

Table 5. Australian Sentinel Practice Research Network reports, weeks 25 to 28, 1999

| Week number | 25 | | 26 | | 27 | | 28 | |
|-----------------------------|----------------|------------|----------------|------------|----------------|------------|----------------|------------|
| Week ending on | 27 June 1999 | | 4 July 1999 | | 11 July 1999 | | 18 July 1999 | |
| Doctors reporting | 49 | | 47 | | 49 | | 48 | |
| Total encounters | 6,457 | | 6,087 | | 6,496 | | 6,289 | |
| Condition | Rate per 1,000 | | Rate per 1,000 | | Rate per 1,000 | | Rate per 1,000 | |
| | Reports | encounters | Reports | encounters | Reports | encounters | Reports | encounters |
| Influenza | 67 | 10.4 | 78 | 12.8 | 91 | 14.0 | 87 | 13.8 |
| Rubella | 0 | 0.0 | 1 | 0.2 | 2 | 0.3 | 0 | 0.0 |
| Measles | 1 | 0.2 | 0 | 0.0 | 0 | 0.0 | 1 | 0.2 |
| Chickenpox | 10 | 1.5 | 4 | 0.7 | 7 | 1.1 | 13 | 2.1 |
| New diagnosis of asthma | 14 | 2.2 | 9 | 1.5 | 13 | 2.0 | 12 | 1.9 |
| Post operative wound sepsis | 3 | 0.5 | 10 | 1.6 | 11 | 1.7 | 10 | 1.6 |
| Gastroenteritis | 67 | 10.4 | 40 | 6.6 | 52 | 8.0 | 60 | 9.5 |

The NNDSS is conducted under the auspices of the Communicable Diseases Network Australia New Zealand. The system coordinates the national surveillance of more than 40 communicable diseases or disease groups endorsed by the National Health and Medical Research Council (NHMRC). Notifications of these diseases are made to State and Territory health authorities under the provisions of their respective public health legislations. De-identified core unit data are supplied fortnightly for collation, analysis and dissemination. For further information, see CDI 1999;23:55.

LabVISE is a sentinel reporting scheme. Twenty-one laboratories contribute data on the laboratory identification of viruses and other organisms. Data are collated and published in Communicable Diseases Intelligence every four weeks. These data should be interpreted with caution as the number and type of reports received is subject to a number of biases. For further information, see CDI 1999;23:58.

ASPEN currently comprises about 100 general practitioners from throughout the country. Up to 9,000 consultations are reported each week, with special attention to 12 conditions chosen for sentinel surveillance in 1999. CDI reports the consultation rates for seven of these. For further information, including case definitions, see CDI 1999;23:55-56.

Additional Reports

National Influenza Surveillance, 1999

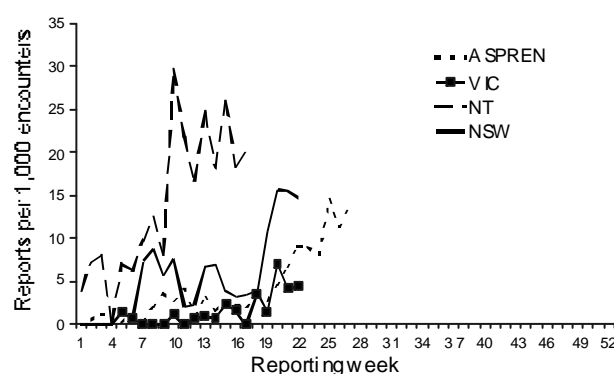
Three types of data are included in National Influenza Surveillance, 1999. These are sentinel general practitioner surveillance conducted by the Australian Sentinel Practice Research Network, Department of Human Services (Victoria), Department of Health (New South Wales) and the Tropical Influenza Surveillance Scheme, Territory Health (Northern Territory); laboratory surveillance data from the Communicable Diseases Intelligence Virology and Serology Laboratory Reporting Scheme, LabVISE, and the World Health Organization Collaborating Centre for Influenza Reference and Research; and absenteeism surveillance conducted by Australia Post. For further information about these schemes, see CDI 1999; 23:56.

