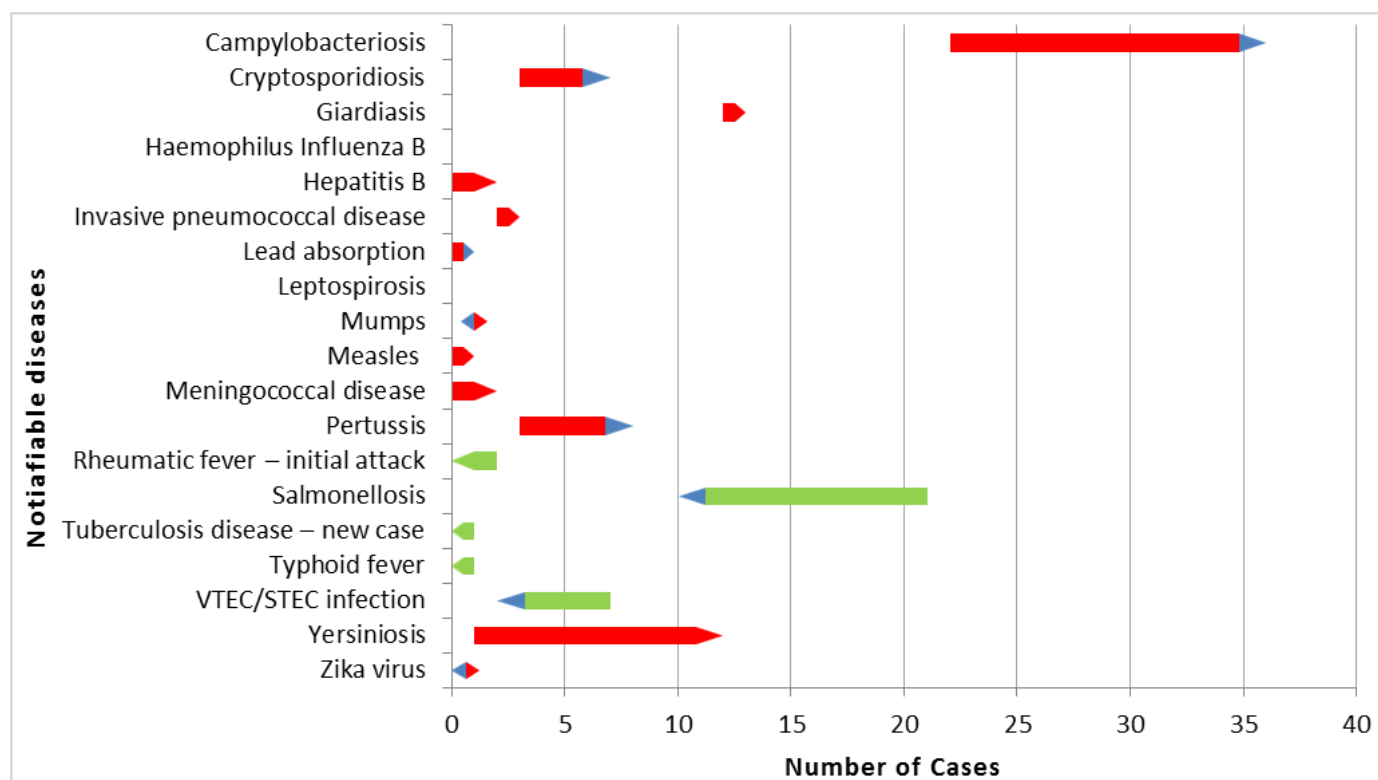


May, 2018

**PUBLIC HEALTH BULLETIN**
**Communicable diseases notified April, 2018**

Disease name	Month Year 2017	Month Year 2018	YTD	Disease name	Month Year 2017	Month Year 2018	YTD
Campylobacteriosis	22	36	173	Meningococcal disease	0	2	2
Cryptosporidiosis	3	7	23	Mumps	1	1	6
Dengue fever	2	1	16	Pertussis	3	8	160
Gastroenteritis – unknown cause	0	0	1	Measles	0	1	1
Gastroenteritis – foodborne intoxication	0	0	1	Rheumatic fever - initial attack	2	0	1
Giardiasis	12	13	54	Salmonellosis	21	10	39
Hepatitis A	0	0	2	Shigellosis	0	3	11
Hepatitis B	0	2	2	Toxic shellfish poisoning	0	1	1
Invasive pneumococcal disease	2	3	10	Tuberculosis disease - new case	1	0	6
Latent Tuberculosis	4	8	19	Typhoid fever	1	0	2
Lead absorption	0	1	1	VTEC/STEC infection	7	2	17
Legionellosis	0	0	1	Yersinia	1	12	26
Malaria	0	1	2	Zika virus	0	0	1

**Figure 1: Notifiable diseases (selected), April 2018 compared to April 2017, Waikato DHB**


## **Please call us for urgent notifications**

Disappointingly we've had several fax notifications after hours recently for high priority notifiable diseases like Measles (also things like Typhoid, Meningococcal, Mumps are high priority). If we are to ensure appropriate testing, isolation awaiting results, and timely contact or outbreak management, we need these to be phoned to the on call Medical Officer of Health. Fax alone is not enough. On a recent weekend we had two suspect measles faxed on Saturday (fax failed, senders got bounce back reports), first we knew of them was in regular mail received on the following Tuesday. Fortunately neither case was lab confirmed!

## **Measles Update**

Sadly our "breaking news" and "measles outbreak" information in the last bulletin was almost immediately followed by a local measles case and several other measles contact tracing actions, plus an interesting notification that turned out to be neither measles nor measles vaccine reaction.

The local measles case was acquired on a trip to the Philippines and led to extensive contact tracing of staff at a local retail outlet (managed in conjunction with HR from the retail chain) and also a local A&M clinic, plus some public venues. Another local GP managed the suspect case perfectly with admission direct to a single room through a side door, then leaving the room vacant for 2 hours followed by a thorough clean... all due to the case first ringing ahead.

While that was going on we had contacts from a separate case from their flight into Auckland and an Auckland urgent care practice, and from a South Island case that worked in our region for 2 days while infectious. So far no secondary cases in our region, though the South Island outbreak is expanding.

We also had notification of a suspect case, ill enough to require brief hospitalisation, with onset the week after MMR1. Eventually the National Measles Reference Lab identified both vaccine strain genotype (very weak detection) and enterovirus, which fitted well with the clinical picture.

**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)**

## **Winter is Coming**

We are concerned that we will be hit hard with influenza this year because the Northern Hemisphere has had a particularly severe season and experts are predicting that the same strain of influenza will be circulating in New Zealand. It is important for you to recall your eligible patients *including eligible children*.

It is also important that health professionals are immunised prior to the season starting so they have time to develop immunity before exposure to the virus. Key messages for staff are...

- It is our duty to protect our patients from infectious viruses like influenza. We expect you to take all available precautions to avoid putting others at risk from a debilitating and dangerous virus
- Immunisation is the best protection available against influenza. Let's not catch influenza and let's not spread it.
- New data out says that four out of five people infected show no signs of influenza. These carriers could have spread the virus among their family, co-workers, classmates and patients without ever realising it.
- If you are feeling unwell, don't come to work and spread your illness amongst your colleagues and patients

**Get immunised for Influenza – protect yourself, your colleagues and your patients – influenza kills.**