



Virus WAtch

Week ending 10th July 2022

Key Points

Please note that the influenza and ILI surveillance systems in Western Australia (WA) have been impacted by the COVID-19 pandemic. Therefore, respiratory viral activity should be interpreted with caution and take into account the effects of changes in health seeking behaviour including accessing alternate health services such as telehealth, focused testing for COVID-19 at COVID-19 clinics or specific acute respiratory infection clinics, increased testing for other respiratory viruses and the impact of international border closures.

Influenza and influenza-like illnesses (ILI)

- Indicators of influenza activity continued to increase in the past week.
- ILI presentations at EDs and sentinel GPs increased in the past week.
- The number of influenza cases reported to the Department of Health remained high with 2,047 cases in the past week.
- Non-influenza virus detections at PathWest Laboratory Medicine (PathWest) increased in the past week.

Gastroenteritis

- Gastroenteritis presentations to sentinel GPs were stable in the past week. Data for gastroenteritis presentations to EDs is being reviewed and is not available this week.
- Notifications for rotavirus were stable in the past week and detections of norovirus at PathWest increased.

Other vaccine-preventable diseases

- **Chickenpox and shingles:** There were no chickenpox presentations to GPs in the past week, while presentations to EDs decreased. Shingles presentations at sentinel GPs and EDs remained above base line levels.
- **Measles:** No measles cases were notified in the past week.
- **Mumps:** No mumps cases were notified in the past week.
- **Rubella:** No rubella cases were notified in the past week.
- **Invasive meningococcal disease (IMD):** No IMD cases were notified in the past week.

Other diseases

Coronavirus COVID-19: As of 10th July 2022, WA has recorded 956,764 COVID-19 cases. See [webpage](#) for further information.

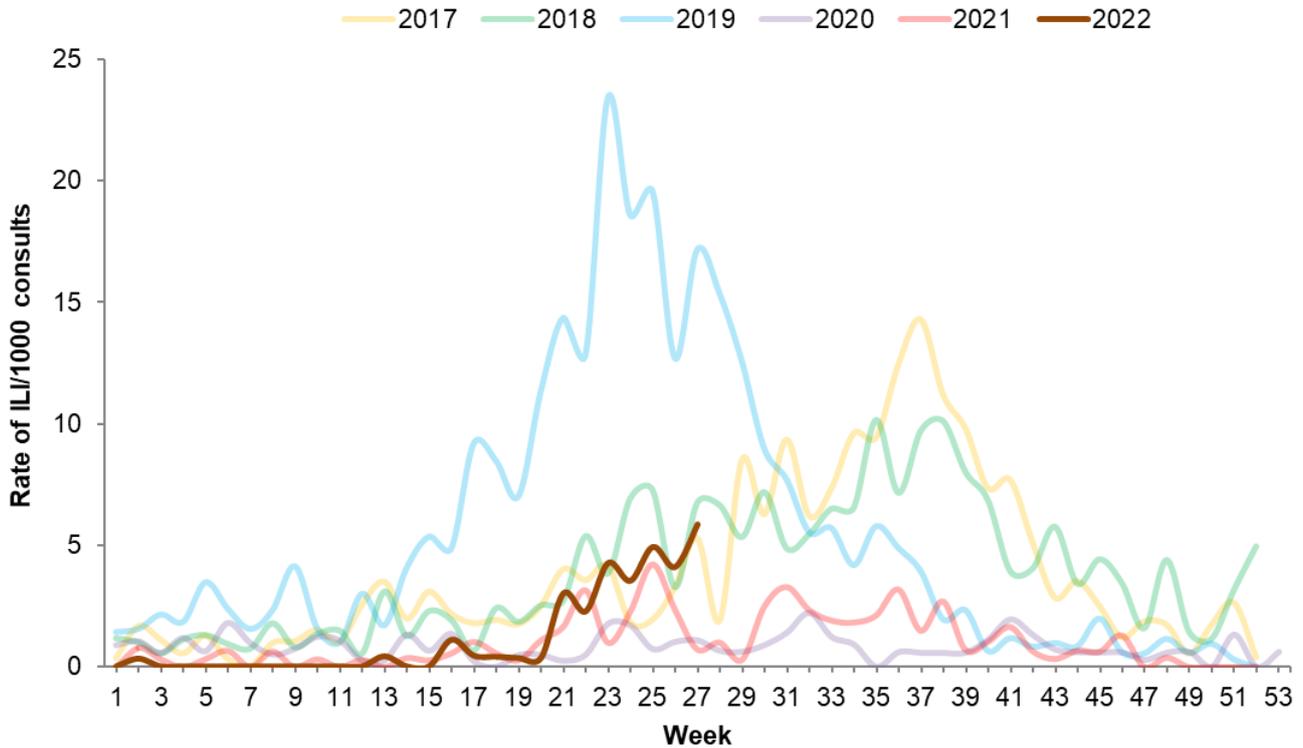
Virus WAtch is a weekly electronic publication by the Communicable Disease Control Directorate (CDCD) and key collaborators. It provides a brief summary of General Practice and Hospital Emergency Department sentinel surveillance data on influenza-like illness, gastroenteritis and varicella-zoster disease, together with relevant laboratory information, to alert health care workers in WA to important circulating viruses. All figures and data were accurate at time of publication, but subject to change. The data collections used to create this publication include:

