Communicable Diseases Surveillance

Highlights

Communicable Diseases Surveillance consists of data from various sources. The National Notifiable Diseases Surveillance System (NNDSS) is conducted under the auspices of the Communicable Diseases Network Australia New Zealand. The CDI Virology and Serology Laboratory Reporting Scheme (LabVISE) is a sentinel surveillance scheme. The Australian Sentinel Practice Research Network (ASPREN) is a general practitioner-based sentinel surveillance scheme. In this report, data from the NNDSS are referred to as 'notifications' or 'cases', whereas those from ASPREN are referred to as 'consultations' or 'encounters' while data from the LabVISE scheme are referred to as 'laboratory reports'.

Vaccine preventable diseases

Pertussis notifications continue to fall slightly when examined by date of onset (Figure 1). The downward trend has continued for each month of this year. This is encouraging, given that the rise towards the peak in late 1997 began in May 1997. Most notifications having onset in 1998 are in children aged 5 to 9 years (17%), 10 to 14 years (16%) and 0 to 4 years (11%).

Numbers of notifications for other vaccine preventable diseases also remain low.

Figure 1. Notifications of Pertussis, January 1992 to September 1998, by month of onset.

Arboviruses

9 notifications of dengue have been recorded for the current reporting period compared with 24 in the previous reporting period. This brings the total reported in 1998 to 390.

The numbers of new notifications for Ross River virus infection have also continued to decline for several months as expected for the time of year.

Hepatitis A

Numbers of notifications of hepatitis A remain lower than those seen in the first 6 months of 1998.

Meningococcal infection

The number of notifications of meningococcal infection reflects the higher level usually recorded in Australia during Winter and Spring (Figure 2).

Figure 2. Notifications of meningococcal disease, Australia, January 1994 to September 1998, by month of onset.

SLTEC infections, HUS and TTP

Reporting of these conditions commenced in the previous issue of CDI which includes the case definitions (Commun Dis Intell 1998;22:223). No cases have been reported for the current period.