

**NATIONAL PRIMARY CARE INFECTIOUS DISEASES
SENTINEL SURVEILLANCE FORTNIGHTLY REPORT**

Combining data from The Australian Sentinel Practices Research Network (ASPREN)*
and the Victorian Sentinel Practitioners Influenza Network (VicSPIN)*

No. 15, 2022 - 18th July — 31st July 2022

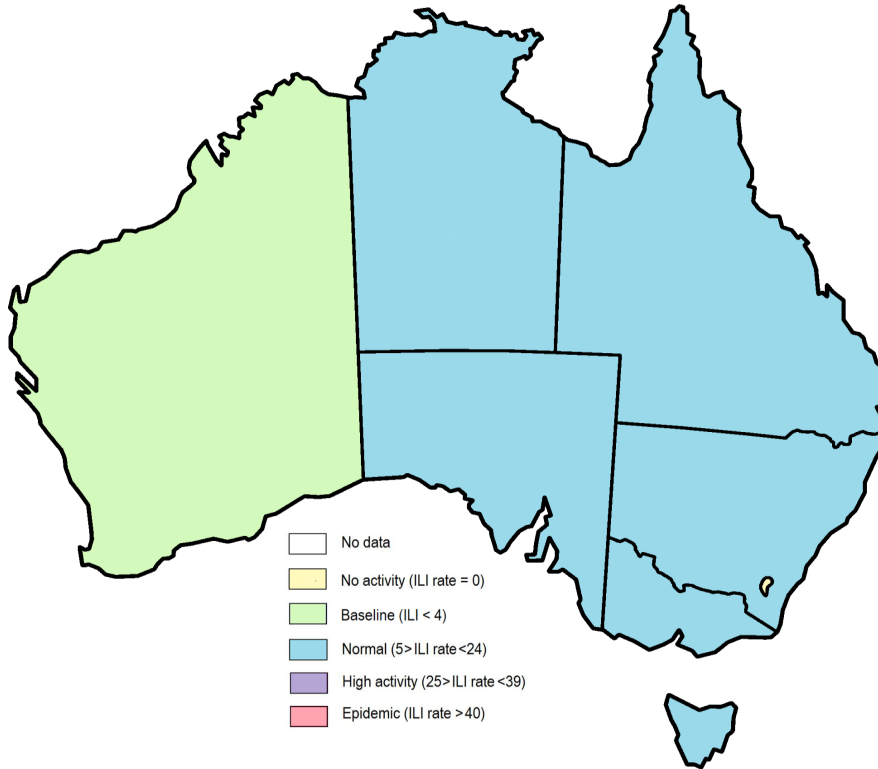


Figure 1. Map of ILI activity by jurisdiction, weeks 29 - 30, 2022.

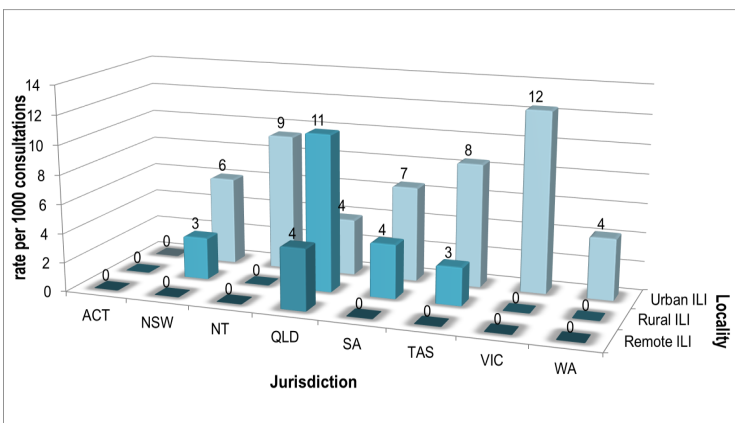


Figure 2. ASPREN rate of ILI by locality and jurisdiction, weeks 29 - 30, 2022.