- Sentinel General Practice (GP) data collected by WA members of the Australian Sentinel Practices Research Network (ASPREN)
- Emergency Department (ED) data provided by the Emergency Department Information System (EDIS), which currently incorporates data from the following hospitals: Fiona Stanley Hospital, Sir Charles Gardiner Hospital, Royal Perth Hospital, Perth Children's Hospital, King Edward Memorial Hospital, St John of God Midland, Bunbury Hospital, Armadale Hospital, Joondalup Health Campus, and Rockingham General Hospital.
- Notification data derived from disease notifications (Western Australian Notifiable Infectious Diseases Database [WANIDD]) received by CDCD, WA Department of Health from medical providers and public or private laboratories in WA. These data are updated routinely to include admission status for all public and public/private hospitals in WA and hospitalisation data are included in the report during the influenza season.
- Viral laboratory data obtained from PathWest laboratories at QEII Medical Centre, as well as via notification data sent by all WA laboratories to CDCD, WA Department of Health.
- As of 1 January 2022, the definition of a confirmed influenza case has changed to remove 'Single high titre by CFT or HAI to influenza virus' from the list of laboratory definitive evidence.
- As of March 2022, this report includes COVID-19 cases diagnosed by Polymerase Chain Reaction (PCR) test and Rapid Antigen Test (RAT)
- Current and archived issues of Virus Watch http://ww2.health.wa.gov.au/Articles/F_1/Infectious-disease-data/Virus-WAtch

Influenza and influenza-like illnesses (ILI)

