

## Communicable Disease Report

### **British tourists return from Majorca with cryptosporidiosis**

Twenty-two confirmed cases of cryptosporidiosis in holidaymakers returning from Majorca have been reported to the PHLS Communicable Disease Surveillance Centre (CDSC) and the Scottish Centre for Infection and Environmental Health (SCIEH) since mid July 2000. The holiday dates and dates of onset suggest that the infections were acquired abroad (incubation period 1 to 12 days). Public health authorities in Spain have been alerted to the incident. They have detected cryptosporidial oocysts in swimming pool filters at the implicated hotel, closed the pool, and are conducting an epidemiological investigation

All 22 cases stayed at the same resort in Calas de Mallorca. A further 28, as yet unconfirmed, cases have also been reported to CDSC. The tour operator has advised its clients not to use the swimming pool at the resort and commissioned an independent environmental investigation, which was carried out on 5 and 6 August. Please inform CDSC (William Smerdon, tel: 020 8200 6868 ext 4646) and SCIEH (Mary Locking, tel: 0141 300 1118) of other cases – in England and Wales and in Scotland, respectively – who might be linked to this outbreak.

### **Drug resistant tuberculosis in North London**

A cluster of 26 cases of isoniazid resistant tuberculosis has been identified in London since January 1999. Most of the cases are young adults of various ethnic groups, born in the United Kingdom, who live in one north London health district. Isolates from the 26 patients (25 from north London and one from south London) share a common typing pattern, according to preliminary results from the PHLS Mycobacterium Reference Unit. Fourteen of these 26 isolates have also been subjected to IS6110 restriction fragment length polymorphism typing, by which they are indistinguishable. Since January 1999 a total of 119 isoniazid resistant isolates have been reported in London – 89 in north and 30 in south London, respectively.

Investigation of the cluster is being coordinated by incident teams for the local district and London Region. All isoniazid resistant strains (with or without resistance to other drugs) isolated in London since the start of 1999 are now being typed. Information is being collected about all cases sharing the common strain type to identify possible places of exposure and routes of transmission. The progress and outcome of all cases identified in the cluster are being reviewed to ensure that no continuing risk of the spread of infection exists, and all relevant contacts are being screened. For further information, and to provide information about potentially linked cases, contact Dr Georgia Duckworth of Dr Helen Maguire, regional epidemiologists, CDSC London (tel: 020 7725 2734).

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### **Age threshold lowered for influenza immunisation and target for coverage introduced**

The Department of Health has reduced the age threshold for vaccination against influenza of the 'otherwise fit' from 75 to 65 years<sup>1,2</sup>. Health authorities have been set a target of achieving a minimum 60% uptake of immunisation in those aged 65 years and over in their areas and have been asked to nominate 'flu coordinators' (in many cases the local consultant in communicable disease control [CCDC]) to help local general practitioners (GPs) improve their influenza immunisation programmes. GPs have been offered a financial incentive to immunise patients on their lists aged 65 years and over and a national publicity programme, to be launched on 18 September, will inform patients of the campaign.

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## General outbreaks of foodborne illness, England and Wales: weeks 28- 31/00

Preliminary information has been received about the following outbreaks. Final information will be published in the quarterly report

Health authority	Organism	Place of outbreak	Month of outbreak	Number ill	Cases positive	Suspect vehicle	Evidence
Hillingdon	<i>Salmonella enteritidis</i> PT4	University	July	2	2	None	–
Suffolk	<i>S. enteritidis</i> PT4	Caterers	June	4	3	None	–
East Kent	<i>S. enteritidis</i> PT4	Not known	July	5	5	None	–
Kensington, Chelsea and Westminster	<i>S. enteritidis</i> PT4	Restaurant	July	11	11	None	–
Gwent	<i>S. enteritidis</i> PT4	Retailer	May	19	19	Iced slices	D
Gloucestershire	<i>S. enteritidis</i> PT6a	Wedding	July	12	12	None	–
Cambridge	<i>S. enteritidis</i> PT21	Wedding	July	2	2	None	–
Lincoln	Unknown	Public house	May	21	–	None	–
Norfolk	Unknown	Residential home	July	7	–	Chicken supreme	D
Wolverhampton	Unknown	Restaurant	May	123	–	None	–

D (descriptive): other evidence, usually descriptive, reported by local investigators as indicating the suspect vehicle

## Salmonella infections, England and Wales: reports to the PHLS (salmonella data set\*)

Details of serotypes of the 1351 salmonella infections recorded in June are given in the adjacent table. In July 2000, 1775 salmonella infections were recorded and preliminary information was received about seven outbreaks (see table above).