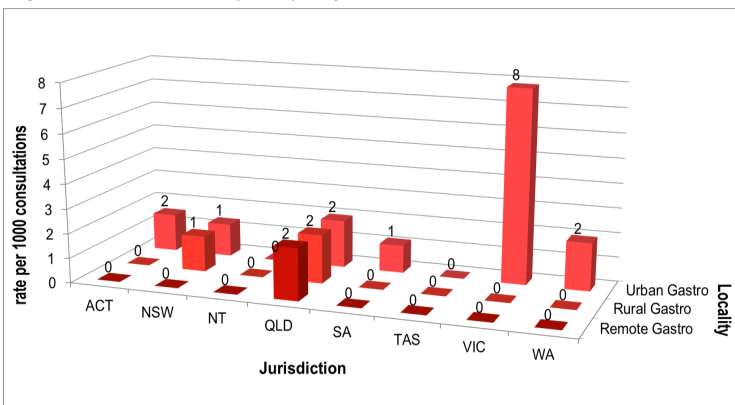


Figure 3. ASPREN rate of gastroenteritis by locality and jurisdiction, weeks 29 - 30, 2022.

NATIONAL SUMMARY

6 Influenza-like-illness levels remain steady above baseline levels

6% Case of influenza have been detected in this reporting period
6 x Influenza A
0 x Influenza B

158 Influenza positivity during the reporting period.

Cases of influenza have been detected this year:
158 x Influenza A
0 x Influenza B

Gastroenteritis levels remain steady below baseline levels

**SYNDROMIC SURVEILLANCE
REPORTING**

Reports were received from 214 reporters from 8 states and territories during the reporting period. During weeks 29 and 30 reporters saw a total of 34,210 patients.

INFLUENZA-LIKE-ILLNESS (ILI)

Nationally, ILI notifications decreased during the period with 229 notifications being reported in weeks 29—30. ILI rates reported in this period were 8 cases per 1000 consultations (weighted). This was similar to the previous fortnight where rates were 8 cases per 1000 consultations in weeks 27 and 28. For the same reporting period in 2021, ILI rates were significantly lower at 1 case per 1000 consultations for weeks 29 and 30 (see Fig. 5).

GASTROENTERITIS

Nationally, gastroenteritis notifications were similar at 50 notifications reported. Gastroenteritis rates reported in this period remained steady at 1 and 2 cases per 1000 consultations in weeks 29 and 30 respectively, compared to 2 cases per 1000 consultations in weeks 27 and 28 (see Fig. 5).

* ASPREN is funded by the Commonwealth's Department of Health, Office of Health Protection, Vaccine Preventable Disease Surveillance Section.

* VicSPIN is funded by Melbourne Health and the Victorian Infectious Diseases Reference Laboratory.

