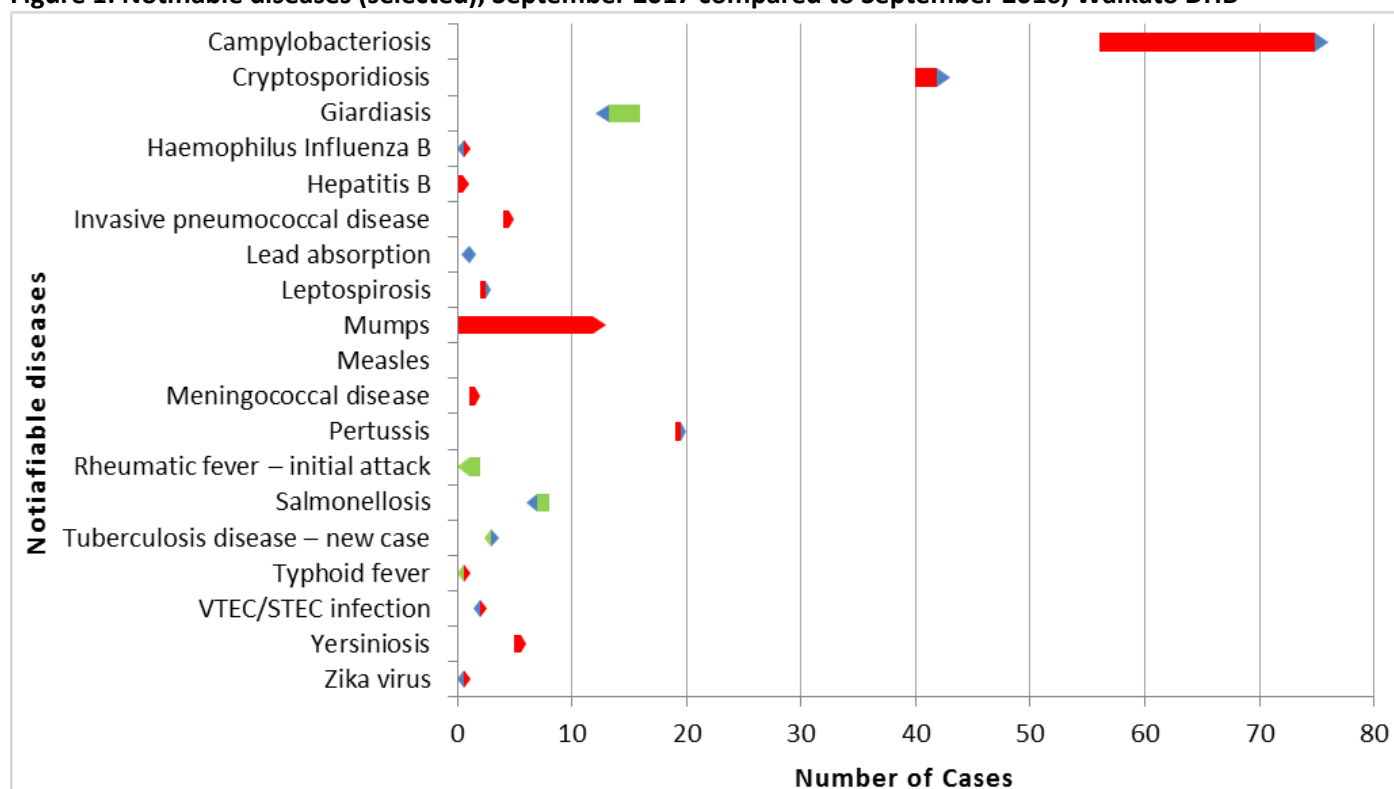


September 2017

**PUBLIC HEALTH BULLETIN**
**Communicable diseases notified September 2017**

Disease name	Sept 2016	Sept 2017	YTD	Disease name	Sept 2016	Sept 2017	YTD
Campylobacteriosis	56	76	392	Malaria	0	1	3
Cryptosporidiosis	40	43	97	Meningococcal disease	1	2	7
Dengue fever	1	1	8	Mumps	0	13	56
Gastroenteritis - unknown cause	0	0	1	Paratyphoid fever	0	1	1
Gastroenteritis / foodborne intoxication	0	0	3	Pertussis	19	20	81
Giardiasis	16	12	137	Rheumatic fever - initial attack	2	0	14
Haemophilus influenzae type b	0	0	1	Rheumatic fever - recurrent attack	0	0	1
Hepatitis A	0	0	2	Salmonellosis	8	6	85
Hepatitis B	0	1	4	Shigellosis	2	0	3
Invasive pneumococcal disease	4	5	33	Tuberculosis disease - new case	3	3	20
Latent tuberculosis infection	1	7	40	Tuberculosis disease - relapse or reactivation	0	0	1
Lead Absorption	1	1	8	Typhoid fever	0	0	2
Legionellosis	1	0	2	VTEC/STEC infection	2	2	30
Leprosy	0	0	1	Yersiniosis	5	6	48
Leptospirosis	2	3	42	Zika virus	0	0	1
Listeriosis	0	0	1				

**Figure 1: Notifiable diseases (selected), September 2017 compared to September 2016, Waikato DHB**


### **Rheumatic Fever prevention over spring and summer**

This year, we have had 15 new cases of acute Rheumatic Fever, which is a significant increase on the past two years. The first case was notified in February, and the latest case notified this month. Although Group A Streptococcus and Rheumatic Fever prevalence are higher over winter, it remains a constant issue throughout the year, particularly for high risk children aged 4 – 19 years.

Even a mild sore throat can cause Rheumatic Fever, so treat all sore throats of all high risk children with urgency. Swabbing and provision of antibiotics under rapid response contracts remain in place to enable free services for high risk groups. For more information go to:

[www.waikatodhb.health.nz/rheumatic-fever](http://www.waikatodhb.health.nz/rheumatic-fever)

