



Communicable Diseases Intelligence

Bulletin number 82/1

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Contents:

- Human salmonellosis surveillance.
- S. newport outbreak - Victoria.
- Gastro-enteritis related to fermented sausage - S.A.
- S. bovis-morbificans phage typing.

VIRUS REPORTING SCHEME - Since the CDI was not published over Christmas-New Year, this issue contains a compilation of the virus reports for the two periods i.e. 10-23 December 1981 and 24 December 1981-6 January 1982. A total of 1369 reports were received for the two periods, although figures from one laboratory were not received due to a delay in the mail. Patterns suggested by the reports included the continuation of measles, rubella, and to a lesser extent, mumps infections in the community. Enteroviral infections, particularly coxsackieviruses B4 and B5 and echovirus type 17, increased, with viral meningitis accounting for approximately 50% of presentations. Respiratory infections were dominated by parainfluenza virus type 3.

Reports of interest included:

- Thirty of the dengue reports from the State Health Laboratory, Brisbane, were of sera collected in the first two weeks of November 1981 from patients in the outbreak on Thursday Island. One serum was taken from a 19 year old blood donor who was included in a control group. The laboratory also confirmed dengue fever in a 34 year old male from Cairns. Clinical dengue was diagnosed by Fairfield Hospital, Melbourne, in a 44 year old male who had recently been employed as a construction worker on Tarawa, Kiribati.
- Varicella-zoster virus was isolated from a 16 weeks pregnant 29 year old woman with Wilson's disease admitted to Fairfield Hospital with severe pneumonia. Because of the severity of the disease she aborted the foetus, and required artificial respiration and high levels of inspired oxygen. The patient had no history of childhood chickenpox infection, and had been in contact with neighbouring infected children three weeks previously. CF antibody against varicella-zoster virus was also detected in the CSF of a 30 year old male with encephalitis by the Institute of Clinical Pathology and Medical Research, Sydney.
- Parainfluenza virus type 3 was isolated by the State Health Laboratory, Brisbane, from the CSF of a 15 year old boy with meningitis. A CSF cell count indicated polymorphonuclear neutrophils 6624/c.mm, monocytes 2276/c.mm and erythrocytes 640/c.mm with protein > 100mg/100ml and sugar 0.25m.mol/L.

(continued on page 6)

HUMAN SALMONELLOSIS SURVEILLANCE

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

This issue contains reports tabulating the identification of salmonellas, shigellas and campylobacters isolated from humans in Australia for the quarter July-September 1981 (see CDI 81/17 and 81/19 for tables for the first two quarters). During the period, 1,242 salmonella (79 serotypes), 88 shigella and 97 campylobacter isolations were reported; 384 of the salmonella reports arose from the one foodborne outbreak centred in Victoria.

TYPHOID - Twelve isolations of S. typhi were reported in the period, of which three isolations were from refugees, three from people returning from overseas, two from known carriers, one from a follow-up investigation, one from blood cultures and two from patients about whom no information was supplied.

PARATYPHOID - S. paratyphi A phage type 1 was isolated from blood and faeces of a 38 year old man who had a history of spiking temperature following his return from Indonesia, Sri Lanka and Malaysia. The serotype was also re-isolated from an asymptomatic 27 year old male reported in December 1980. No details were available of the isolation from faeces of S. paratyphi B phage type UDNC and S. paratyphi B phage type 3a 1 from a seven month old boy and a female respectively.

OUTBREAKS - The reports this period were dominated by two foodborne outbreaks. One was attributed to S. newport in salami which originated in Victoria, and the other to S. bovis-morbificans and S. typhimurium phage type UDNC in fermented sausage in South Australia. Both these outbreaks are reported separately in this issue.

On 14 July 1981, a patient was admitted to Fairfield Hospital with nausea, vomiting and diarrhoea. She had arrived in Melbourne two days previously on a flight from London via Bahrain, Kuala Lumpur and Singapore. It was reported that 17 passengers began vomiting two hours out of Singapore, and symptoms of diarrhoea occurred from 14 hours to three days later. One hundred of the 168 passengers were contacted, and all those with diarrhoea or who were foodhandlers were investigated. S. alachua was isolated from eight passengers including one mixed infection of S. alachua and V. cholerae non-01 from a woman who had eaten crab meat at the Singapore stop-over. Of the 25 reports of S. alachua collated by the National Reporting Scheme to date, 19 were confirmed as originating overseas.

