

---

## MONTHLY NOTIFIABLE DISEASE SURVEILLANCE REPORT

Data contained within this monthly report are based on information recorded on EpiSurv by Public Health Service (PHS) staff at 11 December 2018. Changes made to EpiSurv after this date will not be reflected in this report. The data are provisional and include cases that are still under investigation, some of which may become 'Not a case'. For this reason, comparisons between the current year and the previous year should be treated with caution.

---

### KEY NOTIFIABLE DISEASE TRENDS

#### Enteric Diseases

Enteric infections are the most common notifiable diseases, and several are increasing in incidence. This increase is partly due to changes in laboratory testing practices with a shift from culture methods to multiplex PCR, which tests for several diseases at the same time. This means more diseases are likely to be detected and in a more timely manner. For further information, see the [2016 Annual Notifiable Disease Report Commentary](#).

#### Group W Meningococcal Disease

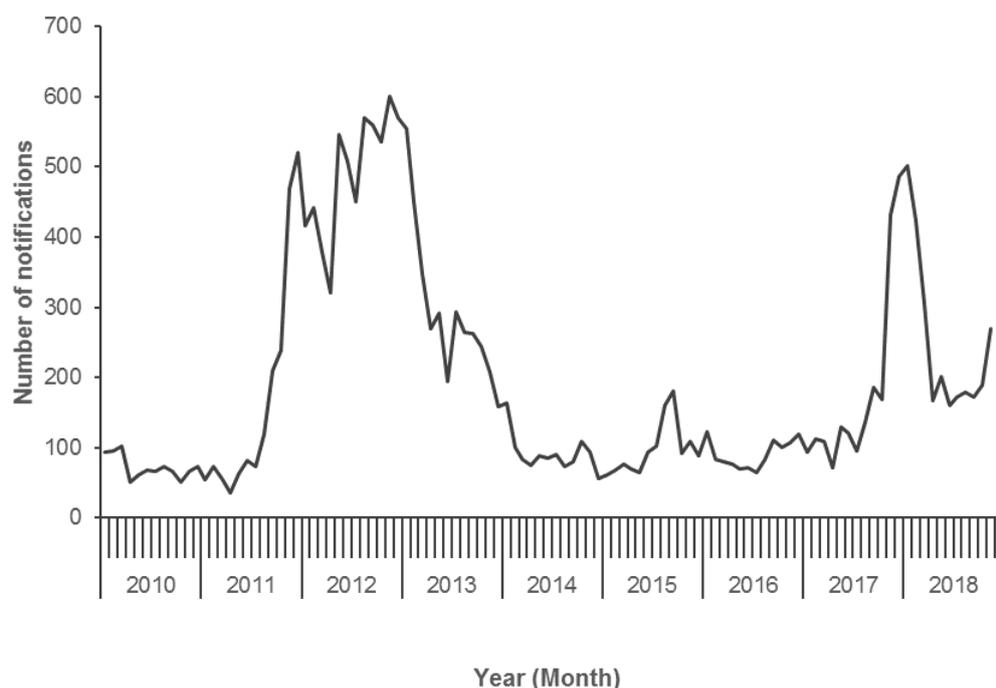
There have been 29 cases of group W meningococcal disease from January to November 2018, compared with 11 for the same period in 2017. The cases were reported from the following DHBs: Northland (7), Waitemata, Auckland (4 each), Canterbury (3), Counties Manukau, Lakes, Capital & Coast, Southern (2 each), Bay of Plenty, Whanganui and South Canterbury (1 each). Most (26) cases were hospitalised and six cases have died, giving a case fatality rate of 20.7%. There were 12 cases and three deaths due to group W reported in 2017.

A targeted vaccination programme has begun in Northland. See: <https://www.health.govt.nz/news-media/news-items/targeted-vaccination-programme-meningococcal-disease>.

#### Pertussis

There were 270 cases (184 confirmed, 60 probable, 2 suspect and 24 under investigation) of pertussis notified in November 2018, compared with 431 cases for the same month in 2017. While pertussis cases have decreased since the peak in January 2018 there has been a significant increase in the last month (compared to 189 cases in October). This is expected, and a similar trend can be seen in the 2012 outbreak (Figure 1). A national outbreak is ongoing. For more information see the latest [Pertussis Report](#).

**Figure 1. Pertussis notifications by month, January 2010–November 2018**



## Taeniasis

Two cases of taeniasis were notified in November 2018. The cases were aged 20-29 years and both had recently been in Ethiopia where their exposure had occurred.

---

## OUTBREAKS

### Norovirus

Twelve norovirus outbreaks (8 finalised and 4 interim) were reported in November 2018 involving 180 cases. The setting was recorded for 10 outbreaks and the most commonly reported settings were long term care facilities (4 outbreaks) and schools (3 outbreaks).

### Measles

Southern DHB are investigating an outbreak of measles involving three cases. While none of the cases have an overseas travel history, it is suspected that the first case was exposed to an undiagnosed infectious traveller. The two other cases are work colleagues of the first case.

---

## TABLES

Tables for November are available as Excel files on the [Public Health Surveillance website](#).