

Communicable Diseases Report, New South Wales, for March and April 2007

**Communicable Diseases Branch,
NSW Department of Health**

For updated information, including data and facts on specific diseases, visit www.health.nsw.gov.au and click on **Infectious Diseases**.

Trends

Figure 1 and Tables 1 and 2 show reports of communicable diseases received through to the end of April 2007 in NSW.

Hepatitis A clinic

In March, Sydney South West Public Health Unit (PHU) initiated a large immunoglobulin clinic following identification of a sushi chef who had been working whilst infectious with hepatitis A. Following a media release, over 400 people received immunoglobulin which can prevent the development of hepatitis A if given within 14 days of exposure.

Salmonellosis outbreak

In late March, Sydney South West PHU was notified of 10 people with gastroenteritis who presented to Concord Hospital. All cases reported eating pork or chicken rolls from a Sydney bakery. NSW Food Authority officers inspected the bakery and issued a prohibition order restricting the sale of pork and chicken rolls. Over 300 people were reported to the PHU with symptoms of salmonellosis (including diarrhoea, abdominal pain and vomiting). Laboratory results identified *Salmonella* Typhimurium phage type 9 in human, food and environmental samples. The source of contamination remains unclear.

HCV investigation

In late February 2007, a doctor notified the South Eastern Sydney and Illawarra PHU that three of his patients had been diagnosed with acute hepatitis C infection. All received parenteral vitamin therapy at his clinic. The patients, all woman in their 40s and 50s, were diagnosed in January 2007, February 2007 and late 2004.

PHU staff interviewed the cases in detail about risks, but no obvious source of infection was identified. All cases had received intramuscular vitamin B, intramuscular

magnesium and intravenous vitamin C injections at the clinic.

An investigation was initiated to determine if hepatitis transmission had occurred in the practice, and if so, how, and whether other patients may be at risk. The doctor cooperated with the investigation and agreed to cease all vitamin therapy and venipunctures as a precautionary measure.

Laboratory tests comparing viral strains between patients were initiated. A review of infection control practices and interviews with staff could not identify a specific incident with the potential for transmission. As a precaution, staff training and procedural changes were recommended at the clinic. Investigators began contacting patients who received vitamin injections at the clinic on days when transmission was suspected of having occurred.

Hepatitis C is a viral infection of the liver that is primarily transmitted parenterally. Sexual transmission is rare and more likely when there is contact with blood.¹ In 60–70% of cases, hepatitis C infection is asymptomatic. A total of 20–30% of cases may have jaundice and 10–20% may experience non-specific symptoms such as anorexia, malaise or abdominal pain. Clinical illness occurs on average from six to seven weeks following exposure to the virus. The majority of patients infected with hepatitis C without treatment go on to develop a chronic infection,² and studies indicate that cirrhosis may develop in 4–24% of people after 20 years of infection.³ Recent advances, in combination antiviral treatment, mean that a cure can be effected in up to two thirds of cases, depending on the viral genotype and stage of the infection.⁴ There is currently no vaccine for hepatitis C. The investigation continues.

References

1. Dore GJ, Law M, MacDonald M, Kaldor JM. Epidemiology of hepatitis C virus infection in Australia. *J Clin Virol* 2003; 26(2): 171–84. doi:10.1016/S1386-6532(02)00116-6
2. *Recommendations for Prevention and Control of Hepatitis C Virus (HCV) Infection and HCV-Related Chronic Disease*. Available at <http://www.cdc.gov/mmwr/preview/mmwrhtml/00055154.htm> [Verified 4 June 2007].
3. Bialek SR, Terrault NA. The changing epidemiology and natural history of hepatitis C virus infection. *Clin Liver Dis* 2006; 10(4): 697–715. doi:10.1016/j.cld.2006.08.003
4. Pol S, Bourliere M. Optimizing treatment outcomes in chronic hepatitis C: management of non-response. *Antivir Ther* 2006; 11(8): 955–70.

Figure 1. Reports of selected communicable diseases, NSW, January 2002 to April 2007, by month of onset
 Preliminary data: case counts in recent months may increase because of reporting delays. Laboratory-confirmed cases only, except for measles, meningococcal disease and pertussis.

BFV = Barmah Forest virus infections, RRV = Ross River virus infections. Lab Conf = laboratory confirmed. Men Gp C and Gp B = meningococcal disease due to serogroup C and serogroup B infection, other/unk = other or unknown serogroups. NB: multiple series in graphs are stacked, except gastroenteritis outbreaks. NB: Outbreaks are more likely to be reported by nursing homes and hospitals than by other institutions.

