

MONTHLY SURVEILLANCE REPORT

This monthly report contains data and commentary on disease trends and events up to and including the end of November 2001. (See also the January 2002 issue of the *New Zealand Public Health Report*). Its purpose is to provide timely information for use by designated officers and public health service staff. Data contained within is based on information recorded on EpiSurv by public health service staff. As this information may be updated over time, the results should be regarded as provisional only.

Note: where rates are quoted, “current rate” refers to the rate for the 12 month period ending November 2001 and “previous rate” refers to the rate for the 12 month period ending November 2000.

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1. Major surveillance issues

- *Campylobacteriosis* is showing an unusually high incidence for October and November throughout New Zealand. If this pattern continues New Zealand can expect a particularly high rate over summer.
- *Salmonellosis* incidence in 2001 will be the highest ever notified in New Zealand. The continuing STM 160 epidemic is contributing to the sustained rise with this organism now representing 47% of total *Salmonella* isolates. A recent investigation of STM 160 identified 'contact with an individual with diarrhoea in the previous month' and 'contact with wild birds' as risk factors.
- *Meningococcal disease* incidence remains elevated with a cumulative total of 605 cases for the year to date. As yet there is no sign of any deceleration in incidence that usually takes place over summer.

2. Key disease trends

Campylobacteriosis

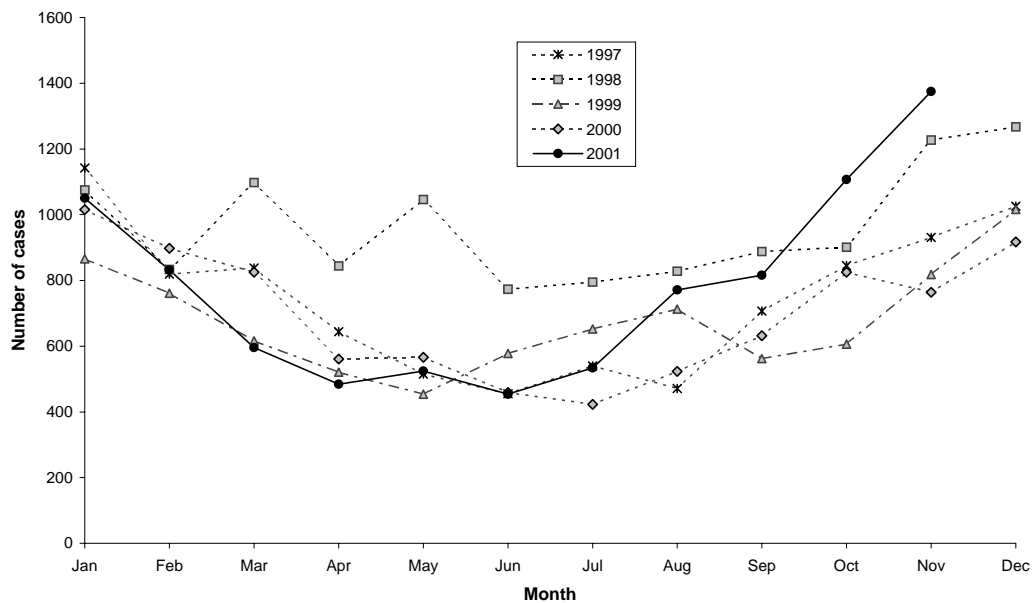
There were 1375 cases of campylobacteriosis notified during November 2001, bringing the year to date total to 8543. In contrast, 764 cases were notified during November last year. This monthly total is the highest reported total for any month since campylobacteriosis became notifiable in 1980.

An increase in rates occurred across New Zealand, with 16 of the 24 health units notifying more cases during November than during October. Rates higher than the national rate of 262.5 per 100 000 were seen in Wellington (422.8), South Canterbury (320.6), Waikato (318.3), Hutt (316.7), Hawkes Bay (287.1), Taupo (286.6), North West Auckland (283.3), Canterbury (283.2), Central Auckland (276.2) and Tauranga (265.1) health districts

Of the 1375 cases notified in November, 426 (31.0%) were notified from the combined Auckland health districts, 162 (11.8%) from Wellington, 156 (11.3%) from Waikato and 106 (7.7%) from Canterbury health districts. Three outbreaks were reported this month from Auckland, Manawatu and Canterbury health districts.

The following graph shows the number of cases by month since 1997.

