



Communicable Diseases Intelligence

Bulletin number 84/1

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VIRUS REPORTING SCHEME - Since the CDI was not published over the Christmas-New Year period, this issue contains a compilation of the virus reports for the two periods i.e. 8-21 December 1983 and 22 December 1983 - 4 January 1984. A total of 2,251 reports were received for the two periods. Mycoplasma pneumoniae, parainfluenzavirus type 3 and rhinoviruses continued to predominate the respiratory infections, although an influenza H₁N₁ strain, resembling A/England/333/80, was isolated by the Royal Alexandra Hospital for Children, Sydney, from an 11 month old boy.

- . Arbovirus infections - Imported clinical dengue cases were reported by Fairfield Hospital, Melbourne, in a 49 year old male and 42 year old female who acquired their infection in Indonesia and Sri Lanka respectively. Specific IgM against Kunjin virus and a seroconversion by CF against mumps virus was reported by the State Health Laboratory, Brisbane, in a 12 year old boy from Mossman. The virus reports also indicated widespread epidemic polyarthrititis activity in Queensland (Brisbane (2), Goondiwindi (2), Tara (2), Townsville, Weipa, Pittsworth and Dalby); New South Wales (Narrabri (3), Sydney (3), Albury, Deniliquin, Moree, North Star and unspecified (10)); South Australia (4) and Western Australia (4). Seroconversions for Sindbis virus among the sentinel chicken flocks located in the Murray Region, Victoria, now total Swan Hill (4), Mildura (9), Barmah (8), Robinvale (8), Shepparton (2), Echuca (2) and Kerang (1).
- . Congenital infections - The State Health Laboratory Services, Perth, isolated rubella virus from throat swabs referred from Darwin. Although the child was categorised as congenital rubella syndrome (CRS), no further details were available. Two unusual cases of congenital cytomegalovirus (CMV) infection were reported by Fairfield Hospital. Specific IgM against CMV was detected in a set of twins, both with thrombocytopenia, hepatosplenomegaly and low birth weight. Although twins are usually affected equally, a case in which two infants of a set of triplets were spared infection has been recorded at Fairfield Hospital, implying a possible barrier role for the placenta against intrauterine CMV infection (K. Hayes, personal communication). The hospital also isolated CMV from urine of a two year old boy with optic nerve atrophy believed to be a secondary effect of earlier severe CMV retinopathy.

HUMAN SALMONELLOSIS SURVEILLANCE

(Contributed by S.A. Hogben and J. Taplin, Microbiological Diagnostic Unit (MDU), University of Melbourne.)

This issue details the salmonellas, shigellas and campylobacters isolated from humans in Australia for April-June 1983. During the quarter 1315 salmonella (81 serotypes), 308 shigella and 333 campylobacter reports were collated. As from this quarter, reports are being compiled on the basis of isolation date, and not the date the specimen is received in the typing laboratory.

TYPHOID - Infections contracted overseas included S. typhi 46 isolated from blood culture of a 45 year old female who had returned two weeks previously from Chile and Peru, and S. typhi E1 isolated from faeces of a 26 year old male after travelling in India and Nepal. S. typhi A was cultured from urine of a 14 year old boy from Vanuatu with bilateral hydronephrosis and a non-functioning kidney. He was asymptomatic and was examined after a trivial injury in a football match. The same serotype was recovered from a 75 year old male with carcinoma of the bladder, who stated he may have had typhoid in 1942. S. typhi 46 was isolated from a brachial aneurism of a 52 year old male with no history of typhoid, and S. typhi degraded was grown from blood culture of a 33 year old female with symptoms of typhoid and meningitis. S. typhi E2 was reisolated from a patient who contracted her infection in the Philippines in February (CDI 83/23).

PARATYPHOID - S. paratyphi A phage type 1 was isolated from faeces of the 27 year old nurse reported in February (CDI 83/23) after she was readmitted to hospital with a relapse in April. She had contracted her infection during a visit to India and Nepal.

SEROTYPE EPIDEMIOLOGY - The majority of family outbreaks involved S. typhimurium, and included the phage types 5, 27, 44, 72 (two incidents), 90, 92, 135 (three incidents) and 170. Shigella sonnei and S. sonnei biotype A were implicated in two other outbreaks. Considerable numbers of S. typhimurium phage type 9 continued to be reported from New South Wales (15) and Victoria (17), with 14 isolates recovered from children less than five years of age. Fifteen of the 19 S. typhimurium phage type 27 reports emanated from the Australian Capital Territory, primarily from infections in adults aged between 20-49 years. The most common S. typhimurium phage types isolated during the quarter were 9, 135, 170, 179, 141 and 202.

