



WEEK ENDING 31ST MAY 2015

KEY POINTS

INFLUENZA AND INFLUENZA-LIKE ILLNESSES (ILI)

Summary: Indicators of influenza-like activity increased this week, but influenza virus detections remain steady, and increases in non-influenza virus activity, particularly RSV, appear to be responsible. Influenza B virus dominates influenza activity at present.

- ILI presentations to sentinel general practitioners (GPs) and sentinel emergency departments (EDs) increased this week.
- Influenza virus detections and hospitalisations for influenza remain relatively steady.
- Influenza B constituted the majority of influenza viruses subtyped this week; influenza A/H3N2 and, to a lesser extent, influenza A/H1N1, continue to co-circulate.
- Respiratory syncytial virus activity continues to increase.

GASTROENTERITIS

- Gastroenteritis presentations to sentinel GPs and EDs continue to fluctuate within expected levels.
- Norovirus detections are fluctuating from week-to-week.

VARICELLA AND VIRAL RASHES

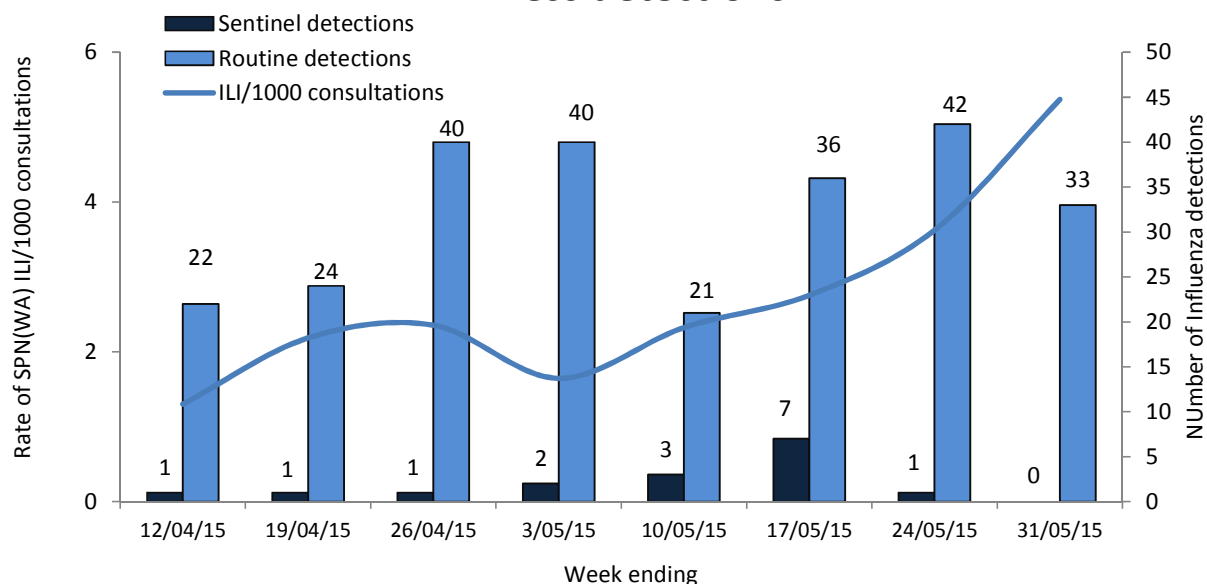
- Shingles presentations to sentinel GPs and EDs are above baseline level.
- Chickenpox presentations are low.
- No cases of measles or rubella were confirmed this week.
- Several additional cases of mumps have been confirmed as part of an outbreak in highly vaccinated Aboriginal children in the Kimberley region, with spread to boarding schools in Perth and Esperance.

Current and archived issues of Virus Watch http://www.public.health.wa.gov.au/3/487/3/virus_watch.pm

Virus Watch is a weekly electronic publication by the Communicable Disease Control Directorate (CDCD) and key collaborators. It provides a brief summary of General Practice and Hospital Emergency Department sentinel surveillance data on influenza-like illness, gastroenteritis and varicella-zoster disease, together with relevant laboratory information, to alert health care workers in WA to important circulating viruses. General Practice data are collected by members of the Sentinel Practitioners Network of Western Australia - SPN(WA). Emergency Department data are provided by the Emergency Department Information System (EDIS), which incorporates data from the following hospitals: Fiona Stanley Hospital, Royal Perth Hospital, Princess Margaret Hospital, King Edward Memorial Hospital, Bunbury Hospital, Armadale Hospital, Joondalup Health Campus, Swan District Hospital and Rockingham General Hospital. Viral laboratory data are obtained from PathWest laboratories at QEII Medical Centre and Princess Margaret Hospital for Children, as well as via notification data sent by all WA laboratories to CDCD, WA Department of Health. All figures and data were accurate at time of publication, but subject to change.

