National Communicable Diseases Surveillance Report

Fortnight 07, 2022 Summary Notes for Selected Diseases

28 March 2022 to 10 April 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 <u>Department's website</u>.

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.

Diphtheria

During the reporting period six (6) cases of toxigenic diphtheria were reported to the NNDSS, all notified by Queensland. These cases ranged in age from 18 to 50 years and 67% (4 cases) were male. In the current year to date, all cases (n=10) were notified by Queensland. Queensland Health is continuing to investigate these cases. For further information, refer to the <u>Queensland</u> Health Surveillance Reports.

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 (11/01/2022 to 10/04/2022).

²The quarterly (90 day) five year rolling mean is the average of 5 intervals of 90 days up to 10/04/2022. 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 (11/04/2021 to 10/04/2022).

⁴The yearly (365 day) five year rolling mean is the average of 5 intervals of 365 days up to 10/04/2022. 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.

AD	OT FN07/2022		State or Territory								Notification received dat Totals for Australia				Historical 90 Day Period				Historical Yearly Period			
Disease group	Disease name	Jisease code	ACT	NSW	TN	QId	SA	Tas	Vic	WA	This reporting period 28/03/2022	Previous reporting Period 14/03/2022	Same reporting period last year 28/03/2021	Current year YTD 01/01/2022	Past Quarter 11/01/2022	Quarterly rolling 5 year mean	Ratio past quarter/5 year mean*	Exceeds quarterly rolling mean +2 SD	Past Year 11/04/2021	Yearly rolling 5 year mean 11/04/2016	Ratio past year/5 year mean*	Exceeds yearly rolling mean +2 S
											10/04/2022	27/03/2022	10/04/2021	10/04/2022	10/04/2022			by	10/04/2022	10/04/2016		by
Bloodborne diseases	Hepatitis B (newly acquired) Hepatitis B (unspecified)	039	- 2	- 57	-	2 54	-	- 1	- 70	- 20	2 204	4	- 144	12 1,320	11 1,243	31.8 1,424.4	0.3	-	77 4,939	143.6 5,629.2	0.5	-
	Hepatitis C (newly acquired)	040	-	-	-	28	-	-	-	-	28	17	23	130	120	170.8	0.7	-	673	688.6	1.0	-
	Hepatitis C (unspecified) Hepatitis D	053	-	93	-	- 63	-	2	- 38	37	234	250 2	232	1,559 18	1,487 18	2,245.2 14.6	0.7	-	6,486 82	9,138.4 72.6	0.7	-
Gastrointestinal diseases	Botulism	045	-	-	-	-	-	-	-	-	-	-	-	2	1	0.8	1.3	-	5	1.2	4.2	2.
	Campylobacteriosis Cryptosporidiosis	005	22		13	282 29	110	- 34	295 37	104 16	1,210 108	1,323 74	1,323 42	9,689 529	8,839 482	8,501.8 1,290.4	1.0 0.4	-	36,573 1,834	31,758.2 3,284.4	1.2 0.6	-
	Haemolytic uraemic syndrome (HUS)	055	-	1	-	-	-	-	-	-	1	-	-	1	1	4.2	0.2	-	6	15.0	0.4	-
	Hepatitis A Hepatitis E	038 051	-	-	-	2	-	-	- 4	-	6 1	-	-	24	24 6	73.2 14.0	0.3	-	44 15	216.0 41.2	0.2	-
	Listeriosis	018	-	2	-	-	-	-	1	-	3	4	1	23	21	19.4	1.1	-	54	62.0	0.9	-
	Paratyphoid Salmonellosis	080 030	- 17	140	- 21	- 176	1 24	- 13	- 75	- 56	522	2 579	- 507	10 3,686	9 3,442	30.8 5,047.6	0.3	-	14 10,134	69.8 14,590.0	0.2	-
	Shigellosis STEC	031 054	3	10	- 3	5	4	-	4	4	33 28	45 45	20 20	215 215	198 204	593.0 175.8	0.3	-	531 645	2,046.4 553.8	0.3	-
	Typhoid Fever	035	- 2		-	1	-	-	4	11	7	45	- 20	40	39	59.0	0.7	-	50	136.8	0.4	-
Quarantinable diseases	Avian influenza in humans (AIH) Cholera	076 008	-	· ·	-	-	-	-	-	-	-	- 1	-	- 1	- 1	- 0.2	5.0	-	- 2	- 1.0	2.0	-
	COVID-19	081	7,313	278,841	6,199	43,423	83,932	5,430	50,525	40,318	515,981	466,166	149	3,082,555	2,544,451	1,432.4	1,776.4	#######################################	3,449,149	5,938.8	580.8	#######
	Middle East respiratory syndrome coronavirus (N Plague	079	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Rabies	028	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Severe acute respiratory syndrome (SARS) Smallpox	071 069	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Viral haemorrhagic fever (NEC)	036	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