URINE ISOLATIONS - Isolations from urine comprised the serotypes S. adelaide, S. birkenhead (3), S. blockley, S. bovis-morbificans, S. chester, S. havana, S. muenchen (2), S. saint-paul (2), S. singapore, S. typhi A, S. typhimurium phage types 5, 10, 135 and 144, S. waycross (2) and S. untypable (6). S. typhimurium phage type 144 was isolated from a 57 year old female with lower abdominal pain and calculus in her right kidney.

BLOOD ISOLATIONS - Cases of septicaemia involved the serotypes S. agona, S. bovis-morbificans (2), S. chester, S. infantis, S. javiana, S. mississippi, S. typhi degraded, S. typhimurium phage types 4, 9, 44, and 141 and S. virchow (4). S. flexneri 2A and C. jejuni (3) were also grown from blood cultures. Of the S. typhimurium isolates, phage type 4 was cultured from an 81 year old female with carcinoma of the large bowel, phage type 9 from blood and also a wound abscess from an 82 year old

female, and phage type 141 from a 75 year old paraplegic male with bullous impetigo. S. bovis-morbificans was isolated from a 50 year old male with a cerebral tumour, and S. javiana from a 23 year old male with PUO on his return from Bali.

MISCELLANEOUS INFECTIONS - S. adelaide was recovered from faeces at post mortem of an eight month old girl with endocardial fibroelastosis, and S. chester was cultured from the vagina of a 27 old female. S. typhimurium phage type 135 was grown from pleural aspirate of a 58 year old male, and phage type 179 was isolated from sputum and faeces of a 65 year old female who became ill after eating frozen cooked chicken.

Organisms reported for the first time this quarter were S. boydii (Western Australia), S. sonnei biotype F (Victoria) and S. typhimurium phage type 10 (South Australia).

SALMONELLA SURVEILLANCE - NON-HUMAN ISOLATES

(Contributed by J. Taplin and L. Scott, MDU, University of Melbourne.)

A total of 1368 salmonella reports from non-human sources were collated by the National Salmonella Surveillance Scheme (NSSS) for the period April-June 1983 (New South Wales-8; Victoria -360; Queensland - 1; South Australia - 3; and Western Australia - 924). Since the salmonella serotypes monitored in Western Australia have already been detailed in CDI 83/23, discussion of the environmental isolates for this second quarter will be limited primarily to Victoria.

FOOD STUFFS - In late March, S. lille was isolated from cocoa, presumably imported from Ghana. The serotype was also isolated from confectionery and ice-cream manufactured from this contaminated cocoa powder, but all contaminated products were intercepted before distribution and destroyed. In addition, S. duisburg was isolated from cocoa beans imported from Ghana, and S. lille and S. senftenberg were grown from cocoa imported from the Philippines via Singapore.

Serotypes cultured from raw egg pulp included S. bareilly (1), S. infantis (7), S. singapore (6), S. 4,12:d:- (3) and S. typhimurium phage type 26 (1). S. oranienburg was isolated from raw egg pulp, egg white and spray dried egg.

ANIMAL PRODUCTS - A survey of pig carcass swabs from two abattoirs yielded mainly S. give, S. derby, S. infantis, S. bredeney and S. anatum with occasional isolations of S. bovis-morbificans, S. meleagridis, S. eimsbuettel, S. london, S. chester, S. vejle and S. eastbourne.

DAIRY FACTORIES - The monitoring of factory environments has shown the continued re-isolation of S. agona at factory 1, S. bredeney (factory 2), S. derby (factory 3) and S. ohio and S. havana (factory 4). Salmonella serotypes were also recovered from the environment of two new factories - S. warragul (factory 5) and S. dublin (factory 6). S. senftenberg is still being isolated from the factory in New South Wales.

