

Diseases
IntelligenceBOTULISM IN SALMON

The Australian Department of Health in Canberra received advice from the U.K. of 4 cases of botulism suspected of being associated with the consumption of salmon canned in the U.S.A. Cartons of the salmon of the same batch number as that responsible for the illness in the U.K. and distributed by John West & Co. Pty. Ltd. were identified from distribution records in Queensland on 2 August 1978. The salmon had been canned at the False Pass Cannery in Alaska and although the point of contamination is uncertain, it is suspected that a faulty or damaged can was responsible for the outbreak.

No advice has yet been received on the clinical condition of those affected, although all were elderly and are receiving intensive care treatment, including support on a respirator because of respiratory paralysis. Each consumed a meal consisting of salmon, salad, tinned fruit and cream, but until toxin can be detected in one of the foods and/or in the blood or faeces of the patients, no conclusions can be drawn at this early stage.

FOOD POISONING FROM OYSTERS

Continued testing of oysters and faecal samples from people who suffered symptoms of food poisoning after eating oysters (as described in Bulletin 78/14) has failed to establish a definitive cause. Although a number of incriminated oyster samples showed excessively high bacterial counts (e.g. Standard Plate Counts in excess of 20 million/gm and E. Coli levels up to 100 times the acceptable level), no pathogens have been isolated simultaneously from the oyster and faecal samples.

The association between the food poisoning cases and the consumption of oysters grown in the Sydney area is well defined epidemiologically, with an estimated 2000 cases occurring around the country. On present evidence, the agent most likely to have been responsible for the disease is a parvovirus, since examination by electron microscopy has shown small virus particles in a significant number of faecal samples from afflicted persons. I.C.P. & M.R. in Sydney report that small virus particles have been visualized in 41 of 61 samples, and 30 of these resemble parvoviruses (23-24mm diameter). The remaining 11 have a diameter of 27-28mm and 9 of these have grown in tissue culture, suggesting enteroviruses. 8 of those that grew however are from Wagga (N.S.W.), so that the evidence incriminating a parvovirus as the aetiological agent in the general outbreak is now stronger than what it was previously. To conclusively establish the causal association between the virus and the disease however, it will be necessary to show a rise in antibody titre against the virus in question. Paired sera are not yet available for this purpose.

Dr M.G. Davey, the Director of the Red Cross Blood transfusion Service in Perth advises that the above episode created a demand for Hepatitis A immunoglobulin in Western Australia. It is therefore considered timely to issue the following reminder on the use of this globulin, but because of the possible limitations on supply, the product should not be administered unnecessarily:

Normal human immunoglobulin (C.S.L.) is effective in reducing the incidence of overt hepatitis in persons exposed to Hepatitis A, but not Hepatitis B.

For Hepatitis A passive protection may be offered by giving normal human immunoglobulin as follows:

Short term for 1. Household contacts of an index case, who have not already had infectious hepatitis (not for school, office, factory and hospital contacts).

2. Persons exposed to an identified common source of infection such as food or water.

The dose recommended is 0.02 ml/kg body weight, once only.

Longer term for 1. Staff in situations where hepatitis is endemic.

2. Persons going to stay temporarily or permanently in areas of high risk.

The dose recommended is 0.05 ml/kg body weight, repeated every six months if the risk persists.

The following is a simple guide to dosage:

Patient Weight, kg	Dose of normal immunoglobulin, ml.	
	Short term (up to 3 mths)	3-6 months
Less than 25	0.5	1.0
25-50	1.0	2.5
More than 50	2.0	5.0

Immunoglobulin must be given by intramuscular injection.

Agglutinins to the Causative Agent of Contagious Equine Metritis in Human Serum. - (Contributed by Dr. K. Hughes, School of Veterinary Science, University of Melbourne.)

Contagious equine metritis is a newly emerged disease which was first reported from the U.K. in mid 1977. It has since been recognised in Eire, Australia, U.S.A. and France. The disease in horses is characterised by **endometritis** of variable severity with cervicitis and vaginitis. A highly tenacious vaginal discharge, coloured grey, pink or yellow, may be present about 2 to 6 days after mating; the mare fails to conceive and returns to service with a reduced interval between heats.