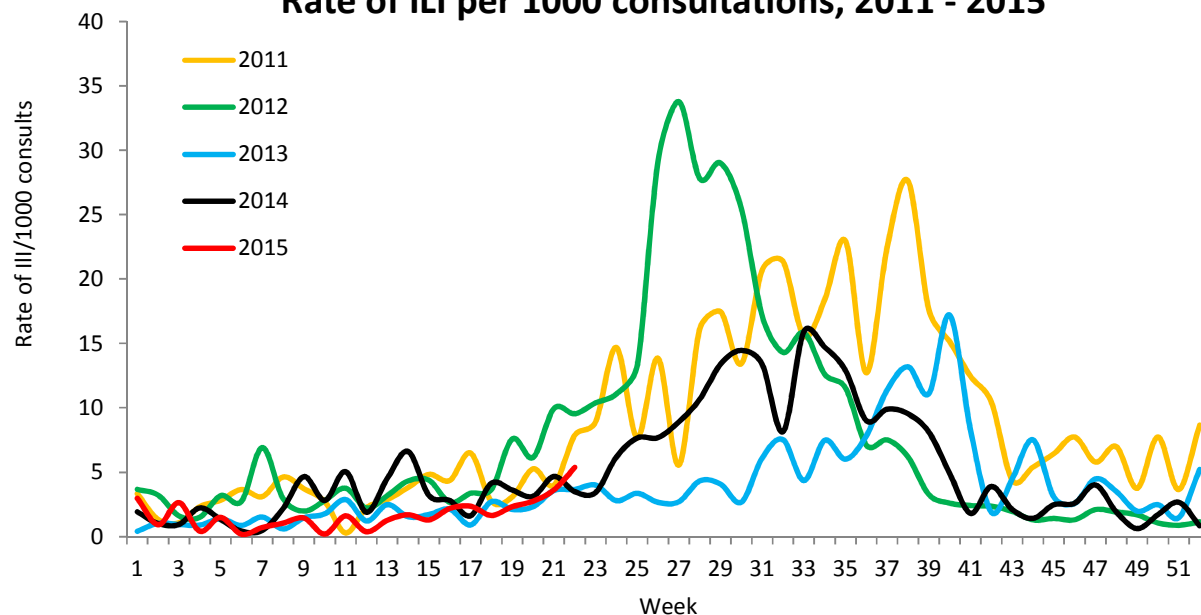
Influenza and Influenza-like Illnesses

Sentinel and Routine Influenza and Influenza-like-Illness detections



The rate of ILI seen at sentinel GPs increased this week. Of 364 routinely collected specimens, 33 (9%) tested positive for influenza virus; 24 specimens were collected at sentinel GP sites, none of which tested positive for influenza virus.

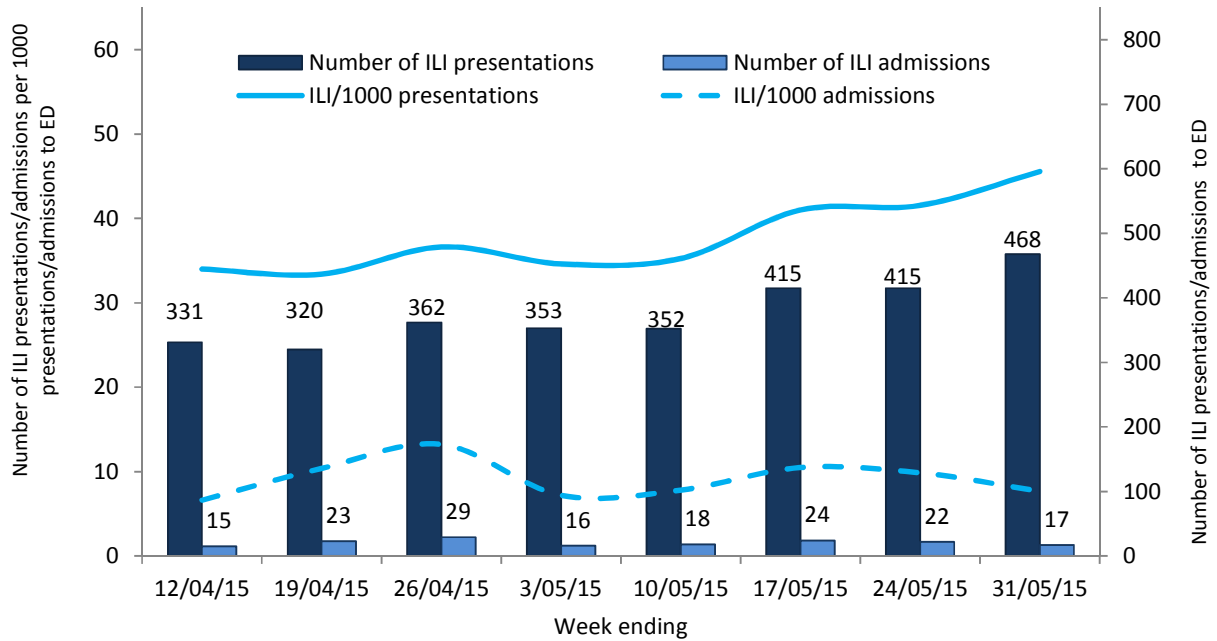
Sentinel Practitioner Network of WA - GP surveillance Rate of ILI per 1000 consultations, 2011 - 2015



The rate of ILI presentations to SPN(WA) GPs increased this week and is in the mid-range of values for presentations during this time period in recent years.

