

**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. 06, 2022 - 14th March — 27th March 2022

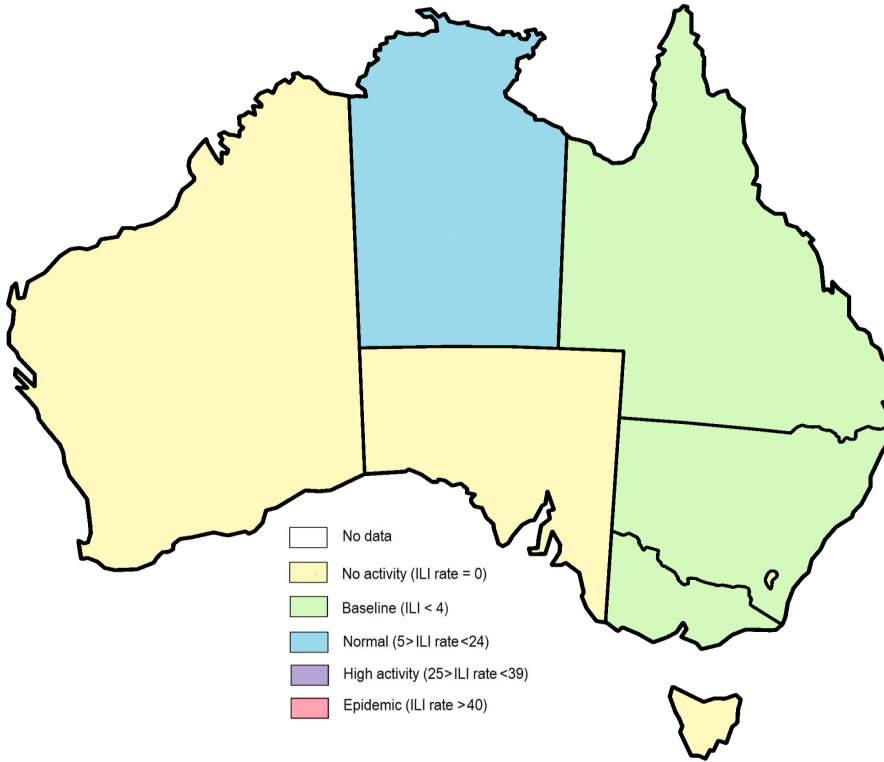


Figure 1. Map of ILI activity by jurisdiction, weeks 11 - 12, 2022.

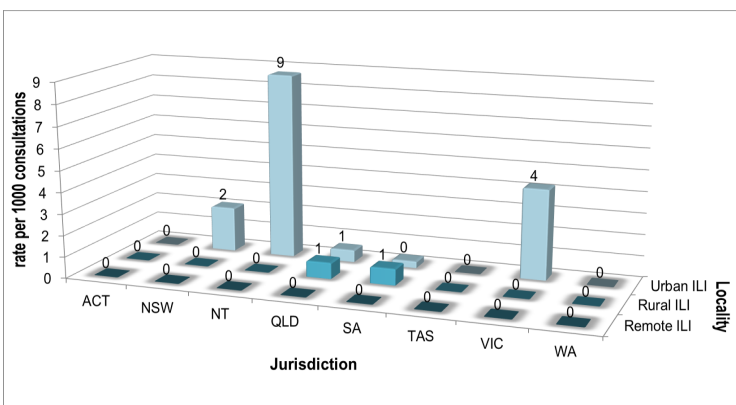


Figure 2. ASPREN rate of ILI by locality and jurisdiction, weeks 11 - 12, 2022.

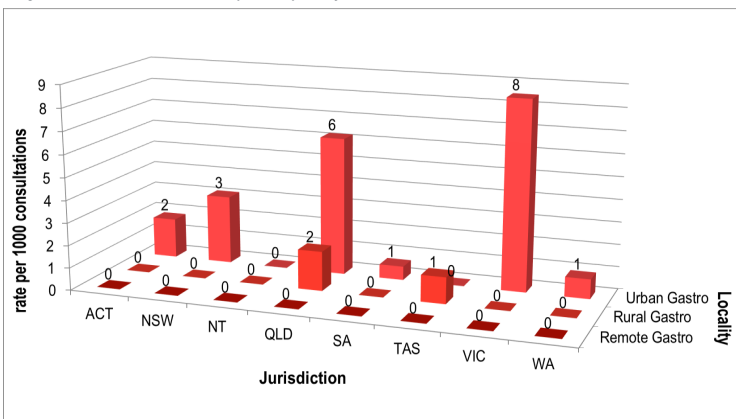



Figure 3. ASPREN rate of gastroenteritis by locality and jurisdiction, weeks 11 - 12, 2022.


