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

The 289 notifications of pertussis infection in this reporting period represent a further fall compared to historical figures which are high because of the large epidemic that occurred from mid 1996 to early 1998. When examined by month of onset, April is historically the month with the lowest number of cases. The number of pertussis cases with onset in April 1999 is the lowest since April 1993 (Figure 1). The male to female ratio for the current reporting period is 1:1.2 and most cases are in the 10-14 age group (12%) although there is a broad spread of age distribution with considerable activity across the range. Most notifications in this reporting period are from Queensland (122) and 55% of these are in the 20 to 49 year age groups. Figure 2 shows a comparative age distribution for the current and previous 4 week reporting periods and 5 years of historical data from 1 July 1994 to 30 June 1999.

Figure 1. Notifications of pertussis, Australia, 1991 to 1999, by month of onset

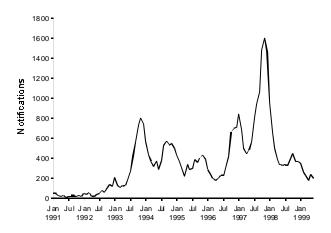
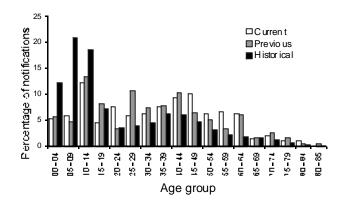


Figure 2. Notifications of pertussis, Australia, by age group, current and previous reporting periods and 5 years' historical data to 30 June 1999



Measles and rubella

Small numbers of notifications continue to occur although they continue to be low compared to historical data.

CDI Vol 23. No 8 5 August 1999