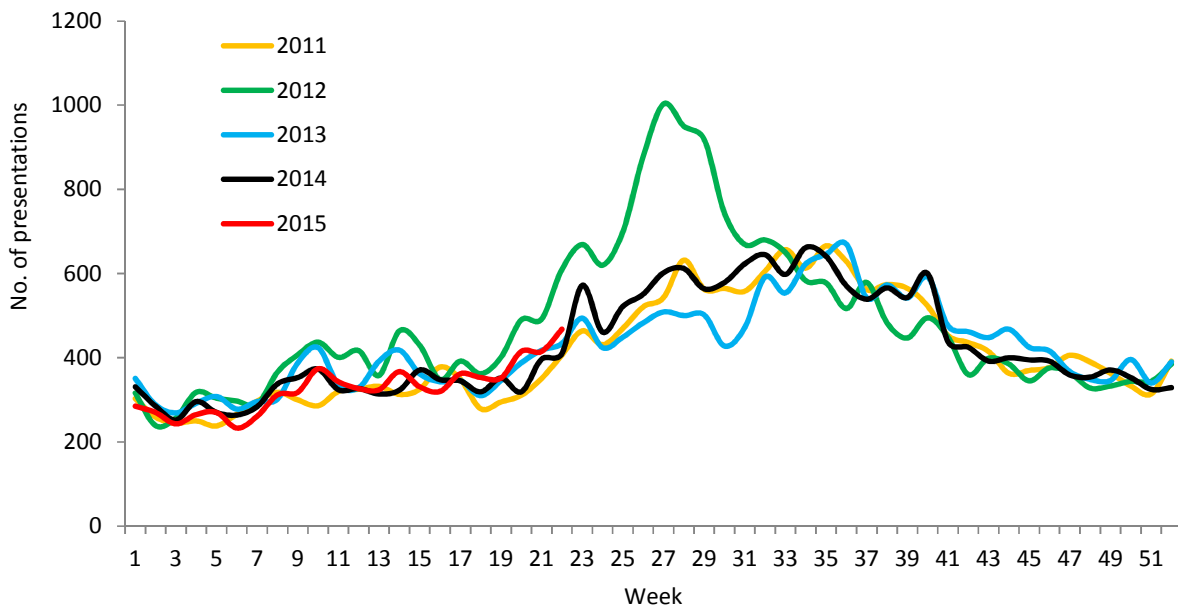
The following is a summary of current Emergency Department sentinel surveillance (EDSS) data for respiratory viral presentations.

Viral Respiratory ED Presentations and Admissions



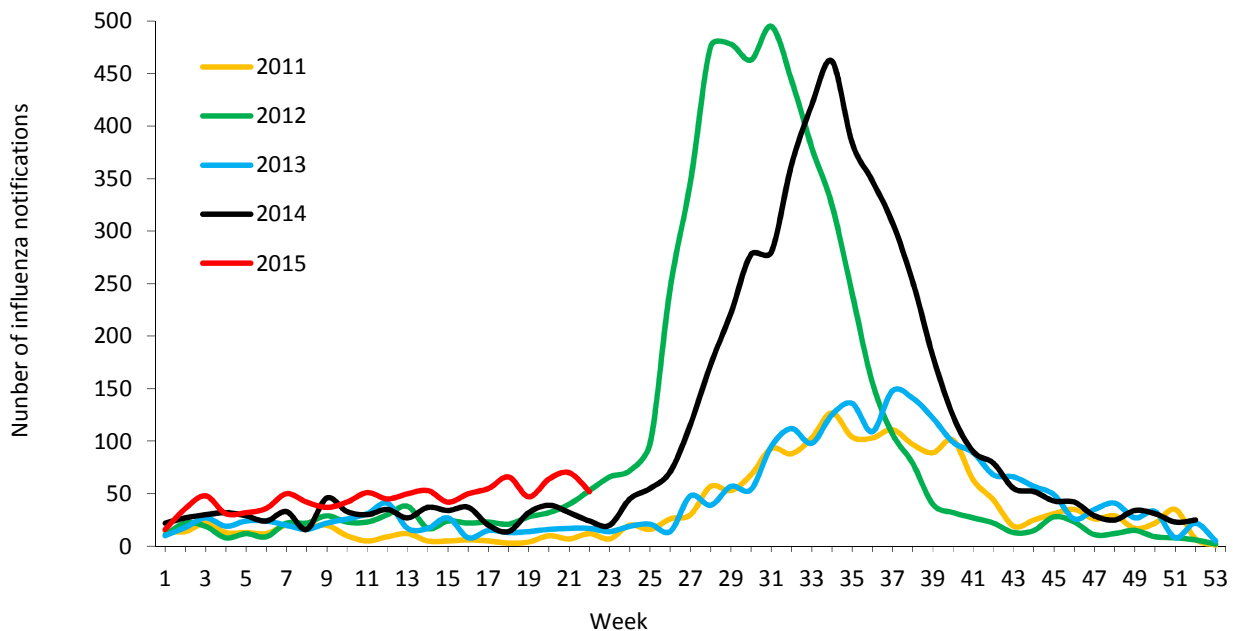
Presentations to sentinel EDs for viral respiratory illness increased this week.

ED Respiratory Viral Presentations, 2011 - 2015



The number of respiratory viral infection presentations to sentinel EDs is within the range of values seen during this time period in recent years.

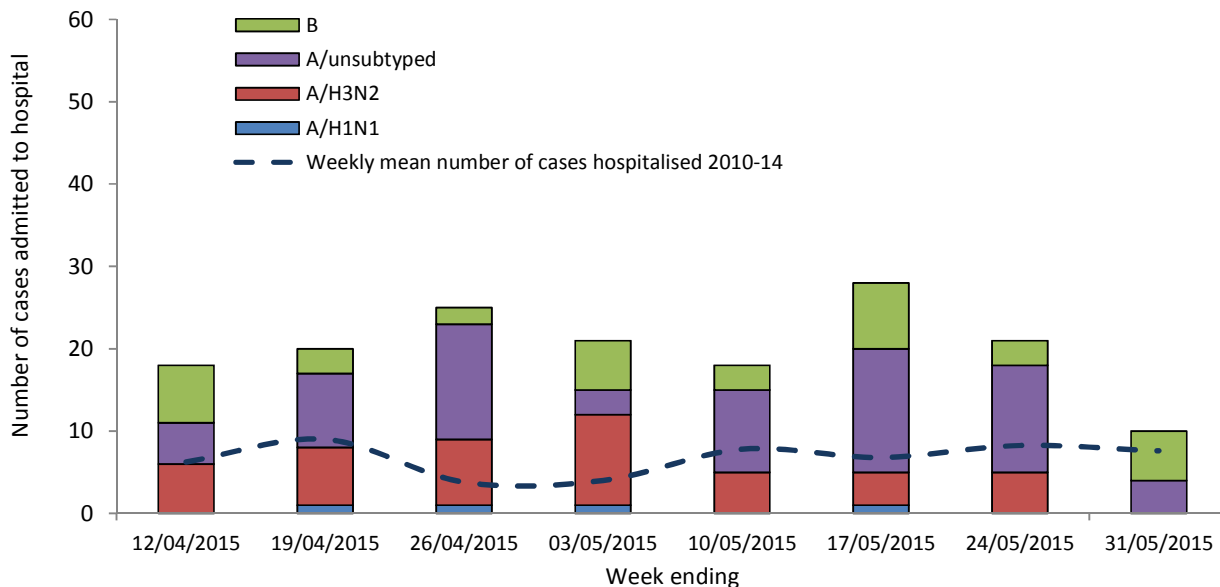
Influenza notifications in Western Australia by week, 2011 to 2015



