

**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. 08, 2022 - 11th April — 24th April 2022

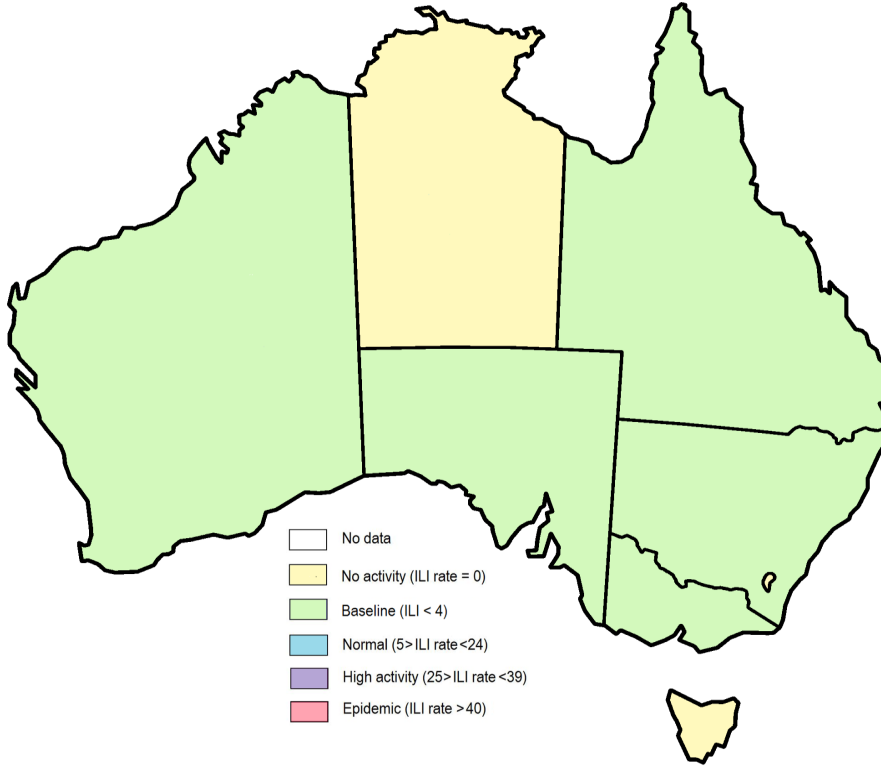


Figure 1. Map of ILI activity by jurisdiction, weeks 15 - 16, 2022.

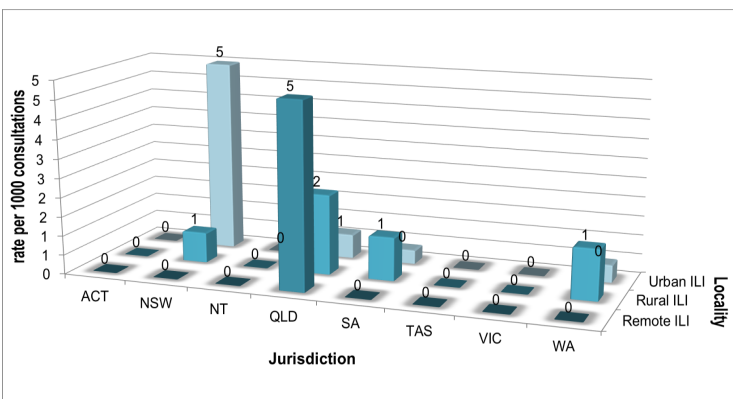


Figure 2. ASPREN rate of ILI by locality and jurisdiction, weeks 15 - 16, 2022.