Sentinel general practitioner surveillance

An increase in consultation rates for influenza-like illness reported by the ASPREN, NSW and Victorian schemes was apparent in April. Rates for influenza-like illness recorded by ASPREN were lower this year than for the same period in 1998. In contrast, the consultation rates for

influenza activity reported by the Tropical Influenza

Figure 4. Sentinel general practitioner influenza consultation rates, 1999, by scheme and week

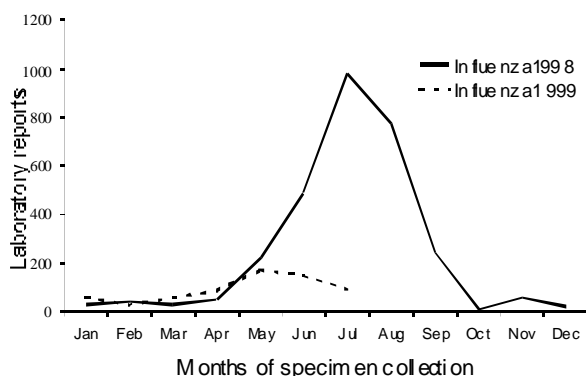


Surveillance Scheme showed higher rates from March to June than for the same period in 1998. Victorian rates were similar to those recorded for the corresponding period in 1998.

Laboratory surveillance

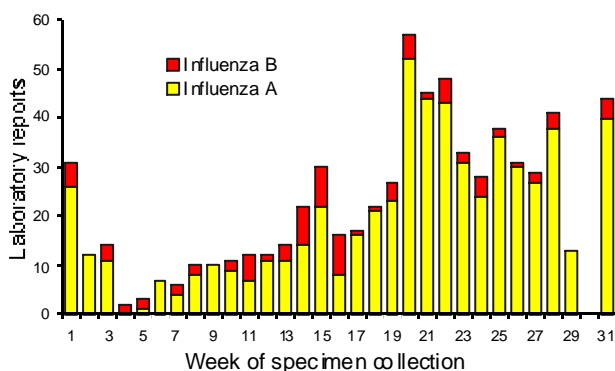
Figure 5 shows the number of laboratory reports for 1998 and 1999. Data for 1999 is provided only for January to July. For the year to date there have been 735 laboratory reports of influenza.

Figure 5. Laboratory reports of influenza, 1998-99, by month of specimen collection



To July 1999, there have been 649 (88.3%) reports of influenza A of which 17 were H3N2 and 2 were H1N1 (Figure 6). There were 86 (11.7%) reports of influenza B. To date there has been no lodging of influenza reports in week 30.

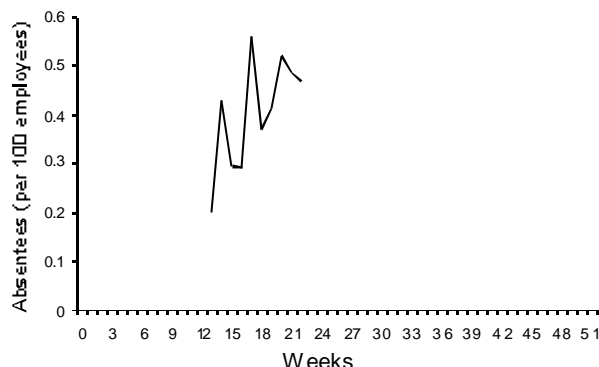
Figure 6. Laboratory reports of influenza, 1999, by type and by week of specimen collection



Absenteeism surveillance

Australia Post reports employees absent if they are not at work for three or more consecutive days in one week. The average rates for May were 0.45% which is higher than for May 1998 (0.28%) (Figure 7). There are no changes in the reports of absenteeism since the previous report.

Figure 7. Absenteeism rates in Australia Post, 1999



Sentinel Chicken Surveillance Programme

Sentinel chicken flocks are used to monitor flavivirus activity in Australia. The main viruses of concern are Murray Valley encephalitis (MVE) and Kunjin which cause the potentially fatal disease Australian encephalitis in humans. Currently 26 flocks are maintained in the north of Western Australia, seven in the Northern Territory, nine in New South Wales and ten in Victoria. The flocks in Western Australia and the Northern Territory are tested year round but those in New South Wales and Victoria are tested only from November to March, during the main risk season.