Influenza notifications received by the Department of Health are slightly higher than previous years, but do not yet appear to be trending upwards. There were 52 notifications for influenza this week.

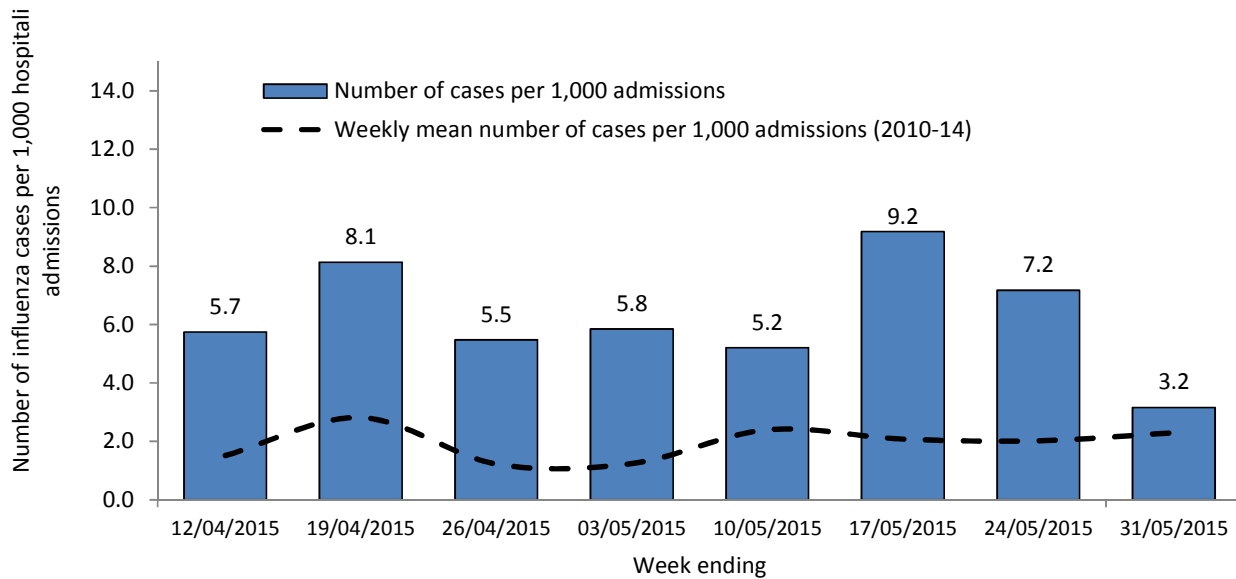
The graph is a summary of all influenza notifications received by the DoH, Western Australia to the end of the current reporting week, for which cases had date of symptom onset or specimen collection between 25/05/2015 and 31/05/2015.

Number of influenza cases hospitalised



Ten notified influenza cases were hospitalised in the past week; 4 (40%) with influenza A/unsubtyped and 6 (60%) with influenza B.

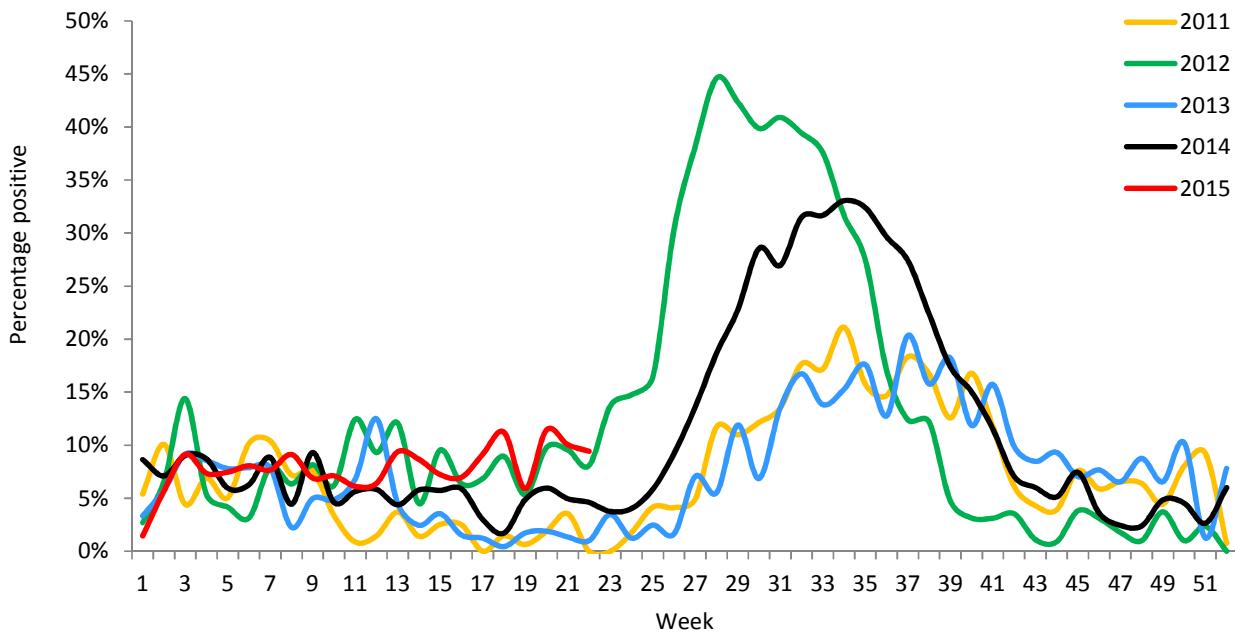
Influenza cases per 1000 hospital admissions