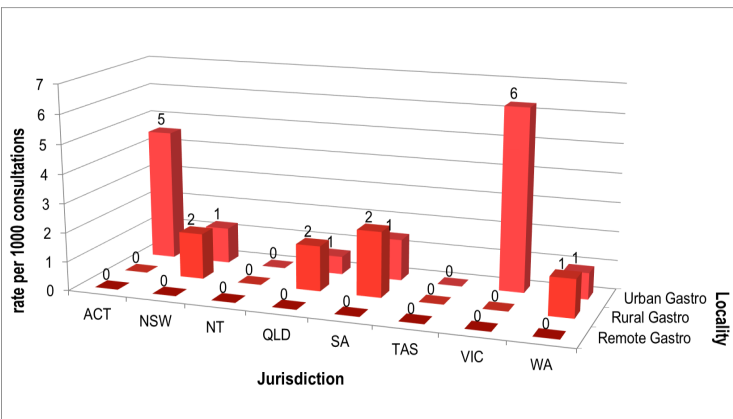


Figure 3. ASPREN rate of gastroenteritis by locality and jurisdiction, weeks 15 - 16, 2022.

NATIONAL SUMMARY



Influenza-like-illness levels are increasing

3

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

13%

Influenza positivity during the reporting period.

4

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



Gastroenteritis levels remain steady below baseline levels

**SYNDROMIC SURVEILLANCE
REPORTING**

Reports were received from 196 reporters from 8 states and territories during the reporting period. During weeks 15 and 16 reporters saw a total of 23,995 patients.

INFLUENZA-LIKE-ILLNESS (ILI)

Nationally, ILI notifications increased during the period with 50 notifications being reported in weeks 15—16. ILI rates reported in this period were 2 and 5 cases per 1000 consultations (weighted). This was higher than the previous fortnight where rates were 2 cases per 1000 consultations in weeks 13 and 14. For the same reporting period in 2021, ILI rates were lower at 1 case per 1000 consultations for weeks 15 and 16 (see Fig. 5).

GASTROENTERITIS

Nationally, gastroenteritis notifications decreased over the period with 31 notifications reported. Gastroenteritis rates reported in this period were similar at 2 and 1 cases per 1000 consultations in weeks 15 and 16 respectively, compared to 2 and 1 cases per 1000 consultations in weeks 13 and 14 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.

