reproductive age (15-44 years). Increases among women have coincided with continued reporting of congenital syphilis cases and in some instances infant death resulting from infection. Detailed analysis of infectious and congenital syphilis trends in Australia are reported quarterly in the [National syphilis surveillance reports](#).

Influenza summary

Influenza is a common and highly contagious respiratory infection that can cause mild to severe illness. Person-to-person transmission most commonly occurs by breathing in respiratory droplets containing the influenza virus. In the past 12 months (10 November 2024 – 9 November 2025), there have been 446,018 cases of influenza notified to the National Notifiable Diseases Surveillance System (NNDSS). This is higher than the mean of 181,411 for the rolling 5-year period (10 November 2019 – 9 November 2024). In 2025, there has been elevated interseasonal activity from January–April, a prolonged June–August peak and slower decline in notifications than prior seasons. In line with historical trends, influenza cases should have decreased from early October; however, the number of influenza cases notified each week remains at least three times higher than the expected number of cases per week. The reason for the increase in notifications across 2025 is not clear but is likely a result of several factors including improved diagnostic capacity, increased testing, increased vaccine hesitancy or lower vaccine coverage, and lower social compliance with non-mandated public health and social measures since the COVID-19 health emergency response ended. Trends in influenza notifications continue to be monitored and reported in the Australian Respiratory Surveillance Report series.

Q Fever summary

Q fever is a bacterial infection that can cause a severe flu-like illness. The bacteria are spread from animals, mainly cattle, sheep and goats. In the past 12 months (10 November 2024 – 9 November 2025), there have been 949 cases of Q fever notified to the National Notifiable Diseases Surveillance System (NNDSS). This is higher than the mean of 572 for the rolling 5-year period (10 November 2019 – 9 November 2024). In the past 3 months (12 August 2025 – 9 November 2025), there have been 209 cases of Q fever notified. In this reporting period (27 October 2025 – 9 November 2025), 40 cases of Q fever have been notified (19 in Queensland, 16 in New South Wales, 3 in Vic and 2 in South Australia). The increase in notifications has largely been driven by increases in Queensland and New South Wales, although other states have also seen increases. The reason for the increase in notifications is not clear but includes changes in testing in Queensland.

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 (12/08/2025 to 09/11/2025).

²The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up 09/11/2025. 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 (10/11/2024 to 09/11/2025).

⁴The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 09/11/2025. 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.

*The term 'women' is used, but it is acknowledged that this may also include people with a uterus who are non-female identifying.