National Communicable Diseases Surveillance Report

Fortnight 05, 2022 Summary Notes for Selected Diseases

28 February 2022 to 13 March 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.

Outbreak in northern and central Australia

In January 2011, an increase of infectious syphilis notifications among Aboriginal and Torres Strait Islander people was identified in the North West region of Queensland, following a steady decline at a national level in remote communities. Subsequent increases in infectious syphilis notifications were reported in the Northern Territory in 2013, Western Australia in 2014 and South Australia in 2016, following sustained periods of low notification rates. The outbreak is of significant public health concern given the: elevated rates of infectious syphilis among women of child-bearing age, increasing the risk of congenital syphilis; and the concomitant risk of HIV transmission. For the latest information on the infectious syphilis outbreak and related national activities, refer to the Department's website.

Increases among MSM

Since 2010 increases in notifications of infectious syphilis have been reported in MSM, predominately 20-39 years of age, residing in urban areas of Australia.

Increases among women (Aboriginal and Torres Strait Islander and non-Indigenous)

Since 2016, increases in notifications of infectious syphilis have been reported in women (Aboriginal and Torres Strait Islander and non-Indigenous) aged predominately 20-39 years of age residing largely in urban areas in Australia. As noted in the outbreak in northern and central Australia, increases in women of childbearing age is of significant public health concern given the increased risk of congenital syphilis.

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.

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 (14/12/2021 to 13/03/2022).

[2]The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 13/03/2022. 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 (14/03/2021 to 13/03/2022).

[4]The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 13/03/2022. 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.