S. enteritidis was isolated from faeces of two people admitted to hospital after a tour in Hawaii. Of the 16 people on the tour, eight became violently ill in Hawaii after a buffet meal. Lasagna appeared to be the implicated food. Other people at the hotel also became ill. All members of the tour were contacted, and a further three were found to be excreting S. enteritidis.

S. kottbus was isolated from faeces of ten patients in the Ballarat area. Two adults from one family, and the mother and two boys aged five and eight years of another family had recently returned from Bali. No connection between the people infected overseas and the other patients could be established. A previous patient at the hospital was infected with S. kottbus and S. oslo after returning from Bali in June.

Two family outbreaks of Sh. sonnei biotype A occurred in Victoria. One incident involved the father (aged 43 years), mother (40) and four children (18, 15, 11 and nine). The 15 year old daughter was the first to be infected. A 12 year old boy with Down's syndrome who was staying with the family was also infected. The second family outbreak involved the mother and two children aged six and nine years. The youngest child also had Giardia lamblia. Other family outbreaks were attributed to S. typhimurium phage type 179 in Whyalla and S. typhimurium phage type 202 in Western Australia. The latter phage type was first reported in May from quokkas and tiger snakes.

A sudden increase in the isolation of S. typhimurium phage type 101 was noted in mid-September. Four of the seven patients were children under ten years of age from the eastern suburbs of Melbourne. No common factor was established. The phage type was also isolated from two children aged less than two years in New South Wales at the beginning of September. Other serotypes that exhibited regional and/or isolation frequency variation included a sharp rise of S. wandsworth isolations in the Northern Territory (18 reports compared to five in the previous quarter), and a decrease of S. adelaide in all States.

MISCELLANEOUS INFECTIONS - S. dublin was isolated from the swab of a pustular lesion on the right forearm of a 32 year old farmer. He developed the local rash after delivering a still-borne calf. S. derby was isolated from the eyes of a five week old girl with purulent conjunctivitis. S. typhimurium phage type 179 was cultured from the aspirate from a ten month old boy with septic arthritis of the knee. He also had diarrhoea. S. typhimurium phage type 154 was isolated from blood, faeces and urine of a 45 year old woman with destructive pneumonia and diarrhoea, and S. typhimurium phage type UDNC was isolated from a wound abscess close to the kidney of a 37 year old male who had a renal transplant two months previously. Other serotypes isolated from urine included S. havana and S. typhimurium phage types 12A, 27 and 135.

Serotypes that were reported for the first time this quarter included S. bardo (Australian Capital Territory) and S. blukwa (Western Australia). The first reports of S. dublin this year included three isolations from Victoria, one from pus and one from blood.

S. NEWPORT OUTBREAK - VICTORIA

(Contributed by J. Taplin, Microbiological Diagnostic Unit, University of Melbourne).

Until 1978, S. newport was isolated relatively frequently from patients in Victoria, when it comprised 6% of all human isolates in 1976, 1977 and 1978. However, the isolation frequency decreased significantly in 1979 and 1980. In the period 17-31 July 1981, 21 cases of S. newport were reported in the State, whereas the serotype had only been isolated on four occasions in the previous six months (2 January, 2 April). Three of these cases had recently returned from overseas. Consequently the Health Commission was notified, and investigations were commenced. The number of isolations over the following weeks together with age distribution are listed in Tables 1 and 2 respectively.

TABLE 1 S. newport isolations in Victoria

<u>Week ending</u>	17 Jul	24 Jul	31 Jul	7 Aug	14 Aug	21 Aug
<u>No. of cases</u>	1	5	15	33	79	113
<u>Week ending</u>	28 Aug	4 Sept	11 Sept	18 Sept	25 Sept	2 Oct
<u>No. of cases</u>	17	8	4	2	2	0
TOTAL =	279					

TABLE 2 Age distribution of S. newport cases

<u>Age (years)</u>	2	2-5	6-10	11-20	21-60	60	unknown
<u>No. of cases</u>	15	32	19	38	123	7	42