*Campylobacter notifications by month,
January 1997 - November 2001*

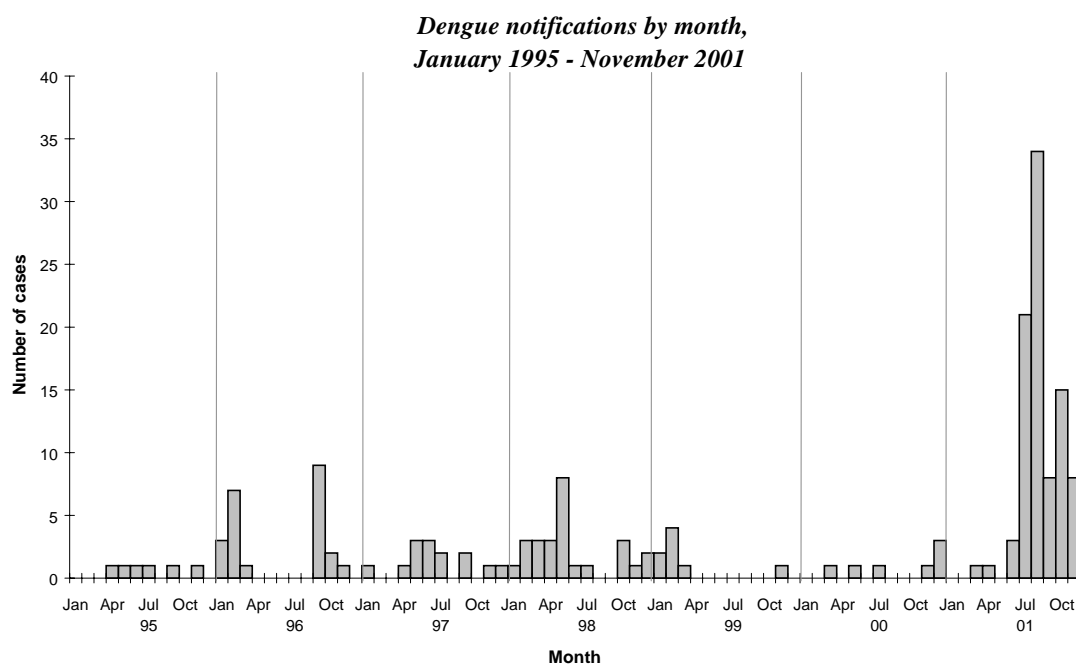


There is very little information on risk factors. Among the 1375 cases notified in November, 3.9% of cases for which this information was recorded (14/359) had contact with a case, 5.9% (23/387) had been overseas during the incubation period.

Dengue Fever

Eight cases of dengue fever were reported in November, bringing the year to date total to 91. All cases had travelled overseas during the incubation period. Travel destinations were Bali, Cook Islands (two each), East Timor, Tahiti, Thailand, and Samoa (one each). All of the cases were confirmed by IgM serology. One of the cases was hospitalised.

The following graph plots the number of dengue notifications each month from January 1995 to November 2001.



The following table shows dengue fever cases notified annually since January 1995, by country/region visited. A total of 176 dengue cases was notified from January 1995 to November 2001. Travel history was reported for 95.5% (168/176) of the cases. In 2001, 63.7% (58/91) of the cases had travelled to Samoa during the incubation period. Samoa has previously been the source of dengue infection in New Zealand travellers (1996-1997).

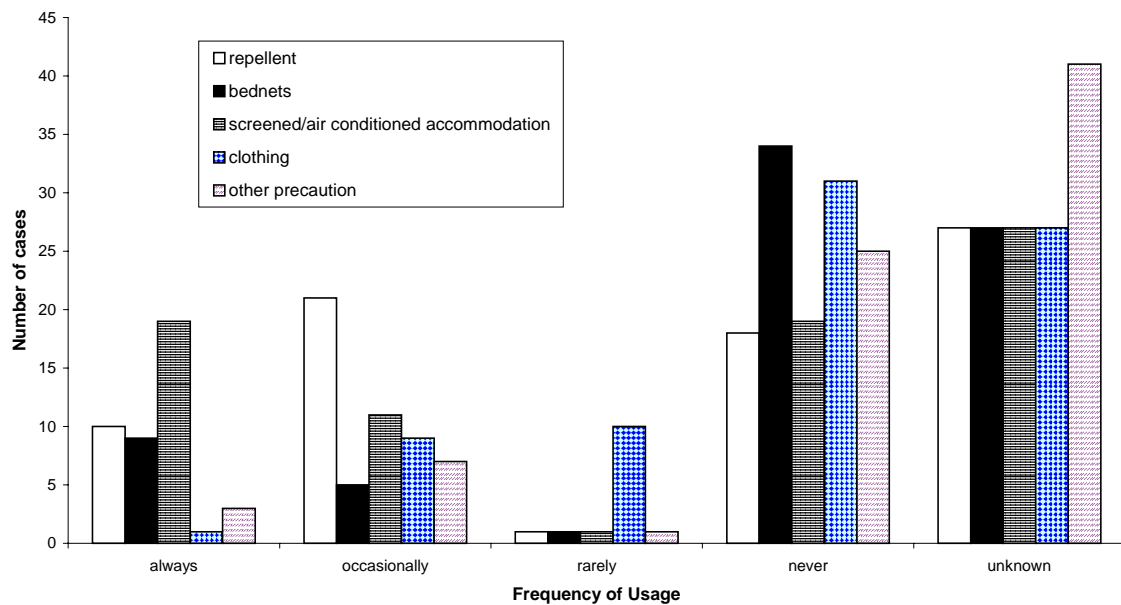
Annual dengue fever EpiSurv notifications by country/region visited, 1995-2001

Country/Region	1995	1996	1997	1998	1999	2000	2001¹
<i>Australia</i>			1			1	
<i>Pacific Islands</i>							
American Samoa				1			
Cook Island (Rarotonga)	2		6				2
Fiji	2			9	1	2	1
French Polynesia							1
Samoa		16	4				58
Tahiti			3				7
Tokelau							3
Tonga				7			
Unspecified					1		
<i>South East Asia</i>							
Brunei		1					
East Timor						1	3
Indonesia (Bali, Jakarta)		2		2		1	5
India						1	1
Malaysia					1	1	
Philippines				2	1		2
Singapore					1		
Sri Lanka							1
Thailand		1		4	4		5
Vietnam							
<i>Unknown travel total</i>	2	3		1			2
Total	6	23	14	26	9	7	91

¹ Year to date cases only

The following graph shows how frequently protective measures were used by cases notified this year (data excludes overseas visitors and those who had unknown travel style). About 60% of the cases had information recorded on precautions and regularity of usage i.e. the use of insect repellent, bednets, screened/air conditioned accommodation, wearing of long sleeved shirts and trousers or any other precaution against biting insects. Thirteen percent of the 77 cases for which information on repellants was recorded always used repellent. However, there was a high percentage of cases who never used any protective measures.

