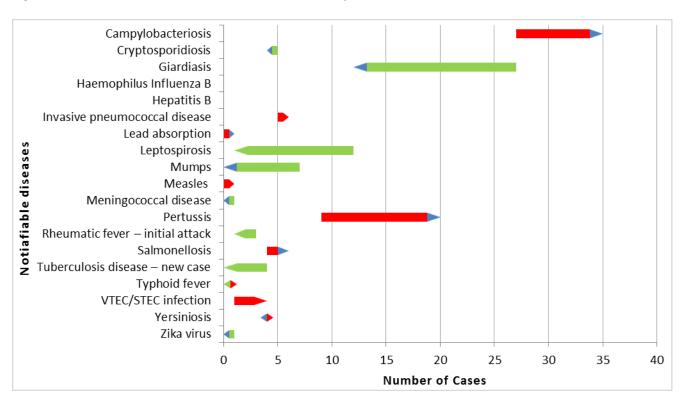
PUBLIC HEALTH BULLETIN

Communicable diseases notified June 2018

Disease name	June/ 2017	June/ 2018	YTD	Disease name	June 2017	June 2018	YTD
Campylobacteriosis	27	35	242	Meningococcal disease	1	0	2
Cholera	0	1	1	Mumps	7	0	8
Cysticercosis	0	0	1	Murine Typhus	0	0	1
Cryptosporidiosis	5	4	39	Pertussis	9	20	202
Dengue fever	0	0	18	Q fever	0	0	1
Gastroenteritis – unknown cause	0	0	1	Rheumatic fever - initial attack	3	1	5
Gastroenteritis – foodborne intoxication	1	0	1	Rheumatic fever – recurrent attack	0	0	1
Giardiasis	27	12	80	Salmonellosis	4	6	52
Hepatitis A	0	0	2	Shigellosis	0	0	11
Invasive pneumococcal disease	5	6	17	Toxic Shellfish Poisoning	0	0	1
Lead absorption	0	1	6	Tuberculosis disease - new case	4	0	8
Latent Tuberculosis	5	7	32	Tuberculosis disease – relapse or reactivation	1	0	0
Legionellosis	0	0	2	Typhoid fever	0	0	2
Leprosy	1	0	0	VTEC/STEC infection	1	4	27
Leptospirosis	12	1	11	Yersiniosis	4	4	36
Malaria	0	0	2	Zika virus	1	0	1
Measles	0	1	2				

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



Mumps Epidemic

Although our near neighbours in the BoP and Auckland are continuing to confirm notified cases of mumps this is at a much lower rate in Auckland. The Waikato region has only had 3 last lab confirmed cases in the last 3 months – two with onset in late April and 1 only just notified but probably with onset in early June 2018. We are now optimistic that the Waikato part of the nationwide epidemic is almost over.

As expected most of our 86 confirmed or probable cases since early 2017 were in the teenage/young adult age groups and the majority had no documentation of mumps (or MMR) immunisation. This is the age group usually most affected by vaccine preventable diseases because of the known MMR immunisation gap/deficit that occurred before the National Immunisation Register and effective and for pre-call, recall outreach systems immunisation. Thus NZ still remains at risk for imported cases of measles, mumps and rubella to lead to established outbreaks.

Thanks to all the first contact health workers who diagnose, arrange suitable lab investigation, give isolation advice to cases, and give immunisation advice to contacts.

Pertussis Epidemic

As you can see the numbers are down compared to last year, and there are certainly signs that the national epidemic is waning (see https://surv.esr.cri.nz/surveillance/PertussisRpt.php).

However, the numbers are not back to inter-epidemic levels yet, and we certainly continue to receive about 5 notifications per week. The key continues to be early treatment to reduce the infectious period, isolation until non-infectious, and prophylactic treatment of the whole household if there is a high risk contact in the household (immunocompromised or aged <1 year irrespective of immune status).

Flowcharts and notification forms are at: https://www.waikatodhb.health.nz/your-health/public-health-services-and-alerts/notifiable-and-communicable-diseases/

BCG vaccine availability

BCG vaccine supplies are not yet available in New Zealand. However, BCG vaccine production has resumed in Denmark and Ministry of Health is working

with PHARMAC to plan for its reintroduction in New Zealand, and will make an announcement once the vaccine is available locally. BCG clinics should not be scheduled until advised that the vaccine is available. Public Health's current understanding the MoH is not intending for there to be a "catch up" programme.

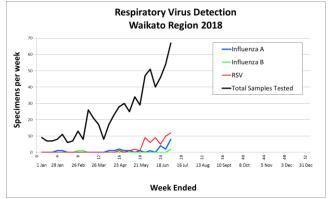
2018 Immunisation Workshop

IMAC will be holding their annual Immunisation Workshop on Thursday 13 September at Naumi Auckland Airport Hotel. Registration is open at www.immune.org.nz/2018-immunisation-workshop.

Influenza season and vaccine

While it has been anticipated this year's influenza season may be as severe as it was in the Northern hemisphere there has been a slow start to the season according to influenza surveillance. It is important that this does not lead to complacency so we urge Practices to recall their eligible patients (including children) for this year's influenza vaccination.

The Waikato Respiratory Virus Report (lab surveillance) for the week to 1 July 2018 notes that Influenza A (no strain information yet) is now starting to be detected.



Stocks of Fluarix Tetra, the funded quadrivalent influenza vaccine approved for children younger than 3 years of age, have run out – Influvac (trivalent) vaccine is now funded for eligible children in this age group. The Influvac (trivalent) dose for children aged under 3 years is 0.25mls (ie a half dose). This vaccine contains the WHO approved strains for the 2018 season - the same strains of influenza A as the quadrivalent vaccine, and one strain of influenza B. Children under 3 years of age who have not received influenza vaccine in previous years, and have received one dose of Fluarix Tetra this year, may be given Influvac (trivalent) for their second dose.

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