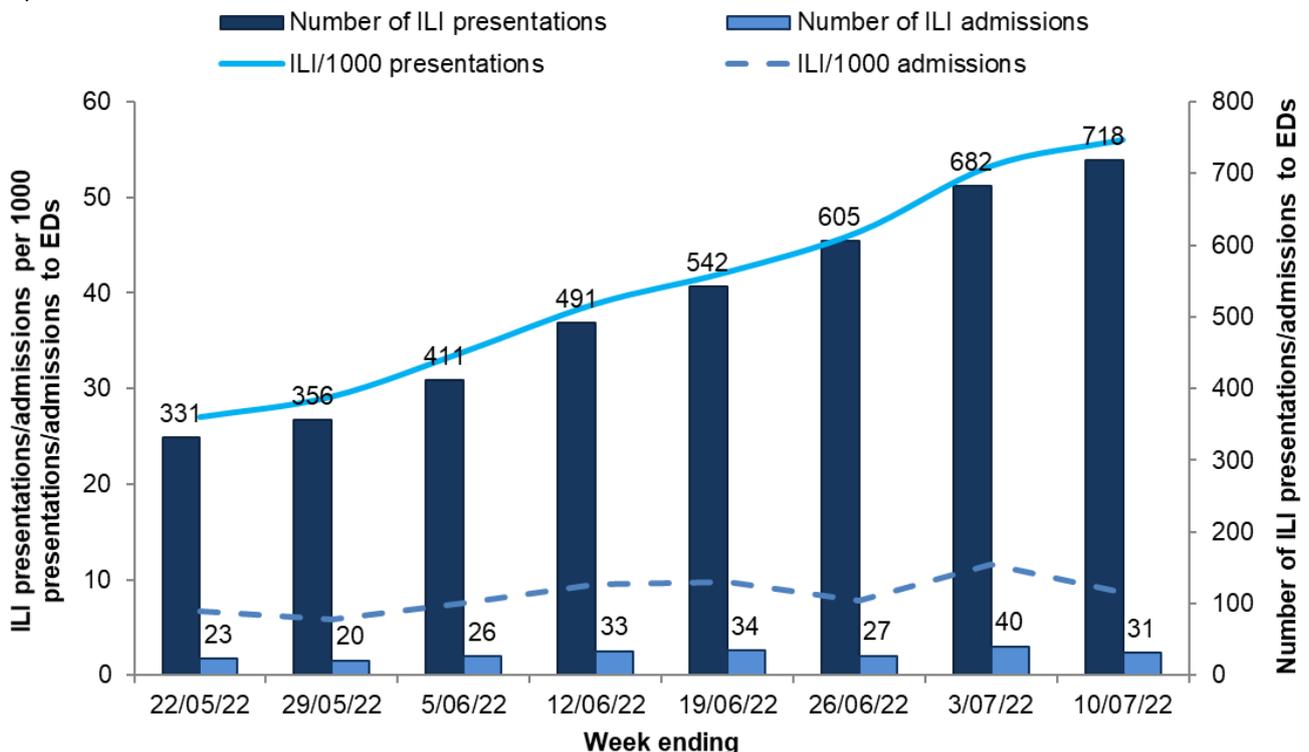
The rate of ILI presentations to sentinel GPs increased in the past week but remained in the mid-range of values usually reported at this time of year (Figure 1).

Figure 1. Rate of ILI per 1000 consultations at sentinel GPs (Australian Sentinel Practices Research Network) in WA by week, 2017 to 2022 YTD



The number of ILI-related presentations to EDs increased in the past week, while the number of admissions decreased (Figure 2).

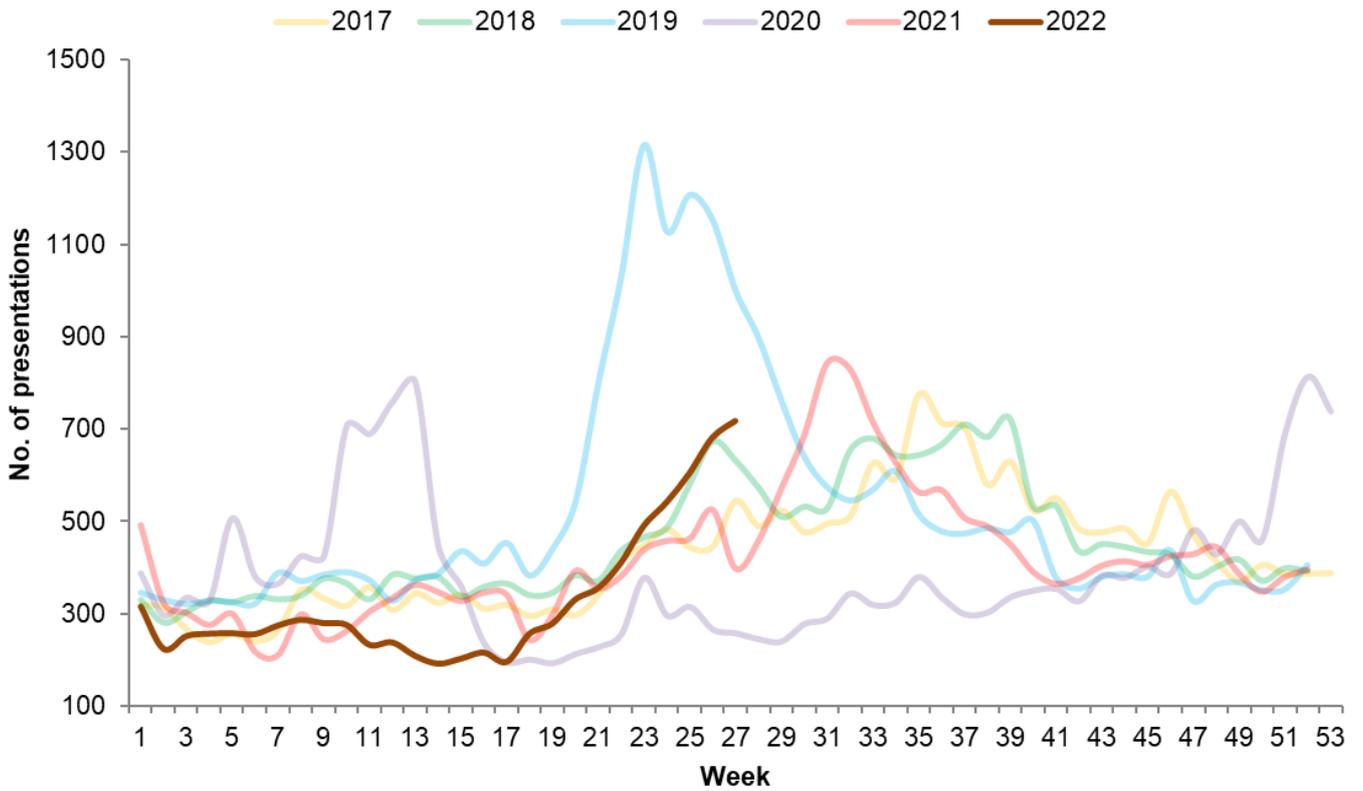
Figure 2. Number and rate of ILI presentations/admissions to emergency departments in WA in the last eight weeks, 2022



