

COMMUNICABLE DISEASES, NSW: MARCH 2002

TRENDS

Through to January 2002 relatively few cases of **Ross River virus** infections were reported across the state for the time of year. **Barmah Forest virus** infections were predominantly notified from the north coast of NSW (Tables 1 and 2, Figure 1).

We are happy to report that there were no cases of **measles** reported in the previous three months (Figure 1).

We are also happy to report that, after a prolonged epidemic, notifications of **pertussis** seem to be declining. Nonetheless, there are still many cases about, with 391 notifications being received in January. To protect vulnerable members of the community, vigilance is important in terms of ensuring complete immunisation of children, case finding, treatment, and prophylaxis of household contacts with erythromycin.

MENINGOCOCCAL DISEASE AMONG CRUISE SHIP PASSENGERS

On Friday 25 January 2002, the South Western Sydney Public Health Unit (SWSPHU) notified the NSW Department of Health's Communicable Diseases Unit (CDU) of the death of a 21-year-old South Western Sydney man from suspected invasive meningococcal disease. The man was taken by ambulance to hospital on 24 January after collapsing at his home. He had a three-day history of sore throat but had otherwise been well. A rash was noted and a diagnosis of meningococcal disease was made. Despite aggressive intervention, the man died.

In the seven days prior to the onset of his illness, the man had been on a cruise to the South Pacific. The cruise ship carried over a thousand passengers from all over Australia.

SWSPHU identified over 50 close contacts of the man who may have been at increased risk of disease, and provided them with information about the disease and with antibiotics to help prevent its further spread. The CDU informed local public health units and other states and territories about the case. Shortly after, the South Australian Department of Health reported that a South Australian man on the same cruise had been diagnosed with meningococcal disease on 22 January 2002. The man's close contacts had been contacted and given antibiotics.

No direct personal link between the cases was established. The cruise operator agreed to contact all passengers and crew from the ship to tell them about these events and about meningococcal disease. The NSW Department of Health set up a hotline providing general information to the public, issued media releases, and conducted regular media interviews to update the public on events. Passengers were alerted to seek medical attention if they develop symptoms of the disease. As a result of the public

warnings, several other passengers were investigated for possible meningococcal infection, but in none of these was the diagnosis confirmed.

HEPATITIS A INCREASING

Notifications of hepatitis A reached a nadir of seven in April 2001, but have since increased. Thirty cases had onset in December 2001. Of these 30 cases, the biggest reported exposure was male-to-male sex (nine cases or 30 per cent), followed by overseas travel and eating at restaurants (five cases each or 17 per cent each). By area of residence, male-to-male sex is the most prominently reported exposure in South Eastern Sydney and Central Sydney. Men who have sex with men are at increased risk of hepatitis A, which is acquired through faecal-oral contact, including during sexual activity. Outbreaks of hepatitis A have been recorded among men who have sex with men in South Eastern Sydney every few years, most recently in 1998.¹

Hepatitis A can be prevented through:

- careful hand-washing with soap and running water after using the toilet, before handling food, and before and after sex;
- avoidance of exposure to faecal material;
- administration of immunoglobulin, which is recommended for household and other close contacts of cases;
- immunisation, which is recommended for some people at increased risk of the disease, including men who have sex with men.

Clinicians should be alert to the possible diagnosis of hepatitis A, especially among men who have sex with men living in or visiting Sydney, and notify the local public health unit (listed under 'Health' in the White Pages) of cases. PHU staff will help investigate the likely source and to help prevent disease in contacts.

CRYPTOSPORIDIOSIS

Notifications of cryptosporidiosis increased in December (21 cases) and January (30 cases). Most cases were individuals who resided in rural areas. About half the cases were children under five years of age. No common source has been identified among cases.

Cryptosporidiosis is a diarrhoeal illness caused by a water-borne parasite. Infections have been linked to drinking water, recreational water, childcare settings, person-to-person and animal-to-person contact. Large outbreaks of cryptosporidiosis have been recorded every three or four years in NSW, the last in 1997-8, associated with swimming in contaminated swimming pools.^{2,3}

To avoid catching cryptosporidiosis:

- always wash hands thoroughly with soap and running water after using the toilet, handling, animals, changing nappies, or working in the garden;
- always wash hands thoroughly before preparing food and drinks;
- do not drink untreated water (for example, from rivers, streams, lakes and dams). Boiling water from these sources for one minute will kill germs, including cryptosporidiosis.