A jar of marinated scallops and the remains of a large salami which had been eaten by two people who became ill two days later with S. newport infection provided the first lead as to the cause of the outbreak. S. newport was isolated from both the scallops and salami. Samples of the same brand and type of salami purchased from shops also yielded the organism. However, examination of other jars of scallops and faeces from food processors failed to grow S. newport. The salamis from the relevant manufacturer were withdrawn from sale on 11 August (see CDI 81/16). Investigation of the products marketed by the manufacturer resulted in the isolation of S. newport from seven different types of salami, S. anatum from four, S. derby from two and S. typhimurium phage type 1 from two. Salamis from other manufacturers yielded S. newport, S. anatum, S. ohio, S. give and S. oranienburg. Follow-up examination of a wide variety of salamis from the implicated manufacturer when the outbreak had ceased yielded the following serotypes; - S. adelaide (2), S. anatum (13), S. derby (8), S. eimsbuettel (1), S. havana (1), S. infantis (1), S. johannesburg (5), S. muenchen (6), S. newport (5), S. ohio (4), S. schwarzengrund (2), S. typhimurium phage type 1 (2), S. typhimurium phage type 46 (1) and S. wandsbek (4). Thirteen of the different varieties of salamis yielded more than one salmonella serotype. Three varieties grew only one serotype. It is not unusual for salami and related products to have low numbers of salmonella, but due to the nature of the product they do not multiply and in fact, decrease on storage. Apart from S. newport, S. typhimurium phage type 1 and possibly S. anatum, there was no significant rise in the number of patients affected with any of the above serotypes in Victoria (S. typhimurium phage type 1 was isolated from four patients, and S. anatum from one person after eating salami).

A total of 279 patients were infected with S. newport during the outbreak, of which 127 had eaten salami. There were five secondary cases. Two patients required intensive care treatment. S. newport was isolated from blood, faeces and later throat swab from a 59 year old man who had a history of diarrhoea, vomiting, fever and sweats; and from blood and faeces of a 65 year old man with a history of diarrhoea, vomiting and acute renal failure. Neither patient gave a history of eating salami. Four urine isolations of S. newport were made:

- . A ten year old girl with a urinary tract infection.
- . A 15 year old girl who had eaten salami. The serotype was also isolated from faeces.
- . A 43 year old female with a one day history of frequency, dysuria and haematuria. The serotype was later isolated from faeces.

- . A 41 year old man with urinary tract infection and probable acute prostatitis.

S. newport was also isolated from the gastric washing from a 72 year old woman.

The last case was isolated on 23 September, and there were no further cases in Victoria to the end of December 1981. Serotypes isolated from food-handlers during the outbreak included S. anatum (2) S. derby (1), S. newport (6) and S. wandsbek (1).

GASTRO-ENTERITIS RELATED TO UNFERMENTED SAUSAGE - SOUTH AUSTRALIA

(Contributed by C. Murray and G. Rich, Institute of Medical and Veterinary Science, Adelaide; S. Cameron, South Australian Health Commission).

In the five week period 20 July - 31 August 1981, 58 isolates of S. bovis-morbificans were made from human gastro-enteritis cases in South Australia. Thirty-one were identified as phage type 0170 by the Salmonella Reference Laboratory, Adelaide. In the previous eight months, only four of the 43 S. bovis-morbificans isolates were identified as phage type 0170. In the same period, 71 isolates of S. typhimurium were made of which 33 were phage typed as UDNC. In addition, there were 11 cases of S. typhimurium phage type UDNC and S. bovis-morbificans phage type 0170 mixed infection. The reports emanated from all parts of the State, from Mount Gambier to Port Lincoln.

Dietary histories from 66 cases indicated that 35 had consumed salami in the 48 hours prior to the onset of symptoms. Twenty-nine cases implicated a single manufacturer. Food samples were collected from complainants in 14 incidents. S. bovis-morbificans was isolated from 12 samples and S. typhimurium from two. The isolates from faeces and food were identical in five episodes.