*Dengue protective measures,
January - November 2001*

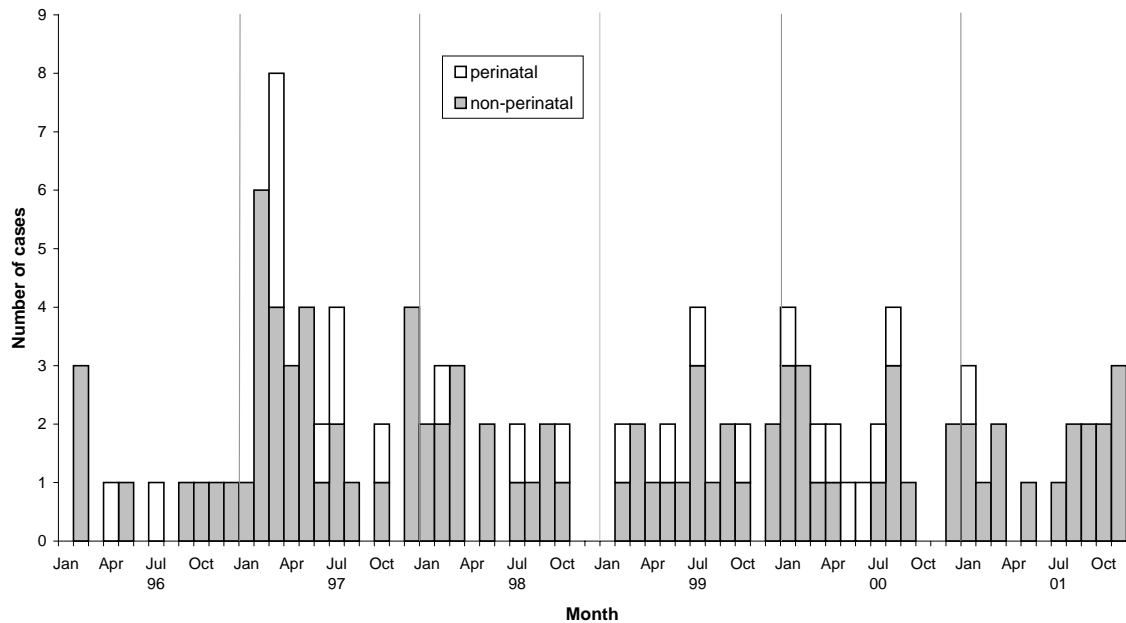


Listeriosis

Three cases of listeriosis were notified in November, bringing the total for the year to date to 17. All were non-perinatal cases. The current rate of 0.5 per 100 000 is less than the previous rate of 0.6.

The following graph shows the number of listeriosis cases by month from January 1996 to November 2001.

*Perinatal and non-perinatal listeriosis cases by month,
January - November 2001*

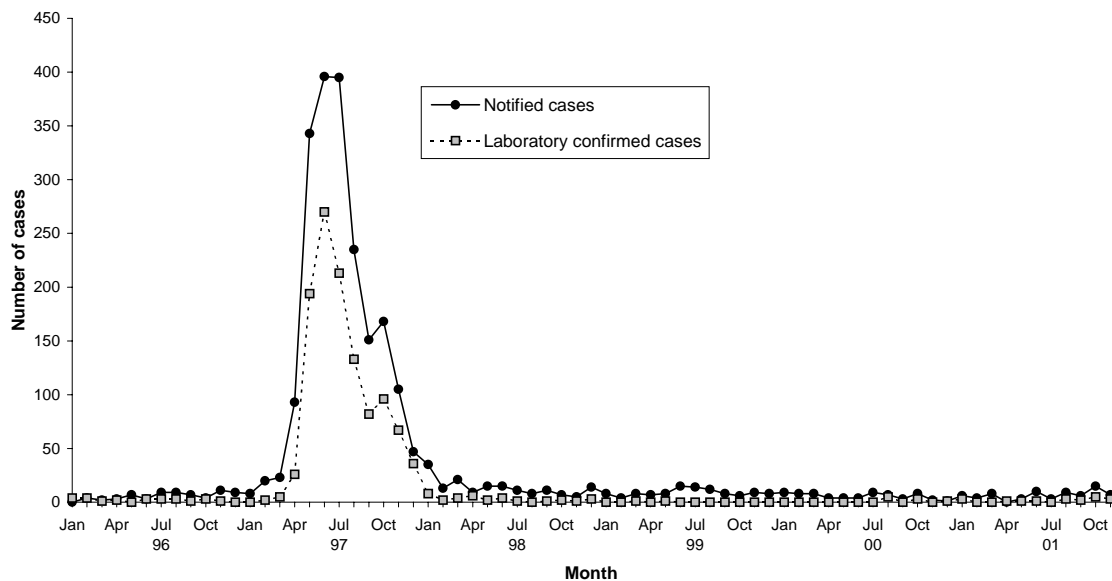


Measles

Seven cases of measles were notified during November, bringing the year to date total to 71. Of the November cases, 42.9% (3/7) were laboratory confirmed.

The following graph shows the number of notified and the number of laboratory confirmed cases of measles by month from January 1997 to November 2001.

*Notified and laboratory confirmed cases of measles by month,
January 1997 - November 2001*



The cases were of variable ages and from different health districts (see table below). Two of the seven cases reported contact with another measles case. None of the cases indicated overseas travel.

Four of the seven cases were recorded as immunised. Only one case had dosage information recorded, and received the first dose only.

The table below shows the distribution by health district and the associated risk factors.