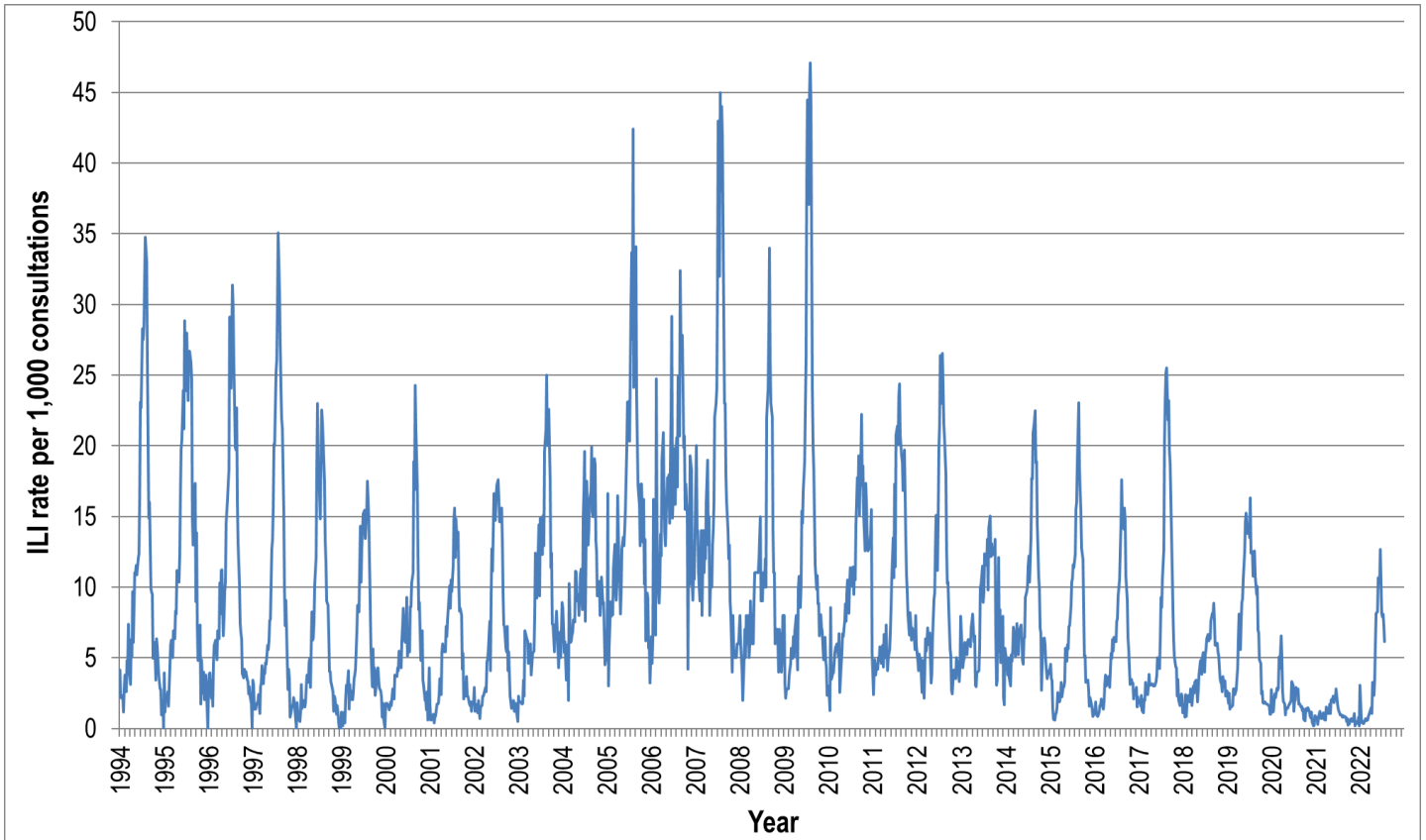


Figure 4. ASPREN ILI rates 1994 - 2022.