The proportion of hospital admissions notified as having laboratory-confirmed influenza remains relatively steady but above the average proportion seen during this time period in previous years.

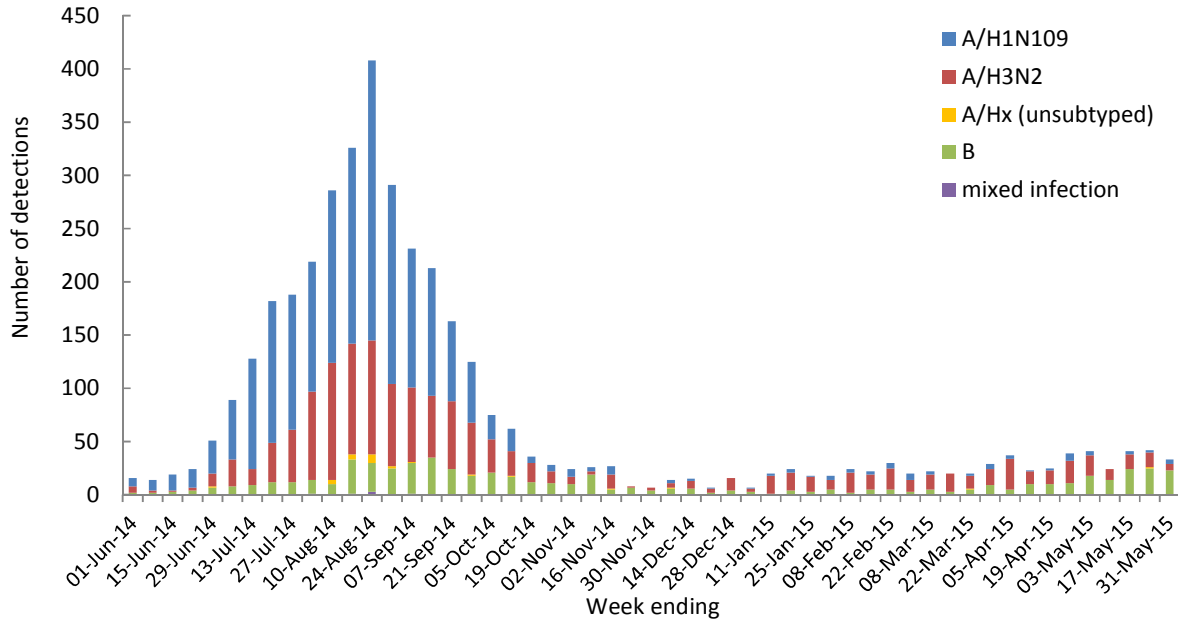
The graph is a summary of influenza notifications received by the DoH who were recorded as having a hospital admission, expressed per 1,000 admissions.

PathWest-QEII-PMH influenza percentage positive 2011- 2015



Among samples tested at PathWest this week, 9.4% were positive for influenza virus, which is at the upper margin of levels for this time period in recent years.

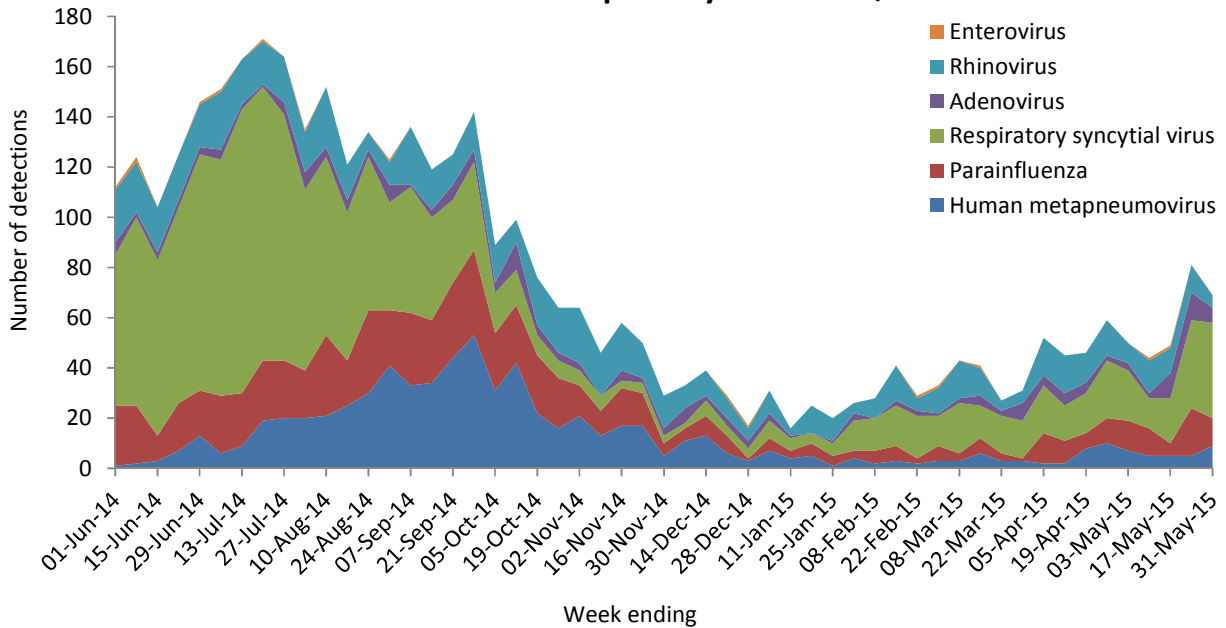
PathWest-QEII-PMH 2014-2015 all influenza subtypes