Note: This graph presents current EDIS data using the ICD codes B34.9 and J06.9, which are consistent with a clinical presentation of a viral illness. This data may differ from that presented in the Winter Respiratory Illness Report provided by the Information and System Performance Directorate.

The number of ILI-related presentations to EDs increased in the past week to a higher range than usually reported at this time of year (Figure 3).

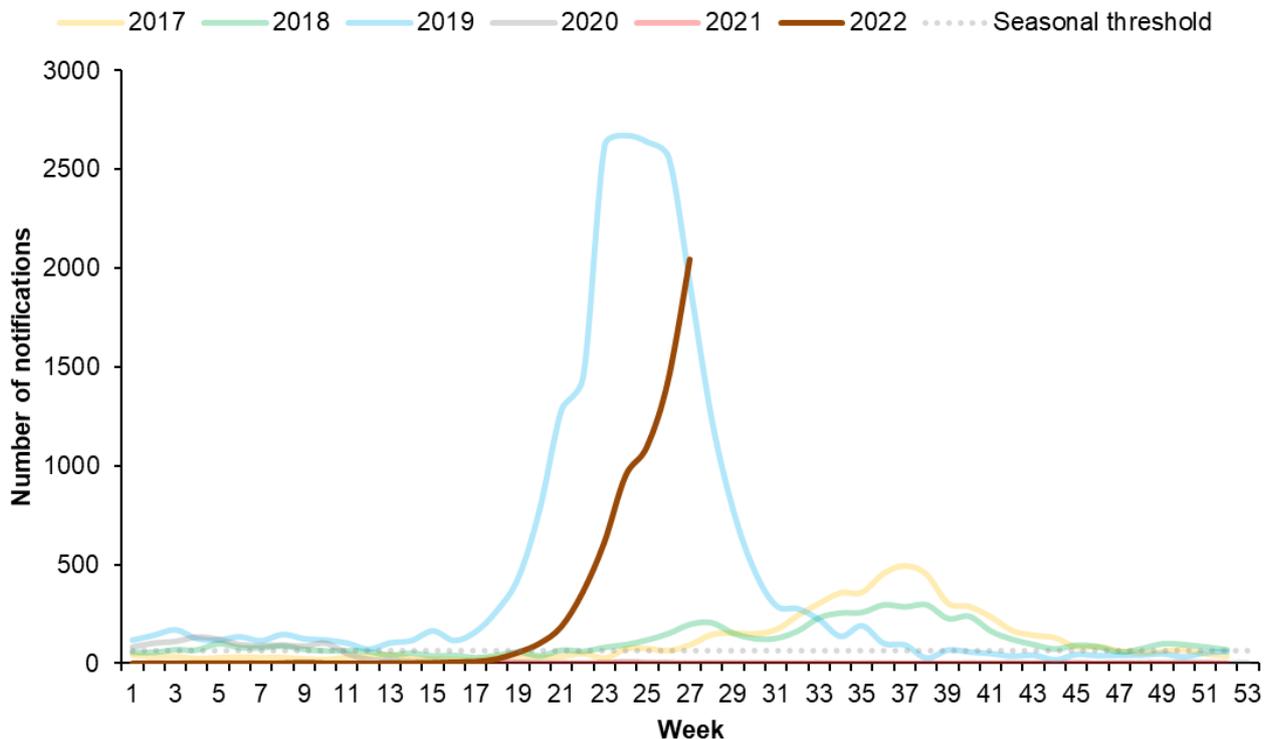
Figure 3. Number of ILI presentations to emergency departments in WA by week, 2017 to 2022 YTD