\* figures quoted from the PHLS salmonella data set are for isolates confirmed and typed by PHLS Laboratory of Enteric Pathogens (LEP)

	June 2000
<b>Salmonella</b> (provisional total)	1351
<b>S. enteritidis</b> (PT4)	451
<b>S. enteritidis</b> (other PTs)	362
<b>S. typhimurium</b>	234
<b>S. virchow</b>	27
Others (typed)	277

## Common gastrointestinal infections, England and Wales: laboratory reports, weeks 28- 31/00

Laboratory reports	Number of reports received				Total reports 28-31/00	Cumulative totals for weeks 01 -31	
	28/00	29/00	30/00	31/00		2000	1999
<b>Campylobacter</b>	1135	844	493	2375	4847	31373	33015
<b>Escherichia coli O157*</b>	24	33	46	20	123	434	537
<b>Shigella sonnei</b>	10	8	1	32	51	443	591
<b>Rotavirus</b>	77	41	69	124	311	15657	13517
<b>SRSV</b>	17	33	1	70	121	1565	1509
<b>Cryptosporidium</b>	39	48	51	129	267	2435	2352
<b>Giardia</b>	57	57	27	132	273	2243	2419

\* Vero cytotoxin producing isolates (data from LEP)

## *Shigella sonnei* in England and Wales, 1998 and 1999

The numbers of laboratory reports of *Shigella sonnei* in England and Wales received each year by the PHLS Communicable Disease Surveillance Centre have remained at a low level since a peak in 1992 (figure). Eight hundred and seventy-eight reports were received in 1998 and 909 in 1999, compared with 1467 reports in 1997.

The incidence was significantly higher in females (1.84 per 100 000 population) than in males (1.49/100 000) ( $P < 0.001$ ). The highest regional reporting rate in 1998 and 1999 was

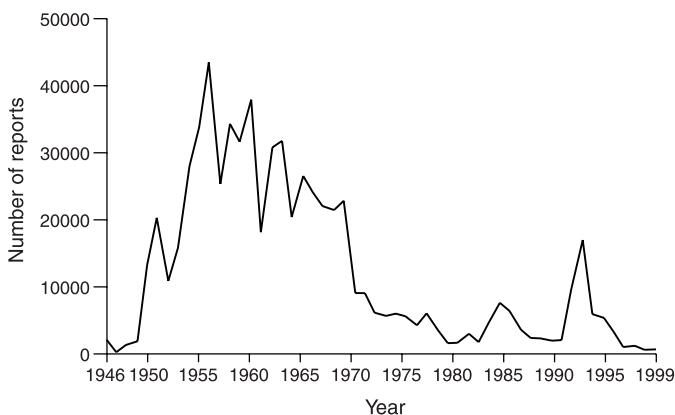
4.7/100 000 in West Midlands compared with an average of 3.3/100 000 in other regions. The age specific rate was highest in children aged 1 to 4 years and adults aged 25 to 29 years (both 3.2/100 000).

Foreign travel was reported in 524 cases (30%), with the largest number in travellers from India (table).

**Table** Top ten destinations for travel associated cases of *Shigella sonnei* infection: England and Wales, 1998 and 1999

Travel destination	Laboratory reports	Percentage
India	112	25
Egypt	61	13
Turkey	53	12
Dominican Republic	25	6
Pakistan	21	5
Mexico	17	4
Gambia	16	4
Tunisia	16	4
Nepal	13	3
Kenya	12	3
Other	196	43
<b>Total</b>	<b>542</b>	

**Figure** Laboratory reports of *Shigella sonnei*: England and Wales, 1946 to 1999



## Typhoid and paratyphoid, England and Wales: laboratory reports, April to June 2000

Organism and phage type*	Number of cases	Infection acquired abroad			Excretors (E) and carriers (C)
		Yes	No	Not reported	
<b><i>S. typhi</i></b>					
A	6	5	–	1	–
D2	2	–	–	2	–
E1	19	13	–	6	–
E9	7	7	–	–	–
N	2	1	–	1	–
Degraded	4	3	–	1	–
Untypable	3	1	–	2	–
Untypable Vi-1	3	2	–	1	–
Untypable	4	2	–	2	–
Other PTs†	4	3	–	1	–
<b>Totals</b>	<b>54</b>	<b>37</b>	<b>–</b>	<b>17</b>	<b>–</b>
<b><i>S. paratyphi</i> A</b>					
1	8	5	–	3	–
1A	13	10	–	3	–
4	7	5	–	2	–
13	18	10	–	8	–
<b>Totals</b>	<b>46</b>	<b>30</b>	<b>–</b>	<b>16</b>	<b>–</b>
<b><i>S. paratyphi</i> B</b>					
Battersea	1	–	–	1	–
Taunton	4	3	–	1	–
<b>Totals</b>	<b>5</b>	<b>3</b>	<b>–</b>	<b>2</b>	<b>–</b>

Fifty-four cases of *Salmonella typhi* infection were reported in the second quarter of 2000. Thirty-seven cases were known to have been infected abroad (Indian subcontinent 34, Ghana 1, Indonesia 1, Nigeria 1). In 17 cases the country of infection was not stated.

