

Hunter New England and Central Coast Public Health Units Communicable Diseases Report February 2019

Increased influenza and pertussis activity
Ebola in the DRC
Changed dosing schedule for the meningococcal B vaccine

Respiratory disease:

Influenza notifications are approximately five times historical averages and there have been reports of residential aged care facilities experiencing influenza outbreaks. NSW Health is preparing to undertake an epidemiological study to investigate possible explanations for this unusual seasonal increase. Other respiratory viruses are circulating including RSV, picornavirus and adenovirus.

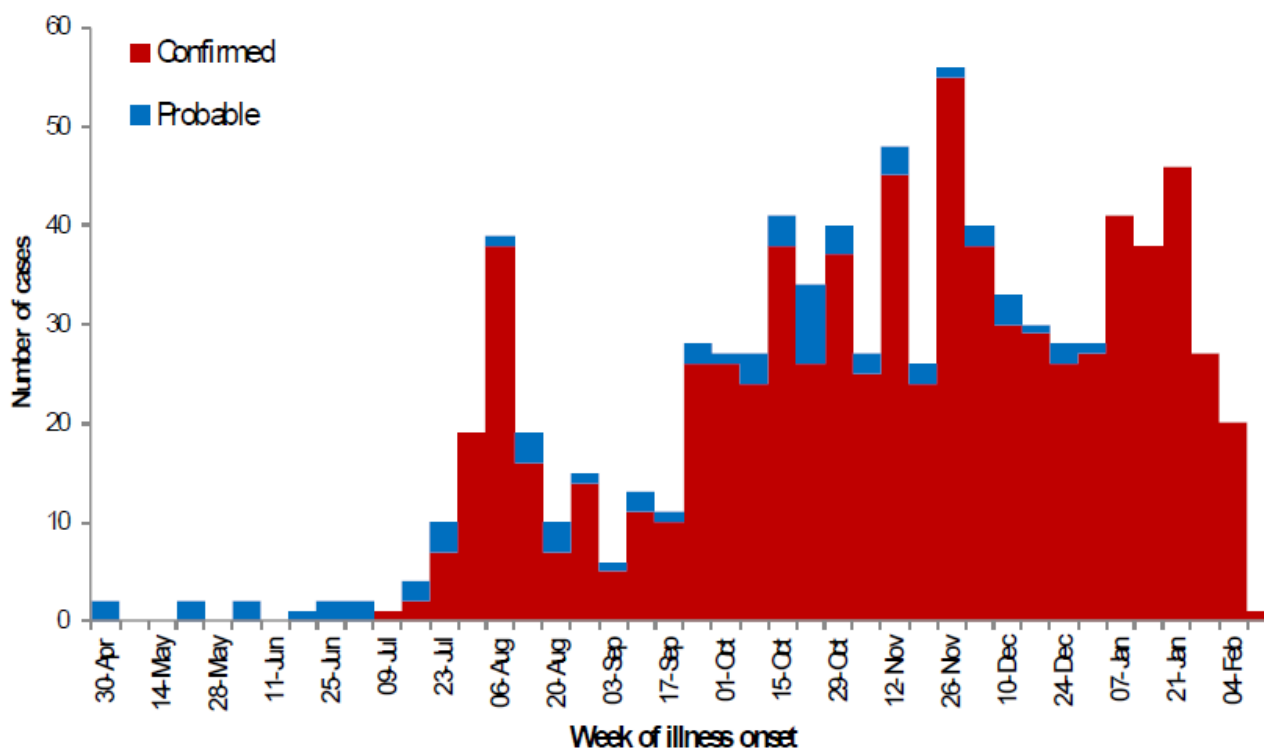
Two published studies have indicated high vaccine effectiveness (VE) for the 2018 influenza vaccines, with a Canadian study of children 1-8 years of age determining a VE of 91% (CI 67-98%) and a study in Hong Kong in children 6 months to 17 years calculating a VE of 92% (CI 82-96%).

Pertussis notifications are also increased with high levels noted in some areas.

Ebola

This serious haemorrhagic disease has re-surfaced in the Democratic Republic of the Congo, a country with an unstable political situation making containment particularly challenging. Despite the high number of notifications, it is apparent that many cases go unreported.

Cases by week of illness onset



Immunisation

The Australian Immunisation Handbook has [updated dosing for the Meningococcal B vaccine](#) Bexsero for infants.

The recommended dosing schedule for Bexsero has been updated for healthy infants aged 6 weeks to 5 months. Two primary doses should be given with an 8 week interval between doses, followed by a 3rd dose at 12 months of age.

MedicalDirector Clinical and PracSoft have released version 3.18 of the practice software. This release includes the updated National Immunisation Program Childhood Schedule which changed on 1 July 2018.

For the latest information follow the [monthly immunisation newsletters](#).

Disease updates

Communicable disease notifications

Table 1. Summary of selected notifiable conditions (YTD* by year), 2015 – 12 Feb 2019

Condition	Hunter New England# (YTD*)					Central Coast# (YTD*)				
	2019	2018	2017	2016	2015	2019	2018	2017	2016	2015
Cryptosporidiosis	15	17	25	18	22	2	2	8	10	6
Gonorrhoea	58	58	50	31	25	22	44	22	11	13
Syphilis	0	8	8	7	5	4	4	3	1	7
Chlamydial Infection	264	291	282	324	306	135	135	162	132	124
Meningococcal Inf'n	0	0	1	1	0	0	0	1	0	0
Pertussis	186	61	103	217	80	18	6	13	123	5
Ross River Virus	14	8	73	10	27	3	1	6	1	15
Salmonellosis	63	58	59	49	66	17	30	76	27	33

*YTD, Year to date for each year (reporting delays may result in changes to 2019 figures)

Hunter New England population: 920,000 #Central Coast population: 350,000

Population Health contact details (note, 1300 066 055 will find your local PHU)
Hunter New England: Wallsend Office 4924 6477 - Tamworth Office 6764 8000
Central Coast Public Health Unit: Gosford Office 4320 9730

This [Communicable Disease Report](#) and previous editions are available on the internet
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