Twenty-six samples from the implicated manufacturer were tested. S. bovis-morbificans was isolated from seven samples, and S. bovis-morbificans and S. typhimurium from four. No salmonellae were isolated from 27 samples from other manufacturers. As a result, all the fermented sausage products from the implicated company were recalled. Follow-up investigations included sample testing of their stocks at the various stages of fermentation. These suggested that the contaminated salamis were manufactured about the beginning of July. Samples taken from products manufactured in mid and late July were still positive for S. bovis-morbificans phage type 0170 and/or S. typhimurium phage type UDNC. However, contamination by low numbers of salmonella occur regularly in a small percentage of fermented sausage, and additional isolations included S. anatum, S. bredeney and other phage types of S. bovis-morbificans and S. typhimurium.

The possible causes of this outbreak were:

- . Unusually high salmonella content in the raw meat.
- . Release of sausage before optimum fermentation occurred.
- . Unusually low numbers of fermenting organisms in the raw meat.

Although the first factor was surmised to be the most likely reason, combination of two or more of the parameters may have occurred. Conversely, the manufacturer maintained unusually

high hygiene standards, and starter cultures were not used for their products. This good hygiene may have reduced the fermenting organisms inoculum below the minimum safety requirement. A continuing microbiological quality control program has now been instituted at the company.

The early detection of this outbreak was due to the recognition of an increase in isolation frequency of a relatively uncommon phage type, confirming the value of phage typing particularly when testing can be completed within a few days. In most instances, it is too late to collect the most appropriate samples following the recognition of an epidemic. In this outbreak some time elapsed before it was realised that two salmonella serotypes were involved, since the S. typhimurium isolates were sent interstate for phage typing.

S. BOVIS-MORBIFICANS PHAGE TYPING

(Contributed by C. Murray, Salmonella Reference Laboratory, Adelaide).

Phage typing of S. bovis-morbificans isolates at the Salmonella Reference Laboratory commenced in 1980. The methodology was developed in this laboratory, and is used routinely. From the approximate 500 cultures phage typed to date, 26 different types have been recognized from isolates in Australia and overseas.

The epidemiological value of a phage typing scheme is illustrated in the identification of the S. bovis-morbificans outbreak in August 1981, (see previous article, this issue). A rapid increase in the number of S. bovis-morbificans isolates occurred, and concomitant phage typing indicated that the majority were of phage type 0170. The widespread nature of the outbreak was confirmed by isolation of this phage type from all parts of South Australia. Isolations of different phage types were regarded as random isolates and not part of the main outbreak. Accordingly, the tracing of the source of the outbreak was not confused by unnecessary follow-up investigations, and allowed the other S. bovis-morbificans cases to be used as controls.

The Salmonella Reference Laboratory type all isolates of S. bovis-morbificans, with the results of the South Australian isolates forwarded to the Communicable Disease Control Unit of the South Australian Health Commission. Results of submitted cultures can be sent back to the relevant State authority upon request.

(continued from page 1)

- . Ataxia following measles immunisation was reported by the Royal Alexandra Hospital for Children, Sydney, in a one year old boy. This type of delayed reaction following vaccination is well documented, but recently three immediate reactions of vomiting, fever, rash and in two cases cyanosis, have been recognized (MJA (1981) 2:330). Such events should be reported to the Adverse Drug Reaction Advisory Committee, P.O. Box 100, Woden, ACT 2606.
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HUMAN SALMONELLOSIS CASES