ADT FN05/2022

Notification received date

Disease group	Disease name	Disease code	State or Territory								Totals for Australia				Historical 90 Day Period				Historical Yearly Period			
			ACT	NSW	NT	Qld	SA	Tas	Vic	WA	This reporting period 28/02/2022 13/03/2022	Previous reporting Period 14/02/2022 27/02/2022	Same reporting period last year 28/02/2021 13/03/2021	Current year YTD 01/01/2022 13/03/2022	Past Quarter 14/12/2021 13/03/2022	Quarterly rolling 5 year mean	Ratio past quarter/5 year mean*	Exceeds quarterly rolling mean +2 SD by	Past Year 14/03/2021 13/03/2022	Yearly rolling 5 year mean 14/03/2016 13/03/2021	Ratio past year/5 year mean*	Exceeds yearly rolling mean +2 SD by
Bloodborne diseases	Hepatitis B (newly acquired)	039	1	-	-	-	-	-	-	-	1	1	5	6	7	34.2	0.2	-	71	146.2	0.5	-
	Hepatitis B (unspecified)	052	6	88	-	43	1	-	49	9	196	201	304	910	1,141	1,294.8	0.9	-	4,843	5,663.0	0.9	-
	Hepatitis C (newly acquired)	040	-	-	-	7	1	-	-	3	11	14	36	80	96	166.6	0.6	-	673	691.4	1.0	-
	Hepatitis C (unspecified)	053	5	87	2	64	1	3	57	37	256	267	366	1,071	1,312	2,111.6	0.6	-	6,494	9,233.2	0.7	-
	Hepatitis D	050	-	-	-	-	-	-	1	-	1	2	4	12	15	16.4	0.9	-	80	71.8	1.1	-
Gastrointestinal diseases	Botulism	045	-	-	-	-	1	-	-	-	1	-	-	2	3	1.0	3.0	-	5	1.2	4.2	2.1
	Campylobacteriosis	005	27	402	18	385	102	26	225	76	1,261	1,541	1,517	7,039	8,929	9,198.2	1.0	-	36,564	31,549.6	1.2	-
	Cryptosporidiosis	061	-	10	1	17	2	-	10	18	58	65	68	346	442	1,122.8	0.4	-	1,751	3,431.0	0.5	-
	Haemolytic uraemic syndrome (HUS)	055	-	-	-	-	-	-	-	-	-	-	1	-	-	3.8	-	-	5	15.0	0.3	-
	Hepatitis A	038	-	1	-	-	-	-	1	-	2	2	1	9	10	65.6	0.2	-	29	219.0	0.1	-
	Hepatitis E	051	-	1	-	-	-	-	-	-	1	1	-	5	5	11.4	0.4	-	14	41.2	0.3	-
	Listeriosis	018	-	-	-	1	-	-	1	1	3	3	2	16	17	21.2	0.8	-	51	63.6	0.8	-
	Paratyphoid	080	-	1	-	-	-	-	1	-	2	2	-	5	5	28.6	0.2	-	9	72.0	0.1	-
	Salmonellosis	030	7	187	7	275	36	10	59	32	613	550	622	2,558	3,077	4,924.6	0.6	-	10,118	14,741.8	0.7	-
	Shigellosis	031	1	15	3	8	-	-	-	2	29	27	19	134	161	607.6	0.3	-	494	2,054.8	0.2	-
	STEC	054	-	5	-	-	12	-	7	8	32	23	41	142	192	182.2	1.1	-	620	547.4	1.1	-
	Typhoid Fever	035	-	1	-	-	-	-	2	1	4	7	-	21	22	54.2	0.4	-	32	137.6	0.2	-
Quarantinable diseases	Avian influenza in humans (AIH)	076	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Cholera	008	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	1	1.0	1.0	-
	COVID-19	081	5,653	160,263	4,976	20,928	22,742	2,331	30,539	6,024	253,471	196,747	153	2,075,563	2,238,675	280.8	7,972.5	##########	2,442,273	5,870.6	416.0	##########
	Middle East respiratory syndrome coronavirus (N	079	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Plague	025	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Rabies	028	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Severe acute respiratory syndrome (SARS)	071	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Smallpox	069	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Viral haemorrhagic fever (NEC)	036	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Yellow fever	041	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
Sexually transmissible infections	Chlamydial infection	007	32	975	35	922	204	61	684	469	3,382	3,675	3,747	15,406	18,577	25,237.4	0.7	-	83,189	100,337.8	0.8	-
	Donovanosis	010	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Gonococcal infection	011	13	358	29	232	48	14	264	106	1,064	1,291	1,121	5,587	6,717	7,827.2	0.9	-	26,723	29,918.4	0.9	-
	Syphilis < 2 years	066	-	38	7	26	5	-	59	29	164	188	204	883	1,089	1,240.0	0.9	-	5,434	4,949.0	1.1	-
	Syphilis > 2 years or unspecified duration	067	-	1	1	-	1	1	35	5	44	56	85	269	324	518.8	0.6	-	1,782	2,158.4	0.8	-
	Syphilis congenital	047	-	-	-	-	-	-	-	-	-	-	-	4	5	1.8	2.8	-	17	8.4	2.0	-
Vaccine preventable diseases	Diphtheria	009	-	-	-	2	-	-	-	-	2	-	-	3	3	3.0	1.0	-	8	8.6	0.9	-
	Haemophilus influenzae type b	012	-	-	-	-	-	-	-	-	-	-	1	-	1	5.0	0.2	-	15	19.4	0.8	-
	Influenza (laboratory confirmed)	062	-	39	-	5	1	-	1	3	49	20	34	114	173	11,719.4	0.0	-	714	146,604.6	0.0	-
	Measles	021	-	-	-	-	-	-	-	-	-	-	-	-	-	27.6	-	-	-	114.0	-	-
	Mumps	043	-	-	-	1	-	-	-	-	1	1	1	3	3	101.6	0.0	-	16	468.8	0.0	-
	Pertussis	024	1	4	-	2	1	-	15	-	23	18	31	96	111	2,483.6	0.0	-	535	11,211.0	0.0	-
