

MONTHLY NOTIFIABLE DISEASE SURVEILLANCE REPORT

Data contained within this monthly report are based on information recorded on EpiSurv by Public Health Service (PHS) staff as at 10 November 2022. Changes made to EpiSurv after this date will not be reflected in this report. The data are provisional and include cases that are still under investigation, some of which may become 'Not a case'. For this reason, comparisons between the current year and previous years should be treated with caution.

KEY NOTIFIABLE DISEASE TRENDS

COVID-19

There were 66,867 cases of COVID-19 notified in October 2022, compared with 43,906 in September 2022. BA.5 remained the most prevalent Omicron subvariant across New Zealand throughout October, accounting for around three-quarters of the sequenced cases. See the [Ministry of Health website](#) and [ESR's genomic insights report](#) for more information.

Invasive pneumococcal disease

There were 57 cases (56 confirmed and 1 under investigation) of invasive pneumococcal disease notified in October 2022, compared with 18 cases for the same month in 2021. Of the 56 confirmed cases, 13 (23.2%) were aged under 5 years, 24 (42.9%) were 5–64 years, and 19 (33.9%) were aged 65 years and over. Three deaths were reported; one in a case aged under 5 years, and two aged 65 years and over. A serotype was identified in 53 (94.6%) cases. The most common serotypes were 19A (28.3%, 15 cases) and 8 (22.6%, 12 cases). Of the cases that died, the case aged under 5 years was identified as serotype 3 and the cases aged 65 years and over were serotypes 8 and 19A. There were five cases of serotype 19A in children aged under 5 years; all were age appropriately vaccinated with PCV10.

Monkeypox

There were 23 confirmed cases of monkeypox notified in October 2022. The total number of confirmed cases reported in New Zealand since the beginning of a [multi-country outbreak](#) to the end of October is 32. Of the 23 cases notified in October, one acquired their infection overseas and 22 acquired their infection locally. Cases were reported from the Northern (18), Southern (4), and Central (1) regions.

Shigellosis

There were 13 cases (10 confirmed, 1 probable and 2 under investigation) of shigellosis notified in October 2022, compared with none for the same month in 2021. Of the 11 confirmed and probable cases, seven (63.6%) were overseas during the incubation period, two consumed dried tuna from Kiribati, and one was exposed to untreated water from a bore supply. No risk factors were identified for the remaining case.

OUTBREAKS

Respiratory illness

There were three respiratory illness outbreaks reported in October 2022. One outbreak was due to influenza-like illness, and two were due to acute respiratory infection (rhinovirus was confirmed in one). All three outbreaks were in long-term care facilities.

Ongoing outbreaks

Twelve further cases of hepatitis A were linked to the outbreak associated with frozen berries reported in the [September monthly report](#), bringing the total to 24 cases. All had identical or near identical genetic sequence profiles and this was the same sequence profile as that from a hepatitis A outbreak in Sweden in 2020/2021 linked to frozen berries from Serbia. Foodstuffs Own Brands Ltd initiated a [consumer-level recall](#) in October of Pams frozen berries containing raspberries from Serbia.

Two further cases of *Salmonella* Kintambo were reported in October 2022, bringing the total in the outbreak associated with sesame-based products to seven cases. Sequencing for the seven clinical isolates showed the cases were the same sequence type (ST8754) and closely genomically related to a recent [European outbreak](#) linked to sesame-based products from Syria.

TABLES

Tables for October are available as Excel files on the [Public Health Surveillance website](#).