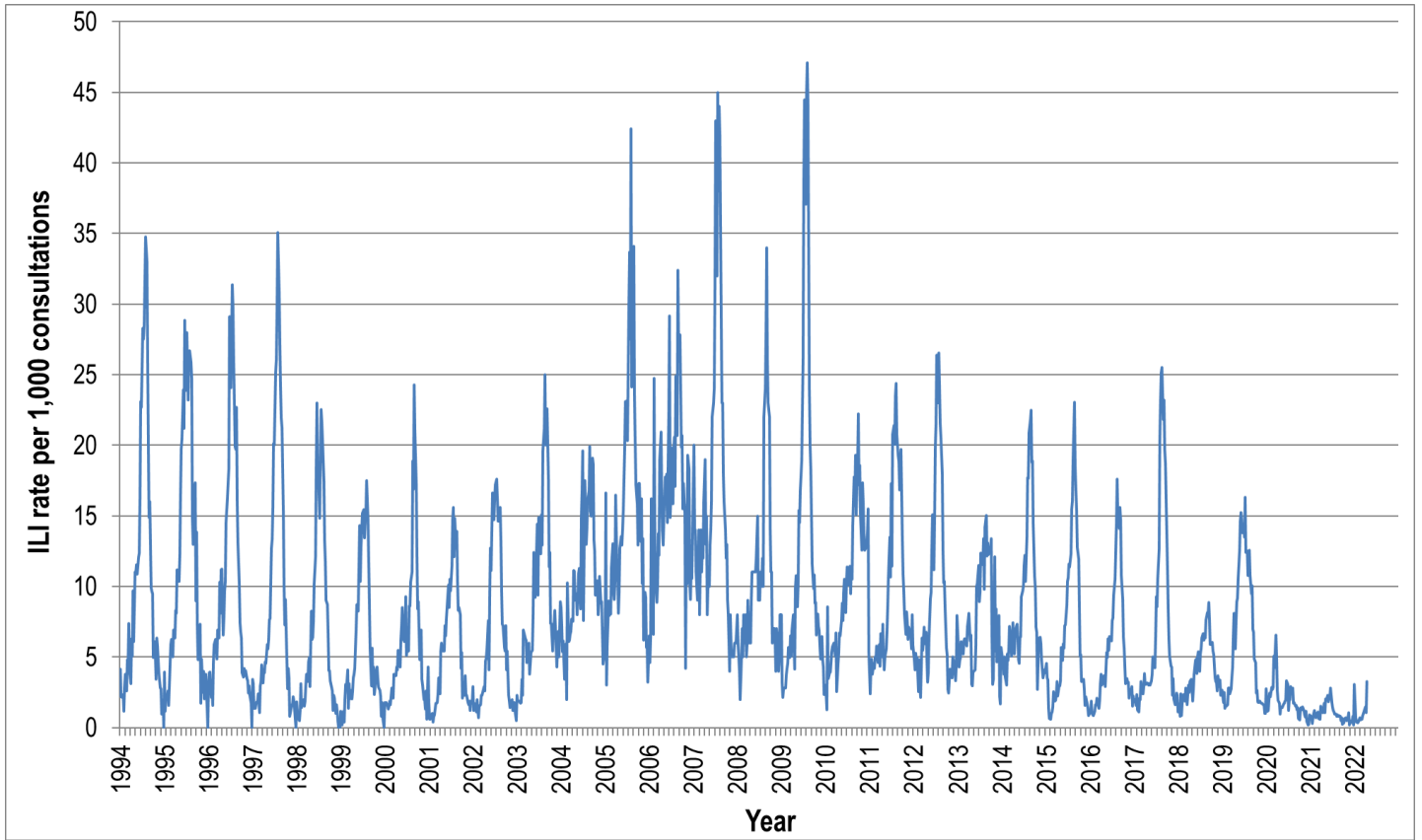


Figure 4. ASPREN ILI rates 1994 - 2022.