	Pneumococcal disease (invasive)	065	-	7	2	7	4	1	4	5	30	26	47	157	210	286.4	0.7	-	1,318	1,809.2	0.7	-
	Poliovirus infection	026	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Rotavirus	077	-	22	1	28	11	-	4	10	76	70	48	482	773	740.2	1.0	-	2,818	4,128.0	0.7	-
	Rubella	029	-	-	-	-	-	-	-	-	-	-	1	-	-	3.2	-	-	2	11.0	0.2	-
	Rubella congenital	046	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Tetanus	033	-	-	-	-	-	-	-	-	-	-	-	-	-	1.2	-	-	3	4.6	0.7	-
	Varicella zoster (chickenpox)	073	5	NN	2	-	3	1	15	26	52	40	71	216	297	803.6	0.4	-	1,773	3,632.6	0.5	-
	Varicella zoster (shingles)	074	18	NN	3	13	66	5	51	80	236	317	449	1,534	1,916	3,350.2	0.6	-	9,369	12,754.6	0.7	-
	Varicella zoster (unspecified)	075	1	NN	3	378	56	16	291	114	859	894	679	3,951	5,010	3,409.6	1.5	514.3	21,277	14,149.6	1.5	3,971.6
Vectorborne diseases	Barmah Forest virus infection	048	-	3	-	13	-	-	-	-	16	9	19	61	77	91.0	0.8	-	357	415.0	0.9	-
	Chikungunya virus infection	078	-	-	-	1	-	-	-	-	1	-	-	3	4	18.8	0.2	-	4	72.8	0.1	-
	Dengue virus infection	003	-	2	-	-	-	-	1	-	3	1	-	7	8	260.4	0.0	-	16	1,113.2	0.0	-
	Flavivirus infection (unspecified)	001	-	-	-	-	-	-	-	-	-	-	-	-	-	3.6	-	-	1	27.0	0.0	-
	Japanese encephalitis virus infection**	059	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Malaria	020	1	2	-	1	-	-	-	-	4	6	2	15	21	81.6	0.3	-	64	314.4	0.2	-
	Murray Valley encephalitis virus infection	049	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	1	0.2	5.0	-
	Ross River virus infection	002	1	55	6	80	29	-	79	60	310	337	227	1,367	1,449	1,383.8	1.0	-	3,264	4,706.2	0.7	-
	West Nile/Kunjin virus infection	060	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	1.2	-	-
Zoonoses	Anthrax	058	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Australian bat lyssavirus infection	063	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Brucellosis	004	-	1	-	-	-	-	-	-	1	-	-	3	4	6.0	0.7	-	19	18.6	1.0	-
	Leptospirosis	017	-	1	1	3	-	-	-	-	5	8	12	25	27	37.4	0.7	-	221	125.2	1.8	50.0
	Lyssavirus infection (NEC)	064	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Ornithosis	023	-	-	-	-	-	-	-	-	-	-	-	1	4	5.0	0.8	-	35	28.4	1.2	-
	Q fever	027	-	3	-	4	-	-	-	1	8	21	33	64	82	136.0	0.6	-	451	522.8	0.9	-
	Tularaemia	070	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	0.4	-	-
Other notifiable diseases	iGAS^	082	-	NN	1	9	4	NN	NN	7	21	20	-	103	132	0.4	330.0	130.5	324	0.6	540.0	322.3
	Legionellosis	015	-	5	-	2	2	1	2	1	13	25	34	109	135	125.6	1.1	-	540	449.4	1.2	-
	Leprosy	016	-	-	-	-	-	-	-	-	-	-	-	1	1	1.0	1.0	-	14	10.0	1.4	-
	Meningococcal disease (invasive)	022	-	-	-	-	-	-	1	1	2	2	3	14	18	44.8	0.4	-	75	238.0	0.3	-
	RSV^	083	-	NN	-	112	-	NN	NN	97	209	198	-	1,107	1,542	-		1,542.0	2,574	-		2,574.0
	Tuberculosis	034	1	15	-	3	-	-	8	1	28	47	47	167	231	352.2	0.7	-	1,342	1,482.0	0.9	-
			5,773	162,592	5,098	23,572	23,333	2,470	32,466	7,226	262,545	206,723	10,035	2,119,671	2,293,053				2,668,422			

Footnotes:

* Ratio of the 90 day prior surveillance period to the past 90 day 5 year rolling mean, or ratio of the year period prior surveillance period to the year period 5 year rolling mean.

NN = Not Notifiable, NEC = Not Elsewhere Classified

** Japanese encephalitis virus (JEV) cases are reported separately on the JEV outbreak webpage, accessible at: https://www.health.gov.au/health-alerts/japanese-encephalitis-virus-jev/about

^ RSV and iGAS were listed as nationally notifiable diseases as of 1 July 2021. However, notification numbers presented here do not represent a national picture, as these conditions are not yet notifiable in all states and territories.

The data in this report are reliant on the provision of data from states and territories to the Australian Government Department of Health. Backlogs in notifications at the state or territory level may contribute to delays in reporting to the NNDSS. Notifications for some high volume conditions are only uploaded quarterly by some jurisdictions, which can result in apparent large variability over time. The NNDSS is a dynamic dataset, with data in this report representing data available on (15/03/2022). Data in this report are subject to retrospective revision and may vary from data reported in published NNDSS reports and reports of notification data by states and territories.