Period July - September 1981

Serotype	-Total	NSW & ACT	VIC	QLD	SA	WA	TAS	NT
S. aberdeen	2			2				
S. abony	4			4				
S. adelaide	9	2	1	1	1	3		1
S. agona	9	3	4	2				
S. alachua	20	1	17		2			
S. anatum	16	3	5	4		3	1	
S. arizonae	3			2		1		
S. bahrenfeld	3					3		
S. ball	1			1				
S. bardo	1	1						
S. bareilly	2		1			1		
S. birkenhead	10	4		5	1			
S. blockley	2		2					
S. blukwa	2					2		
S. bovis-morbificans	104	6	5	4	77	6	1	5
S. braenderup	1				1			
S. bredeney	4	2						2
S. bukavu	1							1
S. chester	13	4		3		4		2
S. cholerae-suis	1	1						
S. derby	12	2	5		1	3		1
S. dublin	3		3					
S. eastbourne	2					2		
S. eimsbuettel	3		3					
S. emek	2		2					
S. emmastad	1							1
S. enteritidis	19	1	5	11		2		
S. give	11	2			4	2	1	2
S. haifa	1	1						
S. havana	23	1	3	2	3	8		6
S. heidelberg	2		2					
S. houten	2			1				1
S. hvittingfoss	4	2				1		1
S. indiana	1	1						
S. infantis	11	2	2	1	1	4		1
S. jangwani	1							1
S. java battersea	1			1				
S. java UDNC	1		1					
S. java untypable	3			2	1			
S. java 1 var 6	2			2				
S. javiana	4		1	1	1	1		
S. johannesburg	1	1						
S. kottbus	15	4	10			1		
S. lansing	2			2				
S. lexington	1					1		
S. litchfield	10			3		4		3
S. london	1		1					
S. mbandaka	1				1			
S. montevideo	1		1					
S. muenchen	22	1		5	2	11		3
S. newington	5			2		2		1
S. newport	385	36	337	3	1	5	3	
S. nienstedten	2		1	1				
S. ohio	4		4					
S. ohlstedt	1					1		
S. oranienburg	16			1		2		13

HUMAN SALMONELLOSIS CASES

Period July - September 1981

Serotype	Total	NSW & ACT	VIC	QLD	SA	WA	TAS	NT
S. orientalis	2			2				
S. orion	2							2
S. oslo	3	1	1		1			
S. paratyphi A1	6		6					
S. paratyphi B UDNC	1	1						
S. paratyphi B 3A1	1	1						
S. poona	1		1					
S. potsdam	2			2				
S. reading	1	1						
S. rubislaw	9			1		3		5
S. saint paul	23	3	5	13				2
S. schwarzengrund	4	1	3					
S. senftenberg	12	2	2			6		2
S. singapore	8			6		2		
S. sofia	2	2						
S. species	1				1			
S. stanley	1	1						
S. tennessee	10					4		6
S. thompson	1			1				
S. typhi*	12	3	3	1	3			2
S. typhimurium*	286	77	58	16	98	20	4	13
S. untypable	6	3			2	1		
S. urbana	2					2		
S. virchow	22	3	4	14		1		
S. wandsbek	3		1	1		1		
S. wandsworth	22			3		1		18
S. waycross	5			5				
S. welikade	2			2				
S. weltevreden	8		2			1		5
TOTAL	1242	179	502	133	202	115	10	101

<u>S. typhimurium*</u>								
S. typhimurium	6	2			3	1		
S. typhimurium UDNC	9	3	2	1	1	1		1
S. typhimurium UDNC (1)	4	4						
S. typhimurium UDNC (2)	61	3	2		52			4
S. typhimurium untypable	32	9	12		8		1	2
phage type 1	7		4		2	1		
phage type 2	1			1				
phage type 3	1			1				
phage type 4	2		2					
phage type 5	2	1			1			
phage type 6	1	1						
phage type 9	5				2	2	1	
phage type 12	5		4			1		
phage type 12A	11		2	2	5		2	
phage type 22	8	4	2			1		1
phage type 26	8	4		2		2		
phage type 27	9	3	2	1		2		1
phage type 29	1		1					
phage type 44	10	8		1	1			
phage type 55	2				2			

HUMAN SALMONELLOSIS CASES

Period July - September 1981

Serotype	Total	NSW & ACT	VIC	QLD	SA	WA	TAS	NT
phage type 58	3					3		
phage type 64	1				1			
phage type 69	1				1			
phage type 83	1	1						
phage type 88	3	2			1			
phage type 90	4	3		1				
phage type 101	16	5	8		3			
phage type 121	4	4						
phage type 124	1	1						
phage type 134	1		1					
phage type 135	19	6	5	2	5	1		
phage type 141	5	3		1	1			
phage type 154	4							4
phage type 170	7	1	6					
phage type 174	1	1						
phage type 176	2	1	1					
phage type 179	20	3	3	3	9	2		
phage type 182	1	1						
phage type 183	4	3	1					
phage type 202	3					3		
TOTAL	286	77	58	16	98	20	4	13
<u>S. typhi*</u>								
<u>S. typhi</u>	3			1				2
S. typhi B2	3	3						
S. typhi C1	1		1					
S. typhi untypable	5		2		3			
TOTAL	12	3	3	1	3			2
<u>Shigellae</u>								
Sh. dysenteriae 2	1		1					
Sh. flexneri 1A	1		1					
Sh. flexneri 1B	4	1	2		1			
Sh. flexneri 2A	42		2		2	30	1	7
Sh. flexneri 3A	2		1			1		
Sh. flexneri 4A	1					1		
Sh. flexneri 5A	1				1			
Sh. flexneri 6	10					10		
Sh. sonnei BIO A	24	6	11		2	5		
Sh. sonnei BIO G	2		1		1			
TOTAL	88	7	19		7	47	1	7
<u>Campylobacter</u>								
<u>C. jejuni</u>	94	8	30	6		49	1	
C. species	3		3					
TOTAL	97	8	33	6		49	1	