**NATIONAL SUMMARY**

 Influenza-like-illness levels remain steady below baseline levels

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

**0%** Influenza positivity during the reporting period.

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

 Gastroenteritis levels remain steady below baseline levels

**SYNDROMIC SURVEILLANCE  
REPORTING**

Reports were received from 179 reporters from 8 states and territories during the reporting period. During weeks 11 and 12 reporters saw a total of 27,504 patients.

**INFLUENZA-LIKE-ILLNESS (ILI)**

Nationally, ILI notifications increased during the period with 28 notifications being reported in weeks 11–12. ILI rates reported in this period were 1 and 3 cases per 1000 consultations (weighted). This was higher than the previous fortnight where rates were 1 case per 1000 consultations in weeks 9 and 10. For the same reporting period in 2021, ILI rates were lower at 1 case per 1000 consultations for weeks 11 and 12 (see Fig. 5).

**GASTROENTERITIS**

Nationally, gastroenteritis notifications increased the period with 59 notifications reported. Gastroenteritis rates reported in this period were slightly higher at 3 and 2 cases per 1000 consultations in weeks 11 and 12 respectively, compared to 2 cases per 1000 consultations in weeks 9 and 10 respectively (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.

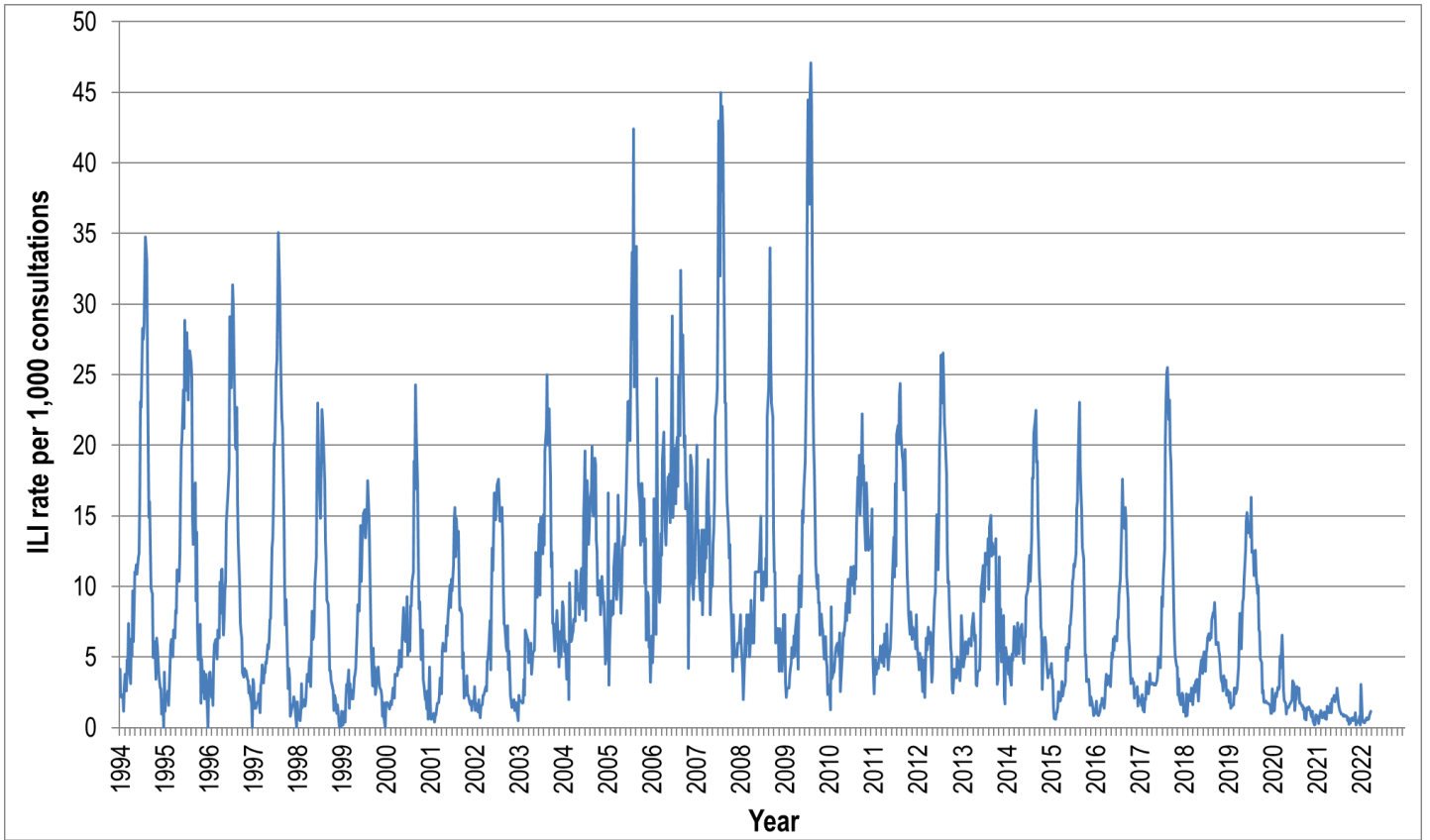


Figure 4. ASPREN ILI rates 1994 - 2022.

