

system;³

- the introduction of enhanced influenza surveillance that added **directed virology surveillance** to the existing sentinel general practice and laboratory-based surveillance systems.⁴

The whole system of health protection rests on the foundation of public health surveillance. Your notifications—whether from general or specialist medical practices, laboratories, hospitals, schools or childcare centres—are vital for running, planning and improving public health programs in New South Wales. So thanks.

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3. NSW Department of Health. Infectious diseases, NSW: October 1998. *NSW Public Health Bulletin* 1998; 9: 118–119.
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INFECTIOUS DISEASES, NSW: SEPTEMBER 1999

TRENDS

Reports of notifiable diseases to the end of July were largely unremarkable for this time of year (Figure 1, Table 7).

NSW INFLUENZA ACTIVITY UPDATE

Summary

Influenza activity continued at a moderately high level during July and early August as reflected by both the number of laboratory diagnoses and reported clinical activity. There was a sharp increase in both forms of surveillance activity in early July. In late July and early August, influenza A activity declined while influenza B activity increased. The influenza season appears to have arrived earlier this year than in the previous few years, and at the same time of year that respiratory syncytial virus (RSV) activity usually peaks. However, influenza activity this year has not yet exceeded the peaks achieved in recent years.

Clinical activity

Rates of reported influenza-like illness have oscillated during July and early August (Figure 2). Reports were received from more than 30 general practitioners (GPs) through four public health units, including approximately 3,500 consultations per week. This source of data may include illness due to causes other than influenza.

Virological activity

The laboratory reporting rate for influenza A decreased markedly during July and early August; however, influenza B reports increased (Figure 3). In the second week of August, 32 cases of influenza A were reported (30 virological, 2 serological), 15 cases of influenza B (all virological) and 39 RSV. In the same week last year, there were 88 cases of influenza A, no cases of influenza B, and 120 cases of RSV. The rate of RSV isolation has been

included to show that the rates of these two viruses have increased at the same time of year this season, whereas influenza A has peaked in July–August in previous years. This source of data tends to include a high proportion of hospitalised patients, particularly children, and may not accurately reflect the affect of the illness on other sections of the community.

Directed virological surveillance

Approximately 25 to 30 nasopharyngeal or throat gargle samples from patients suffering from influenza-like illness were received each week from 10 to 15 of the sentinel GPs (that is, GPs who have been specially enrolled to provide this data) during July and early August. These samples showed a similar virological pattern to the routine laboratory reports discussed previously: the influenza A isolation rate decreased from 30 per cent of samples in mid-July to zero in the second week of August, while the rate for influenza B increased from seven to 21 per cent during that period. No other respiratory viruses were isolated during the period.

There are approximately 30 sentinel GPs from Central Sydney, South Eastern Sydney, Western Sydney, Wentworth, Central Coast, Hunter, Illawarra, Greater Murray and Southern Areas participating in the scheme this year.

International surveillance

Influenza activity in the southern hemisphere reported to the World Health Organization varies considerably between countries. During the first two weeks of August, Argentina continued to report influenza A activity at the level of 'widespread outbreak', while Brazil reported 'local outbreak' activity. New Zealand reported 'sporadic' activity. South Africa continues to report flu activity at the level of 'local outbreak' for both influenza A and B, and both Chile and Paraguay reported 'sporadic' activity.

FIGURE 3

REPORTS OF SELECTED INFECTIOUS DISEASES, NSW, JANUARY 1994 TO JULY 1999, BY MONTH OF ONSET

These are preliminary data: case counts in recent months may increase because of reporting delays