- 1 -

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 10/12/81 - 6/1/82 BULLETIN NUMBER . 82/1
 VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR	RAHC	PHH/	FAIR-	RCH	IMVS	STATE	STATE	Total
	(NSW)/ WVH (ACT)	(NSW)	POW (NSW)	FIELD (VIC)	(VIC)	(SA)	LAB (QLD)	LAB (WA)	
0100 ADENOVIRUS NOT TYPED.....	7	2				4	13	2	28
0101 ADENOVIRUS TYPE 1.....	4			1		2		3	10
0102 ADENOVIRUS TYPE 2.....	2					3		2	7
0103 ADENOVIRUS TYPE 3.....				1					1
0104 ADENOVIRUS TYPE 4.....	1								1
0105 ADENOVIRUS TYPE 5.....				2					2
0107 ADENOVIRUS TYPE 7.....				1					1
0110 ADENOVIRUS TYPE 10.....								1	1
0119 ADENOVIRUS TYPE 19.....				1		1		2	4
0121 ADENOVIRUS TYPE 21.....								1	1
0199 ADENOVIRUS TYPING PENDING.....			2			14			16
0203 INFLUENZA B VIRUS.....	3	1		3		3			10
0204 INFLUENZA C VIRUS.....							1		1
0301 PARAINFLUENZA VIRUS TYPE 1.....				8			1		9
0302 PARAINFLUENZA VIRUS TYPE 2.....						5			5
0303 PARAINFLUENZA VIRUS TYPE 3.....	4	6		3		17	13	6	49
0399 PARAINFLUENZA VIRUS TYPING PENDING.....						2			2
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)...	2	2				6	1		11
0500 RHINOVIRUS (ALL TYPES).....		10		4			2	2	18
0600 MYCOPLASMA PNEUMONIAE.....	8	1		1		2	6	7	25
0700 ORNITHOSIS-PSITTACOSIS.....	1								1
0809 COXSACKIEVIRUS A9.....				3			2	1	6
0816 COXSACKIEVIRUS A16.....				1					1
0904 COXSACKIEVIRUS B4.....	3	4	2	2		1	3	3	18
0905 COXSACKIEVIRUS B5.....			1	4		4	7	1	17
1006 ECHOVIRUS TYPE 6.....							1	2	3
1009 ECHOVIRUS TYPE 9.....						2		3	5
1017 ECHOVIRUS TYPE 17.....	2			5			6		13
1022 ECHOVIRUS TYPE 22.....				1			1		2
1023 ECHOVIRUS TYPE 23.....								1	1
1025 ECHOVIRUS TYPE 25.....								1	1
1030 ECHOVIRUS TYPE 30.....				3			1	1	5

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

2

REPORTING PERIOD - 10/12/81 - 6/1/82 BULLETIN NUMBER - 82/1
 VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES-CONTINUED