Results are coordinated by the Arbovirus Laboratory in Perth and reported bimonthly. For more information see CDI 1999;23:57-58

AK Broom,¹ JS Mackenzie,² L Melville,³ DW Smith⁴ and PI Whelan⁵

1. Department of Microbiology, The University of Western Australia
2. Department of Microbiology, The University of Queensland
3. Berrimah Agricultural Research Centre, Northern Territory
4. PathCentre, Western Australia
5. Department of Health and Community Services, Northern Territory

May/June 1999

Sentinel chicken serology was carried out for 24 of the 27 flocks in Western Australia in May and June 1999. There were again a large number of seroconversions to flaviviruses in the Kimberley, Pilbara and Gascoyne flocks during this period. Twenty-five of the total 34 seroconversions occurred in May 1999. The number of chickens positive for flavivirus antibodies by ELISA and the virus (or viruses) they were infected with is shown in Table 6.

Serum samples from six of the seven Northern Territory sentinel chicken flocks were tested in our laboratory in May and June 1999. There were seroconversions to flaviviruses at Howard Springs and Leanyer (Darwin area) and from Beatrice Hill Farm and Tennant Creek. The number of

Table 6. Flavivirus seroconversions in Western Australian sentinel chicken flocks in May and June, 1999

| Location | May 1999 | | | June 1999 |
|------------------|----------|-----|---------|-----------|
| | MVE | KUN | MVE/KUN | MVE |
| Kimberley | | | | |
| Kalumburu | | 1 | 1 | |
| Wyndham | 1 | | | |
| Kununurra | 1 | | | |
| Fitzroy Crossing | 4 | | | |
| Lombadina | 1 | 1 | | |
| Derby* | 2 | | | |
| Broome* | 2 | | | |
| Pilbara | | | | |
| Port Hedland | | | | 1 |
| Karratha | | 1 | | 1 |
| Harding Dam* | | | | 3 |
| Tom Price | 1 | | | |
| Paraburdoo | 2 | | | 1 |
| Newman* | | | 1 | |
| Exmouth | 3 | | | 3 |
| Gascoyne | | | | |
| Camarvon | 3 | | | |

* 2 flocks of 12 chickens at these sites

MVE Antibodies to Murray Valley encephalitis virus detected by ELISA
 KUN Antibodies to Kunjin virus detected by ELISA
 MVE/KUN Antibodies to both MVE and KUN viruses detected by ELISA
 FLAVI Antibodies to a flavivirus only (not MVE or KUN) detected by ELISA

chickens positive for flavivirus antibodies by ELISA and the virus (or viruses) they were infected with is shown in Table 7. Seroconversions to MVE virus from Tennant Creek in May have not yet been confirmed.

Details of the locations of all chicken flocks are given in *CDI* 1999;23:57-58

Table 7. Flavivirus seroconversions in the Northern Territory sentinel chicken flocks in May and June, 1999

| Location | May 1999 | | June 1999 | | | |
|----------------|----------|-----|-----------|-----|---------|-------|
| | MVE | KUN | MVE | KUN | MVE/KUN | FLAVI |
| Howard Springs | 1 | | | | | |
| Leanyer | | 1 | | 1 | 1 | 1 |
| Beatrice Hill | 3 | | 2 | | | |
| Tennant Creek | 2 | | | | | |

MVE Antibodies to Murray Valley encephalitis virus detected by ELISA
 KUN Antibodies to Kunjin virus detected by ELISA
 MVE/KUN Antibodies to both MVE and KUN viruses detected by ELISA
 FLAVI Antibodies to a flavivirus only (not MVE or KUN) detected by ELISA

HIV and AIDS Surveillance

National surveillance for HIV disease is coordinated by the National Centre in HIV Epidemiology and Clinical Research (NCHECR), in collaboration with State and Territory health authorities and the Commonwealth of Australia. Cases of HIV infection are notified to the National HIV Database on the first occasion of diagnosis in Australia, by either the diagnosing laboratory (ACT, New South Wales, Tasmania, Victoria) or by a combination of laboratory and doctor sources (Northern Territory, Queensland, South Australia, Western Australia). Cases of AIDS are notified through the State and Territory health authorities to the National AIDS Registry. Diagnoses of both HIV infection and AIDS are notified with the person's date of birth and name code, to minimise duplicate notifications while maintaining confidentiality.