NSW Population	
Male	50%
<5 y	7%
5-24 y	27%
25-64 y	53%
65+ y	13%
Rural	46%

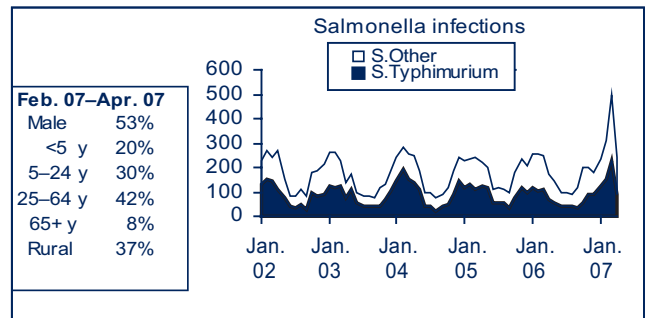
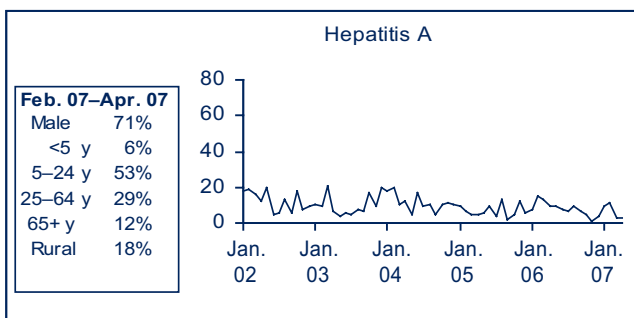
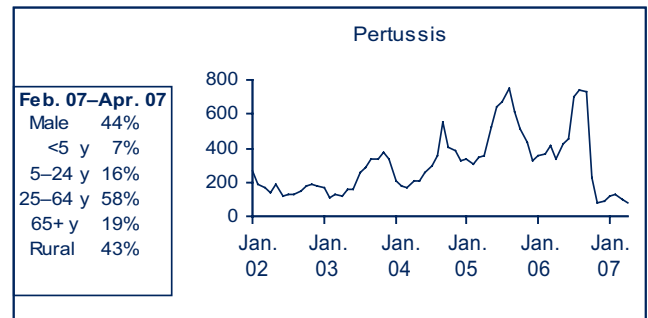
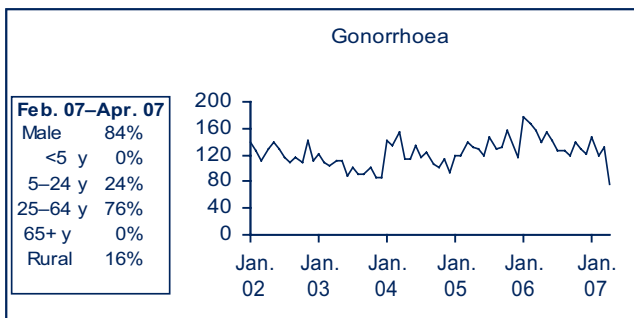