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RAHC (NSW)	PHH/ POW (NSW)	FAIR- FIELD (VIC)	RCH (VIC)	IVVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
1101 POLIOVIRUS TYPE 1.....		1					1		2
1103 POLIOVIRUS TYPE 3.....		1				2		2	5
1104 POLIOVIRUS-VACCINAL STRAIN.....	2								2
1200 MUMPS VIRUS.....	7			14		1	3	1	26
1300 HERPES VIRUS GROUP-NOT TYPED.....	25			4		11		3	43
1301 HERPES SIMPLEX VIRUS NOT-TYPED.....		8		6				76	90
1302 EPSTEIN-BARR VIRUS (EB VIRUS).....	4							1	5
1303 VARICELLA-ZOSTER VIRUS.....	5			2		3	2	4	16
1306 HERPES SIMPLEX TYPE 1.....	23			33		19	29		104
1307 HERPES SIMPLEX TYPE 2.....	107			42		19	46	1	215
1399 HERPES VIRUS TYPING PENDING.....			9			7			16
1401 COXIELLA BURNETI.....	11			1		4	3		19
1502 PICORNA VIRUS-NOT TYPED.....								3	3
1514 MOLLUSCUM CONTAGIOSUM.....						1			1
1521 MEASLES VIRUS.....	8	5		13		4	4		34
1522 RUBELLA VIRUS.....	10			27		3	12	6	58
1532 HEPATITIS B ANTIGEN.....	18	3	6	48		13	9	7	104
1535 HEPATITIS A ANTIBODY.....	7	1	2	9		9	7	8	43
1541 CHLAMYDIA A - C TRACHOMATIS.....	17					1		92	110
1550 CMV - CYTOMEGALOVIRUS.....	10	2	2	37		10	5	18	84
1562 REOVIRUS (ALL TYPES).....	1					1			2
1564 ROTAVIRUS.....	10	11	2	10		4	2	7	46
1599 ENTEROVIRUS TYPING PENDING.....		1	11				1		13
ROSS RIVER VIRUS.....						1	8	6	15
SMALL VIRUS (LIKE) PARTICLE.....				2		1			3
DENGUE.....							31		31
PARAMYXOVIRUS.....						2			2
ARBO. GROUP B. ...				1			1		2
TOTAL.....	302	59	37	293		182	222	274	1,369

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

3

PERIOD : 10/12/81 to 6/1/82

82/1

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
0101 ADENOVIRUS TYPE 1.....	1	5					1				
0102 ADENOVIRUS TYPE 2.....		2					1		1		
0104 ADENOVIRUS TYPE 4.....							1				
0105 ADENOVIRUS TYPE 5.....		1		1							
0121 ADENOVIRUS TYPE 21.....							1				
0203 INFLUENZA B VIRUS.....		4	1	1			1				1
0301 PARAINFLUENZA VIRUS TYPE 1.....		8									
0302 PARAINFLUENZA VIRUS TYPE 2.....		5									
0303 PARAINFLUENZA VIRUS TYPE 3.....	7	37		1		1					
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....		11									
0500 RHINOVIRUS (ALL TYPES).....	2	15									
0600 MYCOPLASMA PNEUMONIAE.....		21									
0809 COXSACKIEVIRUS A9.....		1	1	5							
0816 COXSACKIEVIRUS A16.....											1
0904 COXSACKIEVIRUS B4.....	2	4			5		4	1			
0905 COXSACKIEVIRUS B5.....		2			8		7				
1006 ECHOVIRUS TYPE 6.....									1		
1009 ECHOVIRUS TYPE 9.....	1	2			1						
1017 ECHOVIRUS TYPE 17.....	3	3			6	1	2				
1022 ECHOVIRUS TYPE 22.....						1	1				
1023 ECHOVIRUS TYPE 23.....							1				
1025 ECHOVIRUS TYPE 25.....	1						1				
1030 ECHOVIRUS TYPE 30.....					5						
1101 POLIOVIRUS TYPE 1.....		1									
1103 POLIOVIRUS TYPE 3.....							2		2		
1200 MUMPS VIRUS.....			2	10			1				
1301 HERPES SIMPLEX VIRUS NOT-TYPED	3		1			1	1	1		2	52

