

MONTHLY NOTIFIABLE DISEASE SURVEILLANCE REPORT

Data contained within this monthly report are based on information recorded on EpiSurv by Public Health Service (PHS) staff as at 11 March 2024. Changes made to EpiSurv after this date will not be reflected in this report. The data are provisional and include cases that are still under investigation, some of which may become 'Not a case'. For this reason, comparisons between the current year and previous years should be treated with caution.

KEY NOTIFIABLE DISEASE TRENDS

Mumps

Three confirmed cases of mumps were notified in February 2024, compared with two cases for the same month in 2023. One case was aged 10–14 years, one was 15–19 years, and one was 30–39 years. Two cases were in India during the incubation period. Two cases had a known vaccination status; one was fully vaccinated and one was unvaccinated.

Pertussis

There were 19 cases (15 confirmed and 4 probable) of pertussis notified in February 2024, compared with five cases for the same month in 2023. Two cases were aged under 1 year, two were 1–4 years, six were 5–14 years, and nine were 15 years and over. Two cases were hospitalised, both were infants aged under 1 year. One household outbreak was reported involving two cases. More information on trends in pertussis notifications can be found on [ESR's Pertussis Dashboard](#).

Rheumatic fever

There were 14 cases (8 confirmed, 3 probable, 1 suspect and 2 under investigation) of rheumatic fever notified in February 2024, compared with seven for the same month in 2023. Over half (8) of the cases were reported from Counties Manukau. Six cases were aged 5–14 years, one was 15–19 years and seven were aged 20 years and over. The majority (13/14 cases) were Māori or Pacific peoples. For the year to date, there have been 36 notifications of rheumatic fever, which is higher than for the same period in 2021–2023, and similar to the same period in 2019 and 2020.

Shiga toxin-producing *Escherichia coli* (STEC) infection

There were 105 cases (97 confirmed, 1 probable and 7 under investigation) of Shiga toxin-producing *Escherichia coli* (STEC) infection notified in February 2024, compared with 93 cases for the same month in 2023. A quarter (24/98, 24.5%) of the confirmed and probable cases were children aged under 15 years. Hospitalisation status was recorded for 92 (93.9%) confirmed and probable cases, of which 25 (27.2%) were hospitalised. One case of haemolytic uraemic syndrome (HUS) was reported. The serotype was identified for 55 cases, of which 39 (70.9%) were non-O157.

OUTBREAKS

Campylobacteriosis

An outbreak of campylobacteriosis was reported from Canterbury in February 2024, involving 12 cases. The cases were part of a group of visiting foreign students attending a course at a local tertiary institution. Unpasteurised milk consumed at a dairy farm was identified as the likely source.

Clostridium perfringens infection

An outbreak of acute gastroenteritis due to *Clostridium perfringens* was reported from the Capital, Coast and Hutt Valley district in February 2024, involving five cases. The cases attended a private lunch at a restaurant. The source was partially precooked lamb which was reheated at the venue.

Hepatitis A

Two hepatitis A outbreaks were reported in February 2024. One outbreak involving four children from two households was reported from Canterbury. Two cases were hospitalised. The infections were locally acquired, and the source investigation is ongoing. The other outbreak was reported from Capital, Coast and Hutt Valley district and involved four people from two households. The cases had attended a common event while in India. Two cases were hospitalised.

Histamine (scombroid) fish poisoning

Two outbreaks of histamine (scombroid) fish poisoning were reported from the Auckland region in February 2024, involving seven cases. The cases had eaten kahawai at two separate restaurants. Both outbreaks were linked to the same supplier.

Norovirus

An outbreak of norovirus was reported from the Whanganui district in February 2024, involving 277 cases. The cases were students and staff from two schools which share the same campus. Illness was associated with lunch at the school cafeteria. Source investigations are continuing.

TABLES

Tables for February are available as Excel files on the [ESR Digital Library](#).