

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 December 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 104,707 cases of COVID-19 notified in November 2022, compared with 66,871 in October 2022. Genomic testing from cases showed that the proportion of cases due to Omicron variant BA.5 decreased while BA.2.75 cases increased during November. At least 11% of genomes sequenced were from reinfections. SARS CoV-2 detections in wastewater plateaued in November, BA.4/BA.5 and BA.2.75 were the main variants detected in wastewater and XBC was detected for the first time. See the [Ministry of Health website](#), the [Genomics Insights Dashboard](#) and [ESR's Wastewater Report](#) for more information.

Invasive pneumococcal disease

There were 59 confirmed cases of invasive pneumococcal disease notified in November 2022, compared with 26 cases for the same month in 2021. Twelve (20.3%) were aged under 5 years, 29 (49.2%) were 5–64 years, and 18 (30.5%) were aged 65 years and over. A serotype was identified in 52/59 (88.1%) cases. The most common serotypes were 19A (56.9%, 14 cases) and 8 (26.9%, 14 cases). Three deaths were reported, one in a case aged under 5 years (serotype 19A), one aged 5–64 years (serotype 19A), and one aged 65 years and over (serotype 22F). There were five cases of serotype 19A in children aged under 5 years; the case that died was unvaccinated and the remaining four were age appropriately vaccinated with PCV10.

Monkeypox

There were seven confirmed cases of monkeypox notified in November 2022, bringing the total number of confirmed cases reported in New Zealand to 39. All seven cases notified in November acquired their infection locally.

Travel-acquired diseases

There has been an increase in the following travel-acquired diseases in November 2022 compared with the same month in 2021:

- dengue fever: nine cases in travellers from India (4 cases), Thailand, Malaysia, Nepal, the Philippines and Solomon Islands;
- enteric fever: eight cases in travellers from India (7 cases) and Fiji;
- malaria: five cases in travellers from Papua New Guinea (2 cases), Burkina Faso, Solomon Islands and Nigeria;
- chikungunya fever: four cases in travellers from India;
- hepatitis A: four cases in travellers from India (2 cases), South Africa, and Pakistan and Turkey;

- shigellosis: four cases in travellers from India, Australia, Malaysia, and Peru;
 - cholera: one case in a traveller from Pakistan;
 - leprosy: one case in a traveller from Samoa;
 - taeniasis: one case in a traveller from Laos.
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OUTBREAKS

Respiratory illness

There were three respiratory illness outbreaks reported in November 2022. Two outbreaks were due to influenza-like illness, and one was due to acute respiratory infection (rhinovirus was confirmed). Two outbreaks were in childcare centres and one was in a long-term care facility.

Ongoing outbreaks

Seven further cases of hepatitis A were linked to the outbreak associated with frozen berries, bringing the total to 31 cases. All had identical (or near identical) genetic sequence profiles to that from a hepatitis A outbreak in Sweden in 2020/2021 linked to frozen berries from Serbia. Foodstuffs Own Brands Ltd initiated a [consumer-level recall](#) in October of Pams frozen berries containing raspberries from Serbia.

TABLES

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