

Meningococcal Surveillance Australia: Reporting period 1 October to 31 December 2025

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National Neisseria Network

The reference laboratories of the Australian National Neisseria Network report data on invasive meningococcal disease (IMD) confirmed by culture and/or molecular techniques for the Australian Meningococcal Surveillance Programme (AMSP). Culture-positive cases and molecular-based diagnoses are defined as IMD by the Communicable Diseases Network Australia (CDNA) National Guidelines for Public Health Units.¹ Data contained in the quarterly reports are restricted to a description of the number of cases by jurisdiction and serogroup, when known. The content of the quarterly reports was expanded in 2024 to include antimicrobial resistance (AMR) data for ceftriaxone, penicillin, ciprofloxacin and rifampicin. IMD AMR data was previously only reported annually in the AMSP Annual Report, which has its own programme-specific quality assurance processes. Some minor corrections to data in Table 1 may be made in subsequent reports if additional data are received.

In Australia, there were 113 notifications of IMD between 1 January and 31 December 2025, fewer than during the same period in 2024 (Table 1) and representing a 44% reduction compared with 2019 (202 IMD notifications), prior to the SARS-CoV-2 pandemic.² In 2025, ninety-three percent of national IMD notifications (105/113) had the serogroup determined at the time of reporting. Notably, *N. meningitidis* serogroup B (MenB) IMD continued its predominance accounting for 82% of disease notifications (86/105). In contrast, between 2019 and 2021, the proportion of IMD attributable to MenB was 50–62%.³ IMD notifications attributable to MenW and MenY disease in Australia in 2025 year-to-date (ytd) were reported in equal proportions at 7.6% (8/105) each, and there were two reports of MenC IMD (1.9%; 2/105) and a single report of MenA IMD involving a traveller from Eastern Europe (Table 1).⁴

Among 78 culture-confirmed IMD cases tested in 2025 ytd, there were six detections of penicillin resistance: two isolates from Queensland and one isolate each from the Australian Capital Territory, Northern Territory, Victoria and Western Australia. Of these penicillin-resistant isolates, four were classified as MenB and two were classified as MenW. All 78 IMD isolates were susceptible to ceftriaxone, ciprofloxacin and rifampicin. A full analysis of laboratory-confirmed cases of IMD in each calendar year is contained in the AMSP annual report published in *Communicable Diseases Intelligence*.

Table 1: Number of laboratory confirmations of invasive meningococcal disease, Australia, 1 October to 31 December 2025, by serogroup and state or territory

Jurisdiction	Year	Serogroup													
		A		B		C		W		Y		ND ^a		All	
		Q4	ytd ^b	Q4	ytd	Q4	ytd	Q4	ytd	Q4	ytd	Q4	ytd	Q4	ytd
Australian Capital Territory	2025	0	0	0	0	0	0	1	1	0	0	0	0	1	1
	2024	0	0	0	0	0	0	0	0	0	0	0	0	0	0
New South Wales	2025	0	0	3	20	0	1	1	4	0	5	2	4	6	34
	2024	0	0	3	19	0	0	0	0	3	4	0	0	6	23
Northern Territory	2025	0	0	0	1	0	0	0	0	0	0	0	0	0	1
	2024	0	0	0	2	0	0	0	0	0	0	0	0	0	2
Queensland	2025	0	0	6	22	1	1	0	2	0	0	0	1	7	26
	2024	0	0	10	37	0	1	0	0	3	5	2	5	15	48
South Australia	2025	0	0	4	12	0	0	0	0	0	1	1	1	5	14
	2024	0	0	6	25	0	0	0	0	0	3	0	0	6	28
Tasmania	2025	0	0	0	3	0	0	0	0	0	0	0	0	0	3
	2024	0	0	1	1	0	0	0	0	0	0	0	0	1	1
Victoria	2025	0	1	1	15	0	0	0	0	0	1	0	2	1	19
	2024	0	0	3	14	0	0	0	0	0	4	0	1	3	19
Western Australia	2025	0	0	2	13	0	0	0	1	0	1	0	0	2	15
	2024	0	0	2	10	0	0	0	2	0	2	0	0	2	14
Australia	2025	0	1	16	86	1	2	2	8	0	8	3	8	22	113
	2024	0	0	25	108	0	1	0	2	6	18	2	6	33	135

a ND: not determined at time of report.

b ytd: year to date, data from 1 January to 31 December 2025.

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