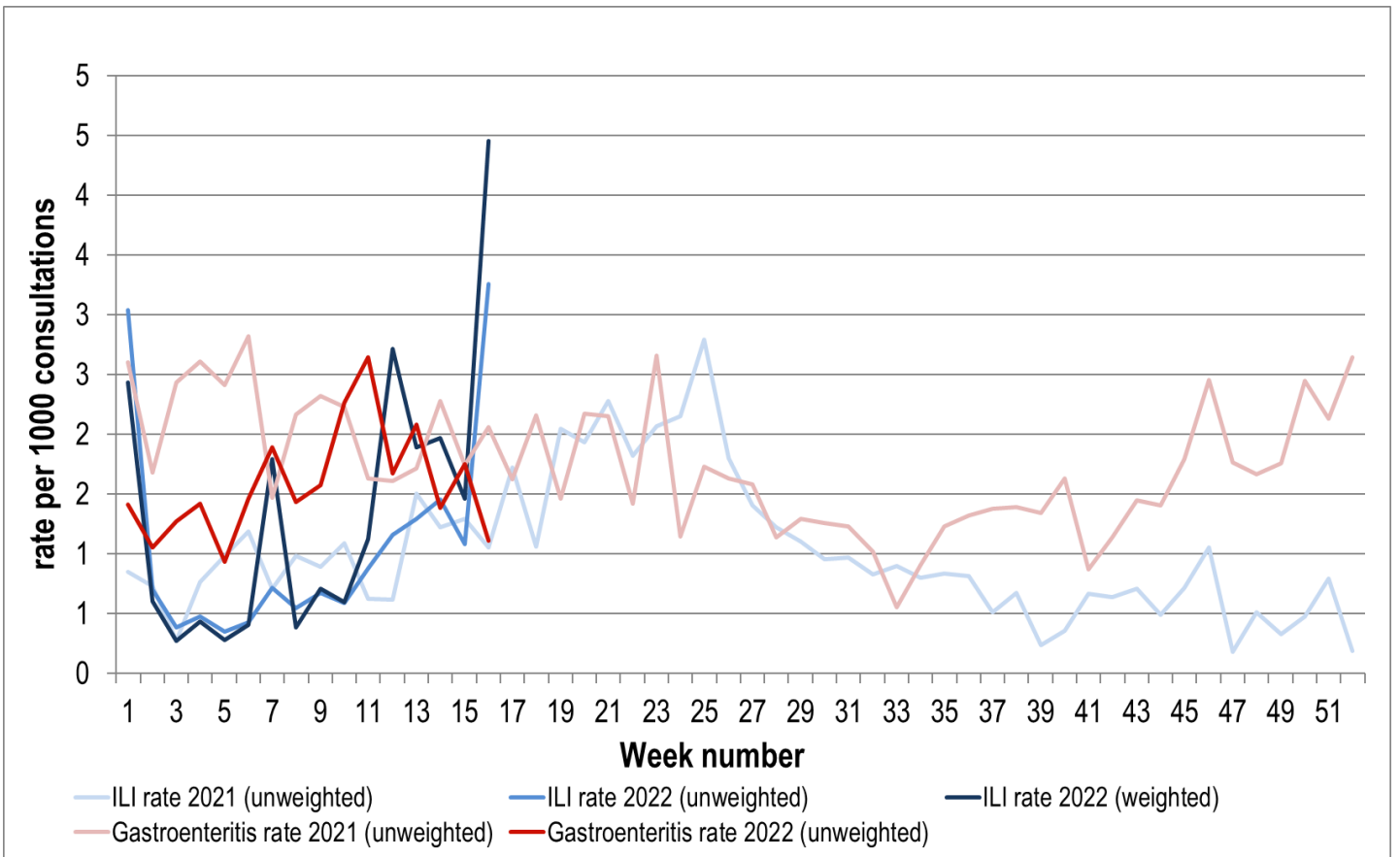


Figure 5. ASPREN + VicSPIN ILI and ASPREN gastroenteritis rates 2021-22. Weighted rates are weighted to account for population size differences between jurisdictions, using population estimates from the 2011 Australian Census.

VIROLOGICAL SURVEILLANCE

48% of all ILI patients were swab tested during weeks 15 and 16 (see Figure 6).

4 cases of SARS-CoV-2 and 3 cases of Influenza A were detected during this period. There were 6 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 11 Apr - 24 Apr 2022	YTD 1 Jan - 24 Apr 2022
Total number of ILI notifications	50	235
Number of swab tests performed	24	87
% ILI patients tested	48%	37%
% of swab tests positive for influenza	13%	5%

