

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 10 August 2022. 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 previous years should be treated with caution.

KEY NOTIFIABLE DISEASE TRENDS

COVID-19

There were 264,858 cases of COVID-19 notified in July 2022, an increase from the 173,039 cases notified in June 2022. The BA.5 Omicron variant steadily increased in prevalence in New Zealand throughout July, replacing BA.2 as the most prevalent variant by mid-July. See the [Ministry of Health website](#) and [ESR's genomic insights report](#) for more information.

Enteric Fever

There were seven confirmed cases of enteric fever (five typhoid fever and two paratyphoid fever) notified in July 2022, compared with no cases for the same month in 2021. Five (71.4%) cases were hospitalised. All seven cases were overseas during the incubation period; five were in India, one in Nepal and one in Samoa.

Legionellosis

There were 17 cases of legionellosis (15 confirmed and 2 under investigation) notified in July 2022, compared with six cases for the same month in 2021. One death was reported in a person aged >70 years. Of the 14 confirmed cases where the species was identified, eight (57.1%) were due to *Legionella pneumophila* which is associated with warm water systems, and six (42.9%) were due to *L. longbeachae* which is associated with compost and potting mix. Information on legionellosis is available on the Ministry of Health website [here](#).

Meningococcal disease

There were 15 cases of meningococcal disease (14 confirmed and 1 probable) notified in July 2022, bringing the total for the year to date to 39, compared with 21 cases for the same period in 2021. Half (20/39) of the cases in 2022 to date were in children aged less than 5 years, of which 15 (75%) were Māori and five (25%) were Pacific peoples. The group was identified in 31 cases; 25 were group B, four were group Y and two were group W. Eleven different PorA types were identified from the group B cases, the most common was B:P1.7-12,14 (7 cases), followed by B:P1.7-2,4 (6 cases). More information is available in the [July meningococcal report](#).

Monkeypox

Two confirmed cases of monkeypox were notified in July 2022. These are the first New Zealand cases in a [multi-country outbreak](#) which began in May 2022. Both cases were overseas during the incubation period.

OUTBREAKS

Respiratory illness

There were four respiratory illness outbreaks reported in July 2022. Three outbreaks were acute respiratory infection or influenza-like illness (respiratory syncytial virus was identified in one) and one outbreak was due to COVID-19. Three outbreaks were in long-term care facilities, and one was in an early childcare centre.

Salmonella Kintambo

An outbreak of *Salmonella* Kintambo was reported in July 2022, involving three cases who had consumed sesame-based products imported from Syria. Two cases were hospitalised. Sequencing of the clinical isolates showed the cases were closely genetically related to each other and the same sequence type (ST8754) identified in a recent [European outbreak](#) linked to sesame-based products from Syria. Algota brand sesame products were [recalled on 29 July](#) and New Zealand Food Safety testing of the products has identified the presence of *Salmonella* Kintambo, *Salmonella* Amsterdam and *Salmonella* Orion.

Ongoing outbreaks

There was one case of gastroenteritis due to *Vibrio parahaemolyticus* infection notified in July 2022, bringing the total in the outbreak since 15 November 2021 to 67 cases. The outbreak has been associated with consumption of oysters, mussels, shellfish, fish and kina.

No further cases of *Salmonella* Enteritidis sequence type 11 were identified as belonging to the Enteritidis_2019_C_01 cluster in July 2022, leaving the total in the outbreak since January 2021 at 63 cases. The outbreak has been linked to poultry and eggs.

TABLES

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