Stallions are not clinically affected. The organism responsible resides on the internal surface of the anterior urethra, the recesses in the head of the penis and the prepuce without causing clinical disease. The disease is not only spread by venereal transmission during mating, but also it can be spread from mare to mare by contaminated obstetric equipment or on the hands of animal attendants, and from stallion to stallion during washing down procedures before and after mating.

A small Gram-negative coccobacillus has been isolated and after reproduction of the disease it has been incriminated as the causative agent. It has fastidious growth requirements, growing best on chocolate agar incubated at 37°C in a microaerophilic atmosphere. Small colonies appear from 2 to 6 days, or even longer, after inoculation of media. The agent is non-motile, oxidase positive, catalase positive, asaccharolytic, and biochemically inactive in conventional tests. It has been tentatively placed in the genus Haemophilus.

Thus far, persons in contact with infected horses or the agent itself have not shown any clinical evidence of infection likely to be caused by the above bacterium but in The Lancet (13 May, 1978, p1038) Drs Taylor and Rosenthal report the finding of agglutinins in the serum of human patients attending a genito-medical clinic, healthy adults, and women attending an antenatal clinic. Among women attending the genito-medical clinic the percentage with serum agglutinins to titre 1:20 was ten times that in women attending the antenatal clinic and three times that in healthy non-pregnant women. The prevalence of similar antibody among males attending the genito-medical clinic was three times that in healthy men.

The meaning of these findings is open to speculation. Since Taylor did not find antibody in the serum of veterinarians in exceptionally close contact with infected horses this suggests that the infection is not readily transmitted from horses to man, if at all, since these reactions might also be cross-reactions with other bacteria (eg others of the Haemophilus group, p.pneumotropica) have been noted. Nevertheless the findings are interesting and clearly require closer investigation.

Global Surveillance of Smallpox

No cases of smallpox have been reported anywhere in the world in the last 39 weeks, suggesting that interruption of the disease may have been achieved. This will be proved only after a further 18 months of intensive surveillance have elapsed without a case being detected.

The Weekly Epidemiological Record of 28 July 1978 advises that a reward of \$ U.S. 1000 has been established by the Director-General of the World Health Organisation for the first person who, in the period preceding final certification of global eradication, reports an active case of smallpox resulting from person-to-person transmission, and confirmed by laboratory tests.

Honey Exposure and Infant Botulism (MMWR 21 July, 1978)

An article in the above issue of MMWR recommends against the use of honey as a food for infants in view of the fact that, of the 43 documented cases of infant botulism reported in California since 1976, 13 had a history of honey ingestion before the onset of symptoms. Although the safety of honey as a food for older children and adults remains unquestioned, the article points out that honey is not an essential food for infants, and on survey, botulinal spores were isolated from 13% of 60 honey samples.

Amendments to Previous Issues

- a) For the Notifiable Diseases return for 26/5/78 in Bulletin 78/14, the following amendment should be made:

Add: Syphilis - Qld: 104+
- Cumulative total Qld: *463

Delete:
Trachoma - S.A.: Cumulative total *463 : (nil entry)
Tuberculosis - QLD: 104+ : (nil entry)

- b) In Bulletin 78/13, the N.H. & M.R.C. recommended Primary Immunisation Schedule (p5) should be amended to include poliomyelitis vaccination at 6 months.

