



Health Protection Report

weekly report

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News

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Confirmed measles cases in England and Wales: update to end-September 2009

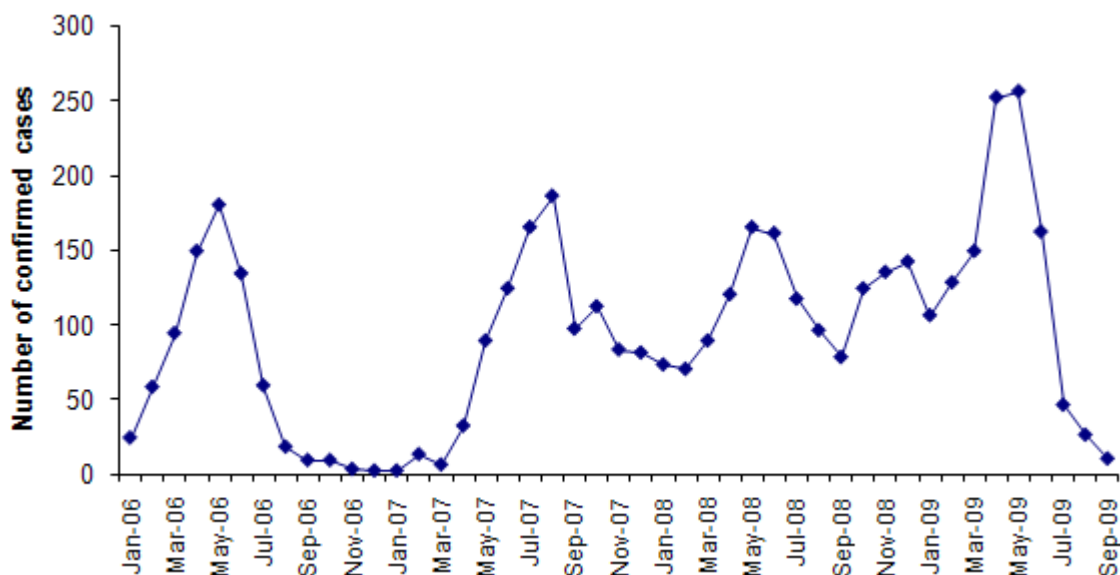
Ten new cases of measles were identified in September 2009 bringing the total of laboratory confirmed cases in England and Wales for the year so far to 1135. This is the fourth monthly decline in measles cases and the incidence is now close to the level last observed in early 2007 levels (figure). However, it is still important to monitor the measles activity, therefore prompt notification and testing of cases is paramount.

To date, the region with the highest number of cases is the South East, representing almost a quarter of all confirmed cases, followed by London and Wales (table).

Confirmed cases of measles by region and month of onset, England and Wales: January to September 2009

| Month | London | East Mids | East of Engl'd | North East | North West | South East | South West | West Mids | Wales | York & Humb | Total |
|-------------------|------------|-----------|----------------|------------|------------|------------|------------|-----------|------------|-------------|-------------|
| Jan 09 | 40 | 8 | 5 | 1 | 8 | 20 | 4 | 13 | – | 7 | 106 |
| Feb 09 | 41 | – | 3 | – | 3 | 53 | 1 | 22 | – | 5 | 128 |
| Mar 09 | 20 | 3 | 7 | 2 | 28 | 49 | 3 | 13 | 21 | 3 | 149 |
| Apr 09 | 22 | 7 | 11 | 50 | 23 | 61 | 12 | 24 | 41 | 1 | 252 |
| May 09 | 26 | 13 | 24 | 43 | 11 | 49 | 10 | 18 | 47 | 15 | 256 |
| Jun 09 | 30 | 10 | 20 | 16 | 4 | 35 | 10 | 4 | 29 | 4 | 162 |
| July 09 | 15 | 6 | – | 3 | – | 5 | – | – | 13 | 4 | 46 |
| Aug 09 | 4 | – | 2 | 6 | 1 | – | 1 | – | 5 | 7 | 26 |
| Sept 09 | 2 | – | – | 1 | 1 | 1 | 1 | – | 1 | 3 | 10 |
| Total 2009 | 200 | 47 | 72 | 122 | 79 | 273 | 42 | 94 | 157 | 49 | 1135 |

Number of laboratory confirmed cases in England and Wales by month of onset: January 2006 to September 2009



The majority of confirmed cases this month continues to be observed in children and teenagers aged 1 to 18 years. This is the same group targeted by the MMR catch-up campaign announced by the Chief Medical Officer in August 2008.