*Measles notifications by age, immunisation status, and recorded risk factors,
November 2001*

Health District	Lab Confirmed	Age	Contact with a case	Overseas during incubation	Immunisation Status
Hawkes Bay	Unknown	1y	Not recorded	Unknown	Not recorded
Manawatu	Yes	27y	Yes	No	Not recorded
Wellington	Yes	27y	Yes	No	Immunised
Canterbury	Not done	1y	No	No	Immunised
	Not done	3y	No	No	Immunised
Otago	Yes	26y	No	No	Immunised
Southland	Unknown	24y	Not recorded	Not recorded	Not recorded

The last measles epidemic began four years and seven months ago in March 1997 when 23 cases were notified. Of these five were laboratory confirmed (see section on measles from 1997 Annual Surveillance summary). The timing of future measles epidemics is difficult to predict because of a lack of reliable immunisation coverage data and the unknown impact of measles catch-up immunisation campaigns.

Local public health services should continue efforts to improve measles surveillance by encouraging case notification on suspicion and laboratory investigation of such cases. It is also important to record risk factor information and immunisation status for cases, particularly those that are laboratory confirmed.

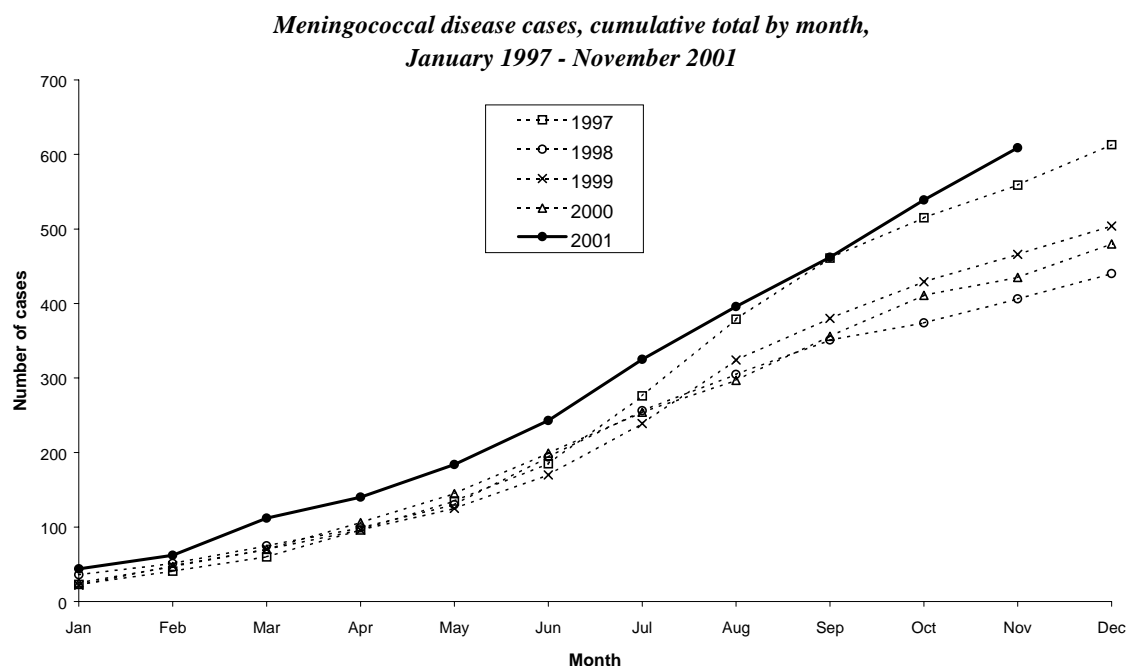
Meningococcal disease

A total of 70 cases of meningococcal disease was notified during November, bringing the year to date total to 605. Again, this is the highest number of cases notified for the period for any year since the epidemic began. There is no sign yet of any deceleration in incidence that usually takes place over the summer.

One of the cases notified this month has since died: a 3-month-old male from South Auckland Health District. This brings to 25 the number of fatal cases this year.

Of the 70 cases notified during November this year, 47 had been laboratory confirmed at the time of this report.

Note: the data plotted below was derived using the earliest available data for the case (i.e. onset or hospitalisation date, if available, rather than report date).

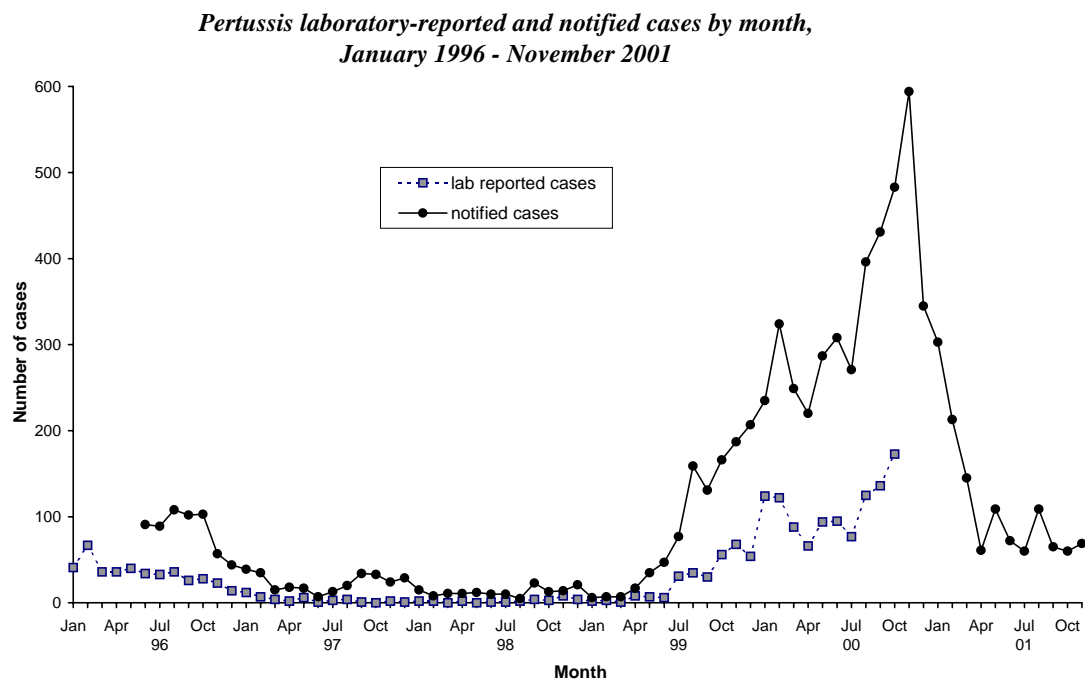


Pertussis

A total of 6383 cases of pertussis has been notified since the current epidemic began in June 1999. Of these, 2983 (46.7%) cases have been laboratory confirmed. There