Forty-six cases of *S. paratyphi* A infection were reported. Thirty cases were known to have been infected abroad (Indian subcontinent 27, 'abroad' 3). In 16 cases the country of infection was not stated.

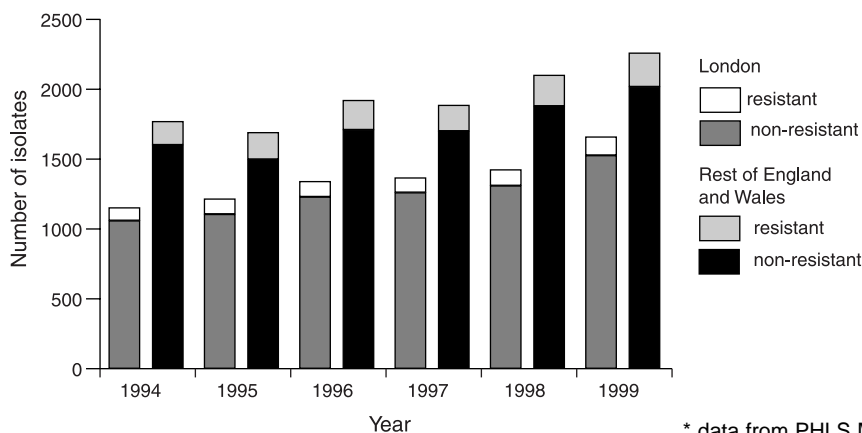
Five cases of *S. paratyphi* B infection were reported. Three cases were known to have been infected abroad (India 2, abroad 1). In 2 cases the country of infection was not stated.

\* all isolates were confirmed and phage typed by LEP

† D1-N, M1, 28, 46 (one each)

## Drug resistant tuberculosis in North London (continued from page 285)

**Figure** Number of resistant and non-resistant isolates of *Mycobacterium tuberculosis* by location of referring hospital\*



\* data from PHLS Mycobnet

**Table** Percentage (number) of isoniazid resistant isolates of *M. tuberculosis* by location of referring hospital\*

Year	London	Rest of England and Wales	Overall
1994	7.7 (88)	4.3 (76)	5.7 (164)
1995	8.7 (105)	4.9 (83)	6.5 (188)
1996	8.0 (106)	5.3 (101)	6.4 (207)
1997	7.4 (101)	4.3 (80)	5.6 (181)
1998	7.8 (110)	5.1 (107)	6.2 (217)
1999	7.8 (128)	4.9 (110)	6.1 (238)

Resistance to isoniazid (with or without resistance to other drugs) in isolates obtained at the time of diagnosis is commoner among patients with tuberculosis in London than elsewhere in England and Wales (figure and table). Within London, the proportions that are resistant rose in south London (hospitals south of the river Thames) from 6.4% in 1997, to 8.9% in 1998, and 10.6% in 1999 and have fallen slightly in north London from 8.2% in 1997, to 7.9% in 1998, and 7.6% in 1999.

## Age threshold lowered for influenza immunisation and target for coverage introduced (continued from page 285)

Careful review of available data has led to the recommendation that the benefits to 'otherwise fit' people aged 65 to 74 years make immunisation worthwhile for them as well as for the previously recommended risk groups. Uptake studies suggest that influenza vaccine has been reaching only around half of those aged 75 years and over, and even fewer of those who were eligible in the younger 'risk' groups. Lowering the age threshold to include all people aged 65 and over also allows those at higher risk within that age range to be identified more easily so that they are more likely to receive their vaccine.

The Joint Committee on Vaccination and Immunisation advises that there is insufficient evidence on which to base a clear recommendation about the routine immunisation of all health care workers. The Department of Health advises NHS employers and social care employers to include influenza immunisation in their winter planning, however, and to offer it to certain front line employees. Such provision is the responsibility of the employer and should be provided through an occupational health service rather than through an individual's own GP.

The policy of offering immunisation to younger people in the established 'high risk' groups (chronic, heart, respiratory (including asthma), and renal disease; diabetes mellitus; and immunosuppression), and those who live in long-stay institutions remains unchanged<sup>2</sup>. The flu vaccine strains recommended by the World Health Organization for this winter are an A/Moscow/10/99 (H3N2) - like strain (for example, A/Panama/2007/99), an A/New Caledonia/20/99 (H1N1) - like strain, and a B/Beijing/184/93 - like strain (B/Yamanashi/166/98 is the most widely used vaccine strain). Influenza vaccine for GP and occupational vaccination programmes must be ordered in advance - firm orders should be placed by mid-August.

