

## PUBLIC HEALTH BULLETIN

### Communicable diseases notified October 2009

Disease name	Oct-08	Oct-09	YTD	Disease name	Oct-08	Oct-09	YTD
Campylobacteriosis	65	63	486	Murine Typhus	0	1	1
Chemical poisoning from the environment	0	0	1	Non Seasonal influenza	0	2	178
Cryptosporidiosis	24	24	90	Paratyphoid fever	0	0	2
Dengue fever	0	0	5	Pertussis	10	31	171
Gastroenteritis / foodborne intoxication	0	0	1	Poliomyelitis	0	0	1
Gastroenteritis - unknown cause	3	1	21	Rheumatic fever - initial attack	7	1	16
Giardiasis	5	10	131	Rheumatic fever – recurrent attack	0	1	2
Haemophilus Influenza B	0	2	3	Rickettsial	0	0	1
Hepatitis A	0	1	3	Salmonellosis	9	5	87
Invasive pneumococcal disease	1	5	72	Shigellosis	0	1	7
Lead absorption	8	2	23	Tetanus	0	0	1
Legionellosis	1	0	1	Tuberculosis - treatment of latent infection	7	0	13
Leptospirosis	4	2	9	Tuberculosis disease - new case	2	2	15
Listeriosis – Perinatal	0	0	4	Tuberculosis disease - relapse or reactivation	0	0	1
Malaria	0	0	3	Tuberculosis infection - on preventive treatment	0	0	1
Measles	0	0	1	Typhoid fever	0	0	1
Meningococcal disease	0	1	8	VTEC/STEC infection	1	4	27
Mumps	0	0	6	Yersiniosis	4	1	

#### Paracetamol and immunisation – recent circular from the Immunisation Advisory Centre

Administering paracetamol before or after immunisation is common practice for many health professionals and parents, as it would appear to provide welcome relief, especially for children experiencing localised pain or generalised discomfort.

A recent study of two randomised controlled trials, which included pneumococcal and hexavalent DTaP-HepB-IPV-Hib vaccines, assessed the effect of prophylactic administration of paracetamol on fever and immunogenicity.

They found although fever was reduced, so was the antibody response to key antigens. The authors concluded that antipyretic drugs should not routinely be recommended.

The authors suggested some possible immunological mechanisms, however of more importance is the clinical and public health implications of reduced antibody concentrations with use of paracetamol. This does not mean however, that vaccination will

not be effective in someone who has been given paracetamol and there is no need to repeat doses.

IMAC recommends:

- Against routine prophylactic use of paracetamol or other antipyretics pre or post vaccination, in the absence of pain or significant discomfort.
- Infants who are uncomfortable with fever should first be managed with appropriate removal of clothing and other cooling measures such as cool drinks or tepid sponging.
- The use of paracetamol for relief of pain and significant discomfort only.

For further information [www.immune.org.nz](http://www.immune.org.nz)

#### Pertussis – call for health workers to get immunised (recent MoH update)

With a pertussis epidemic looming, it is more important than ever that babies and children get their pertussis immunisations on time, and

that health professionals who are eligible for free pertussis immunisation take up the offer.

Immunity gained from having pertussis disease or vaccination as a child does not last into adulthood. An adult health care worker who has not been immunised against pertussis in the past 10 years is a potential source of infection for the babies and young children they come into contact with.

Midwives, Plunket nurses, Well Child providers, GPs and practice nurses are eligible for the free pertussis vaccine. Vaccination vouchers are available for the first three groups.

From this month, the Ministry of Social Development's Family Start workers, and Parents as First Teachers parent educators, will also be offered vouchers for free pertussis immunisation. These groups work closely with families, particularly in low socio-economic communities, and are in frequent contact with young babies.

You can claim the immunisation benefit subsidy (IBS) for the pertussis vaccine (Boostrix™, dTap) for people in these occupational groups who have vouchers. The electronic claiming system can be used for the vaccine for adults by using the indication **dTap 11Y**.

Waikato DHB workers can get the boosterix vaccine free from Health and Safety. People who have received a tetanus/diphtheria containing vaccine within the past two years should delay receiving the Boostrix™ vaccine, unless they are at very high risk of contracting pertussis.

### **MMR uptake**

The Ministry of Health has identified the five areas with the lowest MMR coverage, and therefore the highest proportions of susceptible children. These are Northland, Waikato, Bay of Plenty, Lakes and Tairāwhiti DHBs. The first dose MMR vaccine coverage for the 15-17 months age group for Waikato was 67% in September.

While the recent outbreaks appear to be settling, there is concern the next outbreak may occur in one of these areas. We are therefore continuing to encourage efforts to increase uptake of MMR in our area.

### **Study to test pandemic influenza immunity**

A study investigating the level of immunity New Zealanders have to pandemic influenza (H1N1) will get underway this month.

Blood samples will be taken from 2500 people to see who has been exposed to pandemic influenza and developed immunity to it. This information will be used to establish how many people are still at risk of contracting the illness. This will also assist in planning for a possible second pandemic wave.

Environmental Science and Research (ESR) on behalf of the Ministry of Health are undertaking the study.

We know that many people had a mild to moderate illness as a result of pandemic influenza this winter, but a clearer picture of the general level of immunity is still needed.

A two-week pilot study is expected to begin within the next few days at a single practice in the Hutt Valley. It will be followed by a nationwide study that will run from later in November until March next year.

People randomly selected from participating general practices throughout the country will be asked to take part.

The final report is expected in May.

Dell Hood -- Anita Bell -- Felicity Dumble  
**Medical officers of health/public health  
medicine specialists**

#### **MOoH after hours 021 359 650**

If there is no answer, please contact Waikato Hospital's switchboard and ask for the on-call MOoH.

During office hours, please call:

**Population Health 07 838 2569**

#### **Email:**

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**Health protection officer (after hours) 021 999 521**

After hours help **07 839 8899**