have been 471 hospitalisations (8.0% of cases for whom this information was recorded) and one death reported. During November 2001, 69 cases of pertussis were notified, compared to 60 cases in October and 65 cases in September 2001. While the epidemic appears to be declining slowly the incidence is still well above the inter-epidemic level of about 15 cases a month. November notifications were highest in Waikato (21 cases), Nelson Marlborough (13), and Wellington (11) health districts.

The following graph compares the number of laboratory-reported cases, between January 1996 and October 2000, with cases notified after June 1996, when pertussis became notifiable.



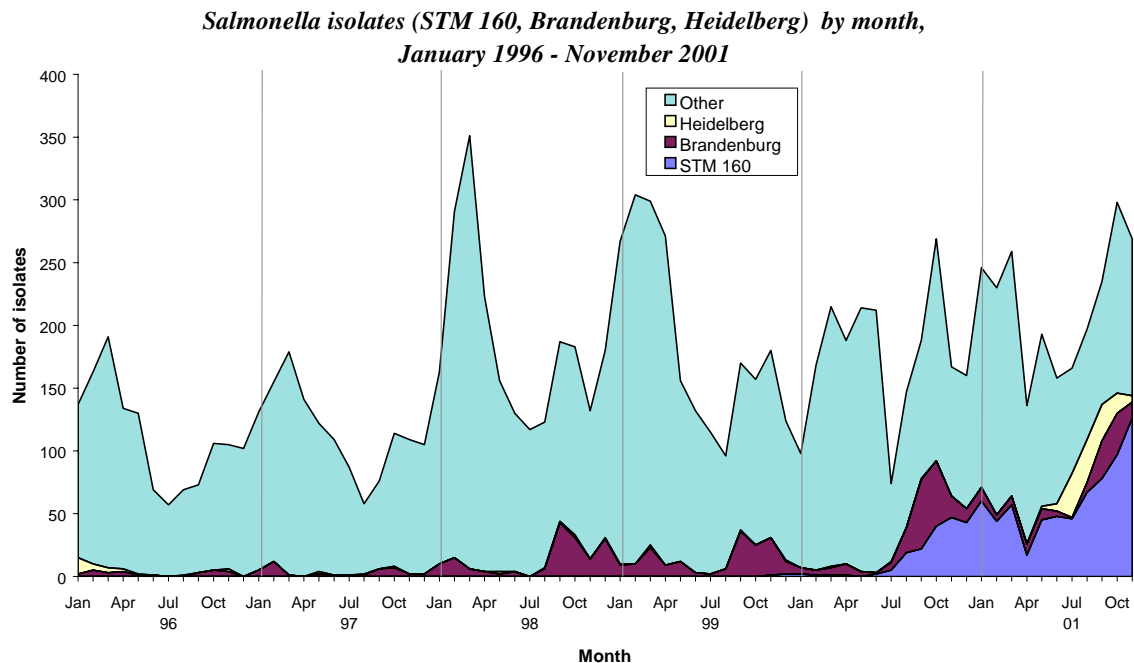
Salmonellosis

There were 232 salmonellosis notifications in November giving a total of 2182 cases for the first 11 months of the year. The total for 2001 has now exceeded the previous highest annual total of 2079 in 1999 and will be even higher when December cases are included.

The ESR Enteric Reference Laboratory (ERL) received 269 *Salmonella* isolates during November. This increase in human isolations in spring follows a pattern similar to the one seen in the last three years. The predominant types identified were *Salmonella* Typhimurium phage type 160 (STM 160), *S. Typhimurium* 135 and *S. Infantis*. The STM 160 epidemic has persisted for the fourth month with 126 isolates in November, representing 47% of total *Salmonella* isolates. (A recent investigation of STM 160 identified 'contact with an individual with diarrhoea in the previous month' and 'contact with wild birds' as risk factors). *S. Brandenburg* has decreased from thirty-three isolates in October to thirteen isolates in November. *S. Heidelberg* has

decreased from 16 isolates in October (5% of total isolates) to five isolates in November (2% of total isolates).

The following graph shows the contribution these emerging *Salmonella* types are making to the total *Salmonella* burden seen in New Zealand.



In January 2002, ESR is commencing a nationwide case-control study of sporadic salmonellosis. The study will run for twelve months. All cases of *Salmonella* Brandenburg and a random selection of other salmonellosis serotypes identified by the Enteric Reference Laboratory will be eligible for inclusion in the study. Case and matched control participants will be interviewed using a standardised questionnaire including questions on food, environmental and other exposures.

Although ESR will obtain consent and interview case participants directly, the study planners are aware that most cases will have already been interviewed (or have received a questionnaire) on behalf of public health services for routine case management. The study planners hope that, at the time of the case management interview or the posted questionnaire, all salmonellosis cases will receive pre-warning about the case-control study in the form of a written information sheet. Draft versions of the information sheet have already been circulated. The date to commence administration of the information sheets will be confirmed in the second week of January 2002.