POTABLE WATERS - Eight different salmonella serotypes were isolated from potable waters in Victoria, including six different types of S. arizonae and two phage types of S. typhimurium. State distribution of the serotypes was S. bonn (Western), S. hessarek (Eastern and Central), S. houten (North Eastern, Eastern and Central), S. orientalis (Eastern), S. warragul (Western and Eastern), S. typhimurium phage type 4

(North Eastern), S. typhimurium phage type 9 (North Eastern and Western) and S. arizonae from all areas but principally in the North East Region. S. rowbarton was isolated for the first time in Victoria from a storage tank in North East Victoria.

S. TYPHIMURIUM - Of the 171 cultures of S. typhimurium recorded, 67 from Western Australia were not phage typed. All but 15 of the remaining 104 isolates were associated with the chicken industry (New South Wales (65); Victoria (19); Western Australia (3); South Australia (2)). Phage types 179 and 135 were the most common isolates in both New South Wales and Victoria.

GONOCOCCAL ENDOPHTHALMITIS

(Contributed by H.J. Sullivan and R.S. McLean, Royal Australian Navy Hospital, HMAS Penguin (RANHP), Balmoral, Sydney.)

In May 1983, a 19 year old naval rating was transferred urgently ashore from his ship in Manila back to Australia with gross, purulent left endophthalmitis of ten days duration.

He had initially been seen by the ship's medical officer who suspected adenovirus keratoconjunctivitis because of several similar cases aboard the ship, and her sister ship, during the previous few months. The rating was further examined by a consultant ophthalmologist in Manila who diagnosed left endophthalmitis probably caused by an adenovirus, Pseudomonas or gonococcal infection. The patient was given gentamicin IM and chloromycetin eye drops four times daily, and was recommended that he be immediately evacuated back to Australia.

Eye swabs were taken for culture on admission to RANHP before immediate transfer to the Sydney Eye Hospital. Swabs for culture from other sites were not requested. Gram staining of the conjunctival discharge at RANHP revealed numerous polymorphs and Gram-negative diplococci. Cultures performed at RANHP and at Sydney Eye Hospital yielded β -lactamase negative, penicillin-sensitive Neisseria gonorrhoeae. Referral of the cultures to the Department of Microbiology, Prince of Wales Hospital, confirmed N. gonorrhoeae with a penicillin MIC value of 0.5, $\mu\text{g/ml}$.

The patient stated that his last sexual contact was 3-4 weeks previously in Thailand, but he denied any urethral discharge or other gonococcal symptoms. However, he added that there had been several cases of gonorrhoea under treatment amongst his messmates, and he could have accidentally used their bath towels which were similar in colour. Since gonococci may survive outside the body for short periods, fomites could theoretically have played a role in the non-venereal spread of infection to his left eye (1).

Following admission, the patient developed a left corneal ulceration with complete corneal clouding and marked sclero-conjunctival injection and oedema. A sclero-corneal transplant using a cadaver donor was performed at Sydney Eye Hospital, as well as reconstruction of the anterior chamber. Subsequent chronic rejection occurred, and the donor cornea became hazy and ulcerated leaving the patient's vision-right eye 6/6, left eye 6/60. Further treatment is planned and a repeat corneal graft will be performed when the left eye is quiescent.

Reference

1. MMWR (1981) 30 : 341

MALARIA IN AUSTRALIA - 1982

(Contributed by P.M. Moodie, Central Registry of Malaria Cases, Commonwealth Institute of Health.)

A total of 578 cases of malaria were recorded in the Central Register of Malaria Cases during 1982 compared with 497 and 628 in 1981 and 1980 respectively. Of these, 574 were imported and four cases were introduced from Papua New Guinea (Plasmodium falciparum (2); P. vivax (1); P. species (1)). There was one death from a P. falciparum infection acquired in Indonesia. P. vivax infections were the most common (446 cases) followed by P. falciparum (120) and P. ovale (5). There were seven mixed infections, five of P. falciparum and P. vivax, one of P. falciparum and P. ovale and one where the species were not determined. The origins of the cases were South West Pacific (366; Papua New Guinea - 292, Solomon Islands - 57, Vanuatu - 10 and others - 7); Asia (152; Indonesia - 48, India - 37, Malaysia - 6, Vietnam - 5, Philippines - 4, Thailand - 4, Kampuchea - 2, Pakistan - 2, Bangladesh - 1 and others - 43); Africa (13) and Turkey (1). The countries of origin were unspecified for 46 cases.

