

Waikato Public Health Bulletin

Tēnā koutou katoa. We hope you enjoy this edition of the Waikato Public Health Bulletin.

COVID-19 update

The latest COVID-19 wave driven by the BA.5 omicron variant is subsiding. Hospitalisations from COVID-19 are also decreasing, though pressure in the hospitals remains high due to high demand and staff sickness. Visiting restrictions remain in place in Waikato District hospitals, with only one support person allowed per patient.

BA.5 is the dominant variant, now making up over 90% of sequenced community cases (Figure 1). There are approximately 1400 genomes successfully sequenced each week covering 1.2% of community cases and 21% of border cases.

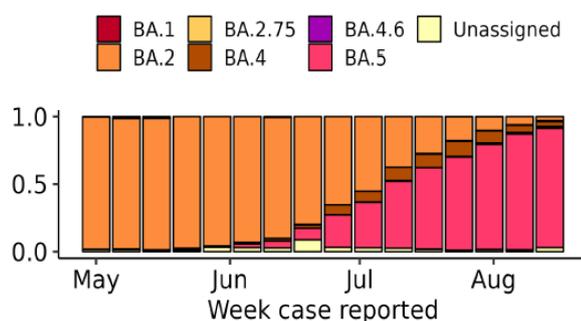


Figure 1: SARS-CoV-2 variant proportions for community cases by week. Source: MoH COVID-19 Genomics Insights Report #20.

Work is underway to develop BA.4 and BA.5 specific vaccines. Pfizer-BioNTech are evaluating BNT162b5, which contains mRNA coding for both wild-type and omicron spike protein, in a phase 2 clinical trial which has an estimated completion date of March 2023. Moderna are investigating mRNA-1273.214, which contains wild-type and BA.1 mRNA. [Interim results](#) from a phase 2/3 clinical trial

showed a strong neutralising antibody response to omicron, including BA.4 and BA.5. The [UK government has announced](#) that this vaccine will be rolled out to those at higher risk of severe illness during the UK autumn. No such announcements have been made in New Zealand.

HPV vaccinations

Human papillomavirus (HPV) is causally linked to almost all cervical cancer as well as a majority of vulval, vaginal, penile, anal, and oropharyngeal cancers. There are approximately 150 cervical cancers diagnosed each year, which cause 50 deaths per year in New Zealand.

Last year the HPV vaccination programme was disrupted due to COVID-19. This programme follows the [National Immunisation Schedule](#) which specifies 2 doses of HPV9 (Gardasil 9) to be given to people 11 or 12 years of age, which correlates with students in year 8. The Public Health Nurses who usual deliver this programme were seconded into the COVID-19 public health response. As a result, many students from Waikato schools didn't receive their second HPV vaccine in 2021.

Of the 6841 eligible Waikato children born in 2008, 4853 (69%) received their first dose of HPV, yet only 2929 (43%) have completed the recommended course. This is a cohort of 13 to 14 year olds who are unlikely to be caught up in school vaccination programme. In comparison, 69% and 63% of children born in 2007 have received their first and second dose.

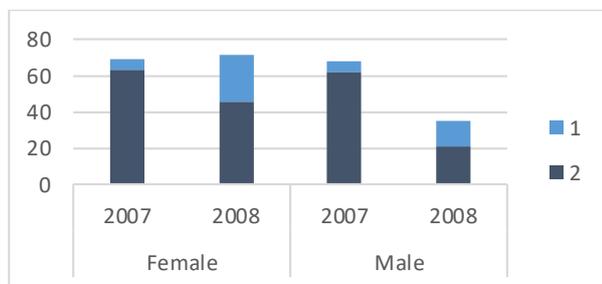


Figure 2: HPV vaccination proportion by dose, gender and cohort birth year. Source: MoH Qlik Sense Application.

The [Ministry of Health](#) recommends General Practitioners set recall reminds for children who aren't fully vaccinated at their 14th birthday. This will be particularly important over the next 1 to 2 years due to the missed school vaccinations. Students who start their course of vaccines through a school-based programme can catch up on any missed doses through their family doctor.

HPV9 (Gardasil 9) is recommended and fully funded for males and females aged 9 to under 27. Non-residents must be aged under 18 years to start a course of funded vaccines.

For those aged 14 years and under it is a two-dose schedule of HPV at 0 and 6–12 months (this is recommended for individuals who receive the first dose before their 15th birthday, even if they are 15 years or older at the time of the second dose).

Individuals aged 15-26 years receive three doses of HPV vaccine, at 0, 2 and 6 months.

For more details regarding the HPV vaccine, recommendations and schedules please see the [Immunisation Handbook](#).

Notification of Hazardous Substances Disease and Injury

A reminder that under the Health Act (1956) injuries and diseases caused by hazardous substances, poisoning suspected as arising from chemical contamination of the environment and lead absorption ≥ 0.24 micromol/L must be notified to the Medical Officer of Health.

GPs can use electronic notification systems within MedTech, Profile or My Practice to notify us. Look for 'Hazardous Substances & Lead Notifications' on the module list of the BPAC dashboard.

GP practices without these practice management systems can still notify the Public Health Unit as for other notifiable diseases, by call or fax.