Thirty three influenza viruses were subtyped by PathWest, QEII and PMH during this reporting week; 6 (18%) were influenza A/H3N2, 4 (12%) were influenza A/H1N1, and 23 (70%) were influenza B.

The graph is a summary of all samples that have been recorded as subtyped at PathWest QEII as of 12.01am Wednesday 3rd June 2015. The number subtyped may not always correspond to the number of influenza detections.

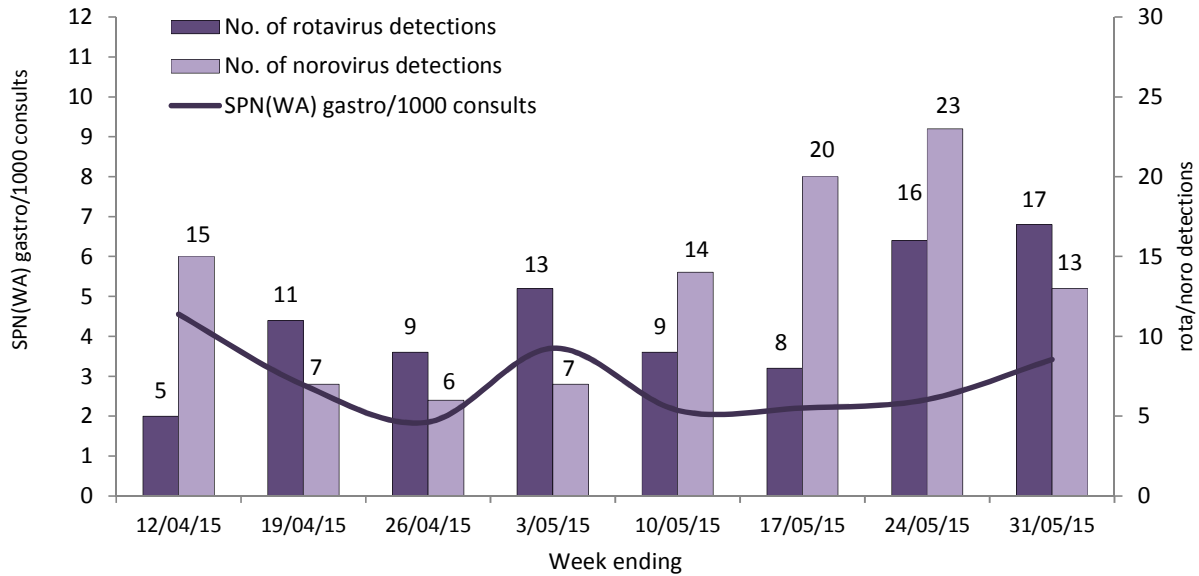
2014-2015 Non-influenza respiratory viruses - QEII and PMH



Respiratory syncytial virus activity continues to increase; other non-influenza respiratory virus activity remains stable.

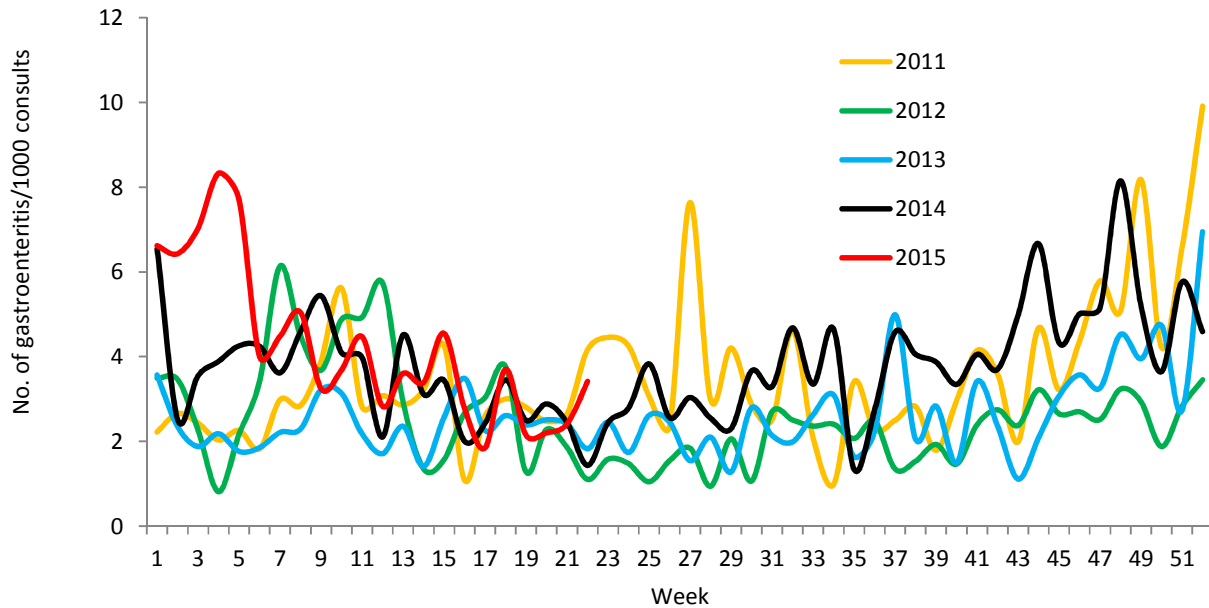
Gastroenteritis

Gastroenteritis GP Presentations



Gastroenteritis presentations to SPN(WA) remain near 3 presentations per 1,000 consultations. Norovirus detections continue to fluctuate; rotavirus detections were similar to last week.