ANNOUNCEMENT - ACUTE RESPIRATORY INFECTIONS IN CHILDHOOD;
SOUTH-EAST ASIAN AND PACIFIC RESEARCH-FOR-DEVELOPMENT WORKSHOP
ON THE CONTROL OF MORBIDITY AND MORTALITY

A five day workshop on acute respiratory infections (ARI's) will be held at the Hilton Airport Hotel, Sydney, on 27-31 August 1984. The objectives of the meeting are:-

- . To summarise the current state of knowledge about ARI's with particular emphasis on children in developing countries, and to identify practical strategies for infection control.
- . To enable research workers from Australia and surrounding countries to meet and discuss, and increase mutual collaboration, in areas of active interest.
- . To produce a publication which has practical application to the needs of the evolving ARI international program, and to make key health administration personnel aware of the problem of ARI and its potential solutions.

The workshop is being co-sponsored by the Australian Development Assistance Bureau; World Health Organisation; Commonwealth Institute of Health and Postgraduate Committee in Medicine, University of Sydney; and United Nations Children's Fund. Unfortunately, participants will be limited to 120, including invited representatives, but registration is open for up to 60 Australian resident's and 30 other interested persons on a "first come" basis. Registration fee is \$A150. All participants are invited to submit articles bearing upon the subjects of the workshop for consideration by the Steering Committee. Abstracts will be limited to 500 words, in English, and should include Title, Author's Name and Positions, a brief summary of the nature of the contribution to be made, and when completed studies are being reported a brief review of the findings. Abstracts must reach the conference office before 1 April 1984 and be addressed to:-

A.R.I. Workshop
Postgraduate Committee in Medicine
Coppleson Institute D02
The University of Sydney
SYDNEY. NSW 2006

The proceedings of the workshop will be published in an internationally distributed journal and are expected to serve as an adjunct to the evolving WHO program on the Control of Acute Respiratory Infections.

HUMAN SALMONELLOSIS CASESPeriod: April - June 1983

Serotype	Total	NSW&						
		ACT	VIC	QLD	SA	WA	TAS	NT
S. aberdeen	6	1		5				
S. abony	6	1		3	1			1
S. adelaide	18	2	2	6	2	5	1	
S. agona	10	2	1					7
S. anatum	52	12	6	18	2	10	1	3
S. angoda	1					1		
S. arizonae	6			6				
S. ball	1							1
S. bareilly	3	2	1					
S. binza	1			1				
S. birkenhead	23	4	4	12	3			
S. blockley	9	9						
S. bournemouth	1			1				
S. bovis-morbificans	85	19	39	4	18	4		1
S. braenderup	1	1						
S. bredeney	6	1		1	1	3		
S. bukavu	1				1			
S. cerro	2	2						
S. chester	47	6		14	8	11		8
S. cholerae suis	2					2		
S. derby	19	5	7		2	4		1
S. dublin	1		1					
S. eastbourne	9		1	4		2		2
S. emek	2		2					
S. enteritidis	16	1	1	14				
S. fremantle	2				1	1		
S. give	7	3	2			2		
S. havana	48	11	7	8	6	9		7
S. heidelberg	1					1		
S. hvittingfoss	4	1		2		1		
S. indiana	1	1						
S. infantis	23	8	2	2	6	4		1
S. irumu	1					1		
S. jangwani	2					1		1
S. java	3	3						
S. java dundee	1				1			
S. java untypable	7			4	1			2
S. java lvar 6	1			1				
S. javiana	3	3						
S. johannesburg	1	1						
S. kottbus	6	4	1			1		
S. lansing	8			6		2		
S. lexington	1			1				
S. litchfield	5			1				4
S. livingstone	1					1		
S. london	2		2					
S. manhattan	1				1			
S. meleagridis	4		3	1				
S. mississippi	11						11	
S. montevideo	1		1					
S. muenchen	68	2		23	12	20		11
S. new brunswick	1					1		
S. newington	4			3		1		
S. newport	17	4	3		8	1		1
S. ohio	5	3	1			1		
S. ohlstedt	3			3				
S. onderstepoort	7			4				3
S. oranienburg	12		1		2	7		2