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES-CONTINUED

14/78

VIRUS OR VIRAL ANTIGEN	ICPMA (NSW)/ WVH (ACT)	RAHC (NSW)	PHR/ POW (NSW)	FAIR- FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
1006 ECHOVIRUS TYPE 6.....	2								2
1007 ECHOVIRUS TYPE 7.....				3		2			5
1011 ECHOVIRUS TYPE 11.....						1		1	2
1014 ECHOVIRUS TYPE 14.....								1	1
1015 ECHOVIRUS TYPE 15.....								1	1
1017 ECHOVIRUS TYPE 17.....				1					1
1019 ECHOVIRUS TYPE 19.....			1			1			2
1021 ECHOVIRUS TYPE 21.....								1	1
1022 ECHOVIRUS TYPE 22.....			1					1	2
1025 ECHOVIRUS TYPE 25.....								1	1
1030 ECHOVIRUS TYPE 30.....	4		2	4				1	11
1031 ECHOVIRUS TYPE 31.....			2						2
1101 POLIOVIRUS TYPE 1.....		1		2			1		4
1102 POLIOVIRUS TYPE 2.....				1		2	2		5
1103 POLIOVIRUS TYPE 3.....				1		2		1	4
1200 MUMPS VIRUS.....	2			4		1	4		11
1300 HERPES VIRUS GROUP-NOT TYPED.....						1			1
1301 HERPES SIMPLEX VIRUS-NOT TYPED.....	10	5	3	4	2	1	23	2	50
1303 VARICELLA-ZOSTER VIRUS.....	1							1	2
1306 HERPES SIMPLEX TYPE 1.....	6			15				3	24
1307 HERPES SIMPLEX TYPE 2.....	14			7		2		17	40
1399 HERPES VIRUS TYPING PENDING.....						13			13
1401 COXSACKIE BURNET1.....	8					1	32		41
1521 MEASLES VIRUS.....				2					2
1522 RUBELLA VIRUS.....								1	1
1532 HEPATITIS B ANTIGEN.....	1	1	9	13		10	1	11	46
1533 HEPATITIS B ANTIBODY.....						26		11	37
1541 CHLAMYDIA A - TRIC TYPE.....						1		17	18
1556 CMV - CYTOMEGALOVIRUS.....	6		1	1	5	3	3	2	21
1564 ROTAVIRUS.....			19	13		17	9	35	93
1599 ENTEROVIRUS TYPING PENDING.....					7	4			11
Total.....	101	15	45	121	64	133	102	132	713

Ross River Virus

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AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 29-6-78 - 12-7-78 BULLETIN NUMBER - 14/78
 VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RHHC (NSW)	PHE/ POW (NSW)	FAIR- FIELD (VIC)	RCH (VIC)	INVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
0100 ADENOVIRUS NOT TYPED.....				1			2	2	7
0101 ADENOVIRUS TYPE 1.....						3		1	7
0102 ADENOVIRUS TYPE 2.....		1	3						9
0103 ADENOVIRUS TYPE 3.....								4	4
0105 ADENOVIRUS TYPE 5.....				2	2	1		2	7
0107 ADENOVIRUS TYPE 7.....				1	3				4
0108 ADENOVIRUS TYPE 8.....								3	3
0109 ADENOVIRUS TYPE 9.....				2					2
0119 ADENOVIRUS TYPE 19.....				2		1			3
0130 ADENOVIRUS TYPE 30.....						1			1
0199 ADENOVIRUS TYPING PENDING.....	2					3	7	1	13
0201 INFLUENZA A VIRUS.....						1			1
0203 INFLUENZA B VIRUS.....				1					1
0301 PARAINFLUENZA VIRUS TYPE 1.....								1	1
0302 PARAINFLUENZA VIRUS TYPE 2.....					2			1	3
0303 PARAINFLUENZA VIRUS TYPE 3.....						2	2	3	7
0399 PARAINFLUENZA VIRUS TYPING PENDING.....						1			1
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)....		6		10	34	12	11		73
0500 RHINOVIRUS (ALL TYPES).....	1			13	3	2	3		22
0600 MYCOPLASMA PNEUMONIAE.....	30			14		3	7	2	56
0700 ORNITHOSIS-PSITTACOSIS.....	8			2		2			12
0800 COXSACKIEVIRUSES GROUP A - NOT TYPED.....							1	3	4
0809 COXSACKIEVIRUS A9.....				1					1
0816 COXSACKIEVIRUS A10.....						1			1
0901 COXSACKIEVIRUS B1.....	2							1	3
0902 COXSACKIEVIRUS B2.....				1					1
0903 COXSACKIEVIRUS B3.....	2								2
0904 COXSACKIEVIRUS B4.....						1			1
0905 COXSACKIEVIRUS B5.....		1						1	2
1003 ECHOVIRUS TYPE 3.....			2						2
1004 ECHOVIRUS TYPE 4.....	2		2						4

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 29-6-78 - 12-7-78 BULLETIN NUMBER
 VIRAL IDENTIFICATIONS CATEGORISED INTO SOURCE SPECIMENS