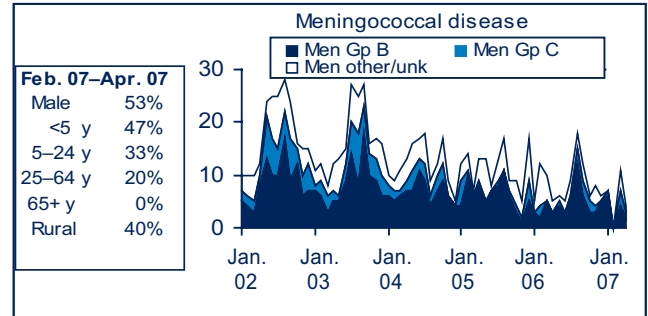
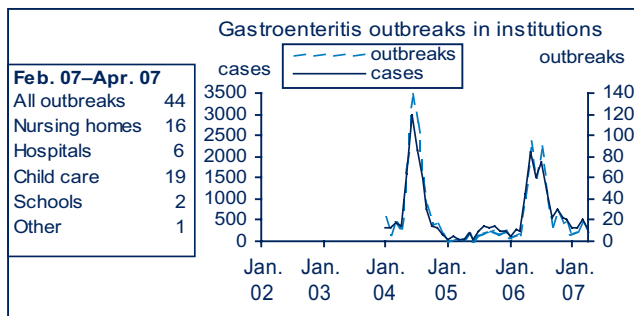
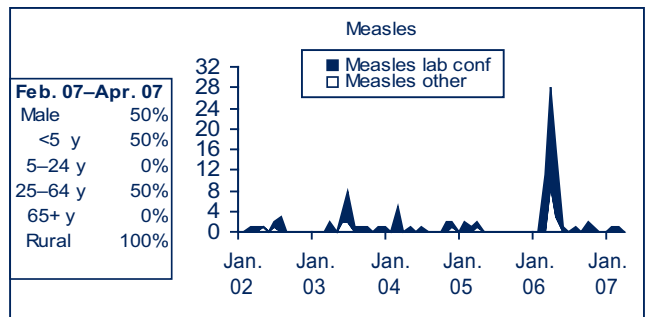
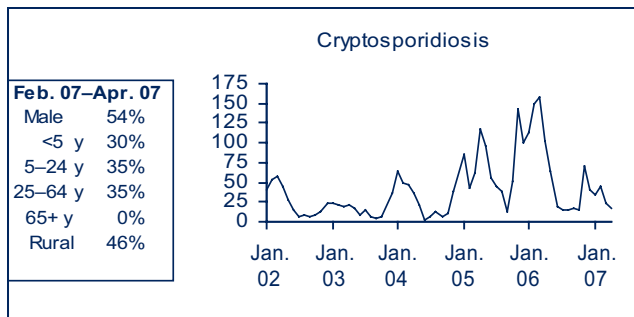
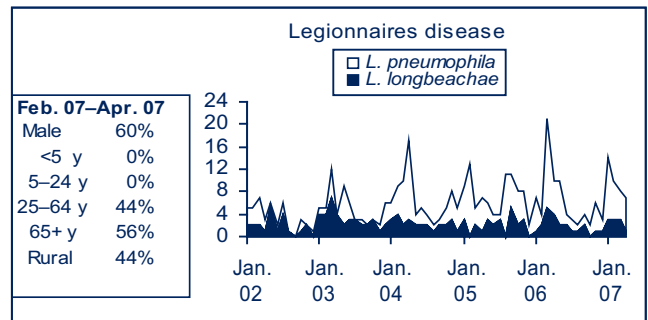
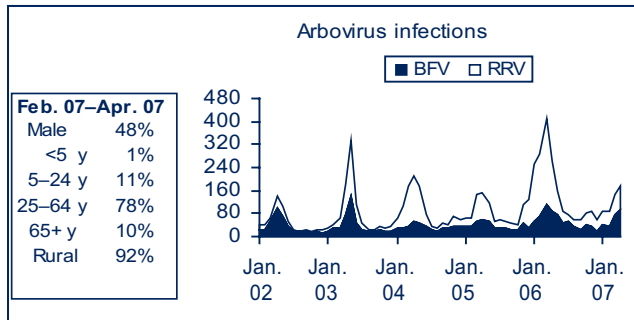