1. Chief Medical Officer. Major changes to the policy on influenza immunisation. *CMO's Update* 2000: (26): 1.
2. Chief Medical Officer, Chief Nursing Officer, Chief Pharmacist, General Practitioners Committee. *Influenza immunisation*. London: Department of Health, 2000. (PL/CMO/2000/3, PL/CNO/2000/6, PL/CPHO/2000/1) <<http://www.doh.gov.uk/cmo/cmoh.htm>>

## Notifications of infectious diseases

Doctors in England and Wales have a statutory duty to notify a 'proper officer' of the local authority (usually the consultant in communicable disease control) of cases of certain infectious diseases (*CDR Review 1993; 3: R19-25*). Notifications of infectious diseases, not all of which are microbiologically confirmed, prompt local investigation and action to control the diseases. Proper officers are required each week to inform the Registrar

General of the number of cases of each disease that have been notified. The responsibility for collating the weekly returns from proper officers, and publishing analyses of local and national trends has been transferred to CDS from ONS (*CDR Weekly 1997; 7: 145*). An expanded form of table 2 with data to district level is available on a quarterly basis on the PHLS website <[www.phls.co.uk/facts/noid.htm](http://www.phls.co.uk/facts/noid.htm)>.

**Table 1 Notifications of infectious diseases\* in the past 6 weeks, with totals for the current year compared with corresponding periods of the two preceding years**

		Week						Cumulative totals to week 30 <sup>†</sup>			Cumulative totals from mid-year to week 30 <sup>‡</sup>		
		25/00	26/00	27/00	28/00	29/00	30/00	1998 (i)	1999 (ii)	2000 (iii)	98/99(a)	99/00(b)	00/01(c)
Tuberculosis	Cases <sup>¶</sup>	173	122	145	128	151	141	3478	3695	4087	544	531	565
Scarlet fever	Cases	26	33	38	29	37	31	2472	1518	1336	265	150	135
Malaria	Cases	34	31	22	36	21	11	635	480	535	90	107	90
Leptospirosis	Cases	1	–	–	1	2	–	17	12	16	5	–	3
Food poisoning formally notified ascertained	Cases	2095	2173	2297	2198	2230	2050	49067	47792	45800	9083	8778	8775
	Cases	1091	1114	1138	1053	1135	1023	28025	27510	23641	5128	4969	4349
	Cases	1004	1059	1159	1145	1095	1027	21042	20282	22159	3955	3809	4426
Typhoid fever presumed contracted	Cases	2	2	2	4	2	3	69	91	75	11	4	11
	abroad <sup>§</sup>	2	2	2	4	2	3	60	78	72	9	4	11
	GB	–	–	–	–	–	–	9	13	3	2	–	–
Paratyphoid fever presumed contracted	Cases	1	3	4	–	–	1	64	72	46	9	9	5
	abroad <sup>§</sup>	–	3	4	–	–	–	60	68	42	8	8	4
	GB	1	–	–	–	–	1	4	4	4	1	1	1
Dysentery	Cases	38	22	30	33	32	23	831	856	824	150	130	118
Viral hepatitis	Cases	115	63	76	60	76	95	1770	1902	2059	273	268	307
Hepatitis A	Cases	39	33	34	18	24	18	884	965	806	105	134	94
Hepatitis B	Cases	29	12	20	23	25	24	484	462	577	93	76	92
Hepatitis C	Cases	45	15	18	17	23	50	304	383	588	67	52	108
other and unknown	Cases	2	3	4	2	4	3	98	92	88	8	6	13
Meningitis meningococcal	Cases	47	70	77	51	67	57	1270	1322	1553	149	125	252
	Cases	18	33	32	17	21	20	716	734	795	61	55	90
	influenzal ( <i>Haemophilus influenzae</i> )	Cases	–	1	–	1	1	–	17	14	24	3	3
other specified	Cases	21	30	34	25	39	32	391	401	542	65	50	130
unspecified	Cases	8	6	11	8	6	5	146	173	192	20	17	30
Meningococcal septicaemia (without meningitis)	Cases	28	32	33	25	28	30	939	1254	1159	87	126	116
Acute encephalitis infective post-infectious	Cases	–	–	–	–	–	–	14	12	5	3	–	–
	Cases	–	–	–	–	–	–	11	8	3	2	–	–
	Cases	–	–	–	–	–	–	3	4	2	1	–	–
Whooping cough	Cases	7	11	16	22	20	21	920	634	366	129	87	79
Tetanus	Cases	–	–	–	–	–	–	1	1	–	1	–	–
Measles	Cases	66	72	45	47	64	68	2551	1552	1660	294	208	224
Mumps	Cases	31	38	46	48	49	34	1009	1010	1349	163	155	177
Rubella	Cases	52	45	36	37	44	45	2326	1308	1184	264	168	162
Ophthalmia neonatorum	Cases	2	5	2	3	2	7	116	104	102	14	17	14
<b>Special cases</b>													
Cholera	Cases	–	–	2	–	1	–	33	15	14	7	1	3