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

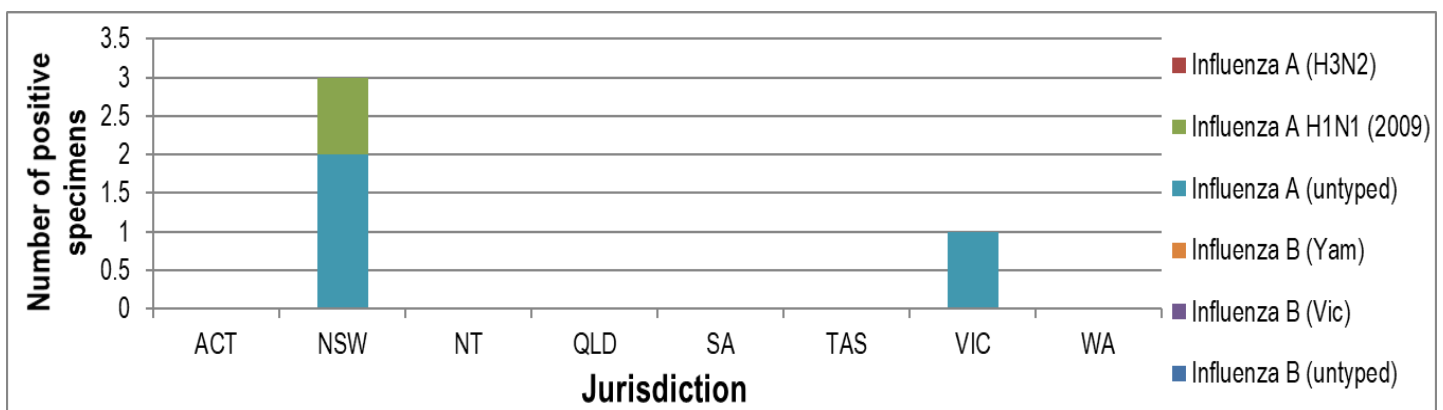


Figure 7. ASPREN + VicSPIN influenza subtype analysis by jurisdiction for 2022 #

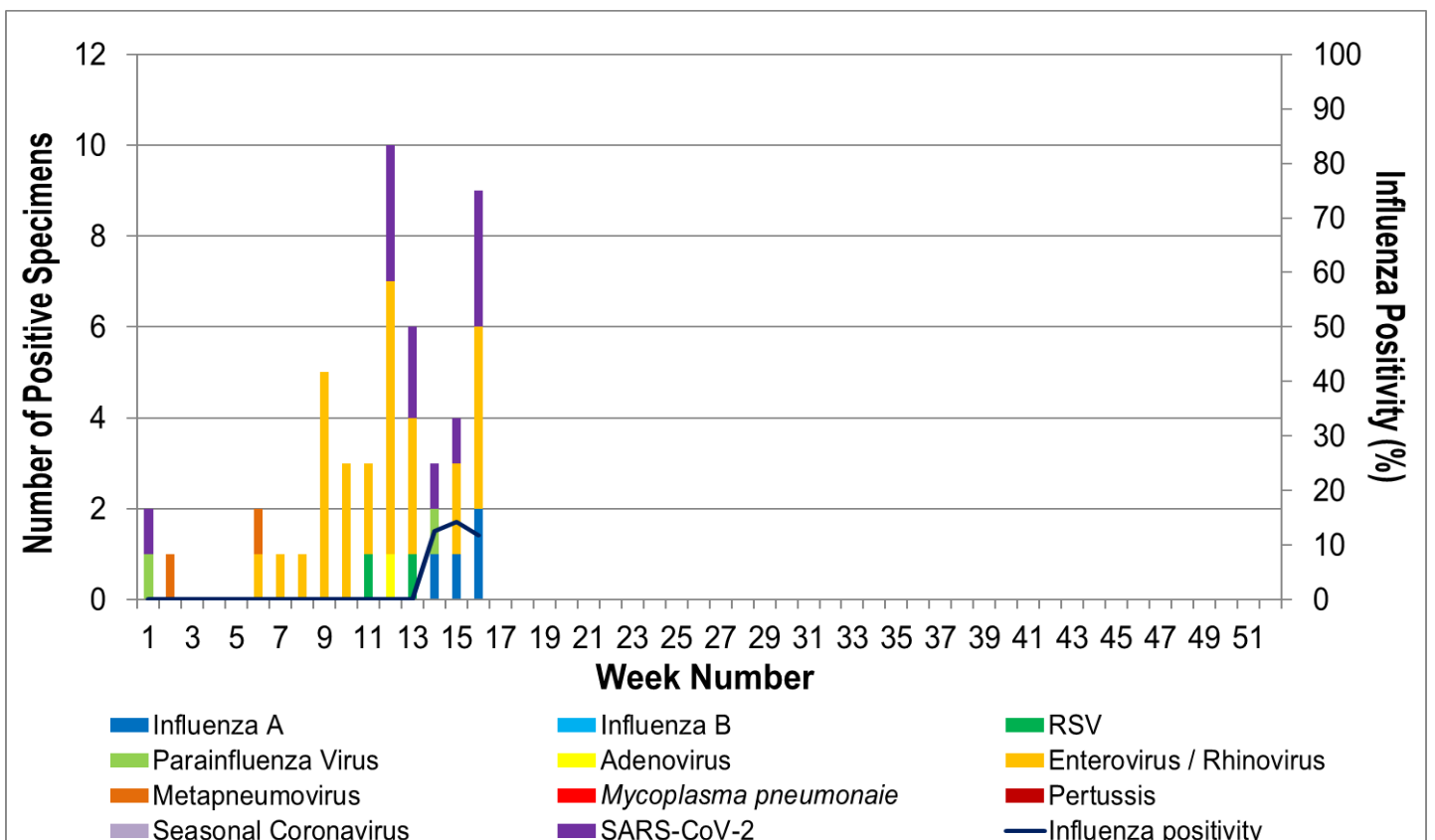


Figure 8. ASPREN, VicSPIN laboratory detection of influenza and other respiratory viruses for 2022 #

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 5 May 2022. Delays in the reporting of data may cause data to change retrospectively.