. 14/78

VIRUS OR VIRAL ANTIGEN	FA	BL	NA	CS	SK	FY	UR	BR	GE	OT	Total
0100 ADENOVIRUS NOT TYPED.....	5		2								7
0101 ADENOVIRUS TYPE 1.....	3		5								8
0102 ADENOVIRUS TYPE 2.....	6		2			1					9
0103 ADENOVIRUS TYPE 3.....	1		3								4
0105 ADENOVIRUS TYPE 5.....	2		5								7
0107 ADENOVIRUS TYPE 7.....			3								3
0108 ADENOVIRUS TYPE 8.....						3					3
0109 ADENOVIRUS TYPE 9.....						2					2
0119 ADENOVIRUS TYPE 19.....						3					3
0130 ADENOVIRUS TYPE 30.....						1					1
0199 ADENOVIRUS TYPING PENDING.....	8		3			2				1	14
0201 INFLUENZA A VIRUS.....		1									1
0203 INFLUENZA B VIRUS.....		1									1
0301 PARAINFLUENZA VIRUS TYPE 1.....			1								1
0302 PARAINFLUENZA VIRUS TYPE 2.....			3								3
0303 PARAINFLUENZA VIRUS TYPE 3.....		1	6								7
0399 PARAINFLUENZA VIRUS TYPING PENDING.....			1								1
0400 RESPIRATORY SYNCYTIAL VIRUS (RS)....		2	70							1	73
0500 RHINOVIRUS (ALL TYPES).....			22								22
0600 MYCOPLASMA PNEUMONIAE.....		56									56
0700 ORNITHOSIS-PSITTACOSIS.....		12									12
0800 COXSACKIEVIRUSES GROUP A - NOT TYPED.....	3		1								4
0809 COXSACKIEVIRUS A9.....			1								1
0816 COXSACKIEVIRUS A16.....					1						1
0901 COXSACKIEVIRUS B1.....			1		2						3
0902 COXSACKIEVIRUS B2.....	1										1
0904 COXSACKIEVIRUS B4.....		1									1
0905 COXSACKIEVIRUS B5.....		1									1
1003 ECHOVIRUS TYPE 3.....	2										2
1004 ECHOVIRUS TYPE 4.....	2				2						4
1006 ECHOVIRUS TYPE 6.....					2						2
1007 ECHOVIRUS TYPE 7.....	2		4		1						7

VIRAL IDENTIFICATIONS CATEGORISED INTO SOURCE SPECIMENS-CONTINUED

14/78

VIRUS OR VIRAL ANTIGEN	PA	BL	NA	CS	SK	EY	UR	BR	GE	OT	Total
1011 ECHOVIRUS TYPE 11.....	1		1								2
1014 ECHOVIRUS TYPE 14.....	1										1
1015 ECHOVIRUS TYPE 15.....	1										1
1017 ECHOVIRUS TYPE 17.....	1										1
1019 ECHOVIRUS TYPE 19.....	1		1								2
1021 ECHOVIRUS TYPE 21.....	1										1
1022 ECHOVIRUS TYPE 22.....	1		1								2
1025 ECHOVIRUS TYPE 25.....			1								1
1030 ECHOVIRUS TYPE 30.....	4		5	2							11
1031 ECHOVIRUS TYPE 31.....	2										2
1101 POLIOVIRUS TYPE 1.....	1		3								4
1102 POLIOVIRUS TYPE 2.....	2		3								5
1103 POLIOVIRUS TYPE 3.....	4										4
1200 MUMPS VIRUS.....		7	3	1							11
1300 HERPES VIRUS GROUP-NOT TYPED.....									1		1
1301 HERPES SIMPLEX VIRUS-NOT TYPED.....		11	16		8	2			11	2	50
1303 VARICELLA-ZOSTER VIRUS.....		2									2
1306 HERPES SIMPLEX TYPE 1.....			12		6	1			5		24
1307 HERPES SIMPLEX TYPE 2.....	1		1		14				24		40
1399 HERPES VIRUS TYPING PENDING.....			1		7	1			4		13
1401 COXIELLA BURNETII.....		40									40
1521 MEASLES VIRUS.....		1	1								2
1522 RUBELLA VIRUS.....		1									1
1532 HEPATITIS B ANTIGEN.....		46									46
1533 HEPATITIS B ANTIBODY.....		37									37
1541 CHLAMYDIA A - TRIC TYPE.....						1			17		18
1556 CMV - CYTOMEGALOVIRUS.....		6	9				5		1		21
1564 ROTAVIRUS.....	92	1									93
1599 ENTEROVIRUS TYPING PENDING.....	7		2	2							11
Total.....	155	227	193	12	36	17	5		63	4	712