Table 1. Reports of notifiable conditions received in March 2007 by Area Health Services

Condition	Area Health Service (2007)												Total for Mar+	Total To date+								
	Greater Southern			Greater Western			Hunter / New England		North Coast			Northern Syd / Central Coast			South Eastern Syd / Illawarra		Sydney South West		Sydney West		JHS	
	GMA	SA	FWA	MAC	MWA	HUN	NEA	MNC	NRA	CCA	NSA	ILL	SES	CSA	SWS	WEN	WSA	JHS				
Blood-borne and sexually transmitted																						
Chancroid*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chlamydia (genital)*	40	20	3	13	35	131	41	49	56	70	122	45	190	119	66	30	96	6	1142	3386	1142	3386
Gonorrhoea*	2	-	-	1	2	2	2	-	3	8	10	2	49	20	8	2	5	1	121	401	121	401
Hepatitis B - acute viral*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Hepatitis B - other*	3	4	-	1	-	8	5	2	2	1	41	3	28	51	70	2	44	1	266	865	266	865
Hepatitis C - acute viral*	-	-	-	2	-	1	-	-	-	-	-	-	1	2	-	-	-	-	8	14	8	14
Hepatitis C - other*	12	16	4	9	14	55	15	22	30	28	23	24	43	63	66	24	50	29	533	1594	533	1594
Hepatitis D - unspecified*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	1	3
Lymphogranuloma venereum	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Syphilis	-	2	-	3	2	5	3	1	2	1	7	6	35	22	9	2	9	1	111	322	111	322
Vector-borne																						
Barmah Forest virus*	1	15	1	-	-	17	4	9	7	3	-	3	-	-	-	-	-	-	60	136	60	136
Ross River virus*	1	2	2	8	4	10	3	9	10	2	3	3	2	1	-	-	1	-	61	167	61	167
Arboviral infection (Other)*	-	-	-	-	-	-	-	-	1	2	-	-	3	1	-	-	-	-	8	26	8	26
Malaria*	-	-	-	-	-	4	-	-	-	-	2	-	3	-	1	2	1	-	13	33	13	33
Zoonoses																						
Anthrax*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Brucellosis*	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1	-	-	-	2	4	2	4
Leptospirosis*	-	-	-	1	-	-	1	-	-	-	-	-	-	-	-	-	-	-	2	4	2	4
Lysavirus*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Psittacosis*	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	1	12	1	12
Q fever*	1	1	-	6	-	1	3	2	3	-	-	1	-	-	-	-	-	-	17	61	17	61
Respiratory and other																						
Blood lead level*	1	1	-	-	-	9	-	-	-	1	-	1	3	3	-	1	-	-	20	36	20	36
Influenza*	3	3	1	2	2	3	1	1	1	4	4	1	7	5	4	6	6	-	48	103	48	103
Invasive pneumococcal infection*	3	-	1	1	1	3	1	1	1	1	1	3	3	2	2	2	6	-	28	83	28	83
Legionella longbeachae infection*	-	-	-	-	-	1	-	-	-	-	-	2	1	1	1	-	-	-	7	10	7	10
Legionella pneumophila infection*	1	-	-	-	-	-	-	2	-	-	-	-	-	-	-	2	2	-	7	23	7	23
Legionnaires disease (Other)*	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	-	1	1	1	1
Leptosy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	1	1	1
Meningococcal infection (invasive)*	1	1	-	1	-	-	-	-	1	2	2	1	1	1	1	1	2	-	11	19	11	19
Tuberculosis	-	-	-	-	-	3	-	-	-	2	4	1	6	2	4	-	9	-	32	93	32	93
Vaccine-preventable																						
Adverse event after immunisation**	-	-	-	-	1	-	-	-	-	2	-	-	-	-	-	-	-	-	3	8	3	8
H. influenzae b infection (invasive)*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Measles	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	1
Mumps*	-	-	-	-	-	-	-	-	-	-	-	-	2	-	-	1	1	-	6	24	6	24
Pertussis	2	3	-	3	2	10	3	4	4	5	13	3	12	8	8	2	13	-	95	358	95	358
Rubella*	-	-	-	-	-	-	-	-	-	-	-	-	-	1	-	-	-	-	1	6	1	6
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	3	1	3
Enteric																						
Botulism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cholera*	-	-	-	-	-	2	1	1	3	-	6	2	2	1	7	1	2	-	29	110	29	110
Cryptosporidiosis*	5	4	1	3	9	20	8	10	1	4	49	13	34	16	21	5	20	-	224	578	224	578
Giardiasis*	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	2	4	2	4
Haemolytic uraemic syndrome	-	-	-	1	-	-	-	-	-	-	-	-	-	1	-	-	1	-	3	23	3	23
Hepatitis A*	-	-	-	-	-	-	-	-	-	-	-	-	1	1	-	-	-	-	2	3	2	3
Hepatitis E*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2	3	2	3
Listeriosis*	-	-	-	-	-	1	-	-	-	-	-	-	1	1	1	-	-	-	2	7	2	7
Salmonellosis*	6	5	2	2	4	28	15	11	33	17	43	9	36	22	28	19	41	1	323	840	323	840
Shigellosis*	-	-	-	-	-	-	-	1	3	-	1	-	3	2	-	-	-	-	9	16	9	16
Typhoid*	-	-	-	-	-	-	-	-	-	-	1	-	1	1	-	-	3	-	6	16	6	16
Verotoxin-producing E.coli*	-	-	-	-	-	1	-	-	-	-	-	-	-	-	-	-	1	-	2	4	2	4
Miscellaneous																						
Creutzfeldt-Jakob disease	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal conjunctivitis	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

*Laboratory-confirmed cases only. +Includes cases with unknown postcode. **HIV and AIDS data are reported separately in the Public Health Bulletin quarterly. ^ Count contains several months of notifications submitted from a technical study. N.B.: From 1 Jan. 2005, Hunter/New England AHS also comprises Great Lakes, Gloucester & Greater Taree LGAs; Sydney West also comprises Greater Lithgow LGA. CCA, Central Coast Area; CHS, Corrections Health Services; CSA, Central Sydney Area; FWA, Far West Area; GMA, Greater Murray Area; HUN, Hunter Area; ILL, Illawarra Area; MAC, Macquarie Area; MNC, North Coast Area; NEA, North Eastern Area; NRA, Northern Rivers Area; NSA, Northern Sydney Area; SA, Southern Area; SES, South Eastern Sydney Area; SWS, South Western Sydney Area; WEN, Wentworth Area; WSA, Western Sydney Area.