A regional breakdown of cases by age is available at:

http://www.hpa.org.uk/web/HPAweb&HPAwebStandard/HPAweb_C/1223019390211.

Pandemic influenza: UK situation at 5 November 2009

The Health Protection Agency's Weekly National Influenza Report of 5 November (week 45) [1] described the UK (and international) situation as follows:

- Pandemic influenza activity is variable across the UK;
- The weekly influenza/influenza-like illness (ILI) consultation rates decreased, although they remained above the winter baseline thresholds in England, Scotland and Northern Ireland;
- The National Pandemic Flu Service (NPFs) continued to issue antiviral drugs to people in England with an influenza-like illness who called or logged onto the internet site. The number of assessments and antiviral collections through this service decreased slightly over the past week;
- Interpretation of data to produce estimates on the number of new cases continued to be subject to a considerable amount of uncertainty with the move to NPFs. HPA modelling gave an estimate of 84,000 (range 42,000 – 181,000) new cases in England in week 44. The estimated number of new cases increased in some regions and most age groups;
- The fact that Week 44 (26 October to 1 November 2009) was the half-term holiday for most schools across the UK may have affected some of the indicators in the Weekly Report, although it was unclear to what extent;
- The main influenza virus circulating in the UK continued to be the pandemic (H1N1) 2009 strain, with few influenza H1 (non-pandemic), H3 and B viruses detected. Three of 2437 pandemic viruses tested have been confirmed to carry a mutation which confers resistance to the antiviral drug oseltamivir; all three are phenotypically resistant to the drug but retain sensitivity to zanamivir;
- The majority of pandemic influenza cases continued to be mild. The cumulative number of deaths reported due to pandemic (H1N1) 2009 in the UK was 151. There was a total of 1431 new patients hospitalised with suspected pandemic influenza in the week from 29 October to 4 November, an increase from 1200 in the previous week. The highest hospitalisation rates have consistently been in the under-5-year age group and have increased in all age groups recently;
- According to the European Centre for Disease Prevention and Control (ECDC), by 4 November, 6255 deaths due to pandemic influenza had been reported globally;
- According to the World Health Organisation (23 October), influenza activity is low in temperate southern hemisphere regions, is increasing in the temperate northern hemisphere regions and has declined in most tropical areas.

Vaccination programme guidance for clinicians

A link to latest information about the swine influenza vaccination programme, including clinical information and guidance for professionals

[<http://www.dh.gov.uk/en/PublicHealth/Flu/Swineflu/InformationandGuidance/index.htm>], is among the External Links available on the HPA website's Swine Influenza landing page (www.hpa.org.uk/swineflu).

This includes an update from the National Director of NHS Flu Resilience to primary care trust and health authority chief executives stressing the importance of ensuring early vaccination of vulnerable groups, such as children with neurological conditions, who are at greatest risk of developing complications from the infection [2].

References

1. HPA. [Weekly National Influenza Report: week 45](#) (5 November 2009, PDF 395 KB), HPA website: www.hpa.org.uk/swineflu/surveillance&epidemiology.
2. [Swine influenza: update on vaccination programme, 3 November 2009](#), www.dh.gov.uk/en/Publicationsandstatistics/Lettersandcirculars/Dearcolleagueletters/DH_107901.

Current rabies situation in Bali

In December 2008, the Indonesian Ministry of Agriculture reported a rabies outbreak in dogs on Bali to the World Organization for Animal Health (OIE). In May 2009, the South East Asia Regional Office of the WHO reported that eight human cases had occurred since the start of the outbreak. Since then, ProMED reports suggest that this number has further increased [1].

Most human and animal rabies cases have been confirmed near popular tourist destinations on the southern tip of Bali (in Denpasar, Badung and Tabanan districts) but there is potential for further spread to the rest of the island. FAO and WHO have been supporting national authorities to carry out extensive campaigns of dog (and cat) vaccination, control of stray dog populations and animal movement controls.

Reports suggest that human or equine rabies immunoglobulin is not presently available in Bali and that the supply of WHO-approved tissue culture rabies vaccines cannot be assured. If a traveller does incur a rabies exposure in Bali, the nearest facilities that are able to provide reliable post-exposure treatment are in Singapore, Bangkok and Australia.

The National Travel Health Network and Centre (NaTHNaC) has posted information on its website [2] reiterating advice that pre-exposure vaccination should be given to travellers at increased risk of rabies through exposure (eg occupation, long duration of stay or certain types of activity such as running or cycling) or who are travelling to remote areas where medical care and post-exposure rabies vaccine and immunoglobulin are not readily available.