### **Enteric Disease**

This spring we are (as usual) receiving large numbers of notifications of enteric disease (mainly Campylobacter and Cryptosporidiosis) relating to farm animal (calf/lamb) contact. Please continue to emphasise hand hygiene and infection control practices with your rural patients, particularly those with young children.

### **Measles and Rubella: NZ Qualifies for “Eliminated” Status**

Many of you will have seen last week that NZ has met the World Health Organisation criteria and is verified as having eliminated endemic Measles and Rubella. This means we have not had a chain of endemic transmission lasting more than 12 months for the last three years, in the presence of a well-functioning surveillance system.

This, of course, does not mean there will not be future importations of measles and outbreaks. Indeed should this happen and an outbreak last longer than 12 months we will no longer be considered to have eliminated measles.

The report also noted that there is a large susceptible pool of people aged 15 - 35 years. With outbreaks of measles, some very large, currently reported in both Australia and some European countries NZ does remain at risk of future outbreaks. Remember to consider measles or rubella in your differential diagnosis, particularly where there has been recent travel, and notify on suspicion. Also take opportunities as they arise to catch up on MMR immunisations for your young adult populations – in the absence of two documented doses of MMR catch up is free.

**Medical Officers of Health:** Felicity Dumble -- Richard Wall – Richard Vipond – Richard Hoskins

#### **After hours**

**MOoH 021 359 650**

**HPO 021 999 521**

If there is no answer, please contact Waikato Hospital's switchboard 07 839 8899 and ask for the on-call MOoH.

#### **During office hours**

**Population Health (MOoH or HPO) (07) 838 2569**

**Notifications: 07 838 2569 ext. 22065 or 22020**

**Notifications outside Hamilton: 0800 800 977**

**Fax: 07 838 2382**

**Email: [notifiablediseases@waikatodhb.health.nz](mailto:notifiablediseases@waikatodhb.health.nz)**