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

4

PERIOD : 10/12/81 to 6/1/82

82/1

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.-CONTINUED

VIRUS OR VIRAL ANTIGEN	No-ill or data	Respir atory	Enceph alitis	Mening -itis	Para- lysis	CNS other unspec	GI	hepa -tic	CVS	Urin -ary	Skin/ muc membr
1302 EPSTEIN-BARR VIRUS (EB VIRUS) ..	1							1			
1303 VARICELLA-ZOSTER VIRUS.....		1	1			1					15
1306 HERPES SIMPLEX TYPE 1.....	3	5	3							2	45
1307 HERPES SIMPLEX TYPE 2.....	3	1									19
1401 COXIELLA BURNETI.....	7										
1521 MEASLES VIRUS.....	4	3	1			2					28
1522 RUBELLA VIRUS.....	9		1								40
1532 HEPATITIS B ANTIGEN.....	46							55		1	
1535 HEPATITIS A ANTIBODY.....	5							38			
1556 CMV - CYTOMEGALOVIRUS.....	23	14					1	1		14	1
1562 REOVIRUS (ALL TYPES).....							1				
1564 ROTAVIRUS.....		1					46				
ROSS RIVER VIRUS	3										5
SMALL VIRUS (LIKE) PARTICLE							3				
DENGUE	28										1
PARAMYXOVIRUS		2									
ARBO. GROUP B.	1										
TOTAL.....	150	149	11	43		7	16	97	4	19	208

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

5

PERIOD : 10/12/81 to 6/1/82 ...
 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;
 G8 -Fever/malaise; 09 -Other; A1 -SIDS ...

82/1

VIRUS OR VIRAL ANTIGEN	Eye	Gen-ital	Endo/sal gland	RES	Muscle/joint	Con-genital	PUO	Fever/mal-aise	Other	SIDS
0101 ADENOVIRUS TYPE 1.....	2						1			
0102 ADENOVIRUS TYPE 2.....	2						1			
0103 ADENOVIRUS TYPE 3.....	1									
0107 ADENOVIRUS TYPE 7.....		1								
0110 ADENOVIRUS TYPE 10.....		1								
0119 ADENOVIRUS TYPE 19.....	4									
0203 INFLUENZA B VIRUS.....							2	1		
0204 INFLUENZA C VIRUS.....					1			1		
0301 PARAINFLUENZA VIRUS TYPE 1....								1		
0303 PARAINFLUENZA VIRUS TYPE 3....							3	4		
0400 RESPIRATORY SYNCYTIAL VIRUS (RS).....							1			
0500 RHINOVIRUS (ALL TYPES).....										1
0600 MYCOPLASMA PNEUMONIAE.....			1		1		2	5		
0700 ORNITHOSIS-PSITTACOSIS.....							1			
0904 COXSACKIEVIRUS B4.....				1			1			
1006 ECHOVIRUS TYPE 6.....							1	1		
1009 ECHOVIRUS TYPE 9.....	1							1		
1101 POLIOVIRUS TYPE 1.....										1
1103 POLIOVIRUS TYPE 3.....										1
1104 POLIOVIRUS-VACCINAL STRAIN....										2
1200 MUMPS VIRUS.....			12					4		
1301 HERPES SIMPLEX VIRUS NOT-TYPED		34						1	1	
1302 EPSTEIN-BARR VIRUS (EB VIRUS) .			1					2		
1303 VARICELLA-ZOSTER VIRUS.....								1		
1306 HERPES SIMPLEX TYPE 1.....	7	39		1				4		
1307 HERPES SIMPLEX TYPE 2.....		192				1				
1401 COXIELLA BURNETI.....							6	6		

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

6

PERIOD : 10/12/81 to 6/1/82 ...

82/1

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;

G8 -Fever/malaise; 09 -Other; A1 -SIDS ...

-CONTINUED

VIRUS OR VIRAL ANTIGEN	Eye	Gen-ital	Endo/sal gland	RES	Muscle/joint	Con-genital	PUO	Fever/malaise	Other	SIDS
1502 PICORNA VIRUS-NOT TYPED.....							1			1
1514 MOLLUSCUM CONTAGIOSUM.....		1								
1521 MEASLES VIRUS.....								2		
1522 RUBELLA VIRUS.....				1	8	3		3	3	
1532 HEPATITIS B ANTIGEN.....									2	
1541 CHLAMYDIA A - C TRACHOMATIS...	3	107								
1556 CMV - CYTOMEGALOVIRUS.....		11		4	1	7	6	8	2	
1562 REOVIRUS (ALL TYPES).....							1			
ROSS RIVER VIRUS.....					10			5		
DENGUE.....					1			3		
ARBO. GROUP B.								1		
Total.....	20	386	14	7	22	11	27	54	8	6