

Hunter New England and Central Coast Public Health Units

Communicable Diseases Report

January 2016

Pertussis: vaccination and prophylaxis
Zika virus information
Immunisation: "No Jab no Pay"

Pertussis

Increased notifications continue to be reported from across the country. Cases of neonatal infection can be avoided by vaccination during the third trimester of each pregnancy. The current [NSW immunisation schedule](#) recommends a 3-dose primary schedule of pertussis containing vaccine (Infanrix Hexa) at 2, 4 and 6 months of age, followed by two booster doses, one prior to starting school (Infanrix-IPV at 4 years) and one in high school (Boostrix in year 7). The first dose in the primary schedule can be given as early as 6 weeks. From early 2016, an additional funded booster at 18 months of age will be added to the immunisation schedule.

Table 1. Recommended treatment and prophylaxis regime for pertussis

Drug	Adults
Azithromycin	Day 1, 500mg orally daily Days 2-5, 250mg orally, daily
Trimethoprim + Sulfamethoxazole	160+800mg orally, twice a day for 7 days
Clarithromycin	500mg twice daily orally for 7 days

Reference: Therapeutic Guidelines: Antibiotic, eTG Complete, November 2015

Zika virus

Following reports of a possible association with Zika virus infection and birth defects, NSW Health has issued a [media release](#) and an updated [factsheet](#). Infection with Zika virus is spread by mosquitoes but is often mild. The concern is specifically related to infection during pregnancy. [Travel advice](#) is available from the Smart Traveller website. As there is no specific treatment, [prevention of mosquito bites](#) is paramount. Doctors are reminded to always obtain a travel history. Currently, affected areas include Samoa, Tonga and South America. An updated list of countries is available on the Smart Traveller website.

Ebola virus disease

On 14 January, the World Health Organization (WHO) announced that all known chains of transmission have been stopped in West Africa. However, WHO also warned that the three affected countries (Liberia, Guinea and Sierra Leone) remained at high risk of additional small outbreaks of Ebola, likely the result of the virus persisting in some survivors even after recovery. The Commonwealth Government has ceased border control measures and travellers returning from West Africa will not be under surveillance.

Influenza and respiratory infections

Globally, activity is low; however, some northern hemisphere countries are recording increasing case numbers. Sporadic cases have been reported in NSW throughout the summer although currently picornavirus is the most commonly identified respiratory virus.

Australian Bat Lyssavirus (ABLV)

Ten NSW bats tested positive for ABLV in 2015 including bats from the Central Coast and Hunter regions. Bats may be found on the ground if sick or following hot spells. As any bat (micro bat or fruit bat, juvenile or adult) can harbour ABLV none should be handled by other than vaccinated wildlife workers. Exposures should be notified to public health for prophylaxis and management.

Summer, rain and mosquitoes

The NSW Arboviral Surveillance program indicates relatively low mosquito levels around the state and no seroconversions in sentinel chickens or arboviral isolates from trapped mosquitoes. However, with the recent heavy rainfall and hot conditions there is a likelihood of increased mosquito numbers. Protection from Ross River and Barmah Forest virus is through [prevention of mosquito bites](#).

Immunisation News

[No Jab No Pay](#)

From 1 January 2016, parents of children (< 20 years of age) who are fully immunised or are on a recognised catch-up schedule can obtain certain payments. Free catch-up vaccines ([see tables](#)) are available (through on-line ordering) for persons to 19 years until 31 December 2017.

No Jab No Pay applies throughout Australia; however in NSW, children with parents who object to vaccination can still enrol in child care if they complete a NEW Interim [Vaccination Objection Form](#) signed by an immunisation provider (although without payment).

2016 NSW School Vaccination Program

Table 2. Vaccines offered to high school students in 2016

Vaccine	Number of doses
Varicella (chicken pox)	1 dose
Diphtheria-Tetanus-Pertussis (dTpa)	1 dose
Human Papillomavirus (HPV)	3 doses

Note: students who miss vaccine doses due to absence will be offered catch-up vaccination at subsequent school clinics. Alternatively, free catch-up vaccination is available from their GP during the school year.

Communicable disease notifications

Table 3. Summary of selected notifiable conditions 2012-2015

	Hunter New England				Central Coast			
	2015	2014	2013	2012	2015	2014	2013	2012
Cryptosporidiosis	178	63	155	84	30	11	29	32
Salmonellosis	431	512	425	328	133	187	132	133
Chlamydia infection	2880	2871	3004	3061	916	1038	857	1040
Gonorrhoea	259	266	207	259	103	76	96	62
Syphilis	53	42	44	33	18	37	32	33
Influenza	2626	2831	470	1134	732	375	82	133
Meningococcal Disease	10	11	11	9	<5	<5	<5	<5
Pertussis	1315	452	288	594	748	24	42	234
Ross River virus	392	214	127	154	73	30	20	27

Population Health contact details (note, 1300 066 055 will find your local PHU)
Hunter New England Wallsend Office 4924 6477 Tamworth Office 6764 8000
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This [Communicable Disease Report](#) and previous editions are available on the internet

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