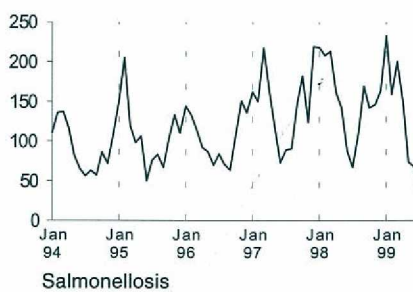
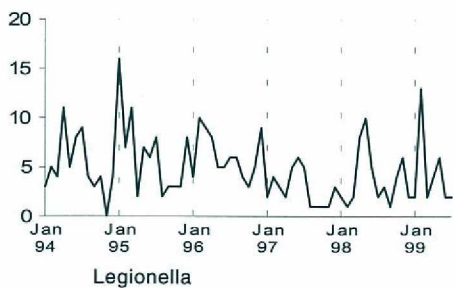
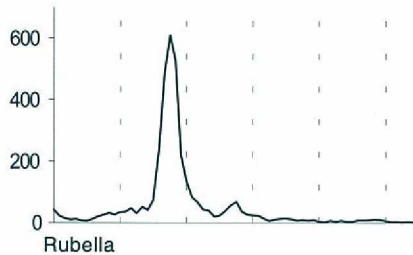
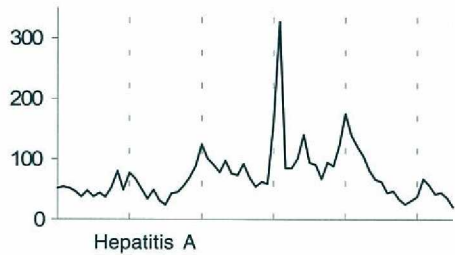
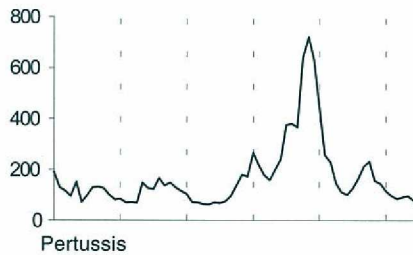
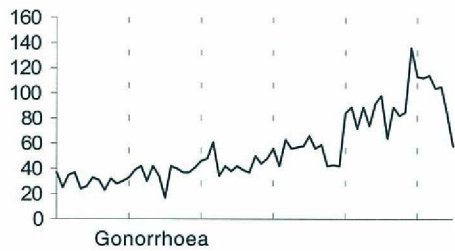
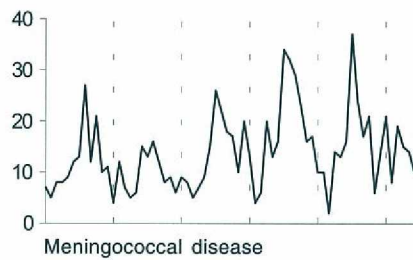
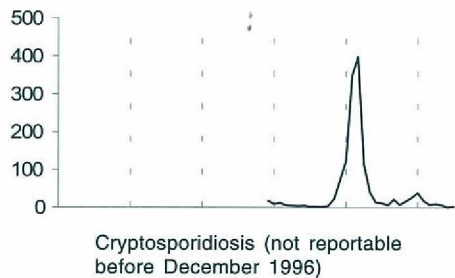
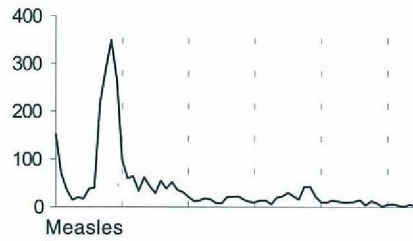
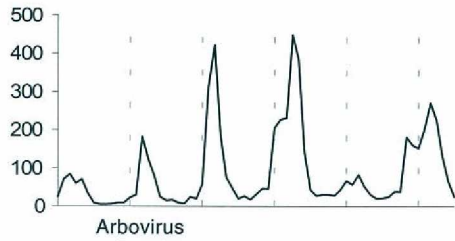


TABLE 7 **REPORTS OF NOTIFIABLE CONDITIONS RECEIVED IN JULY 1999 BY AREA HEALTH SERVICES**

Condition	Area Health Service (1999)																	Total	
	CSA	NSA	WSA	WEN	SWS	CCA	HUN	ILL	SES	NRA	MNC	NEA	MAC	MWA	FWA	GMA	SA	for Jul†	To date†
Blood-borne and sexually transmitted																			
AIDS	-	-	2	-	-	-	1	-	2	-	1	-	-	-	-	-	-	7	79
HIV infection*	1	1	-	-	1	-	-	-	4	-	-	-	-	-	-	-	-	22	194
Hepatitis B: acute viral*	-	-	2	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3	32
Hepatitis B: other*	32	5	49	12	-	4	6	6	36	4	1	1	3	1	6	-	5	172	1,794
Hepatitis C: acute viral*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	14	27
Hepatitis C: other*	52	6	32	30	-	42	54	32	71	26	27	11	3	31	2	14	34	470	4,127
Hepatitis D: unspecified*	-	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	2	8
Hepatitis, acute viral (not otherwise specified)	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Chancroid*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1
Chlamydia (genital)*	13	3	1	3	-	7	24	8	54	20	8	6	7	10	3	7	5	179	1,303
Gonorrhoea*	21	4	-	1	-	3	3	1	31	2	1	1	-	-	-	-	-	68	730
Syphilis	9	1	3	1	-	3	1	2	7	3	5	-	2	2	-	-	-	39	340
Vector-borne																			
Arboviral infection (BFV)*	-	-	-	-	1	-	1	1	-	4	4	2	-	-	-	-	1	14	191
Arboviral infection (RRV)*	1	-	-	-	-	1	2	1	-	3	4	2	3	2	3	1	8	31	982
Arboviral infection (Other)*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11
Malaria*	-	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	2	3	106
Zoonoses																			
Brucellosis*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	3
Leptospirosis*	-	-	-	-	-	-	-	-	-	4	-	2	-	-	-	-	-	6	31
Q fever*	-	-	-	-	-	-	-	-	-	-	2	1	3	-	-	-	1	7	85
Respiratory and other																			
Blood lead level*	2	-	-	1	-	-	1	13	2	-	1	-	-	1	-	-	5	26	349
Legionnaires': Longbeachae*	-	-	-	-	-	-	-	1	1	-	-	-	-	-	-	-	-	2	9
Legionnaires': Pneumophila*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	18
Legionnaires': Other*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5
Leprosy	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Meningococcal infection (invasive)	1	-	5	5	3	1	-	1	4	-	-	3	1	-	-	-	-	24	111
Mycobacterial tuberculosis	9	1	5	-	-	1	-	-	6	-	1	-	-	-	-	-	1	24	215
Mycobacteria other than TB	9	-	-	-	-	2	3	-	2	-	1	1	-	-	-	-	1	19	233
Vaccine-preventable																			
Adverse event after immunisation	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	21
<i>H. influenzae</i> b infection (invasive)*	1	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	1	7
Measles	-	-	-	-	-	-	-	1	-	-	-	-	1	-	-	-	-	2	23
Mumps*	-	-	1	-	-	-	-	-	1	-	-	-	-	-	-	-	-	3	13
Pertussis	7	-	3	3	6	1	26	2	14	3	2	-	2	1	-	8	-	78	711
Rubella*	-	-	1	-	-	-	-	-	-	-	-	-	-	-	-	-	1	2	23
Tetanus	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Faecal-oral																			
Botulism	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-
Cholera*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	2
Cryptosporidiosis*	-	-	-	-	-	-	-	-	-	2	-	2	-	-	-	-	-	4	99
Giardiasis*	4	2	-	6	-	3	8	10	10	5	3	3	1	1	-	4	-	60	675
Food-borne illness (not otherwise specified)	-	-	-	2	-	-	-	-	-	-	-	-	-	-	1	-	-	3	19
Gastroenteritis (in an institution)	-	-	-	14	-	-	-	-	-	-	-	35	-	-	1	-	-	50	219
Haemolytic uraemic syndrome	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	8
Hepatitis A*	4	-	5	-	4	3	1	1	3	-	-	1	-	2	-	1	-	25	309
Hepatitis E*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	5
Listeriosis*	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	11
Salmonellosis (not otherwise specified)*	6	-	4	3	3	5	4	8	8	7	6	1	1	-	2	2	4	63	1,003
Typhoid and paratyphoid*	2	-	-	-	-	-	-	-	2	-	-	-	-	-	-	-	-	4	19
Verotoxin producing <i>E. coli</i> *	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-	-