HUMAN SALMONELLOSIS CASESPeriod: April - June 1983

Serotype	Total	NSW&						
		ACT	VIC	QLD	SA	WA	TAS	NT
S. orion	13			3	2	2		6
S. oslo	2				1	1		
S. panama	5	1	2					2
S. paratyphi A1	1		1					
S. poona	1							1
S. potsdam	8	1		6	1			
S. rubislaw	5					4		1
S. saint-paul	47	4	1	25	1	8	1	7
S. schwarzengrund	1			1				
S. senftenberg	14	1	3	3		2		5
S. singapore	25	17	1	2	3	2		
S. sofia	1		1					
S. stanley	3	1	2					
S. tennessee	12	1	1	2		4		4
S. thompson	4			3	1			
S. typhi*	10	6		1		3		
S. typhimurium*	424	162	106	51	53	30	10	12
S. untypable	2	1			1			
S. untypable rough: L,V:-	1	1						
S. untypable 1,13,23:-	2		2					
S. untypable 16:L,V:-	2	2						
S. untypable 17:A:-	1							1
S. untypable 39:-:1,7 SG2	2		2					
S. untypable 4,5:E	2					2		
S. untypable 6,7:K:-	3							3
S. untypable 6,7:L,V:-	1	1						
S. untypable 6,8:R:-	2		2					
S. untypable 9,12:-:1,5	1		1					
S. urbana	4					4		
S. virchow	78	3	1	71	1	2		
S. wandsbek	5			1	1	2		1
S. wandsworth	7					5		2
S. waycross	7	2		5				
S. welikade	6	2		3		1		
S. weltevreden	14		2					12
S. worthington	4	3		1				
S. zanzibar	2			2				
S. 4,12:D:-	3			1	1	1		
TOTAL	1315	321	216	329	142	170	24	113

S. typhimurium*								
S. typhimurium	5	1		1	1	2		
S. typhimurium UDNC	12	6	3	1		2		
S. typhimurium UDNC*	2					2		
S. typhimurium untypable	16	7	5	1	1	2		
phage type 1	3	1	2					
phage type 2	6	1	3		2			
phage type 3	1			1				
phage type 4	13	6	5		1		1	
phage type 5	17	4	1	3	9			
phage type 6	3	1	1	1				
phage type 8	21	2	11		8			
phage type 9	44	15	17	4	2	6		
phage type 10	1				1			
phage type 12	2	2						

HUMAN SALMONELLOSIS CASES

Period: April - June 1983

Serotype	NSW&							
	Total	ACT	VIC	QLD	SA	WA	TAS	NT
phage type 12A	8	3	1		3	1		
phage type 13	1				1			
phage type 16	1	1						
phage type 22	13	1		1	1	2		8
phage type 25	2	2						
phage type 26	15	5	6		3	1		
phage type 27	19	17			1	1		
phage type 31	4	1	3					
phage type 41	6	4			2			
phage type 44	10		4	3	2			1
phage type 46	5	2	3					
phage type 55	5		1		3	1		
phage type 64	5	3			1	1		
phage type 68	1				1			
phage type 72	4					4		
phage type 90	8	8						
phage type 92	2		2					
phage type 101	7	2		2			3	
phage type 101A	1	1						
phage type 102	2		1	1				
phage type 104	2	1	1					
phage type 108	5	2		3				
phage type 124	8	8						
phage type 126	2	2						
phage type 135	38	8	13	6	4	2	5	
phage type 141	20	14	3	1		1	1	
phage type 145	1		1					
phage type 150	1		1					
phage type 154	2							2
phage type 170	33	14	11	7	1			
phage type 176	3				3			
phage type 179	22	9	7	4		1		1
phage type 183	1				1			
phage type 186	1	1						
phage type 202	20	7		11	1	1		
TOTAL	424	162	106	51	53	30	10	12
<u>S. typhi</u> *								
S. typhi	1					1		
S. typhi A	3	1				2		
S. typhi degraded	4	3		1				
S. typhi E1	1	1						
S. typhi 46	2	2						
TOTAL	11	7		1		3		
<u>Shigellae</u>								
S. boydii 1	2					2		
S. flexneri 1A	1		1					
S. flexneri 1B	1							1
S. flexneri 2	21	2				19		
S. flexneri 2A	37	2	1	9	2	10		13