All figures include late returns

\* includes notifications from Port Health Authorities

† Cumulative totals commencing week ended (i) 2 Jan (ii) 8 Jan (iii) 7 Jan

‡ Cumulative totals from mid-year commencing week ended (a) 4 July (b) 9 July (c) 7 July

§ Includes cases of unstated origin

¶ Excluding chemoprophylaxis

**Table 2 Notifications of infectious diseases in week 30/00 (health regions, counties, and unitary authorities)**

Area	Measles	Mumps	Rubella	Dysentery	Scarlet fever	Whooping cough	Viral hepatitis	TB all forms*	Meningitis†	Food poisoning notified§	ascertained#	Malaria
<b>Northern and Yorkshire</b>	<b>15</b>	<b>6</b>	<b>6</b>	<b>4</b>	<b>8</b>	<b>1</b>	<b>4</b>	<b>12</b>	<b>12</b>	<b>102</b>	<b>117</b>	–
Cumbria	–	–	–	–	–	–	–	1	1	6	10	–
Durham	1	–	–	–	–	–	–	1	–	11	8	–
North Yorkshire	1	–	–	–	–	–	–	1	–	18	15	–
Northumberland	–	–	–	–	–	–	1	–	–	1	10	–
Tyne and Wear†	2	–	1	–	1	–	1	2	5	7	22	–
West Yorkshire‡	6	6	3	4	2	1	1	4	5	28	50	–
City of Kingston upon Hull	4	–	1	–	2	–	–	1	1	3	–	–
Darlington	–	–	–	–	–	–	–	–	–	3	2	–
East Riding of Yorkshire	–	–	1	–	1	–	–	1	–	4	–	–
Hartlepool	–	–	–	–	–	–	–	–	–	–	–	–
Middlesbrough	1	–	–	–	1	–	–	–	–	4	–	–
Redcar and Cleveland	–	–	–	–	–	–	–	–	–	–	–	–
Stockton-on-Tees	–	–	–	–	1	–	1	1	–	14	–	–
York	–	–	–	–	–	–	–	–	–	3	–	–
<b>Trent</b>	<b>9</b>	<b>3</b>	<b>10</b>	<b>1</b>	<b>9</b>	<b>4</b>	<b>7</b>	<b>20</b>	<b>3</b>	<b>76</b>	<b>107</b>	–
Derbyshire	1	–	5	–	1	–	1	1	–	20	14	–
Leicestershire	–	1	4	1	1	–	–	–	2	11	6	–
Lincolnshire	1	–	–	–	–	2	–	2	–	8	29	–
Nottinghamshire	1	–	1	–	–	1	2	–	–	11	13	–
South Yorkshire‡	4	2	–	–	4	–	1	6	1	9	14	–
Derby	1	–	–	–	–	1	–	4	–	11	6	–
Leicester	1	–	–	–	1	–	–	6	–	2	9	–
North East Lincolnshire	–	–	–	–	–	–	1	–	–	–	3	–
North Lincolnshire	–	–	–	–	–	–	1	1	–	2	5	–
Nottingham	–	–	–	–	2	–	1	–	–	–	8	–
Rutland	–	–	–	–	–	–	–	–	–	2	–	–
<b>Eastern</b>	<b>3</b>	<b>4</b>	<b>3</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>5</b>	<b>9</b>	<b>148</b>	<b>125</b>	<b>1</b>
Bedfordshire	–	–	–	–	–	–	–	–	2	7	13	–
Cambridgeshire	–	–	–	1	–	–	–	–	–	18	10	–
Essex	1	–	–	–	–	–	–	1	–	42	18	–
Hertfordshire	–	1	1	–	–	–	4	1	2	31	36	1
Norfolk	–	3	1	–	–	–	–	–	2	9	28	–
Suffolk	1	–	–	–	–	–	–	2	–	22	13	–
Luton	–	–	–	–	–	–	–	1	3	8	7	–
Peterborough	–	–	–	–	1	1	–	–	–	5	–	–
Southend-on-Sea	–	–	1	–	–	–	–	–	–	1	–	–
Thurrock	1	–	–	–	–	–	–	–	–	5	–	–
<b>London</b>	<b>10</b>	<b>3</b>	<b>4</b>	<b>7</b>	<b>5</b>	<b>1</b>	<b>16</b>	<b>57</b>	<b>1</b>	<b>147</b>	<b>34</b>	<b>8</b>
Greater London	10	3	4	7	5	1	16	57	1	147	34	8
<b>South East</b>	<b>5</b>	<b>3</b>	<b>7</b>	<b>1</b>	<b>5</b>	<b>5</b>	<b>8</b>	<b>12</b>	<b>12</b>	<b>201</b>	<b>211</b>	<b>1</b>
Buckinghamshire	–	–	–	–	1	–	–	2	1	6	25	–
East Sussex	–	–	–	–	–	–	1	–	2	14	18	–
Hampshire	1	–	1	1	1	–	1	1	2	30	37	1
Kent	1	1	2	–	2	3	2	1	2	30	24	–
Northamptonshire	–	–	1	–	1	–	2	–	1	10	21	–
Oxfordshire	–	–	–	–	–	–	–	2	–	3	31	–
Surrey	1	–	–	–	–	–	–	–	–	33	10	–
West Sussex	–	–	1	–	–	2	–	3	3	15	17	–
Bracknell Forest	1	–	–	–	–	–	–	–	–	7	–	–
Brighton and Hove	–	–	–	–	–	–	–	–	–	11	–	–
Isle of Wight	–	1	–	–	–	–	–	–	–	–	–	–
Medway Towns	–	–	–	–	–	–	–	1	–	10	–	–
Milton Keynes	–	–	–	–	–	–	–	–	–	–	10	–
Newbury	–	–	–	–	–	–	1	–	–	5	1	–
Portsmouth	–	1	–	–	–	–	–	–	–	8	–	–
Reading	–	–	–	–	–	–	1	–	–	3	2	–
Slough	–	–	–	–	–	–	–	1	–	3	–	–
Southampton	–	–	1	–	–	–	–	1	1	–	12	–
Windsor and Maidenhead	1	–	–	–	–	–	–	–	–	3	1	–
Wokingham	–	–	1	–	–	–	–	–	–	10	2	–
<b>South West</b>	<b>1</b>	–	<b>5</b>	<b>1</b>	<b>1</b>	<b>2</b>	<b>38</b>	<b>2</b>	<b>4</b>	<b>93</b>	<b>140</b>	<b>1</b>
Cornwall and Isles of Scilly	–	–	–	–	–	–	–	–	–	6	25	–
Devon	–	–	–	–	–	1	2	1	2	13	9	1
Dorset	–	–	–	–	1	1	19	–	–	14	4	–
Gloucestershire	–	–	1	–	–	–	–	1	–	9	2	–
Somerset	–	–	–	–	–	–	3	–	1	34	–	–
Wiltshire	–	–	–	–	–	–	–	–	–	–	–	–
Bath and NE Somerset	–	–	–	–	–	–	–	–	–	–	12	–
Bournemouth	–	–	–	–	–	–	9	–	–	9	3	–
Bristol	–	–	–	1	–	–	2	–	1	–	36	–
North Somerset	1	–	–	–	–	–	–	–	–	3	9	–
Plymouth	–	–	2	–	–	–	–	–	–	–	16	–
Poole	–	–	2	–	–	–	2	–	–	4	6	–
South Gloucestershire	–	–	–	–	–	–	–	–	–	1	11	–
Swindon	–	–	–	–	–	–	–	–	–	–	–	–
Torbay	–	–	–	–	–	–	1	–	–	–	7	–