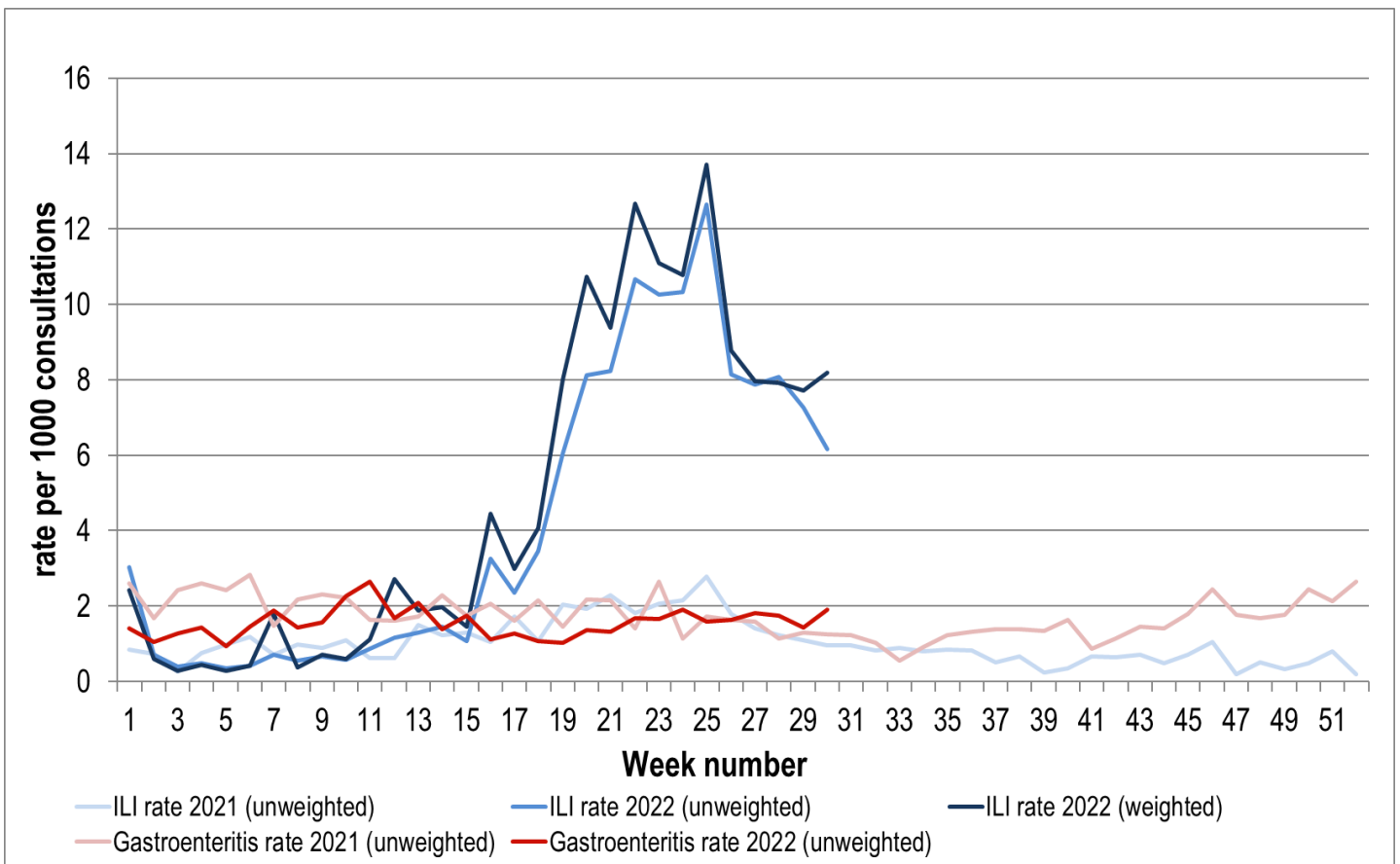


Figure 5. ASPREN + VicSPIN ILI and ASPREN gastroenteritis rates 2021-22. Weighted rates are weighted to account for population size differences between jurisdictions, using population estimates from the 2011 Australian Census.

VIROLOGICAL SURVEILLANCE

42% of all ILI patients were swab tested during weeks 29 and 30 (see Figure 6).

6 cases of Influenza A and 8 cases of SARS-CoV-2 were detected during this period. There were 11 cases of Rhinovirus detected making it the most common respiratory virus circulating the nation at present (see figure 8).

Viral laboratory data are provided by SA Pathology and VicSPIN laboratories.

	Reporting Period 18 July - 31 July 2022	YTD 1 Jan - 31 July 2022
Total number of ILI notifications	229	2067
Number of swab tests performed	97	634
% ILI patients tested	42%	31%
% of swab tests positive for influenza	6%	25%