Ross River Virus _____ 19 _____ 19

AUSTRALIA - COMMUNICABLE DISEASES INTELLIGENCE

REPORTING PERIOD - 13-7-78 . 26-7-78 BULLETIN NUMBER - 15/78
 VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES

VIRUS OR VIRAL ANTIGEN	ICPMR (NSW)/ WVH (ACT)	RAHC (NSW)	PHH/ PCH (NSW)	FAIR- FIELD (VIC)	RCH (VIC)	MVS (SA)	STATE LAB (QLD)	STATE LAB (WA)	Total
0100 ADENOVIRUS NOT TYPED.....			10			1	11	1	23
0101 ADENOVIRUS TYPE 1.....			1	1		2			4
0102 ADENOVIRUS TYPE 2.....						2			2
0103 ADENOVIRUS TYPE 3.....								1	1
0105 ADENOVIRUS TYPE 5.....				1		2			3
0106 ADENOVIRUS TYPE 6.....			1						1
0119 ADENOVIRUS TYPE 19.....				1					1
0199 ADENOVIRUS TYPING PENDING.....	2				2				4
0201 INFLUENZA A VIRUS.....								1	1
0203 INFLUENZA B VIRUS.....				2	2		1		5
0302 PARAINFLUENZA VIRUS TYPE 2.....				3	4	1	1	1	10
0303 PARAINFLUENZA VIRUS TYPE 3.....					3	8	2	2	15
0400 RESPIRATORY SYNCYTIAL VIRUS (RS) ...	1	6	5	5	3	32	6	2	51
0500 RHINOVIRUS (ALL TYPES).....				5	7	4	4	3	23
0600 MYCOPLASMA PNEUMONIAE.....	18	1	11	22		2	2	2	58
0700 ORNITHOSIS-PSITTACOSIS.....	1			1		1			3
0800 COXSACKIEVIRUSES GROUP A - NOT TYPED.....								1	1
0809 COXSACKIEVIRUS A9.....				1					1
0816 COXSACKIEVIRUS A16.....						1			1
0901 COXSACKIEVIRUS B1.....				1		1		4	6
0903 COXSACKIEVIRUS B3.....				1					1
0904 COXSACKIEVIRUS B4.....				1					1
0906 COXSACKIEVIRUS B6.....			1						1
1000 ECHOVIRUS NOT TYPED.....							5		5
1003 ECHOVIRUS TYPE 3.....			1						1
1007 ECHOVIRUS TYPE 7.....				1	5	1			7
1011 ECHOVIRUS TYPE 11.....						1			1
1014 ECHOVIRUS TYPE 14.....						1			1
1015 ECHOVIRUS TYPE 15.....								1	1
1017 ECHOVIRUS TYPE 17.....				1					1
1022 ECHOVIRUS TYPE 22.....					8	1			9