Area	Measles	Mumps	Rubella	Dysentery	Scarlet	Whooping	Viral	TB all	Food poisoning			Malaria
					fever	cough	hepatitis	forms*	Meningitis†	notified‡	ascertained#	
<b>West Midlands</b>	<b>13</b>	<b>9</b>	<b>5</b>	<b>3</b>	<b>1</b>	<b>3</b>	<b>3</b>	<b>19</b>	<b>6</b>	<b>93</b>	<b>141</b>	–
Shropshire	1	–	–	–	–	–	–	–	–	3	18	–
Staffordshire	–	–	2	–	–	1	–	–	–	24	6	–
Warwickshire	1	–	1	–	–	–	–	–	1	1	9	–
West Midlands†	9	9	1	3	–	2	2	19	5	40	66	–
Worcestershire	1	–	1	–	1	–	–	–	–	20	17	–
<i>Hereford</i>	–	–	–	–	–	–	–	–	–	3	–	–
<i>Stoke-on-Trent</i>	1	–	–	–	–	–	–	–	–	1	18	–
<i>Telford and Wrekin</i>	–	–	–	–	–	–	1	–	–	1	7	–
<b>North West</b>	<b>10</b>	<b>5</b>	<b>2</b>	<b>5</b>	<b>1</b>	<b>1</b>	<b>4</b>	<b>9</b>	<b>3</b>	<b>98</b>	<b>85</b>	–
Cheshire	1	–	–	–	–	–	–	1	1	18	9	–
Cumbria	–	–	–	–	–	–	–	–	–	1	11	–
Greater Manchest <sup>†</sup>	4	2	1	1	–	–	3	7	–	31	28	–
Lancashire	2	–	–	1	1	–	1	1	2	24	9	–
Merseyside	2	1	1	1	–	1	–	–	–	21	13	–
<i>Blackburn</i>	1	2	–	–	–	–	–	–	–	–	–	–
<i>Blackpool</i>	–	–	–	–	–	–	–	–	–	3	7	–
<i>Halton</i>	–	–	–	–	–	–	–	–	–	–	–	–
<i>Warrington</i>	–	–	–	2	–	–	–	–	–	–	8	–
<b>Wales</b>	<b>2</b>	<b>1</b>	<b>3</b>	–	–	<b>3</b>	<b>11</b>	<b>5</b>	<b>7</b>	<b>65</b>	<b>67</b>	–
<i>Blaenau Gwent</i>	–	–	–	–	–	–	–	–	1	–	3	–
<i>Bridgend</i>	–	–	1	–	–	–	–	–	1	7	–	–
<i>Caerphilly</i>	–	–	–	–	–	–	–	–	–	3	–	–
<i>Cardiff</i>	–	1	–	–	–	1	–	2	–	5	8	–
<i>Carmarthenshire</i>	–	–	1	–	–	–	1	1	–	4	–	–
<i>Ceredigion</i>	–	–	–	–	–	–	–	–	–	1	–	–
<i>Conwy</i>	1	–	–	–	–	–	2	1	1	5	5	–
<i>Denbighshire</i>	–	–	–	–	–	1	3	–	1	3	–	–
<i>Flintshire</i>	–	–	–	–	–	–	1	–	–	2	10	–
<i>Gwynedd</i>	–	–	–	–	–	1	1	–	–	1	4	–
<i>Isle of Anglesey</i>	–	–	–	–	–	–	–	–	–	–	2	–
<i>Merthyr Tydfil</i>	–	–	–	–	–	–	–	–	–	3	–	–
<i>Monmouthshire</i>	–	–	–	–	–	–	–	–	–	–	6	–
<i>Neath and Port Talbot</i>	–	–	–	–	–	–	–	–	1	6	–	–
<i>Newport</i>	–	–	–	–	–	–	–	–	1	–	8	–
<i>Pembrokeshire</i>	–	–	–	–	–	–	1	–	–	–	1	–
<i>Powys</i>	–	–	–	–	–	–	–	–	–	–	1	–
<i>Rhondda, Cynon, Taff</i>	–	–	–	–	–	–	–	1	–	3	–	–
<i>Swansea</i>	1	–	1	–	–	–	–	–	–	17	2	–
<i>Torfaen</i>	–	–	–	–	–	–	–	–	–	–	7	–
<i>Vale of Glamorgan</i>	–	–	–	–	–	–	–	–	–	3	6	–
<i>Wrexham</i>	–	–	–	–	–	–	2	–	1	2	4	–