To avoid spreading cryptosporidiosis:

- keep small children who have diarrhoea home from school, preschool, childcare or playgroups until the diarrhoea has completely stopped;
- food handlers, childcare workers, and health care workers with cryptosporidiosis should not work until diarrhoea has stopped;
- do not use swimming pools or other water recreational areas, or share linen and towels with others, for at least one week after the diarrhoea has stopped.

Swimming pool operators should follow the NSW Department of Health's *Protocol for Minimising the Risk of Cryptosporidium in Public Swimming Pools and Spa Pools*. This is available from the Department's web site at www.hprb.health.nsw.gov.au/public-health/ehb/general/pools/publicpools.html.

Clinicians should consider the diagnosis among people presenting with diarrhoea lasting more than a few days. If suspected, the diagnosis should be confirmed with a stool sample specifically requesting a test for *Cryptosporidium*.

REFERENCES

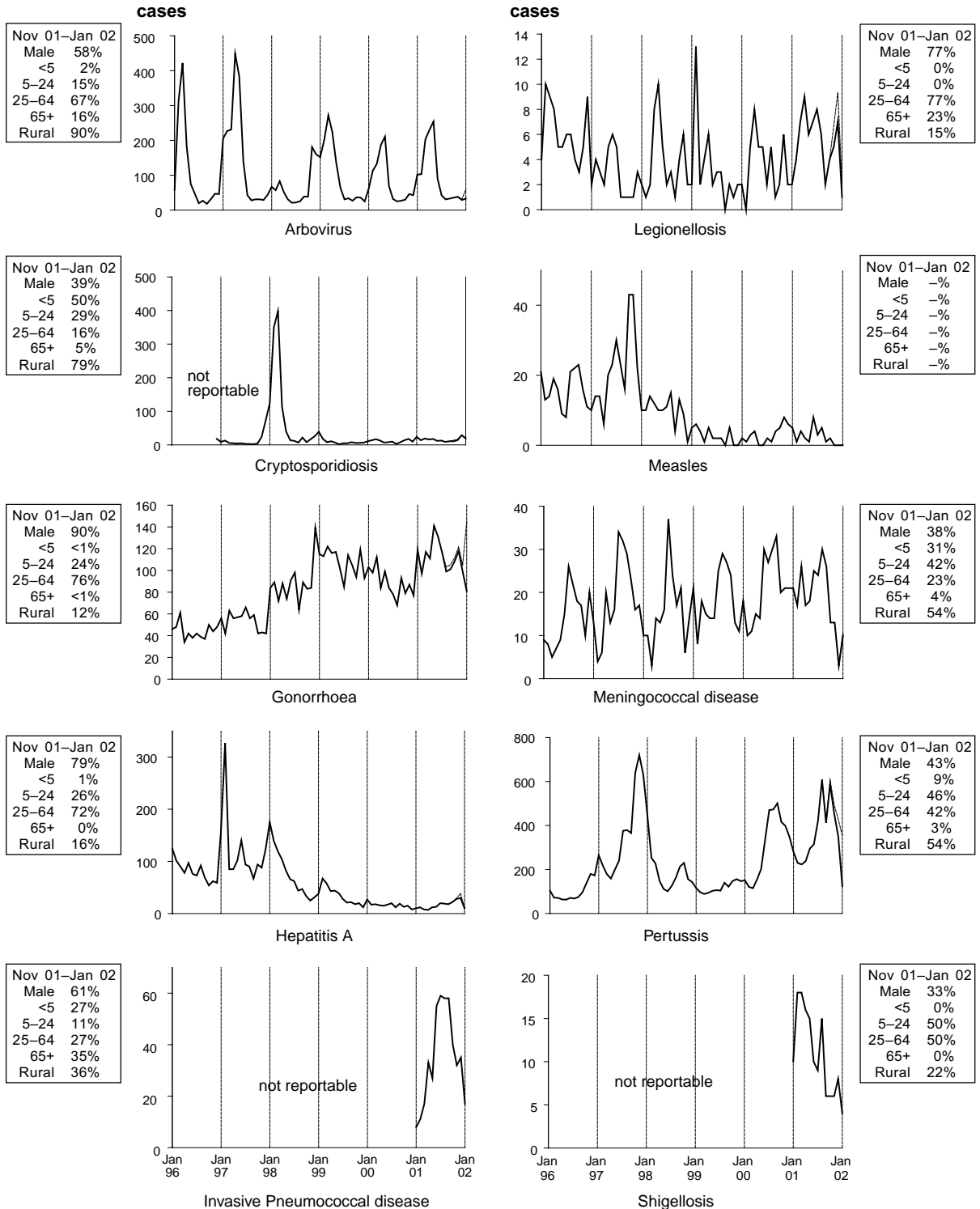
1. Delpech V, Habib M, Lin M, et al. Hepatitis A in New South Wales, 1991–2000. *NSW Public Health Bulletin* 2002. In press.
2. Puech MC, McAnulty JM, Lesjak M, et al. A statewide outbreak of cryptosporidiosis in NSW associated with swimming at public pools. *Epidemiol Infect* 2001; 126: 389–396.
3. Lemmon JM, McAnulty JM, Bawden Smith J. Outbreak of cryptosporidiosis linked to an indoor swimming pool. *Med J Aust* 1996; 165(2): 613–616. ☒