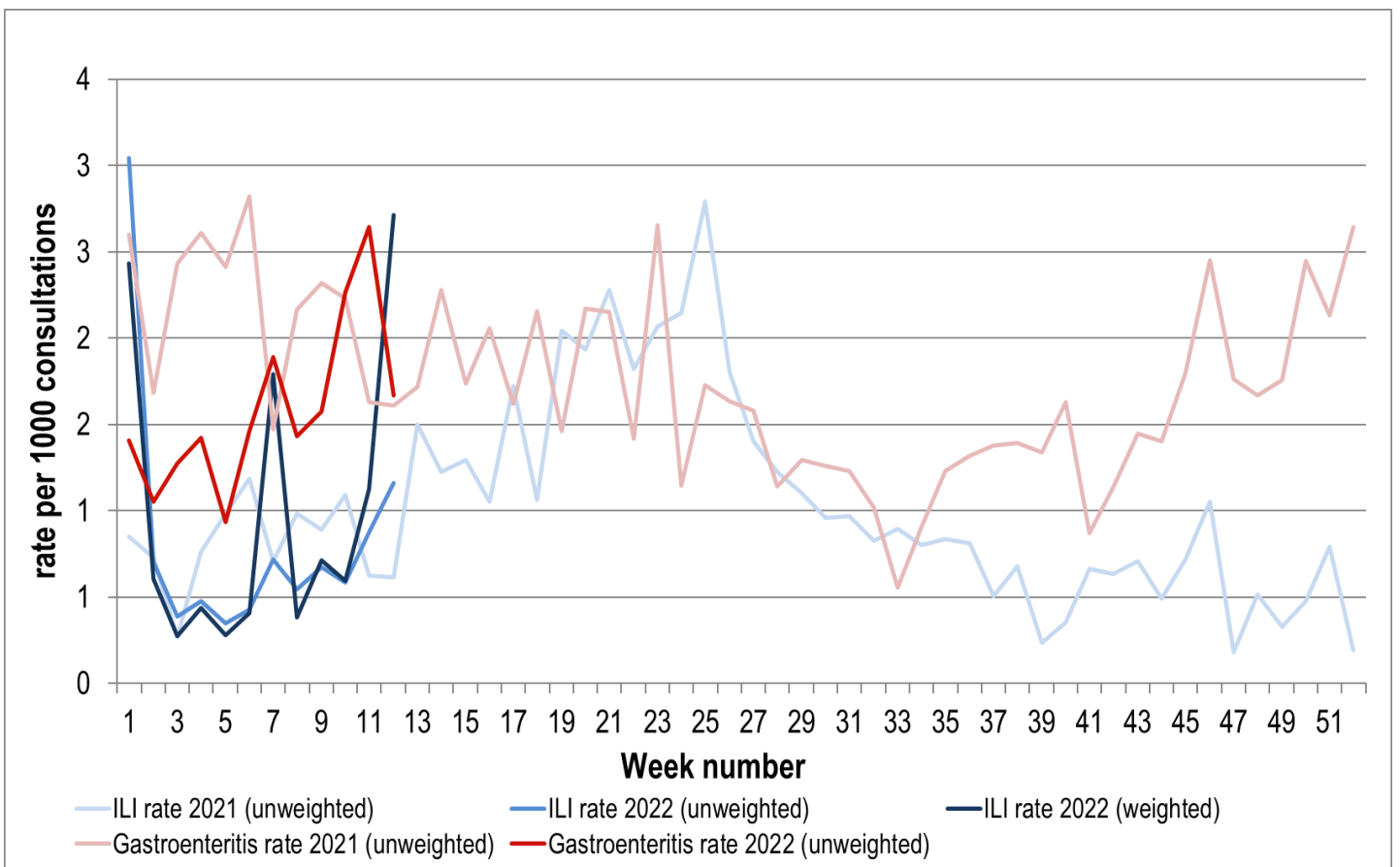


Figure 5. ASPREN + VicSPIN ILI and ASPREN gastroenteritis rates 2021-22. Weighted rates are weighted to account for population size differences between jurisdictions, using population estimates from the 2011 Australian Census.

**VIROLOGICAL SURVEILLANCE**

61% of all ILI patients were swab tested during weeks 11 and 12 (see Figure 6).

No cases of Influenza were detected during this period. 3 cases of SARS-CoV-2 were detected during this period. There were 8 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 14 Mar - 27 Mar 2022	YTD 1 Jan - 27 Mar 2022
Total number of ILI notifications	28	144
Number of swab tests performed	17	46
% ILI patients tested	61%	32%
% of swab tests positive for influenza	0%	0%