* lab-confirmed cases only

† includes cases with unknown postcode

CSA = Central Sydney Area

WSA = Western Sydney Area

CCA = Central Coast Area

SES = South Eastern Sydney Area

NEA = New England Area

FWA = Far West Area

NSA = Northern Sydney Area

WEN = Wentworth Area

HUN = Hunter Area

NRA = Northern Rivers Area

MAC = Macquarie Area

GMA = Greater Murray Area

SWS = South Western Sydney Area

ILL = Illawarra Area

MNC = North Coast Area

MWA = Mid Western Area

FIGURE 2

NSW GP SENTINEL SURVEILLANCE—INFLUENZA-LIKE-ILLNESS, BY WEEK OF CONSULTATION, WITH HISTORICAL COMPARISONS

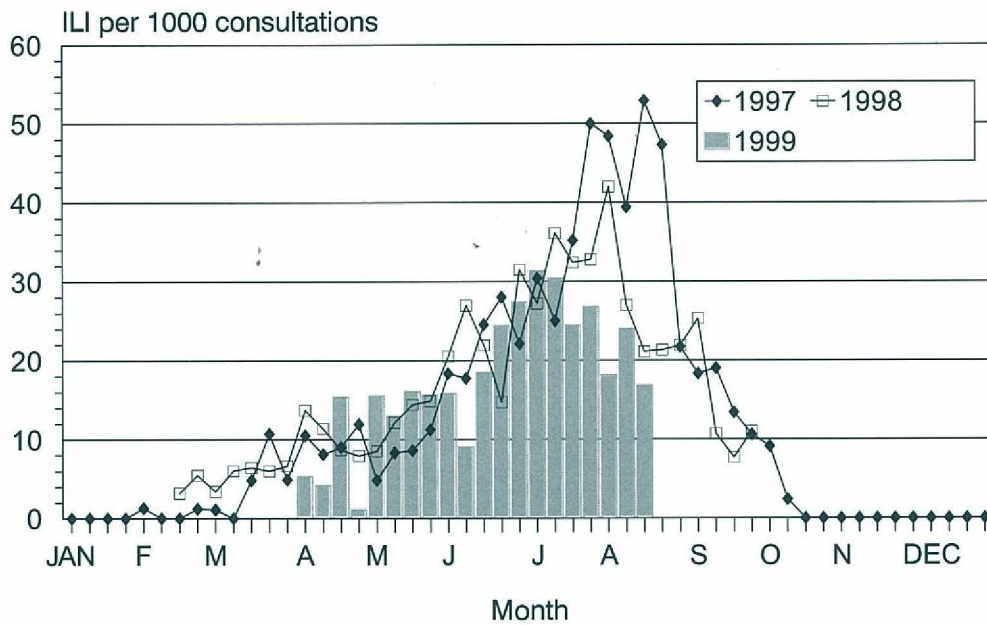


FIGURE 3

RESPIRATORY VIRUS ISOLATION RATES IN NSW, 1990-1999