VIRAL IDENTIFICATIONS FROM CONTRIBUTING LABORATORIES-CONTINUED

15/78

VIRUS OR VIRAL ANTIGEN	ICPMR	SAHC (NSW)	PHH/ POW (NSW)	PAIR- FIELD (VIC)	RCH (VIC)	IMVS (SA)	STATE	STATE	Total
	(NSW)/ WVH (ACT)						LAB (QLD)	LAB (WA)	
1030 ECHOVIRUS TYPE 30.....	2			1		1			4
1031 ECHOVIRUS TYPE 31.....			1						1
1103 POLIOVIRUS TYPE 3.....				3				2	5
1200 MUMPS VIRUS.....	2			2	4	4	6	1	19
1300 HERPES VIRUS GROUP-NOT TYPED.....						1			1
1301 HERPES SIMPLEX VIRUS-NOT TYPED.....	9	2	4	2	4		18	8	47
1302 EPSTEIN-BARR VIRUS (EB VIRUS).....						4			4
1303 VARICELLA-ZOSTER VIRUS.....	1		1				1		3
1306 HERPES SIMPLEX TYPE 1.....	4			9		21		7	41
1307 HERPES SIMPLEX TYPE 2.....	11			10		13		14	48
1399 HERPES VIRUS TYPING PENDING.....				1					1
1401 COXIELLA BURNETI.....	3		1				26		30
1502 PICORNA VIRUS-NOT TYPED.....								1	1
1512 VACCINIA VIRUS.....						1	1		2
1521 MEASLES VIRUS.....	2	1	1	2					6
1522 RUBELLA VIRUS.....								1	1
1532 HEPATITIS B ANTIGEN.....	1		18	17		15	9	12	72
1533 HEPATITIS B ANTIBODY.....		1				22	8	9	40
1541 CHLAMYDIA A - TRIC TYPE.....						1		15	16
1556 CMV - CYTOMEGALOVIRUS.....	6	1	4	4	5	4	1	4	29
1564 ROTAVIRUS.....		7	11	2		10	18	16	64
1599 ENTEROVIRUS TYPING PENDING.....		1			12				13
Total.....	63	20	71	100	92	158	120	107	731

Ross River Virus

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Astrovirus

1 — — — 1

VIRAL IDENTIFICATIONS CATEGORISED INTO SOURCE SPECIMENS-CONTINUED

15/78

VIRUS OR VIRAL ANTIGEN	FA	BL	NA	CS	SK	EY	UH	BR	GE	OT	Total
1103 POLIOVIRUS TYPE 3.....	4		1								5
1200 MUMPS VIRUS.....		6	8	5							19
1300 HERPES VIRUS GROUP-NOT TYPED.....					1						1
1301 HERPES SIMPLEX VIRUS-NOT TYPED.....		3	14		14				11	4	46
1302 EPSTEIN-BARR VIRUS (EB VIRUS).....		4									4
1303 VARICELLA-ZOSTER VIRUS.....		2	1								3
1306 HERPES SIMPLEX TYPE 1.....	1		9		22	2			7	3	44
1307 HERPES SIMPLEX TYPE 2.....					13				35		48
1399 HERPES VIRUS TYPING PENDING.....										1	1
1401 COXIELLA BURNETI.....		30									30
1502 PICORNA VIRUS-NOT TYPED.....						1					1
1512 VACCINIA VIRUS.....					1			1			2
1521 MEASLES VIRUS.....		3	2	2							7
1522 RUBELLA VIRUS.....		1									1
1532 HEPATITIS B ANTIGEN.....		72									72
1533 HEPATITIS B ANTIBODY.....		40									40
1541 CHLAMYDIA A - TRIC TYPE.....						1			15		16
1556 CMV - CYTOMEGALOVIRUS.....		11	7				7		3	4	32
1564 ROTAVIRUS.....	64										64
1599 ENTEROVIRUS TYPING PENDING.....	6		7	1							14
Total.....	117	258	194	10	51	6	8		72	20	736

Ross River Virus _____ 13 _____ 13
 Astrovirus _____ 1 _____ 1

30.6.78

LIST B COMMUNICABLE DISEASES AND AGENTS NOTIFIED AFTER HOSPITAL AND LABORATORY DIAGNOSIS

DISEASES	CASES NOTIFIED DURING WEEK								CUMULATIVE TOTAL - year to date*							
	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	N.T.	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	N.T.
AMOEBIASIS	N.N.								N.N.	1	3		2			1
ANKYLOSTOMIASIS	N.N.		1						N.N.		4		3			*119
ARBO VIRUS INFECTION			N.N.		N.N.						N.N.		N.N.			
DENGUE					N.N.					1			N.N.			
MURRAY VALLEY ENCEPHALITIS			N.N.	N.N.	N.N.		N.N.				N.N.	N.N.	N.N.		N.N.	
OTHER (STATE TYPE)				N.N.	N.N.		N.N.					N.N.	N.N.		N.N.	
HYDATID									5	3		1				
MALARIA	1		2		1				32	26	42	6	16	1	8	*5
ORNITHOSIS (PSITTACOSIS, etc)										1						
Q. FEVER			1				N.N.		13	7	140	10			N.N.	1
SALMONELLA (LABORATORY ISOLATES)	31	4	3	3	2		1	5	742	116	68	191	113	21	18	70
SHIGELLA (LABORATORY ISOLATES)	N.N.		1					6	N.N.		42	15			1	148

N.N. - NOT NOTIFIABLE

* - INCLUDES ADJUSTMENTS FOR REVISED DIAGNOSIS OR OTHER AMENDMENT.