\* Excluding prophylaxis. † All forms. ‡ Formally notified. # Ascertained by other means. ¶ Metropolitan county.

Unitary authorities are shown in italics.

## Notifications in week 30/00 of infectious diseases not shown in table 2

**Meningitis (meningococcal):** 20 cases; two in Norfolk and in West Midlands, and one in each of Bedfordshire, Blaenau Gwent, City of Kingston upon Hull, Conwy, Cumbria, Denbighshire, Greater London, Hertfordshire, Kent, Leicestershire, Neath and Port Talbot, Newport, Northumbria, Lancashire, Tyne and Wear, and West Yorkshire.

**Meningococcal septicaemia (without meningitis):** 30 cases; three in each of Leicester, Plymouth, West Midlands, two in each of Devon, Lincolnshire, Northamptonshire, North Lincolnshire, and West Midlands, and one in each of Blackpool, Bridgend, Cumbria, Denbighshire, Dorset, East Sussex, Greater London, Hampshire, Poole, Surrey, and Tyne and Wear.

**Ophthalmia neonatorum:** seven cases; two in Greater London and in Kent, one in each of Bedfordshire, Dorset, and Kent.

**Paratyphoid fever:** one case; presumed to have been contracted in Great Britain – from West Midlands.

**Typhoid fever:** three cases; presumed to have been contracted abroad – from Greater London, West Midlands, and Kent.

No cases of acute encephalitis, acute poliomyelitis, anthrax, cholera, diphtheria, leptospirosis, meningitis influenzal (*Haemophilus influenzae*), plague, rabies, relapsing fever, smallpox, tetanus, typhus, viral haemorrhagic fever, or yellow fever were notified.