FIGURE 1

REPORTS OF SELECTED COMMUNICABLE DISEASES, NSW, JANUARY 1996 TO MAY 2001, BY MONTH OF ONSET

These are preliminary data: case counts for recent months may increase because of reporting delays. Laboratory-confirmed cases, except for measles, meningococcal disease and pertussis. _____ actual - - - predicted after adjusting for likely reporting delays.

NSW population	
Male	50%
<5	7%
5-24	28%
25-64	52%
65+	13%
Rural*	42%



* For definition, see *NSW Public Health Bulletin*, April 2000

TABLE 1 REPORTS OF NOTIFIABLE CONDITIONS RECEIVED IN DECEMBER 2001 BY AREA HEALTH SERVICES

Condition	Area Health Service (2001)																	Total		
	CSA	NSA	WSA	WEN	SWS	CCA	HUN	ILL	SES	NRA	MNC	NEA	MAC	MWA	FWA	GMA	SA	CHS	for Dec [†]	To date [†]
Blood-borne and sexually transmitted																				
Chancroid*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia (genital)*	15	31	16	8	-	10	18	13	56	10	13	11	7	4	5	10	4	1	233	4,445
Gonorrhoea*	1	7	5	1	-	-	1	1	24	2	2	2	1	-	2	1	-	-	53	1,301
Hepatitis B - acute viral*	-	-	1	-	1	-	1	-	1	-	1	-	-	-	-	1	-	-	6	84
Hepatitis B - other*	18	30	1	2	100	1	3	1	35	3	2	1	5	2	1	2	1	-	208	4,782
Hepatitis C - acute viral*	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	204
Hepatitis C - other*	55	2	-	33	93	28	50	21	57	17	17	11	2	6	3	12	13	23	465	8,873
Hepatitis D - unspecified*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	12
Syphilis	5	-	4	-	9	-	-	1	13	-	1	-	-	1	-	-	1	1	36	758
Vector-borne																				
Barmah Forest virus*	-	-	-	-	-	1	-	-	-	5	12	-	-	-	-	-	-	-	18	406
Ross River virus*	-	-	-	-	-	1	2	1	-	3	3	-	-	-	1	-	-	-	11	764
Arboviral infection (Other)*	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	2	65
Malaria*	-	1	1	1	-	1	3	1	1	-	1	1	-	1	-	-	1	-	13	155
Zoonoses																				
Anthrax	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leptospirosis*	-	-	-	-	-	-	1	-	-	4	1	-	-	-	-	-	-	-	6	73
Lyssavirus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psittacosis	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	1	-	-	2	35
Q fever*	-	-	-	-	1	-	1	-	-	3	1	-	4	-	-	-	-	-	10	154
Respiratory and other																				
Blood lead level*	-	3	-	2	-	-	3	-	-	-	1	1	-	-	-	-	-	-	10	497
Influenza	1	-	2	1	-	-	-	-	1	-	1	-	-	-	-	-	-	-	6	303
Invasive pneumococcal infections	-	10	9	2	1	3	1	1	3	2	1	-	-	2	-	-	-	-	35	417
<i>Legionella longbeachae</i> infections*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	27
<i>Legionella pneumophila</i> infections*	-	-	2	1	-	-	1	-	1	-	-	-	-	-	-	-	-	-	5	38
Legionnaires' disease (other)*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Leprosy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Meningococcal infection (invasive)	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	2	238
Tuberculosis	2	3	6	-	-	-	-	1	8	-	-	-	-	-	-	-	-	1	21	386
Vaccine-preventable																				
Adverse event after immunisation	1	-	3	-	-	-	1	-	-	-	-	-	-	-	-	1	3	-	9	102
H.influenzae b infection (invasive)*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	10
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	32
Mumps*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	28
Pertussis	26	51	47	21	16	7	45	22	44	26	7	5	8	6	4	17	13	-	365	4,371
Rubella*	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	64
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Faecal-oral																				
Botulism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cholera*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Cryptosporidiosis*	2	1	1	-	-	-	-	-	1	5	2	5	2	1	-	1	-	-	21	176
Food borne illness (not otherwise specified)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	31
Gastroenteritis (in an institution)	-	-	141	-	-	-	8	-	-	-	-	-	-	-	-	-	-	-	149	623
Giardiasis*	-	9	7	1	-	4	4	1	7	1	-	6	1	4	1	-	-	-	46	966
Haemolytic uraemic syndrome	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	6
Hepatitis A*	7	2	4	-	2	-	1	-	9	1	-	-	-	1	-	-	-	-	27	192
Hepatitis E*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	9
Listeriosis*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	13
Salmonellosis (not otherwise specified)*	-	22	-	12	17	3	14	2	15	10	3	-	3	-	1	6	1	-	109	1,662
Shigellosis	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	2	131
Typhoid and paratyphoid*	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	1	43
Verotoxin producing E. coli*	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	1

* lab-confirmed cases only

+ includes cases with unknown postcode* HIV and AIDS data are reported separately in the Public Health Bulletin quarterly