HUMAN SALMONELLOSIS CASES

Period: April - June 1983

Serotype	Total	NSW&						
		ACT	VIC	QLD	SA	WA	TAS	NT
S. flexneri 2B	1		1					
S. flexneri 4	1	1						
S. flexneri 6	23	3	1			12		7
S. sonnei	131	3				86		42
S. sonnei BIO A	82	1	6	14	18	41		2
S. sonnei BIO F	2		2					
S. sonnei BIO G	6		6					
TOTAL	308	12	18	23	20	170		65
<u>Campylobacter</u>								
C. jejuni	220	32	85	18	11	74		
C. species	113	106	4		3			
TOTAL	333	138	89	18	14	74		

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

 REPORTING PERIOD - 8/12/83 - 4/1/84 BULLETIN NUMBER . 84/1
 VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR	RAHC (NSW)	PHH/ POW (NSW)	FAIR- FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE	STATE	Total
	(NSW)/ WVH (ACT)						LAB (QLD)	LAB (WA)	
0100 ADENOVIRUS NOT TYPED.....	6	4	11		4		10	1	36
0101 ADENOVIRUS TYPE 1.....					3	3	1		7
0102 ADENOVIRUS TYPE 2.....		1			5	1		4	11
0103 ADENOVIRUS TYPE 3.....	1	1		8	1	1			12
0104 ADENOVIRUS TYPE 4.....					1				1
0105 ADENOVIRUS TYPE 5.....	3					7		1	11
0106 ADENOVIRUS TYPE 6.....						3			3
0107 ADENOVIRUS TYPE 7.....		2							2
0111 ADENOVIRUS TYPE 11.....								2	2
0118 ADENOVIRUS TYPE 18.....						1			1
0119 ADENOVIRUS TYPE 19.....	2			1		3			6
0120 ADENOVIRUS TYPE 20.....						1			1
0199 ADENOVIRUS TYPING PENDING.....		1	1		13	2			17
0201 INFLUENZA A VIRUS.....				1					1
0203 INFLUENZA B VIRUS.....								1	1
0206 INFLUENZA A VIRUS SUBTYPE H1N1.....		1							1
0301 PARAINFLUENZA VIRUS TYPE 1.....				2	4	2		2	10
0302 PARAINFLUENZA VIRUS TYPE 2.....				1		1		1	3
0303 PARAINFLUENZA VIRUS TYPE 3.....	8	4	4	4	31	28	17	3	99
0304 PARAINFLUENZA VIRUS TYPE 4.....								1	1
0399 PARAINFLUENZA VIRUS TYPING PENDING.....						3			3
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)....					1	3	1	13	18
0500 RHINOVIRUS (ALL TYPES).....	2		2	16	22	13	14		69
0600 MYCOPLASMA PNEUMONIAE.....	20	7		90	7	94	28	9	255
0700 ORNITHOSIS-PSITTACOSIS.....				4		2			6
0800 COXSACKIEVIRUSES GROUP A - NOT TYPED.....								3	3
0816 COXSACKIEVIRUS A16.....							2		2
0901 COXSACKIEVIRUS B1.....		1							1
0902 COXSACKIEVIRUS B2.....	1			4	1	8	1	1	16
0903 COXSACKIEVIRUS B3.....				2					2
0905 COXSACKIEVIRUS B5.....						2			2
1006 ECHOVIRUS TYPE 6.....							1	1	2
1009 ECHOVIRUS TYPE 9.....	2			2	1		11		16
1011 ECHOVIRUS TYPE 11.....					1				1
1016 ECHOVIRUS TYPE 16.....		1							1
1017 ECHOVIRUS TYPE 17.....		1							1
1022 ECHOVIRUS TYPE 22.....		2							2
1024 ECHOVIRUS TYPE 24.....		1							1
1026 ECHOVIRUS TYPE 26.....						1			1
1101 POLIOVIRUS TYPE 1.....						3		2	5
1102 POLIOVIRUS TYPE 2.....	1			1		3			5
1103 POLIOVIRUS TYPE 3.....						3	1		4
1104 POLIOVIRUS-VACCINAL STRAIN.....			3						3
1200 MUMPS VIRUS.....	4	2	1	4	2	2	4	4	23
1300 HERPES VIRUS GROUP-NOT TYPED.....	25			2		4			31
1301 HERPES SIMPLEX VIRUS NOT-TYPED.....		5		1					6
1302 EPSTEIN-BARR VIRUS (EB VIRUS).....	10	1				2		16	29
1303 VARICELLA-ZOSTER VIRUS.....	2		1	1		1	1	1	7
1306 HERPES SIMPLEX TYPE 1.....	25		12	72		33	63	34	239
1307 HERPES SIMPLEX TYPE 2.....	112		14	103		35	120	64	448
1399 HERPES VIRUS TYPING PENDING.....			29	1	5	9			44
1401 COXIELLA BURNETI.....	5						7		12
1502 PICORNA VIRUS-NOT TYPED.....	2		12				2		16
1515 CONTAGIOUS PUSTULAR DERMATITIS (ORF VIRUS).....						1			1
1521 MEASLES VIRUS.....				7	4	5		2	18
1522 RUBELLA VIRUS.....	8	1		5		9	33	3	59
1532 HEPATITIS B ANTIGEN.....	90		14	33		36	24	10	207
1535 HEPATITIS A ANTIBODY.....	6		3	8		7	7	9	40
1541 CHLAMYDIA A - C TRACHOMATIS.....	38					8	16	97	159
1556 CMV - CYTOMEGALOVIRUS.....	9	1		33	9	3	7	11	73
1564 ROTAVIRUS.....	12	10	23	5	18	26		11	105
1599 ENTEROVIRUS TYPING PENDING.....		1	21		15	4			41
ARBO. GROUP A.(UNSPECIFIED).....				1					1
ROSS RIVER VIRUS.....	2		3			4	25	4	38
SMALL VIRUS (LIKE) PARTICLE.....	2	3							5
PARAMYXOVIRUS.....						1			1
KUNJIN VIRUS.....							1		1
ARBO. GROUP B.				2					2
Total.....	398	51	154	414	148	378	397	311	2,251