Note: This graph is a summary of current EDIS data using the ICD codes B34.9 and J06.9 which are consistent with a clinical presentation of a viral illness. This data may differ from that presented in the Winter Respiratory Illness Report provided by the Information and System Performance Directorate.

The number of influenza cases reported to the Department of Health continued to increase above the seasonal threshold with 2,047 cases in the past week (Figure 4).

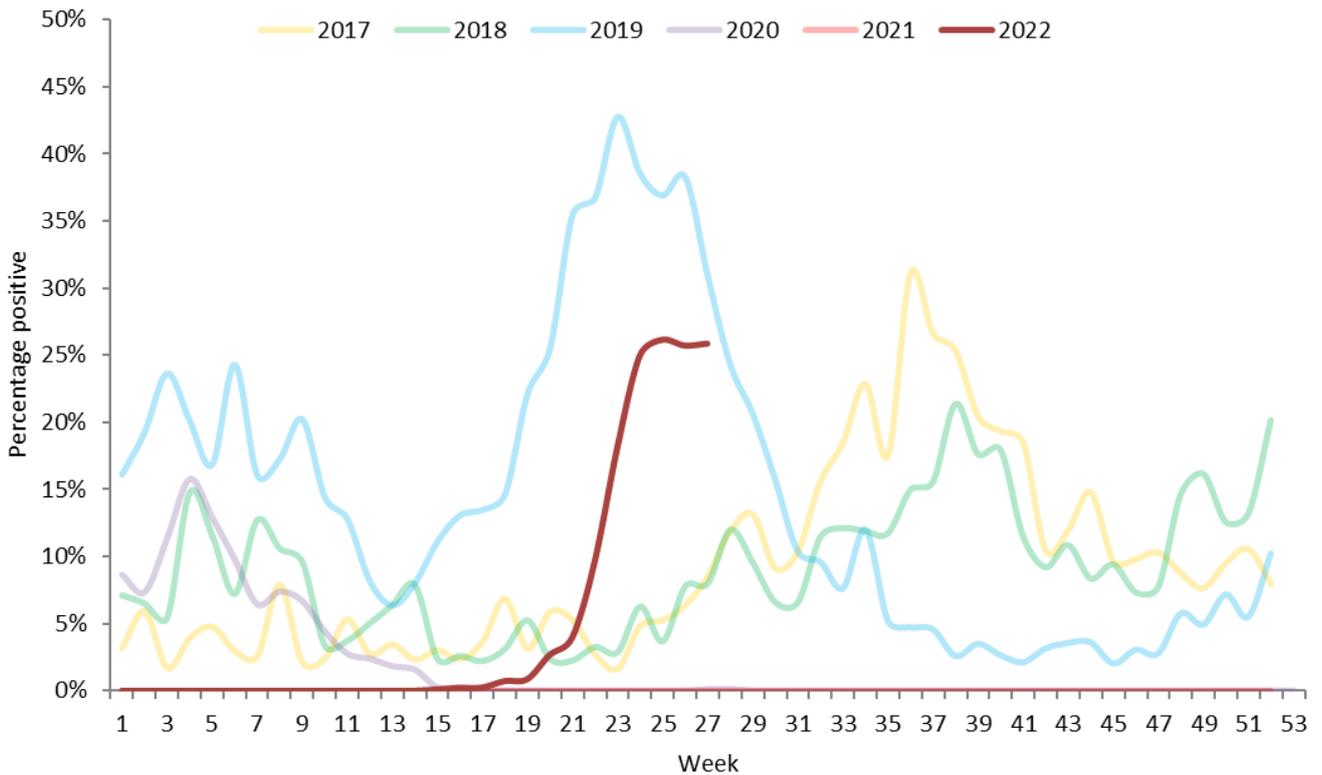
Figure 4. Number of influenza notifications in WA by week, 2017 to 2022 YTD