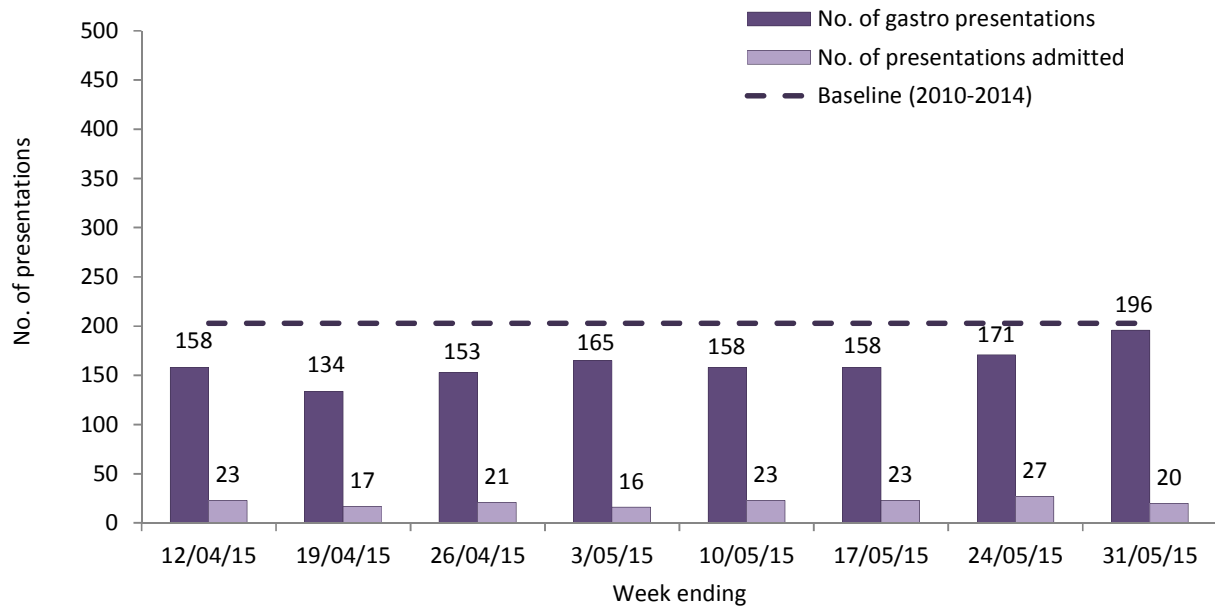
Sentinel Practitioner's Network of WA SPN(WA) - GP surveillance Rate of gastroenteritis per 1000 consultations, 2011 - 2015



The rate of gastroenteritis presentations to sentinel GPs continues to fluctuate within expected levels.

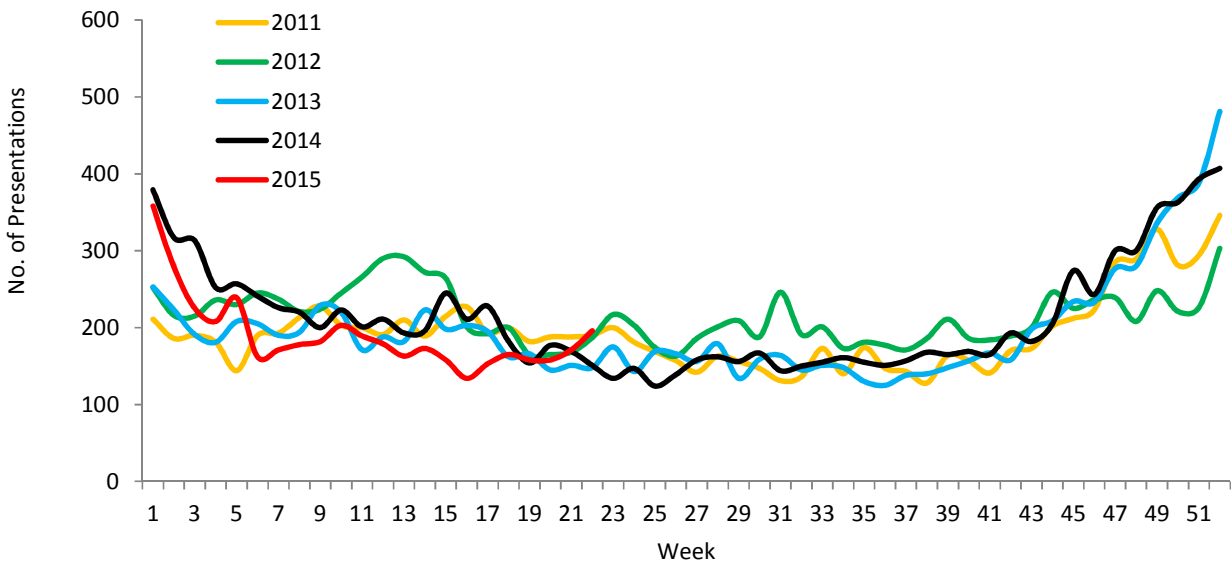
The following is a summary of current Emergency Department Sentinel Surveillance (EDSS) data for gastroenteritis presentations. Baseline levels for gastroenteritis presentations were calculated using the mean of weekly EDIS data from week 1, 2011 to week 52, 2014.