Figure 6. ASPREN + VicSPIN virological surveillance results overview for 2022 #

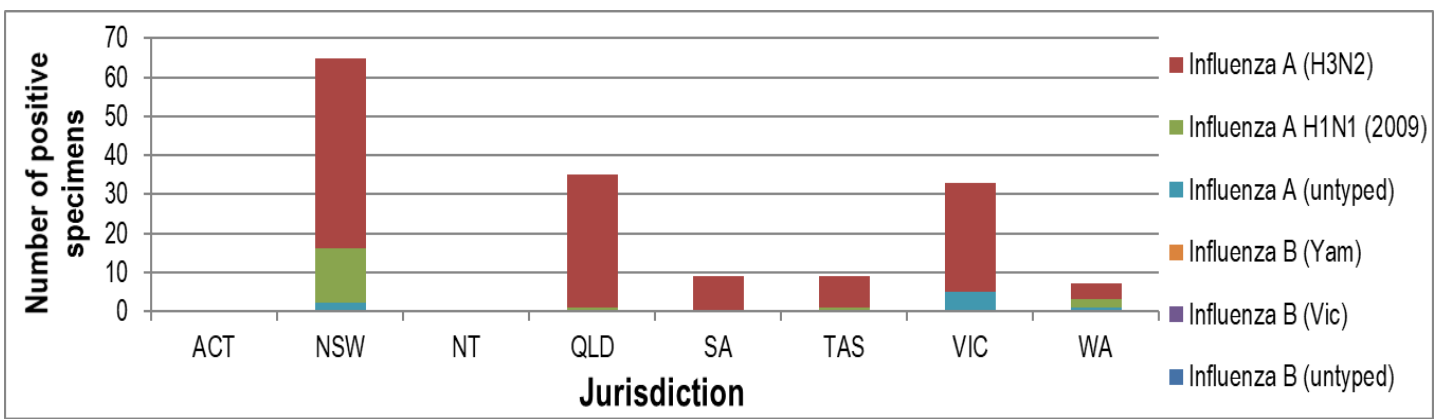


Figure 7. ASPREN + VicSPIN influenza subtype analysis by jurisdiction for 2022 #

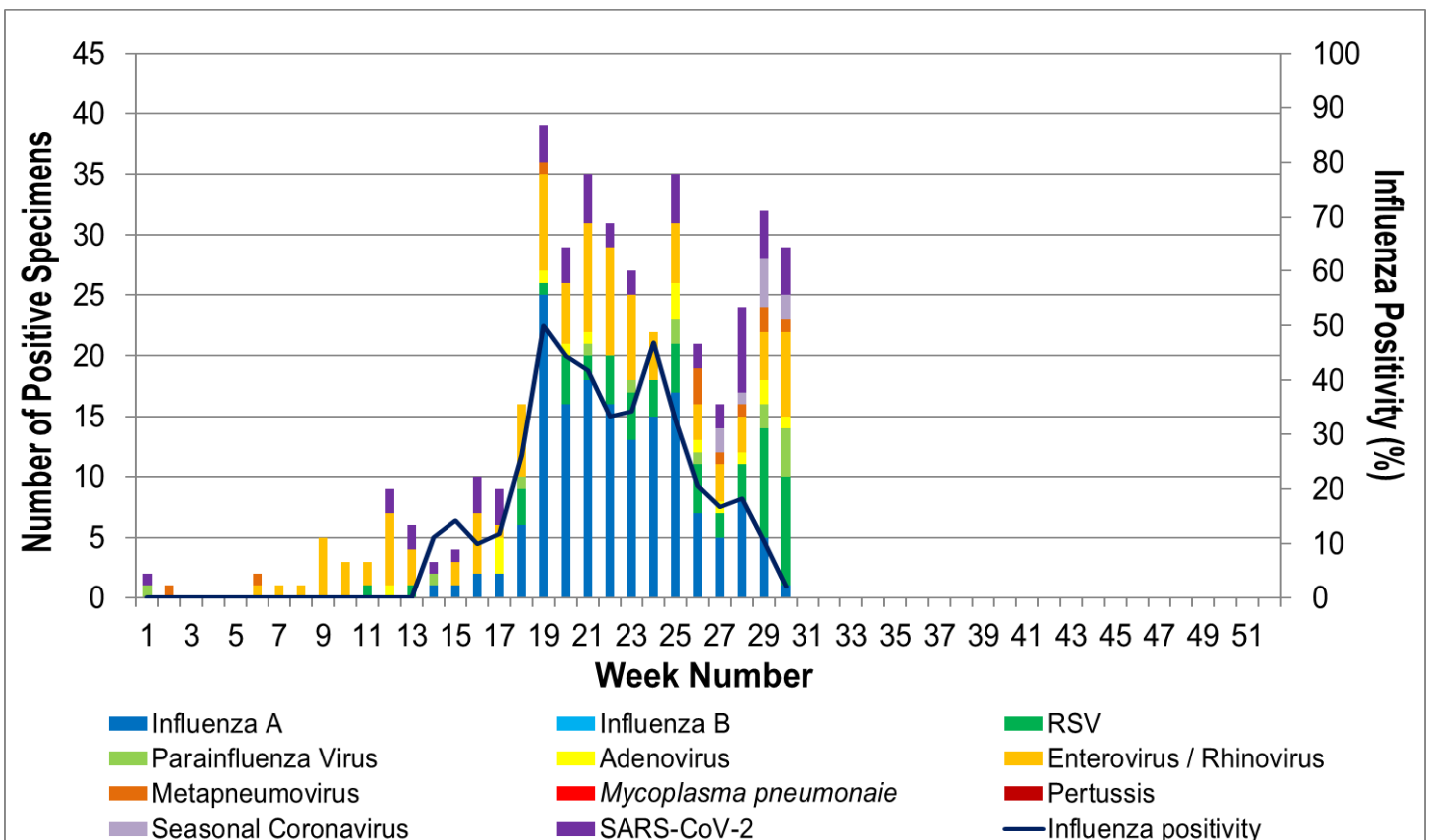


Figure 8. ASPREN, VicSPIN laboratory detection of influenza and other respiratory viruses for 2022 #

The Australian Sentinel Practices Research Network is supported by the Australian Government Department of Health (the Department). The opinions expressed in this paper are those of the authors, and do not necessarily represent the views of the Department.

Please note: This report is based on data available as at 11 August 2022. Delays in the reporting of data may cause data to change retrospectively.