
MONTHLY NOTIFIABLE DISEASE SURVEILLANCE REPORT

Data contained within this monthly report are based on information recorded on EpiSurv by Public Health Service (PHS) staff as at 12 April 2021. 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

Campylobacteriosis

There were 406 cases of campylobacteriosis reported in March 2021 (391 confirmed, 2 probable and 13 under investigation) compared with 267 cases in March 2020, and 387 cases in March 2019. The lower number of cases seen in March 2020 coincides with New Zealand introducing stringent measures against COVID-19, such as social distancing, increased hygiene practices, working from home and children not attending school or pre-school. All of these measures are also likely to prevent the spread of other infectious diseases.

COVID-19

There were 122 cases of COVID-19 reported in March 2021 (120 confirmed and 2 under investigation) compared with 743 for the same month in 2020. Of the 120 confirmed cases, 114 (95.0%) were in managed isolation/quarantine (MIQ) facilities at the time of diagnosis, four were historical community cases, one was an [MIQ worker](#) and one was an [airline crew member](#). One case was hospitalised, and no deaths were reported. More information can be found on the [ESR COVID-19 dashboard](#).

Haemophilus influenzae serotype b disease

A case of *Haemophilus influenzae* serotype b disease was reported in March 2021. The case was aged 1–4 years, unvaccinated, and lives in a Christian community that experienced an outbreak in December 2020.

Legionellosis

There were 23 cases of legionellosis reported in March 2021 (19 confirmed and 4 under investigation), compared with eight cases for the same month in 2020. The serogroup was identified in 18 of the confirmed cases and nine were due to *Legionella longbeachae* (commonly found in soil and potting mix), eight were due to *L. pneumophila* (which is usually found in warm water and transmitted by inhalation of contaminated aerosols), and one was due to *L. micdadei*. One death was reported in a case aged over 70 years (see below).

OUTBREAKS

Legionellosis

An outbreak of legionellosis was reported from Waitemata DHB in March 2021, involving three cases who were on a rail and bus tour of the central North Island and Taranaki. Two of the cases were confirmed as *Legionella pneumophila*. All three cases were aged over 70 years and one died. Environmental sampling from a number of sites visited by the tour group did not identify a source.

Salmonellosis

An increase in *Salmonella* Enteritidis sequence type 11 cases, belonging to a genomic cluster named Enteritidis_2019_C_01, was detected in March 2021. From January to March 2021, there were 23 cases reported, with the majority (69.6%, 16/23) in the Auckland region. This strain was first detected in 2019 in an outbreak associated with a restaurant in the Auckland region. Since 2019 it has been associated with four other outbreaks.

Vibrio parahaemolyticus infection

An outbreak of gastroenteritis due to *Vibrio parahaemolyticus* was reported from Nelson Marlborough DHB in March 2021, involving 17 cases (14 confirmed and 3 probable). Cases were from several DHBs, with all but two cases from the South Island. The source of the infection was consumption of raw and undercooked mussels from the Marlborough Sounds. Mussel harvesting areas were closed for non-thermal treated harvesting, and implicated mussels were removed from sale in supermarkets. MPI put out press releases on [12 March](#) and [24 March](#) warning people not to eat raw mussels.

TABLES

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