Gastroenteritis ED Presentations



Gastroenteritis presentations to sentinel EDs increased but remain below baseline level.

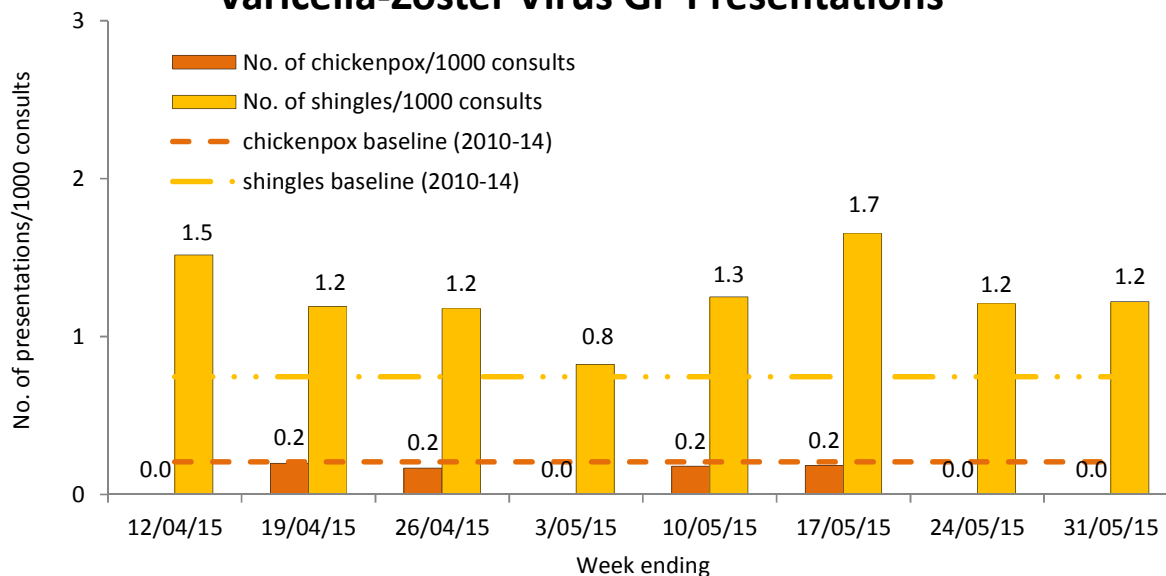
ED Gastroenteritis Presentations 2011 - 2015



The number of gastroenteritis presentations to sentinel EDs is within the expected range of values for this time period.

Viral Rashes

Varicella-Zoster Virus GP Presentations

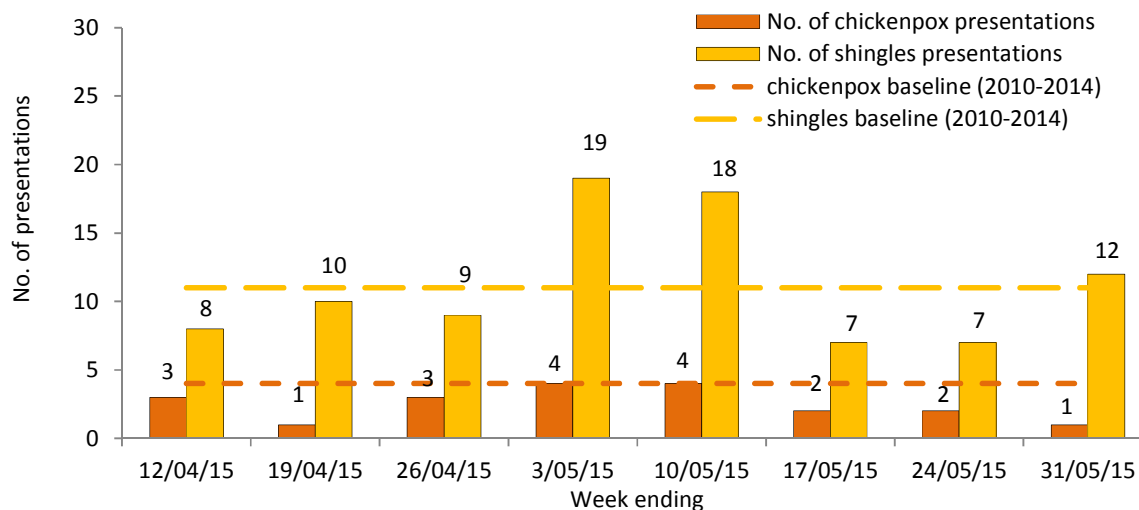


Shingles presentations to sentinel GPs remain above baseline level, but no chickenpox cases were reported this week. No measles or rubella cases were reported this week. Several additional cases of mumps have been confirmed, as part of a continuing outbreak in highly vaccinated Aboriginal children in the Kimberley region.

Baseline levels for chickenpox and shingles presentations to SPN(WA) GPs per thousand consultations were calculated using the mean of weekly WA ASPREN data from week 1, 2010 to week 52, 2014.

The following is a summary of current Emergency Department sentinel surveillance (EDSS) data for varicella-zoster virus presentations. Baseline levels for varicella-zoster virus presentations were calculated using the mean of weekly EDIS data from week 1, 2010 to week 52, 2014.

Varicella-Zoster virus ED Presentations



Chickenpox presentations to sentinel EDs remain below baseline level this week; shingles presentations increased above baseline level.