Table 2. Reports of notifiable conditions received in April 2007 by Area Health Services

Condition	Area Health Service (2007)												Total for Apr.+	Total To date+								
	Greater Southern GMA	Greater Southern SA	FWA	Greater Western MAC	MWA	HUN / New England	HUN	NEA	North Coast MNC	NRA	CCA	Northern Syd / Central Coast NSA			South Eastern Syd / Illawarra ILL	SES	CSA	Sydney West West	SWS	WEN	Sydney West WSA	JHS
Blood-borne and sexually transmitted																						
Chancroid*																						
Chlamydia (genital)*	39	14	3	5	20	88	33	35	47	47	78	31	202	93	21	31	88	3	882	4311		
Gonorrhoea*				1		2		2	3	3	16	3	49	17	3	2	9		111	529		
Hepatitis B – acute viral*											1								2	16		
Hepatitis B – other*	2	2		2	1	4		2	4	4	38	11	42	39	28	10	18	2	212	1090		
Hepatitis C – acute viral*																				15		
Hepatitis C – other*	12	17	2	7	10	35	9	11	27	23	27	23	64	60	29	12	36	37	445	2069		
Hepatitis D – unspecified*																					3	
Lymphogranuloma venereum																						
Syphilis	1			2		2		1	6	2	2	2	32	12	5		12		82	399		
Vector-borne																						
Barmah Forest virus*	2	41		2	1	8		11	13			19	2	1					100	237		
Ross River virus*	1	6	2	3	2	13	11	25	12	4	3	3	1	1		3		90	258			
Arboviral infection (Other)*										2	3	1	1	1				10	36			
Malaria*	1	1									1			1				6		38		
Zoonoses																						
Anthrax*																						
Brucellosis*																						
Leptospirosis*									1										1	4		
Lysavirus*																			2	6		
Psittacosis*																						
Q fever*		2		1		2	1	3	4			1						14		16	75	
Respiratory and other																						
Blood lead level*	1					1					1	3	1	2					10	46		
Influenza*	2				2	4			2	3	2	2	10	1		2	12		37	142		
Invasive pneumococcal infection*	2			1		4		1	1	1	4	3	3	1		3	1	25	109			
Legionella longbeachae infection*																			3	12		
Legionella pneumophila infection*																			8	30		
Legionnaires' disease (Other)*																						
Leprosy																						
Meningococcal infection (invasive)*	1										1								5	23		
Tuberculosis	1					2				2	2	1	4			1	4		17	113		
Vaccine-preventable																						
Adverse event after immunisation**		2								5			1						9	20		
H. influenzae b infection (invasive)*																				1		
Measles											1									2		
Mumps*											1	1	2					5	29			
Pertussis	5	5		1		13	6	3	5	5	7	4	17	3	3	2	14	93	454			
Rubella*																				6		
Tetanus																					3	
Enteric																						
Botulism																						
Cholera*																						
Cryptosporidiosis*	1				4	1	1	1	1		2	1	4	1	4		2		22	134		
Giardiasis*	2	6	1	4	1	20	4	2	2	6	31	6	30	16	5	3	20	160	750			
Haemolytic uraemic syndrome																				5		
Hepatitis A*											1								1	24		
Hepatitis E*																				2		
Listeriosis*													1	1					3	10		
Salmonellosis*	6	4		1	4	25	9	9	22	61	60	11	33	101	45	7	88	490	1339			
Shigellosis*									1		1	1	2	1			1		6	22		
Typhoid*																			5	21		
Verotoxin-producing E. coli**	1																		1	5		
Miscellaneous																						
Creutzfeldt-Jakob disease																						
Meningococcal conjunctivitis																						

*Laboratory-confirmed cases only. +Includes cases with unknown postcode. **HIV and AIDS data are reported separately in the Public Health Bulletin quarterly. ^ Count contains several months of notifications submitted from a technical study.
 N.B.: From 1 Jan. 2005, Hunter/New England AHS also comprises Great Lakes, Gloucester & Greater Taree LGAs; Sydney West also comprises Greater Lithgow LGA.
 CCA, Central Coast Area; CHS, Corrections Health Service; CSA, Central Sydney Area; FWA, Far West Area; GMA, Greater Murray Area; HUN, Hunter Area; ILL, Illawarra Area; MAC, Macquarie Area; MNC, North Coast Area; MWA, Mid Western Area; NEA, North England Area; NRA, Northern Rivers Area; NSA, Northern Sydney Area; SWS, South Western Sydney Area; SES, South Eastern Sydney Area; SA, Southern Area; SE, Southern Sydney Area; WEN, Wentworth Area; WSA, Western Sydney Area.