CSA = Central Sydney Area
NSA = Northern Sydney Area
WSA = Western Sydney Area

WEN = Wentworth Area
SWS = South Western Sydney Area
CCA = Central Coast Area

HUN = Hunter Area
ILL = Illawarra Area
SES = South Eastern Sydney Area

NRA = Northern Rivers Area
MNC = North Coast Area
NEA = New England Area

MAC = Macquarie Area
MWA = Mid Western Area
FWA = Far West Area

GMA = Greater Murray Area
SA = Southern Area
CHS = Corrections Health Service

TABLE 2 REPORTS OF NOTIFIABLE CONDITIONS RECEIVED IN JANUARY 2002 BY AREA HEALTH SERVICES

Condition	Area Health Service (2001)																		Total	
	CSA	NSA	WSA	WEN	SWS	CCA	HUN	ILL	SES	NRA	MNC	NEA	MAC	MWA	FWA	GMA	SA	CHS	for Jan [†]	To date [†]
Blood-borne and sexually transmitted																				
Chancroid*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia (genital)*	53	27	40	15	33	12	27	14	73	15	13	10	7	6	2	18	9	1	376	376
Gonorrhoea*	17	12	9	1	3	5	-	3	66	2	-	2	1	-	2	2	-	1	128	128
Hepatitis B - acute viral*	1	-	-	-	1	-	3	-	2	-	1	-	-	-	-	-	-	-	9	9
Hepatitis B - other*	52	30	36	6	138	7	7	4	35	2	2	4	2	-	3	1	5	-	254	254
Hepatitis C - acute viral*	1	-	-	-	-	-	-	-	1	-	1	-	-	-	-	1	-	1	5	5
Hepatitis C - other*	83	26	78	32	98	32	27	25	88	35	31	15	7	4	2	9	8	39	640	640
Hepatitis D - unspecified*	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	1
Syphilis	8	-	8	2	17	2	2	-	11	2	1	3	1	1	2	-	-	3	63	63
Vector-borne																				
Barmah Forest virus*	1	-	-	-	-	-	-	1	-	7	9	-	-	-	-	-	-	-	18	18
Ross River virus*	1	1	-	-	-	2	-	-	-	2	2	3	3	2	-	2	1	-	19	19
Arboviral infection (Other)*	2	1	1	-	-	-	-	-	1	-	1	-	-	-	-	-	-	-	7	7
Malaria*	-	-	1	-	4	-	2	-	1	1	1	1	-	1	-	-	-	-	12	12
Zoonoses																				
Anthrax	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leptospirosis*	-	-	-	-	-	-	-	-	-	2	1	3	-	-	-	-	-	-	6	6
Lyssavirus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psittacosis	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	2	2
Q fever*	-	-	-	1	-	1	2	-	-	3	4	2	3	-	-	-	1	-	17	17
Respiratory and other																				
Blood lead level*	1	2	1	1	4	-	1	2	2	1	-	1	2	-	10	-	-	-	28	28
Influenza	-	-	2	-	2	-	-	1	1	-	-	-	-	-	-	-	-	-	6	6
Invasive pneumococcal infections	1	3	8	1	1	1	2	4	5	-	1	-	-	-	-	-	-	1	28	28
<i>Legionella longbeachae</i> infections*	-	-	-	-	-	-	-	-	1	2	-	-	-	-	-	-	-	-	3	3
<i>Legionella pneumophila</i> infections*	-	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	2	2
