

Table 5. Australian Sentinel Practice Research Network reports, weeks 21 to 24, 1999

Week number	21		22		23		24	
Week ending on	30 May 1999		6 June 1999		13 June 1999		20 June 1999	
Doctors reporting	59		60		58		48	
Total encounters	7,590		7,632		7,610		5,525	
Condition	Rate (per 1,000 Reports encounters)		Rate (per 1,000 Reports encounters)		Rate (per 1,000 Reports encounters)		Rate (per 1,000 Reports encounters)	
Influenza	66	8.7	65	8.5	62	8.1	80	14.5
Rubella	1	0.1	1	0.1	4	0.5	0	0.0
Measles	1	0.1	1	0.1	0	0.0	0	0.0
Chickenpox	12	1.6	13	1.7	6	0.8	11	2.0
New diagnosis of asthma	12	1.6	18	2.4	16	2.1	7	1.3
Post operative wound sepsis	6	0.8	11	1.4	11	1.4	5	0.9
Gastroenteritis	70	9.2	73	9.6	82	10.8	35	6.3

The NNDSS is conducted under the auspices of the Communicable Diseases Network Australia New Zealand. The system coordinates the national surveillance of more than 40 communicable diseases or disease groups endorsed by the National Health and Medical Research Council (NHMRC). Notifications of these diseases are made to State and Territory health authorities under the provisions of their respective public health legislations. De-identified core unit data are supplied fortnightly for collation, analysis and dissemination. For further information, see CDI 1999;23:55.

LabVISE is a sentinel reporting scheme. Twenty-one laboratories contribute data on the laboratory identification of viruses and other organisms. Data are collated and published in Communicable Diseases Intelligence every four weeks. These data should be interpreted with caution as the number and type of reports received is subject to a number of biases. For further information, see CDI 1999;23:58.

ASPREN currently comprises about 100 general practitioners from throughout the country. Up to 9,000 consultations are reported each week, with special attention to 12 conditions chosen for sentinel surveillance in 1999. CDI reports the consultation rates for seven of these. For further information, including case definitions, see CDI 1999;23:55-56.

## Additional Reports

### National Influenza Surveillance, 1999

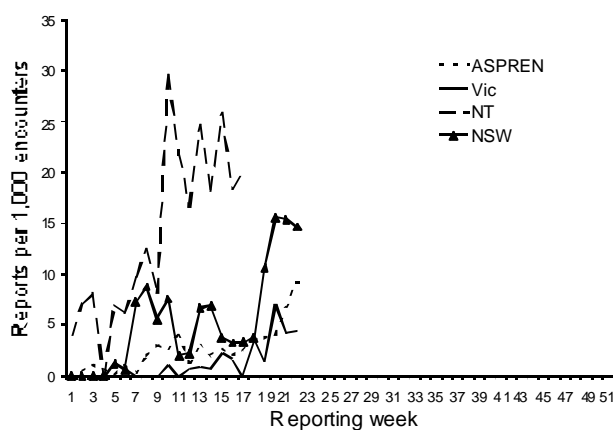
Three types of data are included in National Influenza Surveillance, 1999. These are sentinel general practitioner surveillance conducted by the Australian Sentinel Practice Research Network, Department of Human Services (Victoria), Department of Health (New South Wales) and the Tropical Influenza Surveillance Scheme, Territory Health (Northern Territory); laboratory surveillance data from the Communicable Diseases Intelligence Virology and Serology Laboratory Reporting Scheme, LabVISE, and the World Health Organization Collaborating Centre for Influenza Reference and Research; and absenteeism surveillance conducted by Australia Post. For further information about these schemes, see CDI 1999; 23:56.