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 8/12/83 to 4/1/84

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Viral Identifications by Clinical Information Table 1.

Code 00,99 -No ill or data; 01,02,11,12 -Respiratory; E3 -Encephalitis; M3 -Meningitis; 04 -Paralysis; 05,13 -CNS other unspec.; 07,49 -GI; 17,47 -Hepatic; 19 -CVS; 89 -Urinary; 06 -Skin/mucous.

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respiratory	Encephalitis	Meningitis	Paralysis	CNS other unspec	GI	Hepatic	CVS	Urinary	Skin/ mucous memb
0100 ADENOVIRUS NOT TYPED.....								5			1
0101 ADENOVIRUS TYPE 1.....		5						3			
0102 ADENOVIRUS TYPE 2.....		7				1	1				1
0103 ADENOVIRUS TYPE 3.....	1	7									
0104 ADENOVIRUS TYPE 4.....											1
0105 ADENOVIRUS TYPE 5.....	1	7						3			
0106 ADENOVIRUS TYPE 6.....								3			
0107 ADENOVIRUS TYPE 7.....		1	1								
0111 ADENOVIRUS TYPE 11.....						1				1	
0118 ADENOVIRUS TYPE 18.....		1									
0201 INFLUENZA A VIRUS.....		1									
0206 INFLUENZA A VIRUS SUBTYPE H1N1		1									
0301 PARAINFLUENZA VIRUS TYPE 1....		10									
0302 PARAINFLUENZA VIRUS TYPE 2....	1	2									
0303 PARAINFLUENZA VIRUS TYPE 3....	4	89					1				1
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....		18									
0500 RHINOVIRUS (ALL TYPES).....		65				1					1
0600 MYCOPLASMA PNEUMONIAE.....	33	213				4		1			9
0700 ORNITHOSIS-PSITTACOSIS.....	2	2									1
0816 COXSACKIEVIRUS A16.....											2
0901 COXSACKIEVIRUS B1.....		1									
0902 COXSACKIEVIRUS B2.....		10		1			2		1		1
0903 COXSACKIEVIRUS B3.....				2							
0905 COXSACKIEVIRUS B5.....		1					1				
1006 ECHOVIRUS TYPE 6.....					2						
1009 ECHOVIRUS TYPE 9.....	1	3			6		3				
1011 ECHOVIRUS TYPE 11.....							1				
1017 ECHOVIRUS TYPE 17.....				1							
1024 ECHOVIRUS TYPE 24.....											1
1026 ECHOVIRUS TYPE 26.....							1				
1101 POLIOVIRUS TYPE 1.....	1	2				1	1				
1102 POLIOVIRUS TYPE 2.....							3	1			
1103 POLIOVIRUS TYPE 3.....	2						1				
1104 POLIOVIRUS-VACCINAL STRAIN....							3				
1200 MUMPS VIRUS.....	3	3	3	4		1					1
1301 HERPES SIMPLEX VIRUS NOT-TYPED											5
1302 EPSTEIN-BARR VIRUS (EB VIRUS).	8	1						3			1
1303 VARICELLA-ZOSTER VIRUS.....	1										6
1306 HERPES SIMPLEX TYPE 1.....	6	11				1				4	108
1307 HERPES SIMPLEX TYPE 2.....	6										90
1401 COXIELLA BURNETI.....	4										
1502 PICORNA VIRUS-NOT TYPED.....							12				
1515 CONTAGIOUS PUSTULAR DERMATITIS (ORF VIRUS).....											1
1521 MEASLES VIRUS.....	2	5				2					11
1522 RUBELLA VIRUS.....	7	5									39
1532 HEPATITIS B ANTIGEN.....	109							91			1
1535 HEPATITIS A ANTIBODY.....	8	1						28			
1556 CMV - CYTOMEGALOVIRUS.....	4	18				3	1	4		7	2
1564 ROTAVIRUS.....	2	1				1		102			7
9992 ROSS RIVER VIRUS.....	19	1									
9994 SMALL VIRUS (LIKE) PARTICLE...								5			
9996 PARAMYXOVIRUS.....		1									
9997 KUNJIN VIRUS.....											1
Total.....	225	493	5	15	1	15	152	128	1	12	292