3. Deaths from notifiable diseases (excluding AIDS)

Two deaths from notifiable diseases were reported in November 2001.

Disease	No. of deaths reported Nov 2001	Cumulative no. of deaths reported in 2001
Campylobacteriosis	0	1
Creutzfeldt Jakob disease	0	1
Hepatitis B	0	1
Legionellosis	0	1
Listeriosis	0	1
Meningococcal disease	1	25
Salmonellosis	0	2
Tuberculosis disease	1	2
Total	2	32

4. Outbreaks

Outbreaks, for which ESR received sufficient information to report on during November 2001, are summarised in the table below and individually listed in the following pages.

Summary of November 2001 recorded outbreaks:

Organism/Toxin/Illness	Number of outbreaks	Total number of cases
<i>Campylobacter</i>	3	6
<i>Cryptosporidium parvum</i>	3	9
Gastroenteritis	4	24
<i>Giardia</i>	3	19
Hepatitis A virus	1	5
Monosodium glutamate poisoning	1	2
Norwalk-like virus	5	29
<i>Salmonella</i>	2	4
Total	22	98

In addition, 22 preliminary outbreak reports were received from Auckland (*Campylobacter*, Gastroenteritis and *Salmonella*), Waikato (*Campylobacter*, *Cryptosporidium parvum*), Hawkes Bay (*Campylobacter*), Canterbury (*Clostridium perfringens*) and South Canterbury (*Mycobacterium tuberculosis*). These outbreaks will be reported in the monthly table, when further information has become available.

The following people contributed to this report:
Michael Baker, Carol Kliem, Liza Lopez, Trev Margolin, Liz Sneyd and Craig Thornley.

For further details on items contained in this report contact either of the following:

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Michael Baker	Liz Sneyd
phone 04 914 0788	phone 04 916 3402
email: michael.baker@esr.cri.nz	email: elizabeth.sneyd@esr.cri.nz
Fax: 04 914 0770	

Completed outbreak reports received by ESR during November 2001:

Suspected pathogen/ toxin/illness	Public Health Service	Month of OB	Duration of OB (days)	Cases			Est. no. exposed	Setting	Suspected mode of transmission	Probable factors contributing to OB
				Lab Conf	Oth Conf	Prob.				
<i>Campylobacter</i>	Auckland	Sept	1	2	0	0	Unk	Unknown	Unknown	Unknown
<i>Campylobacter</i>	Manawatu	Sept / Oct	8	2	0	0	5	Home	Person to person	Exposure to infected people
<i>Campylobacter</i>	Otago	Nov	9	2	0	0	2	Home	Person to person	Exposure to infected people
<i>Cryptosporidium parvum</i>	Waikato	Sept / Oct	20	4	0	0	Unk	Child care centre; farm	Person to person;; environmental	Exposure to infected people; exposure to infected animals or animal products
<i>Cryptosporidium parvum</i>	Manawatu	Sept	12	2	0	0	8	Home	Person to person	Exposure to infected people
<i>Cryptosporidium parvum</i>	West Coast	Nov	14	1	0	2	5	Home; farm	Person to person; environmental; zoonotic	Exposure to infected people; exposure to contaminated environment (polluted duck pond); exposure to infected animals or animal products

Outbreaks cont.

Suspected pathogen/ toxin/illness	Public Health Service	Month of OB	Duration of OB (days)	Lab Conf	Cases Oth Conf	Prob.	Est. no. exposed	Setting	Suspected mode of transmission	Probable factors contributing to OB
Gastroenteritis	Auckland	Sept	2	0	0	3	3	Home	Foodborne (chow mein & fried rice)	Inadequate thawing; cross contamination; contamination; contamination from an infected food handler
Gastroenteritis	Auckland	Nov	2	0	0	4	Unk	Unknown	Unknown	Unknown
Gastroenteritis	Waikato	Oct	2	0	0	8	12	Restaurant / café	Foodborne (oysters)	Use of ingredients from unsafe sources
Gastroenteritis	Rotorua	Sept	5	0	0	9	Unk	Home; hotel / motel; restaurant / café; bus and field trip	Person to person; environmental	Exposure to infected people; exposure to contaminated environment(s)
<i>Giardia</i>	Tauranga	Sept	10	4	0	1	Unk	Home	Person to person	Exposure to infected people
<i>Giardia</i>	Hawkes Bay	Dec / Feb	39	3	0	7	Unk	Home; swimming (lake and home pool)	Waterborne; person to person; environmental	Exposure to infected people; exposure to untreated recreational water; exposure to contaminated swimming pool

Outbreaks cont.

Suspected pathogen/ toxin/illness	Public Health Service	Month of OB	Duration of OB (days)	Lab Conf	Cases Oth Conf	Prob.	Est. no. exposed	Setting	Suspected mode of transmission	Probable factors contributing to OB
<i>Giardia</i>	Manawatu	May - Jul	92	4	0	0	4	Home	Person to person plus	Unaware of illness; exposure to infected people
Hepatitis A	Auckland	Jul - Aug	32	5	0	0	26	Home	Person to person	Exposure to infected people
Monosodium glutamate poisoning	Wellington	Nov	1	0	0	2	Unk	Takeaways	Foodborne (fish and chips)	Chemical contamination
Norwalk-like virus	Auckland	Sep	1	2	0	1	3	Unknown	Unknown	Unknown
Norwalk-like virus	Auckland	Sep	1	2	0	2	4	Restaurant / café; takeaways	Foodborne; person to person	Unknown
Norwalk-like virus	Auckland	Sep	2	1	0	8	10	Takeaways	Foodborne; person to person	Unknown
Norwalk-like virus	Tauranga	June	10	1	0	4	6	Home	Foodborne; person to person	Unknown foodborne factors; exposure to infected people
Norwalk-like virus	Canterbury	Nov	3	2	6	0	Unk	Home; caterers	Person to person	Exposure to infected people

Outbreaks cont.