Sexually transmissible infections	Yellow fever Chlamydial infection	041	- 53	- 1,013	- 67	- 978	- 232	- 51	- 924	- 311	- 3,629	- 3,729	- 2,919	- 23,646	- 22,593	- 26,824.8	0.8	-	- 85,911	- 99,747.0	0.9	-
	Donovanosis	010	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Gonococcal infection Syphilis < 2 years	011	7		56	255 33	69 6	- 11	290 58	90 13	1,178 177	1,283 161	1,044 194	8,242 1,301	7,799	8,365.2 1,321.6	0.9	-	27,120 5,456	29,997.8 4,981.8	0.9	-
	Syphilis > 2 years or unspecified duration	067	-	4	-	13	-	-	41	5	63	72	78	457	426	569.2	0.7	-	1,820	2,166.4	0.8	-
Vaccine preventable diseases	Syphilis congenital Diphtheria	047	-	-	- 1	- 6	-	-	-	-	1	-	1	5	5 10	2.2	2.3 4.5	- 4.0	16 15	8.8 8.4	1.8 1.8	- 2.
	Haemophilus influenzae type b	012	-	-	-	-	-	-	-	-	-	1		1	1	4.2	0.2	-	13	19.8	0.7	-
	Influenza (laboratory confirmed) Measles	062	- 4	412	- 9	- 43	- 19	2	- 163	- 3	- 655	- 201	- 21	982	965	13,309.6 39.2	- 0.1	-	1,525	146,195.8 111.2	0.0	-
	Mumps	043	-	· ·	-	-	-	-		1	1	1	1	5	4	109.6	0.0	-	15	450.2	0.0	-
	Pertussis Pneumococcal disease (invasive)	024	-	3	-	- 10	3	-	10 11	3	19 40	19 32	12 47	140 232	130 200	2,266.4 268.2	0.1	-	547 1,301	10,934.8 1,811.0	0.1	-
	Poliovirus infection	026	-	· ·	-	-	-	-	•	-	-	-	-	-	-	-		-	-	-		-
	Rotavirus Rubella	077 029	-	9	-	- 23	- 21	-	-	-	65 1	- 77	- 56	629 1	547 1	589.2 4.6	0.9	-	2,857	4,108.8	0.7	-
	Rubella congenital	046	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Tetanus Varicella zoster (chickenpox)	033	- 6	- NN	-	- 1	- 12	-	- 14	- 6	- 39	- 52	1	- 314	- 284	1.6 758.0	- 0.4	-	2 1,764	4.4 3,639.2	0.5	-
	Varicella zoster (shingles)	074	29		9	11	74	12	57	58	250	327	418	2,221	2,053	3,414.4	0.6	-	9,432	12,913.6	0.7	-
	Varicella zoster (unspecified) Barmah Forest virus infection	075 048	-	NN 3	- 7	374 10	- 44	- 13	329	- 103	875 13	842 19	634 17	5,637 96	5,232 92	3,526.8 114.0	1.5 0.8	583.6	21,324 349	14,089.6 415.8	1.5 0.8	4,245.
Vectorborne diseases	Chikungunya virus infection	078	-	-	-	-	-	-	-	-	-	1	-	5	5	16.6	0.3	-	6	72.0	0.1	-
	Dengue virus infection Flavivirus infection (unspecified)	003	-	- 2	-	- 1	-	-	- 2	-	5	3	-	15	15 2	260.8 2.8	0.1	-	24	1,049.2 25.0	0.0	-
	Japanese encephalitis virus infection**	059	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Malaria Murray Valley encephalitis virus infection	020	-	- 3	-	-	-	-	-	-	- 5	- 7	- 3	- 28	- 28	85.6	0.3	-	73	312.0 0.2	0.2	-
	Ross River virus infection	002	-	29	8	48	17	-	47	26	175	232	124	1,845	1,792	1,670.8	1.1	-	3,452	4,652.8	0.7	-
Zoonoses	West Nile/Kunjin virus infection Anthrax	060 058	-		-	-	-	-	-	-	-	-	-	-	-	-		-	-	- 1.2	-	-
	Australian bat lyssavirus infection	063	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Brucellosis Leptospirosis	004	-	- 1	-	- 8	-	-	-	-	- 9	- 11	1	3 45	3 44	5.4 46.0	0.6	-	17 213	18.6 127.4	0.9 1.7	- 33.
	Lyssavirus infection (NEC)	064	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	-		-
	Ornithosis Q fever	023	-	- 9	-	- 7	-	-	-	- 1	- 17	- 24	- 17	1 113	1 106	4.4 143.2	0.2	-	34 464	28.6 520.8	1.2 0.9	-
	Tularaemia	070	-	-	-	-	-	-	-	-	-	-	-	-	-	-		-	-	0.4	-	-
Other notifiable diseases	iGAS^ Legionellosis	082 015	-	NN 5	- 3	- 11	7	NN -	NN 3	5	26 10	27 30	1 24	157 152	144 134	0.6 126.0	240.0 1.1	- 141.6	377 532	0.8 452.2	471.3 1.2	374.0
	Leprosy	016	-	-	-	-	-	-	-	-	-	-	-	1	-	1.0	-	-	13	10.0	1.3	-
	Meningococcal disease (invasive) RSV [^]	022 083	-	- NN	-	1 358	1	- NN	- NN	- 58	2 417	2 283	-	18 1,808	15 1,585	39.8	0.4	- 1,585.0	73 3,275	236.8	0.3	- 3,275.0
	Tuberculosis	083	- 1		-	358	-	-	NN 14	3	417	283 36	- 58	250	232	349.0	0.7	- 1,585.0	3,275	1,486.6	0.9	3,275.0
			7,467	281,512	6,404	46,261	84,592	5,570	53,023	41,265	526,094	476,184	8,225	3,148,397	2,606,266				3,680,644			

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

Apprinted enceptionities virus (EV) (asks are reported septined septined septined wetpage, accessione at: ntps://www.neatth.gov.au/neatth.aierts/japanese-encephalitis-virus-jev/about A 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 (12/04/2022). 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.