QLD. (+) - MONTHLY NOTIFICATION OF GONORRHOEA AND SYPHILIS.

N.B. Notifications by Queensland for Gonorrhoea and Syphilis are for the month of June.

23.6.78

LIST B COMMUNICABLE DISEASES AND AGENTS NOTIFIED AFTER HOSPITAL AND LABORATORY DIAGNOSIS

DISEASES	CASES NOTIFIED DURING WEEK								CUMULATIVE TOTAL - year to date*							
	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	N.T.	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	T.F.
AMOEBIASIS	N.N.							1	N.N.	1	3		2			1
ANKYLSTOMIASIS	N.N.								N.N.		3		3			84
ARBO VIRUS INFECTION			N.N.		N.N.						N.N.		N.N.			
DENGUE					N.N.					1			N.N.			
MURRAY VALLEY ENCEPHALITIS			N.N.	N.N.	N.N.		N.N.				N.N.	N.N.	N.N.		N.N.	
OTHER (STATE TYPE)				N.N.	N.N.		N.N.					N.N.	N.N.		N.N.	
HYDATID		1							5	3		1				
MALARIA	2		3		1				31	26	40	6	16	1	8	4
ORNITHOSIS (PSITTACOSIS, etc)										1					1	
Q. FEVER			1				N.N.		13	7	139	10			N.N.	1
SALMONELLA (LABORATORY ISOLATES)	3	1	1	9	7			3	711	112	65	188	118	21	17	65
SHIGELLA (LABORATORY ISOLATES)	N.N.			1				11	N.N.		41	15			1	142

N.N. - NOT NOTIFIABLE

* - INCLUDES ADJUSTMENTS FOR REVISED DIAGNOSIS OR OTHER AMENDMENT.

QLD. (+) - MONTHLY NOTIFICATION OF GONORRHOEA AND SYPHILIS.

Director-General of Health

16. 6. '78

LIST B COMMUNICABLE DISEASES AND AGENTS NOTIFIED AFTER HOSPITAL AND LABORATORY DIAGNOSIS

DISEASES	CASES NOTIFIED DURING WEEK								CUMULATIVE TOTAL - year to date*							
	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	N.T.	N.S.W.	VIC.	QLD.	S.A.	W.A.	TAS.	A.C.T.	T.F.
AMOEBIASIS	N.N.								N.N.	1	3		2			
ANKYLOSTOMIASIS	N.N.								N.N.		3		3			* 84
ARBO VIRUS INFECTION			N.N.		N.N.						N.N.		N.N.			
DENGUE					N.N.					1			N.N.			
MURRAY VALLEY ENCEPHALITIS			N.N.	N.N.	N.N.		N.N.				N.N.	N.N.	N.N.		N.N.	
OTHER (STATE TYPE)				N.N.	N.N.		N.N.					N.N.	N.N.		N.N.	
HYDATID	1								5	2		1				
MALARIA		3				1			29	26	37	6	15	1	8	4
ORNITHOSIS (PSITTACOSIS, etc)		1								1					1	
Q. FEVER	2		5				N.N.		13	7	138	10			N.N.	1
SALMONELLA (LABORATORY ISOLATES)	8	5		6				3	708	111	64	179	111	21	17	62
SHIGELLA (LABORATORY ISOLATES)	N.N.							10	N.N.		41	14			1	131

N.N. - NOT NOTIFIABLE

* - INCLUDES ADJUSTMENTS FOR REVISED DIAGNOSIS OR OTHER AMENDMENT.

QLD. (+) - MONTHLY NOTIFICATION OF GONORRHOEA AND SYPHILIS.

Director-General of Health