Suspected pathogen/ toxin/illness	Public Health Service	Month of OB	Duration of OB (days)	Lab Conf	Cases Oth Conf	Prob.	Est. no. exposed	Setting	Suspected mode of transmission	Probable factors contributing to OB
<i>Salmonella</i> Typhimurium	Auckland	Oct	Unk	2	0	0	2	Unknown	Unknown	Unknown
<i>Salmonella</i> Typhimurium	West Coast	Sept - Oct	26	1	1	0	Unk	Home	Person to person	Unknown

5. National surveillance data and trends

Disease ¹	Current year - 2001 ²			Previous year - 2000		
	Nov 2001 cases	Cumulative total since 1 January	Current rate ³	Nov 2000 cases	Cumulative total since 1 January	Previous rate ³
AIDS	1	24	0.7	7	27	0.8
Campylobacteriosis	1375	8579	262.5	771	7513	235.7
Cholera	0	3	0.1	0	0	0
Creutzfeldt-Jakob disease	0	1	0.1	0	2	0.1
Cryptosporidiosis	94	1156	32.8	118	747	21.3
Denque fever	8	91	2.5	3	7	0.2
Gastroenteritis ⁴	60	862	25.2	106	680	20.7
Giardiasis	133	1474	43.9	136	1571	46.4
<i>H. influenzae</i> type b disease	1	11	0.3	1	12	0.4
Hepatitis A	7	55	1.7	8	101	2.9
Hepatitis B (acute) ⁵	6	56	1.7	2	72	2.2
Hepatitis C (acute) ⁵	3	54	1.6	6	78	2.3
Hydatid disease	0	7	0.2	1	3	0.1
Influenza ⁶	1	665	18.5	34	245	6.8
Lead absorption	11	121	4.1	5	99	3.0
Legionellosis ⁶	3	52	1.6	11	63	2.0
Leprosy	0	2	0.1	0	4	0.1
Leptospirosis	12	96	2.9	5	91	2.7
Listeriosis	3	17	0.5	0	20	0.6
Malaria	4	49	1.5	39	106	3.1
Measles	7	72	2.0	2	64	2.0
Meningococcal disease	70	605	17.9	26	434	13.2
Mumps	2	55	1.6	5	46	1.4
Paratyphoid	0	26	0.8	2	22	0.6
Pertussis	69	1268	44.5	594	3797	110.7
Rheumatic fever	2	111	3.8	1	117	3.3
Rubella	2	29	0.8	2	25	0.8
Salmonellosis	232	2182	64.5	140	1649	48.7
Shigellosis	6	151	4.4	11	106	3.2
Tetanus	0	3	0.1	0	1	0.1
Tuberculosis	27	342	10.1	31	330	10.1
Typhoid	2	21	0.6	1	19	0.5
VTEC / STEC infection	5	77	2.2	4	65	1.8
Yersiniosis	34	390	11.4	30	375	11.6

Notes: ¹ Other notifiable infectious diseases reported in November :Nil

² These data are provisional

³ Rate is based on the cumulative total for the current year (12 months up to and including November 2001) or the previous year (12 months up to and including November 2000), expressed as cases per 100 000

⁴ Cases of gastroenteritis from a common source or foodborne intoxication eg, staphylococcal intoxication or toxic shellfish poisoning