Notifiable diseases – Trends

Notifiable diseases (Waikato District) - period to: August 2022

*Stats NZ estimated 8.69% of the population resided in Waikato in 2021

| Disease name | Waikato cases per month | | | Cases per month over the last year (mean) | | |
|--|-------------------------|--------|-------|---|-----------|------------|
| | June | July | Trend | Waikato | National | % Waikato* |
| Botulism | 0 | 0 | - | 0.0 | 0.0 | - |
| Brucellosis | 0 | 0 | - | 0.0 | 0.0 | - |
| Campylobacteriosis | 21 | 40 | ▲ | 46.8 | 457.5 | 10 |
| COVID-19 | 11,627 | 17,705 | ▲ | 10,463.4 | 133,312.6 | 8 |
| Cryptosporidiosis | 4 | 2 | ▼ | 9.0 | 53.2 | 17 |
| Decompression sickness | 0 | 0 | - | 0.0 | 0.1 | 0 |
| Dengue fever | 0 | 0 | - | 0.0 | 0.3 | 0 |
| Diphtheria | 0 | 0 | - | 0.0 | 0.0 | - |
| Gastroenteritis - unknown cause | 0 | 0 | - | 0.2 | 12.3 | 2 |
| Gastroenteritis / foodborne intoxication | 2 | 7 | ▲ | 2.1 | 10.3 | 20 |
| Giardiasis | 7 | 3 | ▼ | 7.5 | 59.1 | 13 |
| Haemophilus influenzae type b | 0 | 0 | - | 0.0 | 0.0 | - |
| Hepatitis A | 0 | 0 | - | 0.3 | 1.1 | 27 |
| Hepatitis B | 0 | 0 | - | 0.1 | 1.1 | 9 |
| Hepatitis C | 0 | 0 | - | 0.1 | 2.9 | 3 |
| Hepatitis NOS | 0 | 0 | - | 0.0 | 0.1 | 0 |
| Hydatid disease | 0 | 0 | - | 0.0 | 0.2 | 0 |
| Invasive pneumococcal disease | 7 | 8 | ▲ | 3.3 | 42.3 | 8 |
| Latent tuberculosis infection | 0 | 0 | - | 0.5 | 10.7 | 5 |
| Lead Poisoning | 0 | 0 | - | 0.0 | 0.0 | - |
| Legionellosis | 2 | 1 | ▼ | 1.1 | 17.3 | 6 |
| Leprosy | 0 | 1 | ▲ | 0.1 | 0.5 | 20 |
| Leptospirosis | 4 | 3 | ▼ | 1.8 | 9.0 | 20 |
| Listeriosis | 1 | 0 | ▼ | 0.3 | 2.3 | 13 |
| Listeriosis - perinatal | 0 | 0 | - | 0.0 | 0.6 | 0 |
| Malaria | 0 | 0 | - | 0.0 | 0.5 | 0 |
| Measles | 0 | 0 | - | 0.0 | 0.0 | - |
| Meningococcal disease | 0 | 3 | ▲ | 0.3 | 5.2 | 6 |
| Mumps | 0 | 0 | - | 0.0 | 0.1 | 0 |
| Murine Typhus | 0 | 1 | ▲ | 0.1 | 0.3 | 33 |
| Pertussis | 0 | 0 | - | 0.1 | 1.6 | 6 |
| Q fever | 0 | 0 | - | 0.0 | 0.0 | - |
| Rheumatic fever - initial attack | 1 | 1 | - | 0.8 | 6.2 | 13 |
| Rheumatic fever - recurrent attack | 0 | 0 | - | 0.0 | 0.3 | 0 |
| Salmonellosis | 3 | 8 | ▲ | 4.3 | 53.7 | 8 |
| Shigellosis | 0 | 0 | - | 0.1 | 1.3 | 8 |
| Taeniasis | 0 | 0 | - | 0.0 | 0.2 | 0 |
| Tetanus | 0 | 0 | - | 0.0 | 0.0 | - |
| Tuberculosis disease - new case | 2 | 3 | ▲ | 2.2 | 24.9 | 9 |
| Tuberculosis disease - relapse or reactivation | 0 | 0 | - | 0.0 | 0.3 | 0 |
| Tuberculosis infection - on preventive treatment | 0 | 0 | - | 0.0 | 0.5 | 0 |
| Typhoid fever | 0 | 2 | ▲ | 0.2 | 0.9 | 22 |
| VTEC/STEC infection | 2 | 8 | ▲ | 6.9 | 81.4 | 8 |
| Yersiniosis | 7 | 7 | - | 7.3 | 100.1 | 7 |

Medical Officers of Health: Felicity Dumble, Richard Wall, Richard Vipond, and Richard Hoskins

After hours:

MOoH: 021 359 650 **HPO:** 021 999 521

If there is no answer, please contact Waikato Hospital's switchboard 07 839 8899 and ask for the on-call MOoH.

During office hours:

Population Health (MOoH or HPO): (07) 838 2569 **Notifications:** 07 838 2569 ext. 22041 or 22020

Notifications outside Hamilton: 0800 800 977 Fax: 07 838 2382 **Email:**

notifiablediseases@waikatodhb.health.nz

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