Note: This graph shows the number of all influenza notifications, by week of onset, received by the DoH, WA (through WANIDD) to the end of the current reporting week. The seasonal threshold defines a value above which may indicate seasonal influenza activity. The threshold value is calculated based on analysis of seasonal influenza data from the past four years. It cannot be used to interpret data from 2019 in this graph.

Of the 1,710 specimens submitted for influenza PCR testing at PathWest in the past week, 440 tested positive (Figure 5).

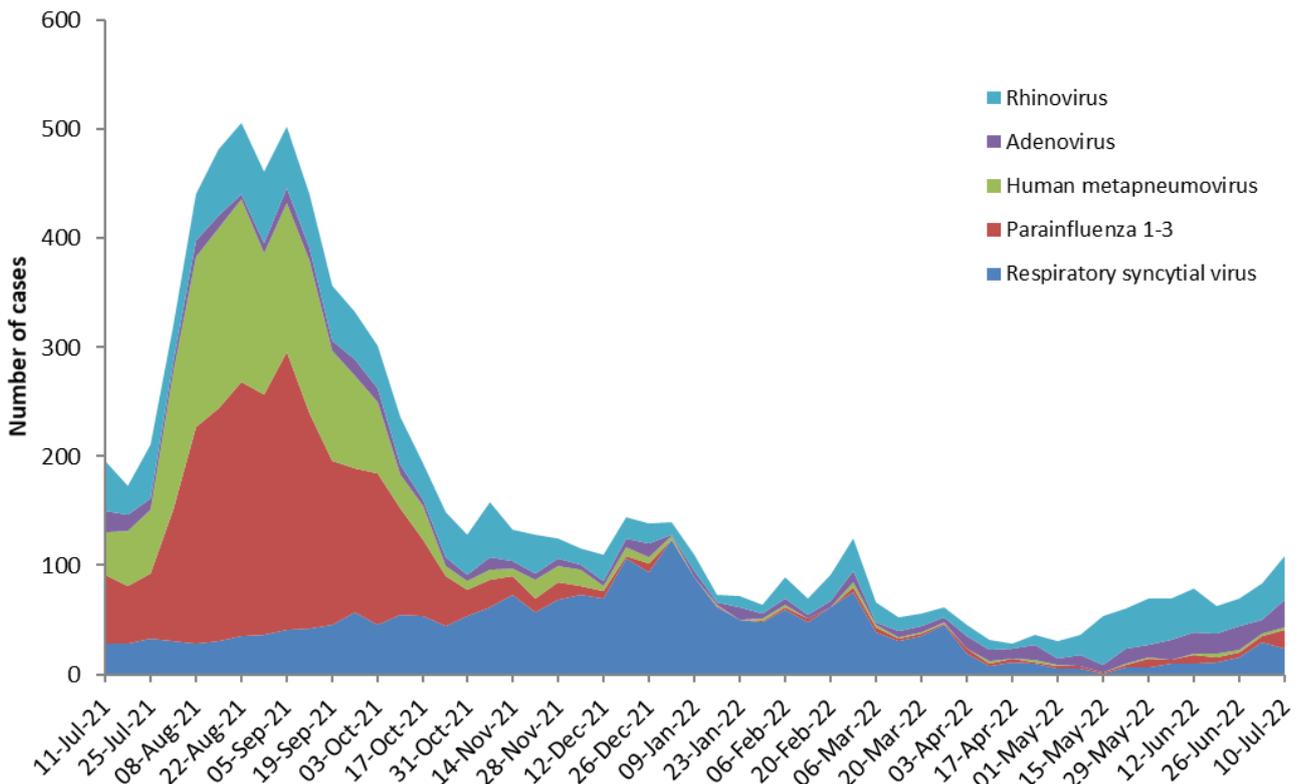
Figure 5. Proportion of influenza PCR specimens positive for influenza at PathWest by week, 2017 to 2022 YTD