#### Sentinel general practitioner surveillance

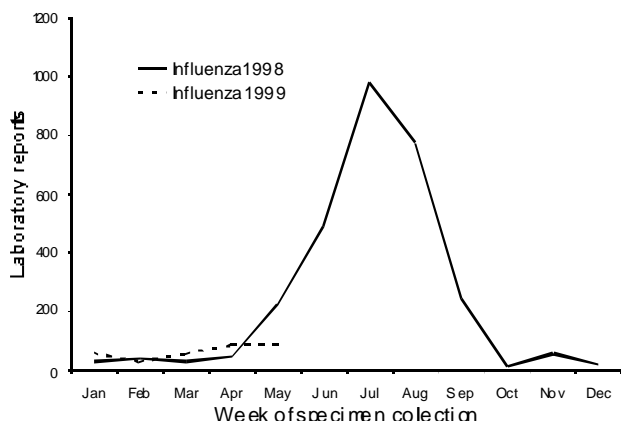
An increase in consultation rates for influenza-like illness reported by the ASPREN, NSW and Victorian schemes was apparent in April (Figure 4). Rates for influenza-like illness recorded by ASPREN were lower this year than for

the same period in 1998. In contrast, the consultation rates

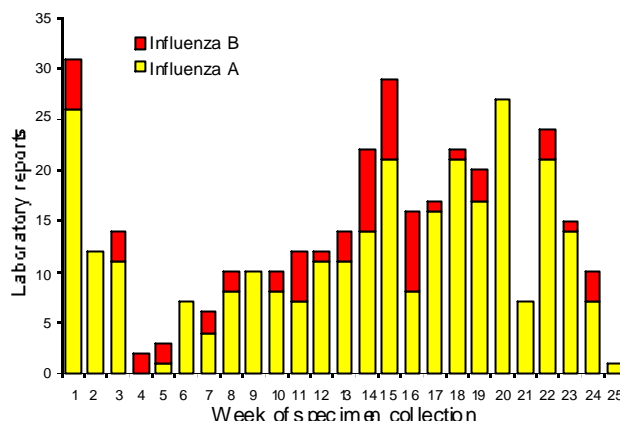
Figure 4. Sentinel general practitioner influenza consultation rates, 1999, by scheme and week



**Figure 5. Laboratory reports of influenza, 1998-99, by week of specimen collection**



**Figure 6. Laboratory reports of influenza, 1999, by type and by month of specimen collection**



for influenza activity reported by the Tropical Influenza Surveillance Scheme showed higher rates from March to May than for the same period in 1998. Victorian rates were similar to those recorded for the corresponding period in 1998.

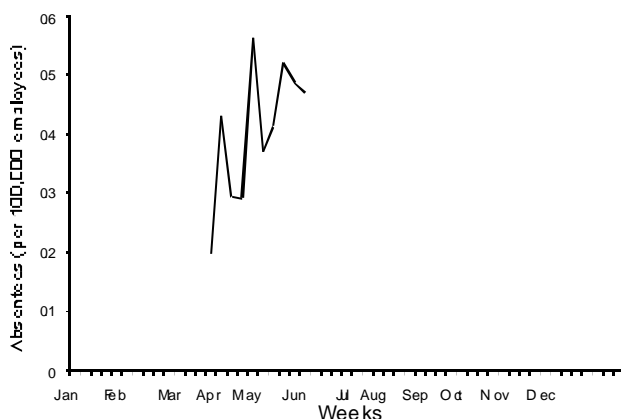
**Laboratory surveillance**

Figure 5 shows the number of laboratory reports for 1998 and 1999. Data for 1999 is provided only for January to May. For the year to date there have been 354 laboratory reports of influenza. Of these 290 (82%) were influenza A and 64 (18%) were influenza B (Figure 6). Of the influenza A that have been typed, 7 strains have been characterised as influenza H3N2 and 2 strains as influenza H1N1.

**Absenteeism surveillance**

Australia Post reports employees absent if they are not at work for three or more consecutive days in one week. The average rates for May were 0.45% which is higher than for May 1998 (0.28%)(Figure 7).