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

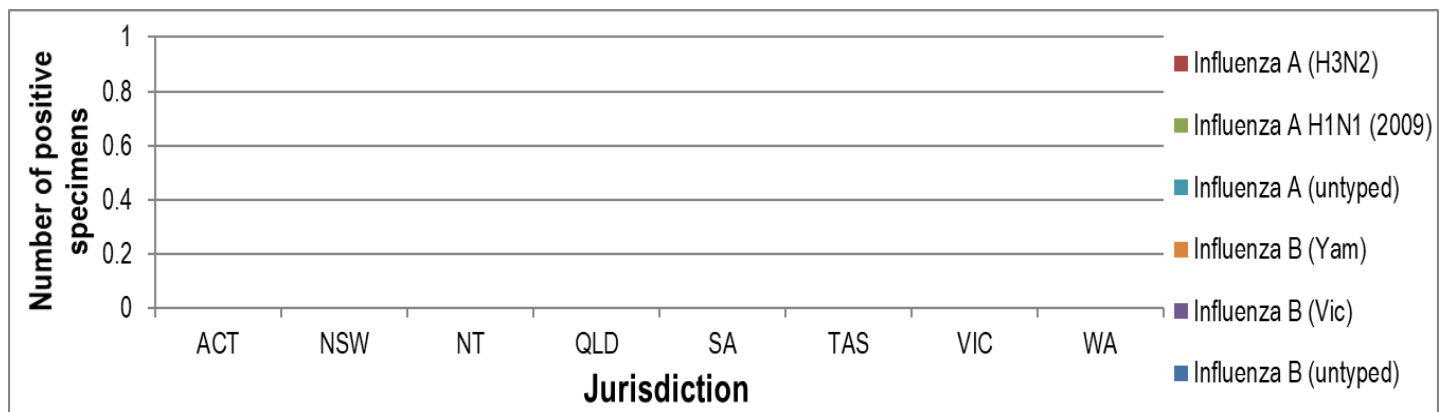


Figure 7. ASPREN + VicSPIN influenza subtype analysis by jurisdiction for 2022 #

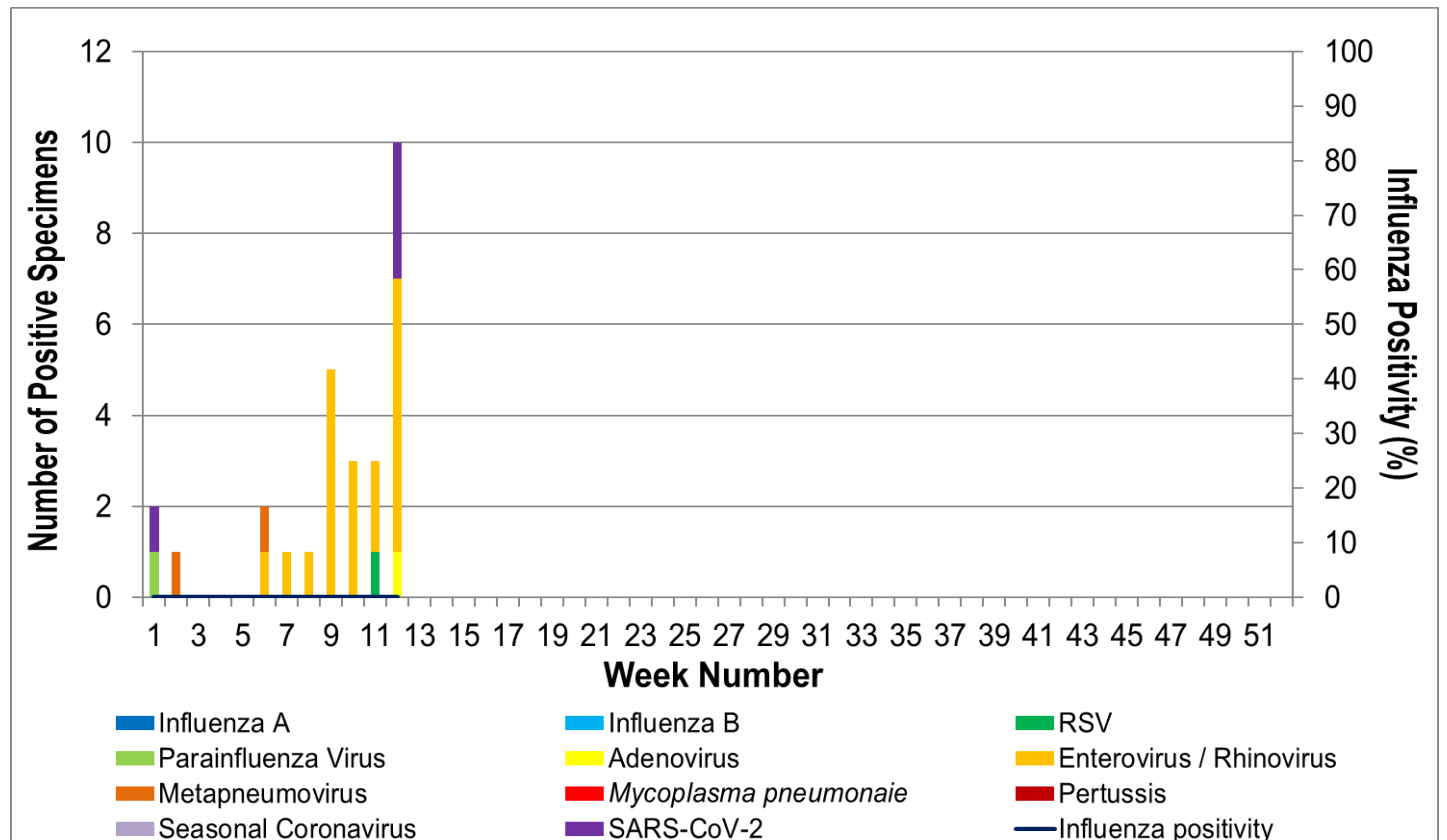


Figure 8. ASPREN, VicSPIN laboratory detection of influenza and other respiratory viruses for 2022 #

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 7 April 2022. Delays in the reporting of data may cause data to change retrospectively.