Note: This graph is a summary of all WA samples reported by PathWest, excluding samples referred by other private laboratories for influenza subtyping.

Non-influenza virus detections at PathWest increased in the past week (Figure 6).

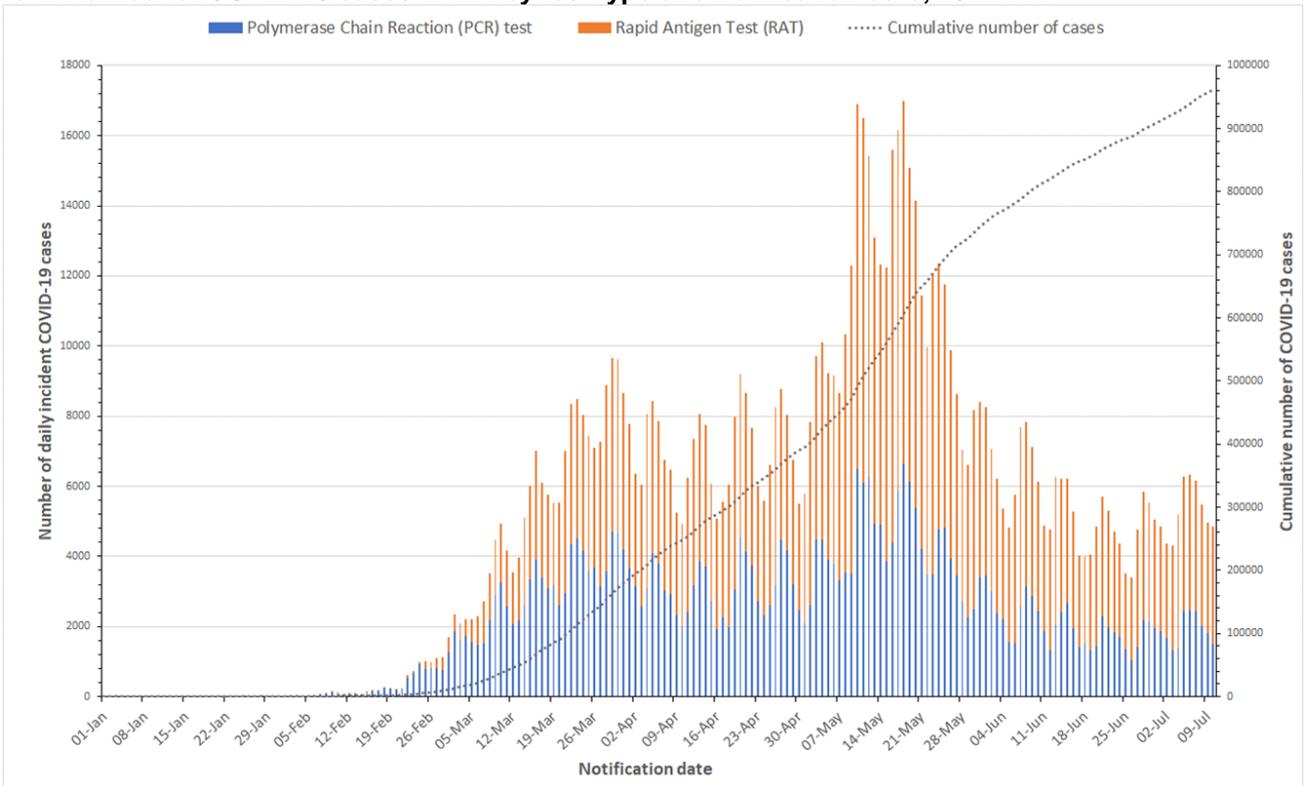
Figure 6. Number of non-influenza respiratory virus detections at PathWest by week, 2021 to 2022 YTD



Note: This graph is a summary of all WA samples positive for a common respiratory virus other than influenza reported by PathWest.