There is no change to the HPA's existing advice on post-exposure prophylaxis (PEP) for those exposed in Bali as Indonesia is already considered to be a high risk country for rabies.

If bitten, scratched, or licked by a warmblooded animal in a rabies-endemic country, people should wash the wound or site of exposure (eg mucous membrane) with plenty of soap and water and seek medical advice without delay, even if previously vaccinated. If they do not seek medical treatment while abroad, they should still seek it when they come home, even if some time after the event. PEP is highly effective in preventing rabies if given promptly and there have been no cases of rabies in the UK in people who have received rabies PEP following exposure.

Travellers should always be advised to seek travel health advice well in advance of their visit overseas to ensure that the risks of all travel-associated illness, not only rabies, have been explained. Although rabies vaccine is not routinely advised for all travellers, pre-exposure immunisation is recommended for those:

- working abroad (eg veterinary staff or zoologists) who by the nature of their work are at risk of contact with rabid animals;
- living in or travelling for more than one month to rabies-enzootic areas unless there is reliable access to prompt, safe medical care;
- travelling for less than one month to enzootic areas but who may be exposed to rabies because of their travel activities; or
- who would have limited access to post-exposure medical care.

References

1. Outbreak notice: rabies in Bali, Indonesia, 31 October 2009, www.promedmail.org.
2. NaTHNaC, 23 October 2009, http://www.nathnac.org/pro/clinical_updates/rabies_231009.htm.

Infection reports

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Respiratory

Laboratory reports of respiratory infections made to Cfl from HPA and NHS labs in England and Wales: weeks 40-44/2009

Data are recorded by week of report, but include only specimens taken in the last eight weeks (ie recent specimens).

Table 1. Reports of influenza infection made to Cfl, by week of report: weeks 40-44/2009

| Week | Week 40 | Week 41 | Week 43 | Week 43 | Week 44 | Total |
|----------------------------|-----------|------------|------------|------------|------------|-------------|
| Week ending | 4/10/09 | 11/10/09 | 18/10/09 | 25/10/09 | 1/11/09 | |
| Influenza A | 63 | 120 | 220 | 194 | 433 | 1030 |
| Isolation | 4 | 2 | 8 | 17 | 16 | 47 |
| DIF | 9 | 19 | 54 | 33 | 138 | 253 |
| PCR | 50 | 91 | 151 | 140 | 264 | 696 |
| †Other | – | 8 | 7 | 4 | 15 | 34 |
| Influenza B | 1 | – | – | – | 1 | 2 |
| Isolation | – | – | – | – | – | – |
| DIF | 1 | – | – | – | – | 1 |
| PCR | – | – | – | – | – | – |
| Other | – | – | – | – | 1 | 1 |
| Influenza (untyped) | – | – | – | – | – | – |
| Isolation | – | – | – | – | – | – |
| DIF | – | – | – | – | – | – |
| PCR | – | – | – | – | – | – |
| Other | – | – | – | – | – | – |

DIF = Direct immunofluorescence.

†Other = Antibody detection, single high titre or 'Method not specified'.

Table 2. Respiratory viral detections by any method (culture, direct immunofluorescence, PCR, single high serology titre), by week of report: weeks 40-44/2009

| Week | Week 40 | Week 41 | Week 42 | Week 43 | Week 44 | Total |
|-----------------------------------|---------|----------|----------|----------|---------|-------|
| Week ending | 4/10/09 | 11/10/09 | 18/10/09 | 25/10/09 | 1/11/09 | |
| Adenovirus [*] | 22 | 14 | 25 | 15 | 46 | 122 |
| Coronavirus | – | – | – | – | – | – |
| Parainfluenza [†] | 24 | 22 | 33 | 25 | 55 | 159 |
| Rhinovirus | 111 | 96 | 160 | 111 | 207 | 685 |
| Respiratory Syncytial Virus (RSV) | 18 | 19 | 28 | 44 | 106 | 215 |

* Respiratory samples only. Excludes diagnoses made by electron microscopy (EM).