Tabulations of diagnoses of HIV infection and AIDS are based on data available three months after the end of the reporting interval indicated, to allow for reporting delay and to incorporate newly available information. More detailed information on diagnoses of HIV infection and AIDS is published in the quarterly *Australian HIV Surveillance Report*, and annually in *HIV/AIDS and related diseases in Australia Annual Surveillance Report*. The reports are available from the National Centre in HIV Epidemiology and Clinical Research, 376 Victoria Street, Darlinghurst NSW 2010. Telephone: (02) 9332 4648; Facsimile: (02) 9332 1837; <http://www.med.unsw.edu.au/nchechr>.

HIV and AIDS diagnoses and deaths following AIDS reported for 1 to 31 March 1999, as reported to 30 June 1999, are included in this issue of *CDI* (Tables 8 and 9).

Table 8. New diagnoses of HIV infection, new diagnoses of AIDS and deaths following AIDS occurring in the period 1 to 31 March 1999, by sex and State or Territory of diagnosis

| | | | | | | | | | | Totals for Australia | | | |
|----------------|--------------------|-----|-----|----|-----|----|-----|-----|----|----------------------|------------------|-------------------|-------------------|
| | | ACT | NSW | NT | Qld | SA | Tas | Vic | WA | This period 1999 | This period 1998 | Year to date 1999 | Year to date 1998 |
| HIV diagnoses | Female | 0 | 3 | 0 | 2 | 0 | 0 | 1 | 2 | 8 | 10 | 18 | 20 |
| | Male | 0 | 35 | 1 | 9 | 1 | 0 | 10 | 3 | 59 | 66 | 138 | 184 |
| | Sex not reported | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 0 | 1 | 0 | 2 | 2 |
| | Total ¹ | 0 | 38 | 1 | 11 | 1 | 0 | 12 | 5 | 68 | 76 | 158 | 206 |
| AIDS diagnoses | Female | 0 | 1 | 0 | 0 | 0 | 0 | 0 | 0 | 1 | 1 | 2 | 3 |
| | Male | 0 | 5 | 0 | 1 | 0 | 0 | 0 | 0 | 6 | 20 | 20 | 72 |
| | Total ¹ | 0 | 6 | 0 | 1 | 0 | 0 | 0 | 0 | 7 | 21 | 22 | 75 |
| AIDS deaths | Female | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 0 | 2 | 2 | 3 |
| | Male | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 4 | 8 | 25 | 34 |
| | Total ¹ | 0 | 0 | 0 | 0 | 0 | 0 | 4 | 0 | 4 | 10 | 26 | 37 |

1. Persons whose sex was reported as transgender are included in the totals.

Table 9. Cumulative diagnoses of HIV infection, AIDS and deaths following AIDS since the introduction of HIV antibody testing to 30 June 1999, by sex and State or Territory

| | | State or Territory | | | | | | | | Australia |
|----------------|--------------------|--------------------|--------|-----|-------|-----|-----|-------|-----|-----------|
| | | ACT | NSW | NT | Qld | SA | Tas | Vic | WA | |
| HIV diagnoses | Female | 23 | 587 | 8 | 134 | 57 | 5 | 202 | 107 | 1,123 |
| | Male | 188 | 10,569 | 105 | 1,888 | 652 | 77 | 3,775 | 878 | 18,132 |
| | Sex not reported | 0 | 258 | 0 | 0 | 0 | 0 | 26 | 0 | 284 |
| | Total ¹ | 211 | 11,433 | 113 | 2,029 | 709 | 82 | 4,016 | 988 | 19,581 |
| AIDS diagnoses | Female | 8 | 171 | 0 | 46 | 21 | 3 | 67 | 26 | 342 |
| | Male | 85 | 4,526 | 34 | 792 | 327 | 44 | 1,586 | 344 | 7,738 |
| | Total ¹ | 93 | 4,709 | 34 | 840 | 348 | 47 | 1,660 | 372 | 8,103 |
| AIDS deaths | Female | 2 | 113 | 0 | 30 | 15 | 2 | 47 | 16 | 225 |
| | Male | 63 | 3,126 | 24 | 554 | 225 | 28 | 1,246 | 245 | 5,511 |
| | Total ¹ | 65 | 3,247 | 24 | 586 | 240 | 30 | 1,299 | 262 | 5,753 |

1. Persons whose sex was reported as transgender are included in the totals.

Childhood Immunisation Coverage

Tables 10 and 11 provide the latest quarterly report on childhood immunisation coverage from the Australian Childhood Immunisation Register (ACIR).