**Figure 7. Absenteeism rates in Australia Post, 1999**



*HIV and AIDS Surveillance*

National surveillance for HIV disease is coordinated by the National Centre in HIV Epidemiology and Clinical Research (NCHECR), in collaboration with State and Territory health authorities and the Commonwealth of Australia. Cases of HIV infection are notified to the National HIV Database on the first occasion of diagnosis in Australia, by either the diagnosing laboratory (ACT, New South Wales, Tasmania, Victoria) or by a combination of laboratory and doctor sources (Northern Territory, Queensland, South Australia, Western Australia). Cases of AIDS are notified through the State and Territory health authorities to the National AIDS Registry. Diagnoses of both HIV infection and AIDS are notified with the person's date of birth and name code, to minimise duplicate notifications while maintaining confidentiality.

Tabulations of diagnoses of HIV infection and AIDS are based on data available three months after the end of the reporting interval indicated, to allow for reporting delay and to incorporate newly available information. More detailed information on diagnoses of HIV infection and AIDS is published in the quarterly Australian HIV Surveillance Report, and annually in HIV/AIDS and related diseases in Australia Annual Surveillance Report. The reports are available from the National Centre in HIV Epidemiology and Clinical Research, 376 Victoria Street, Darlinghurst NSW 2010. Telephone: (02) 9332 4648; Facsimile: (02) 9332 1837; <http://www.med.unsw.edu.au/nchechr>.

HIV and AIDS diagnoses and deaths following AIDS reported for 1 to 28 February 1999, as reported to 31 May 1999, are included in this issue of CDI (Tables 6 and 7).

**Table 6. New diagnoses of HIV infection, new diagnoses of AIDS and deaths following AIDS occurring in the period 1 to 28 February 1999, by sex and State or Territory of diagnosis**

		State or Territory								Totals for Australia			
		ACT	NSW	NT	Qld	SA	Tas	Vic	WA	This period 1999	This period 1998	Year to date 1999	Year to date 1998
HIV diagnoses	Female	1	3	0	1	0	0	2	0	7	7	10	10
	Male	0	18	0	8	1	0	8	2	37	56	79	118
	Sex not reported	0	0	0	0	0	0	0	0	0	2	1	2
	Total <sup>1</sup>	1	21	0	9	1	0	10	2	44	65	90	130
AIDS diagnoses	Female	0	0	0	1	0	0	0	0	1	0	1	2
	Male	0	2	1	5	0	0	0	1	9	26	14	52
	Total <sup>1</sup>	0	2	1	6	0	0	0	1	10	26	15	54
AIDS deaths	Female	0	0	0	0	0	0	0	0	0	0	0	0
	Male	0	3	0	1	0	0	0	0	4	14	20	26
	Total <sup>1</sup>	0	3	0	1	0	0	0	0	4	14	21	26

1. Persons whose sex was reported as transgender are included in the totals.

**Table 7. Cumulative diagnoses of HIV infection, AIDS and deaths following AIDS since the introduction of HIV antibody testing to 31 May 1999, by sex and State or Territory**

		State or Territory								Australia
		ACT	NSW	NT	Qld	SA	Tas	Vic	WA	
HIV diagnoses	Female	23	585	8	132	57	5	201	105	1,116
	Male	188	10,535	104	1,878	651	77	3,765	876	18,074
	Sex not reported	0	258	0	0	0	0	25	0	283
	Total <sup>1</sup>	211	11,397	112	2,017	708	82	4,004	984	19,515
AIDS diagnoses	Female	8	170	0	46	20	3	67	26	340
	Male	85	4,521	34	791	326	44	1,586	344	7,731
	Total <sup>1</sup>	93	4,703	34	839	346	47	1,660	372	8,094
AIDS deaths	Female	2	113	0	30	15	2	47	16	225
	Male	63	3,125	24	554	224	28	1,238	245	5,501
	Total <sup>1</sup>	65	3,246	24	586	239	30	1,291	262	5,743

1. Persons whose sex was reported as transgender are included in the totals.