† Includes parainfluenza types 1, 2, 3, 4 and untyped

Table 3. Respiratory viral detections by age group: data for weeks 40-44/2009

| Age group (years) | <1 year | 1-4 years | 5-14 years | 15-44 years | 45-64 years | ≥65 years | Un-known | Total |
|-----------------------------------|---------|-----------|------------|-------------|-------------|-----------|----------|-------|
| Adenovirus [†] | 25 | 37 | 20 | 15 | 18 | 6 | 1 | 122 |
| Coronavirus | – | – | – | – | – | – | – | – |
| Influenza A | 71 | 82 | 276 | 454 | 125 | 16 | 6 | 1030 |
| Influenza B | – | – | 1 | – | 1 | – | – | 2 |
| Influenza untyped | – | – | – | – | – | – | – | – |
| Parainfluenza [†] | 34 | 51 | 21 | 20 | 16 | 15 | 2 | 159 |
| Rhinovirus | 210 | 129 | 69 | 156 | 73 | 45 | 3 | 685 |
| Respiratory syncytial virus (RSV) | 155 | 47 | 6 | 2 | 1 | 3 | 1 | 215 |

* Respiratory samples only.

† Includes parainfluenza types 1, 2, 3, 4 and untyped.

Table 4. Laboratory reports of infections associated with atypical pneumonia, by week of report: weeks 40-44/2009

| Week | Week 40 | Week 41 | Week 42 | Week 43 | Week 44 | Total |
|-----------------------------------|---------|----------|----------|----------|---------|-------|
| Week ending | 4/10/09 | 11/10/09 | 18/10/09 | 25/10/09 | 1/11/09 | |
| <i>Coxiella burnettii</i> | – | – | – | – | – | – |
| Respiratory <i>Chlamydia</i> sp.* | 1 | 1 | 2 | 4 | 2 | 10 |
| <i>Mycoplasma pneumoniae</i> | 9 | 10 | 23 | 5 | 14 | 61 |
| <i>Legionella</i> sp. | – | – | – | – | – | – |

* Includes *Chlamydia psittaci*, *Chlamydia pneumoniae*, and *Chlamydia* sp detected from blood, serum, and respiratory specimens.

Table 5a. Reports of Legionnaires' disease cases in England and Wales, by week of report: weeks 40-44/2009

| Week | Week 40 | Week 41 | Week 42 | Week 43 | Week 44 | Total |
|---------------|----------|-----------|----------|-----------|-----------|-----------|
| Week ending | 4/10/09 | 11/10/09 | 18/10/09 | 25/10/09 | 1/11/09 | |
| Nosocomial | – | – | – | – | – | – |
| Community | 1 | 9 (1*) | – | 2 | 4 | 16 |
| Travel abroad | 5 | 9 | 3 | 9(2**) | 6 | 32 |
| Travel UK | 1 | 2 | 1 | 1 | – | 5 |
| Total | 7 | 20 | 4 | 12 | 10 | 53 |
| Male | 5 | 17 | 3 | 9 | 7 | 41 |
| Female | 2 | 3 | 1 | 3 | 3 | 12 |

(*) 2008 cases. (**) Non-pneumonic case(s)

Fifty-one cases were reported with pneumonia and two with non-pneumonic infection; 41 males aged 40-87yrs and 12 females aged 44-78yrs. Seventeen cases had community acquired infection. Four deaths were reported in three males aged between 80-87yrs and a female aged 70yrs.

Thirty-seven cases were travel associated: Bosnia & Herzegovina/Turkey (1), Bulgaria (1), Cruise/United States of America (1), Cyprus (1), France/United Kingdom (1), Germany (1), Greece (5), India (1), Italy (3), Italy/Switzerland/United Kingdom (1), Portugal (1), Spain (6), Spain/UK (1), Turkey (8) and United Kingdom (5).

Table 5b Reports of Legionnaires' disease cases by region of report in England and Wales: weeks 40-44/2009

| Region/country | Nosocomial | Community | Travel abroad | Travel UK | Total |
|-----------------|------------|-----------|---------------|-----------|-----------|
| North East | – | – | 3 | – | 3 |
| Yorks & Humber | – | 2 | 3 | – | 5 |
| East Midlands | – | 1 | 6 (2**) | – | 7 |
| East of England | – | 5 | 1 | – | 6 |
| London | – | 2 | 2 | 1 | 5 |
| South East | – | – | 5 | 1 | 6 |
| South West | – | 1 | 4 | 1 | 6 |
| West Midlands | – | 3 (1*) | 1 | – | 4 |
| North West | – | 1 | 6 | – | 7 |
| Wales | – | 1 | 1 | 2 | 4 |
| Other | – | – | – | – | – |
| Total | – | 16 | 32 | 5 | 53 |

(*) 2008 cases. (**) Non-pneumonic case(s).