The data show the percentage of children fully immunised at age 12 months for the cohort born between 1 January

and 31 March 1998 and at 24 months of age for the cohort born between 1 January and 31 March 1997, according to the Australian Standard Vaccination Schedule.

A full description of the methodology used can be found in *CDI 1998;22:36-37*.

Table 10. Percentage of children immunised at 1 year of age, preliminary results by disease and State for the birth cohort 1 January to 31 March 1998; assessment date 30 June 1999

| Vaccine | State or Territory | | | | | | | | Australia |
|--|--------------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | ACT | NSW | NT | Qld | SA | Tas | Vic | WA | |
| Total number of children | 1,070 | 21,453 | 982 | 12,233 | 4,697 | 1,541 | 14,848 | 6,195 | 63,019 |
| Diphtheria, Tetanus, Pertussis (%) | 89.5 | 85.3 | 79.7 | 89.4 | 89.7 | 88.3 | 89.1 | 87.4 | 87.6 |
| Poliomyelitis (%) | 89.3 | 85.0 | 79.1 | 88.8 | 89.6 | 88.3 | 89.3 | 87.2 | 87.3 |
| Haemophilus influenzae type b (%) | 89.2 | 84.7 | 84.9 | 89.7 | 89.1 | 88.0 | 88.8 | 87.1 | 87.4 |
| Fully Immunised (%) | 88.7 | 83.5 | 77.3 | 88.0 | 88.6 | 87.7 | 87.9 | 85.9 | 86.1 |
| Change in fully immunised since last quarter (%) | +1.0 | +0.8 | +2.7 | +1.5 | +1.1 | +0.5 | +1.4 | +1.5 | +1.2 |

Table 11. Proportion of children immunised at 2 years of age, preliminary results by disease and State for the birth cohort 1 January to 31 March 1997; assessment date 30 June 1999¹

| Vaccine | State or Territory | | | | | | | | Australia |
|--|--------------------|-------------|-----------------|-------------|-------------|-------------|-------------|-------------|-------------|
| | ACT | NSW | NT ¹ | Qld | SA | Tas | Vic | WA | |
| Total number of children | 1051 | 22,006 | 946 | 11,888 | 4,628 | 1,558 | 15,454 | 6,475 | 64,006 |
| Diphtheria, Tetanus, Pertussis (%) | 86.2 | 81.3 | 67.7 | 85.5 | 83.2 | 83.6 | 83.6 | 82.0 | 82.8 |
| Poliomyelitis (%) | 88.9 | 85.6 | 79.9 | 91.0 | 88.4 | 89.5 | 89.3 | 85.3 | 87.7 |
| Haemophilus influenzae type b (%) | 85.4 | 81.3 | 77.2 | 85.8 | 81.3 | 83.3 | 83.6 | 82.2 | 82.8 |
| Measles, Mumps, Rubella (%) | 89.7 | 85.9 | 81.8 | 90.9 | 88.0 | 89.0 | 88.6 | 86.7 | 87.8 |
| Fully Immunised (%)² | 81.4 | 70.4 | 57.8 | 80.3 | 71.6 | 74.8 | 74.7 | 70.5 | 73.5 |
| Change in fully immunised since last quarter (%) | +3.7 | +3.5 | +3.2 | +2.8 | +3.5 | +3.2 | +2.7 | +4.5 | +3.2 |

1. The 12 months age data for this cohort was published in *CDI 1998;22:233*.

2. These data relating to 2 year old children should be considered as preliminary. The proportions shown as "fully immunised" appear low when compared with the proportions for individual vaccines. This is at least partly due to poor identification of children on immunisation encounter forms.

Acknowledgment: These figures were provided by the Health Insurance Commission (HIC), to specifications provided by the Commonwealth Department of Health and Aged Care. For further information on these figures or data on the Australian Childhood Immunisation Register please contact the Immunisation Section of the HIC: Telephone 02 6124 6607.