**Table 3 Weekly analysis report of notifications above expected rates in week 30/00**

District	County	Observed number	Expected number	Ratio observed/expected	District	County	Observed number	Expected number	Ratio observed/expected
<b>Dysentery</b>					<b>Meningitis (all)</b>				
Hackney	Greater London	3	0.09	34.74	Calderdale	West Yorkshire	3	0.21	14.09
Kirklees	West Yorkshire	3	0.17	17.40	Luton	Luton	3	0.20	15.01
Warrington	Warrington	2	0.08	23.93	Newcastle upon Tyne	Tyne And Wear	4	0.31	12.82
<b>Food poisoning (all)</b>					<b>Mumps</b>				
Aylesbury Vale	Buckinghamshire	22	6.09	3.61	Walsall	West Midlands	3	0.18	16.46
Bassetlaw	Nottinghamshire	11	4.22	2.60	<b>Rubella</b>				
Bristol	Bristol	36	15.88	2.27	Amber Valley	Derbyshire	5	0.09	55.56
Bromley	Greater London	24	11.63	2.06	Harborough	Leicestershire	2	0.06	31.70
Lincoln	Lincolnshire	10	3.34	2.99	Lichfield	Staffordshire	2	0.08	26.27
Rother	East Sussex	11	3.46	3.18	<b>Tuberculosis*</b>				
Scarborough	North Yorkshire	11	4.32	2.55	Brent	Greater London	10	0.67	14.95
South Hams	Devon	10	3.14	3.19	City of Westminster	Greater London	4	0.53	7.52
South Lakeland	Cumbria	12	3.98	3.02	Coventry	West Midlands	5	0.83	6.04
St. Albans	Hertfordshire	16	5.14	3.12	Crawley	West Sussex	3	0.25	11.98
Swansea	Swansea	19	9.14	2.08	Derby	Derby	4	0.63	6.33
Taunton Deane	Somerset	16	3.91	4.09	Haringey	Greater London	9	0.58	15.48
Tynedale	Northumberland	8	2.29	3.50	Leicester	Leicester	6	0.81	7.45
<b>Food poisoning (Formally notified)</b>					Newham	Greater London	5	0.62	8.03
Brighton and Hove	Brighton and Hove	11	3.09	3.56	Waltham Forest	Greater London	4	0.60	6.64
Derbyshire Dales	Derbyshire	6	1.37	4.38	<b>Viral hepatitis (all)</b>				
Fareham	Hampshire	8	2.03	3.94	Bournemouth	Bournemouth	9	0.30	30.46
Merton	Greater London	15	3.54	4.23	Denbighshire	Denbighshire	3	0.17	17.84
Rother	East Sussex	8	1.72	4.64	Greenwich	Greater London	9	0.39	23.19
Runnymede	Surrey	8	1.50	5.35	West Dorset	Dorset	7	0.16	42.49
Scarborough	North Yorkshire	11	2.15	5.11	Weymouth and Portland	Dorset	10	0.12	86.63
Sedgemoor	Somerset	7	2.00	3.50	<b>Whooping cough</b>				
South Cambridgeshire	Cambridgeshire	10	2.50	4.00	Worthing	West Sussex	2	0.03	58.92
St Albans	Hertfordshire	15	2.56	5.85	Note: This table shows those districts from which the rates of notifications reported this week were significantly higher than expected (P<0.005). The number of notifications in each district is shown in the third column (observed). The number expected if the national rate is applied to the district population is shown in the fourth column (expected). The fifth column shows by how many times the number of notifications exceeds the expected number (ratio observed/expected). Caution must be exercised when interpreting this table, as listing is wholly dependent on comparable reporting of notifiable infectious diseases from all districts of England and Wales and on local patterns of disease.				
Stafford	Staffordshire	8	2.44	3.28					
Stockton-on-Tees	Stockton-on-Tees	14	3.52	3.97					
Sutton	Greater London	13	3.45	3.77					
Swansea	Swansea	17	4.56	3.73					
Taunton Deane	Somerset	16	1.95	8.20					
Tendring	Essex	11	2.60	4.23					
Thanet	Kent	10	2.48	4.04					
Trafford	Greater Manchester	11	4.32	2.55					
Wokingham	Wokingham	10	2.81	3.56					
<b>Malaria</b>									
Hackney	Greater London	2	0.04	48.43					
<b>Measles</b>									
City of Kingston upon Hull	City of Kingston upon Hull	4	0.38	10.45					

\* excluding prophylaxis