Legionnaires' disease (other)*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Leprosy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal infection (invasive)	1	-	1	-	2	-	-	-	2	2	-	1	-	-	-	1	-	-	10	10
Tuberculosis	3	2	7	1	1	-	-	1	10	-	-	-	-	-	-	-	-	-	25	25
Vaccine-preventable																				
Adverse event after immunisation	-	3	-	-	-	1	4	-	-	-	-	-	1	-	-	1	-	-	10	10
H.influenzae b infection (invasive)*	-	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	2	2
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Mumps*	-	-	1	-	-	-	-	-	-	-	-	-	-	2	-	-	-	-	3	3
Pertussis	11	47	47	10	11	8	75	23	63	34	11	11	4	7	-	17	11	-	391	391
Rubella*	2	-	-	-	-	-	-	-	1	2	-	-	1	-	-	-	1	-	7	7
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Faecal-oral																				
Botulism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cholera*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cryptosporidiosis*	-	2	3	-	-	-	2	1	-	5	5	8	2	-	-	1	1	-	30	30
Food borne illness (not otherwise specified)	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1
Gastroenteritis (in an institution)	-	-	47	-	-	-	-	-	7	-	-	-	2	-	-	-	-	-	56	56
Giardiasis*	-	11	5	2	4	3	5	3	11	4	1	3	2	1	-	3	-	-	58	58
Haemolytic uraemic syndrome	-	-	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	1	1
Hepatitis A*	11	-	4	-	-	1	-	1	5	2	-	-	-	-	-	-	-	-	25	25
Hepatitis E*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Listeriosis*	-	1	-	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	2	2
Salmonellosis (not otherwise specified)*	8	18	28	14	23	14	24	2	14	34	11	6	7	4	-	6	7	-	221	221
Shigellosis	-	2	-	-	-	-	1	-	4	-	1	-	-	-	-	-	-	1	9	9
Typhoid and paratyphoid*	1	1	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	4	4
Verotoxin producing E. coli*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

* lab-confirmed cases only

+ includes cases with unknown postcode* HIV and AIDS data are reported separately in the Public Health Bulletin quarterly

CSA = Central Sydney Area	WEN = Wentworth Area	HUN = Hunter Area	NRA = Northern Rivers Area	MAC = Macquarie Area	GMA = Greater Murray Area
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WSA = Western Sydney Area	CCA = Central Coast Area	SES = South Eastern Sydney Area	NEA = New England Area	FWA = Far West Area	CHS = Corrections Health Service