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

PERIOD : 8/12/83 to 4/1/84 ...
 Viral Identifications by Clinical Information Table 2.
 Code 10 -Eye; 59 -Genital; 39 -Endo/sal gland;
 38 -RES; 29 -Muscle/joint; 69 -Congenital; P8 -PUO;
 68 -Fever/malaise; 09 -Other; A1 -SIDS ...

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VIRUS OR VIRAL ANTIGEN	Eye	Gen-ital	Endo/sal gland	RES	Muscle/joint	Con-genital	PUO	Fever/malaise	Other	SIDS
0101 ADENOVIRUS TYPE 1.....								1		
0102 ADENOVIRUS TYPE 2.....							1	1		
0103 ADENOVIRUS TYPE 3.....	3							1		
0107 ADENOVIRUS TYPE 7.....								1		
0119 ADENOVIRUS TYPE 19.....	5	1								
0120 ADENOVIRUS TYPE 20.....									1	
0137 ADENOVIRUS TYPE 37.....	2	5								
0203 INFLUENZA B VIRUS.....								1		
0303 PARAINFLUENZA VIRUS TYPE 3....							4	2	1	
0304 PARAINFLUENZA VIRUS TYPE 4....										1
0500 RHINOVIRUS (ALL TYPES).....	2						3			
0600 MYCOPLASMA PNEUMONIAE.....		3			1	4	7	18		
0700 ORNITHOSIS-PSITTACOSIS.....								2		
0902 COXSACKIEVIRUS B2.....								1		
1009 ECHOVIRUS TYPE 9.....								2		1
1016 ECHOVIRUS TYPE 16.....							1			
1022 ECHOVIRUS TYPE 22.....									2	
1102 POLIOVIRUS TYPE 2.....							1			
1103 POLIOVIRUS TYPE 3.....										1
1200 MUMPS VIRUS.....				9	1		1	1	1	
1301 HERPES SIMPLEX VIRUS NOT-TYPED		1								
1302 EPSTEIN-BARR VIRUS (EB VIRUS).			14				3	7	2	
1306 HERPES SIMPLEX TYPE 1.....	17	92						7	3	
1307 HERPES SIMPLEX TYPE 2.....		356				1				
1401 COXIELLA BURNETI.....							3	5		
1521 MEASLES VIRUS.....							1			
1522 RUBELLA VIRUS.....				2	14	3		12	3	
1532 HEPATITIS B ANTIGEN.....								1		
1535 HEPATITIS A ANTIBODY.....									3	
1541 CHLAMYDIA A - C.TRACHOMATIS...		159								
1556 CMV - CYTOMEGALOVIRUS.....		7		1	1	7	4	12	9	
9901 ARBO. GROUP A.(UNSPECIFIED)...					1					
9992 ROSS RIVER VIRUS.....					14			4		
9997 KUNJIN VIRUS.....					1					
9998 ARBO. GROUP B.				1				1		
Total.....	29	624	26	2	32	15	29	80	30	3