⁵ Only acute cases of this disease are currently notifiable

⁶ Surveillance data based on laboratory-reported cases only

Surveillance data by health district - November 2001

Cases this month

Current rate¹

Disease	Cases for November 2001, ² and current rate ^{1,2} by health district ^{3,4}																							
	Northland	NW Auckland	Central Auckland	South Auckland	Waikato	Tairāngia	Eastern BOP	Gisborne	Rotorua	Tau po	Taranaki	Ruapehu	Hawkes Bay	Wanganui	Manawatu	Wairarapa	Wellington	Hutt	Nelson-Marl	West Coast	Canterbury	South Cant	Otago	Southland
AIDS ⁵	0	1			0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	1.5			0	1.8	0	0	0	0	0	0	0	0	0	0	0.5	0	0	1.0	0	0	0	0
Campylobacteriosis	22	164	144	118	156	33	11	18	19	13	49	0	57	19	51	18	162	70	28	11	106	36	44	26
	152.5	283.3	276.2	215.4	318.3	265.1	147.2	157.4	218.5	286.6	258.3	101.5	287.1	188.9	155.6	239.2	422.8	316.7	132.9	231.3	283.2	320.6	234.5	237.2
Cholera	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0.3	0.3	0.3	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Creutzfeldt-Jakob disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0.5	0	0	0
Cryptosporidiosis	2	4	1	2	14	3	2	0	4	0	2	0	7	2	4	1	5	1	1	1	9	4	6	19
	19.0	17.2	27.2	22.2	61.1	27.5	13.9	30.6	38.7	78.2	20.6	0	121.3	53.7	27.3	18.2	37.5	11.3	6.9	21.6	15.0	62.9	39.4	54.8
Dengue fever	0	1	1	0	1	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	3	0	0	0
	2.9	3.8	5.8	3.2	1.7	2.7	0	0	1.5	9.8	0	0	0	0	2.7	0	2.5	3.8	0.9	0	2.3	1.3	1.2	0.9
Gastroenteritis	0	6	5	5	0	0	0	0	0	0	1	0	0	1	1	0	7	5	0	0	27	0	1	1
	19.0	23.8	29.2	13.2	4.3	8.9	8.0	54.6	18.6	42.3	22.5	0	5.6	14.7	48.5	28.6	12.4	12.8	24.9	21.6	68.5	25.1	40.0	6.3
Giardiasis	2	15	10	10	12	9	4	7	5	0	2	0	7	2	1	0	12	9	6	0	15	1	3	1
	24.8	49.2	63.0	42.7	50.2	62.9	57.7	52.5	44.9	32.6	23.4	17.9	71.1	29.3	25.3	23.4	63.4	35.4	36.9	33.9	39.1	25.1	24.9	16.2
H. influenzae type b disease	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0.7	0.5	0.3	0	0	0	0	2.2	1.5	0	0.9	0	0.7	0	0	0	0.4	0.8	0	0	0.5	0	0	0
Hepatitis A	0	1	1	2	1	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0	0
	0	1.5	4.3	6.7	1.0	0	0	4.4	0	0	0	0	0	0	0	2.6	2.1	1.5	0	0	1.0	0	0	0
Hepatitis B	0	0	1	0	0	1	0	0	0	0	0	0	1	0	0	0	2	0	0	0	0	1	0	0
	2.2	1.5	2.0	1.5	3.3	3.5	0	0	0	6.5	0	0	4.2	0	0.7	7.8	1.6	0.8	2.6	6.2	0.5	1.3	1.2	0.9
Hepatitis C	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	1	0	0	0
	1.5	0.5	0.9	0.6	0	14.2	4.0	4.4	7.7	6.5	0	0	1.4	0	0	0	2.5	1.5	1.7	3.1	1.6	0	0	1.8
Hydatids disease	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0.7	0.3	0	0	0	0.9	0	2.2	0	0	0	0	0	0	0	0	0.4	0	0	0	0.5	0	0	0
Influenza ⁵	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	66.8	0.3	53.9	0	0	0	0	0	0	0	0	0	0	0	25.1	0	0	0	51.2	0	8.7	0
Lead absorption	1	0	1	0	1	1	1	1	0	0	0	0	0	0	1	0	0	0	0	0	1	0	3	0
	2.9	1.0	2.9	0.9	5.3	2.7	2.0	4.4	3.1	0	4.7	29.8	4.2	8.1	7.3	5.2	2.1	0	6.9	3.1	5.7	15.1	9.8	2.7
Legionellosis ²	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
	2.2	0.5	0.6	0.6	5.6	0.9	0	0	0	0	0.9	0	0	1.6	0.7	2.6	2.1	4.5	0	0	2.8	1.3	1.2	0.9
Leprosy	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0	0.3	0.3	0	0	0	0	0	0	0	0	0	0	0	0	0.4	0	0	0	0	0	0	0
Leptospirosis	1	2	0	0	2	0	0	0	0	0	0	1	5	0	0	0	0	0	0	0	0	1	0	0
	10.2	1.3	0.6	0.9	7.3	4.4	2.0	17.5	3.1	3.3	2.8	6.0	10.5	1.6	2.7	2.6	0.4	0	1.7	3.1	1.3	6.3	0.6	0.9
Listeriosis	0	0	0	0	0	2	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0
	0.7	0.8	0.9	0.6	0.3	1.8	0	2.2	0	0	0.9	0	0	0	0	0	0.4	0	0	0	0.5	1.3	0.6	0
Malaria	0	0	0	1	1	1	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0
	0.7	0.5	1.7	1.5	2.0	1.8	0	2.2	0	0	0.9	6.0	0	0	2.7	0	2.5	1.5	3.4	3.1	1.8	2.5	1.2	0.9
Measles	0	0	0	0	0	0	0	0	0	0	0	0	1	0	1	0	1	0	0	0	2	0	1	1
	2.2	1.3	2.3	0.3	0	6.2	0	6.6	0	0	1.9	0	4.9	1.6	1.3	0	1.6	0	3.4	12.3	2.6	0	2.9	5.4
Meningococcal disease	1	5	6	11	12	0	3	3	5	1	0	1	1	1	0	2	3	1	2	0	3	0	8	1
	27.0	9.9	24.6	37.2	23.5	12.4	33.8	28.4	32.5	39.1	9.4	11.9	17.4	13.0	12.6	31.2	9.9	8.3	12.9	9.3	6.5	1.3	27.2	9.9
Mumps	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	1	1	0	0	0	0	0	0
	5.1	0.5	1.2	1.5	0	0	4.0	0	1.5	0	0	6.0	3.5	0	1.3	0	2.5	3.0	0.9	0	2.6	2.5	4.1	0
Paratyphoid	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	0	0.8	3.5	0.9	0	0.9	0	0	0	0	0.9	0	2.1	0	0.7	0	0.8	0	0	0	0.5	0	0	0
Pertussis	2	1	4	3	21	1	0	0	0	0	0	0	1	0	1	0	8	2	13	1	6	3	1	1
	29.2	18.8	19.4	23.7	81.3	37.2	19.9	15.3	26.3	19.5	4.7	71.6	20.2	14.7	4.7	59.8	49.8	86.0	195.5	111.0	68.8	39.0	45.8	54.8
Rheumatic fever	1	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0	0	0	0	0
	6.6	2.5	14.5	10.8	3.0	0	17.9	4.4	1.5	3.3	0	6.0	1.4	1.6	0	2.6	1.6	0.8	0	0	0	0	0	0
Rubella	0	0	0	0	0	0	0	0	0	0	0	0	1	0	0	0	0	0	0	0	1	0	0	0
	0.7	0.8	0	0.6	0	0	0	0	0	0	0	0	6.3	0	0	0	1.6	0.8	0	0	2.1	0	0	1.8
Salmonellosis	10	20	15	13	2																			