In the past week, there were 39,228 COVID-19 cases reported in WA, which was 13% higher than the previous week. Of these, 36% were diagnosed by PCR test and 64% were diagnosed by rapid antigen test (Figure 7).

Figure 7. Number of COVID-19 cases in WA by test type and notification date, 2022 YTD

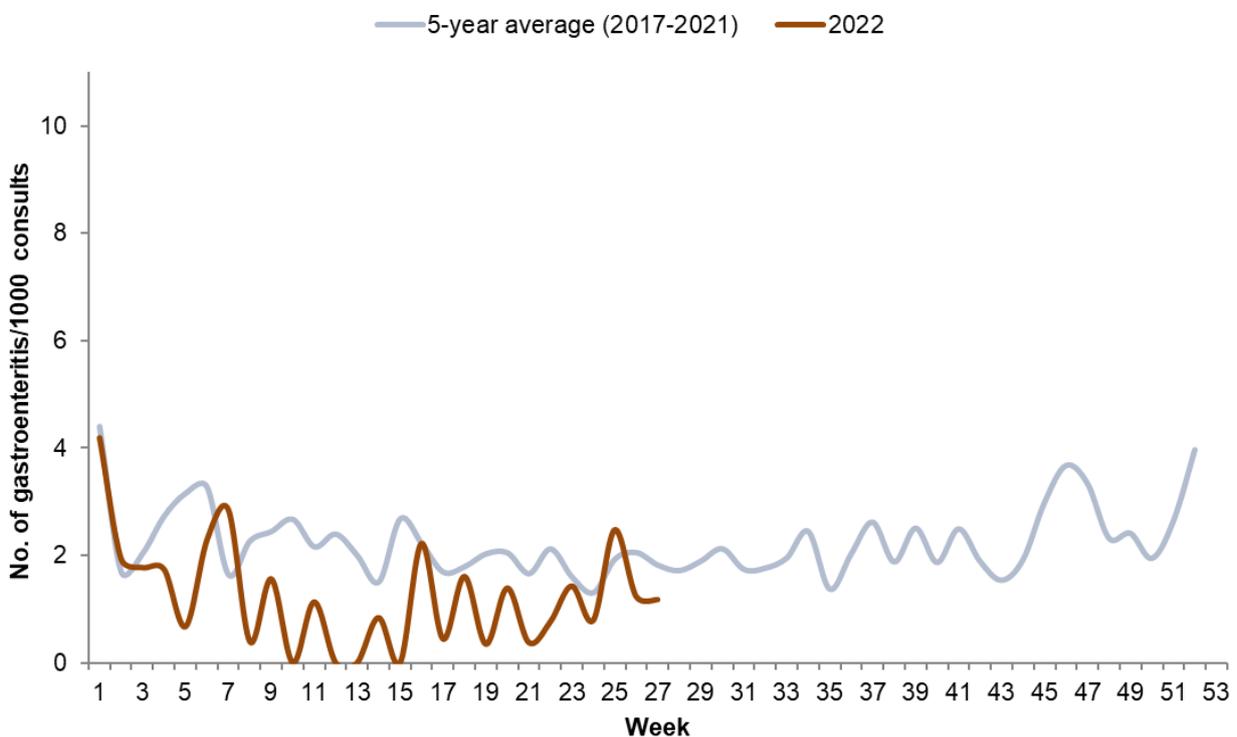


Note: Data sourced from Public Health Operations COVID-19 Unified System (PHOCUS); Notification date is to the 8pm reporting period

Gastroenteritis

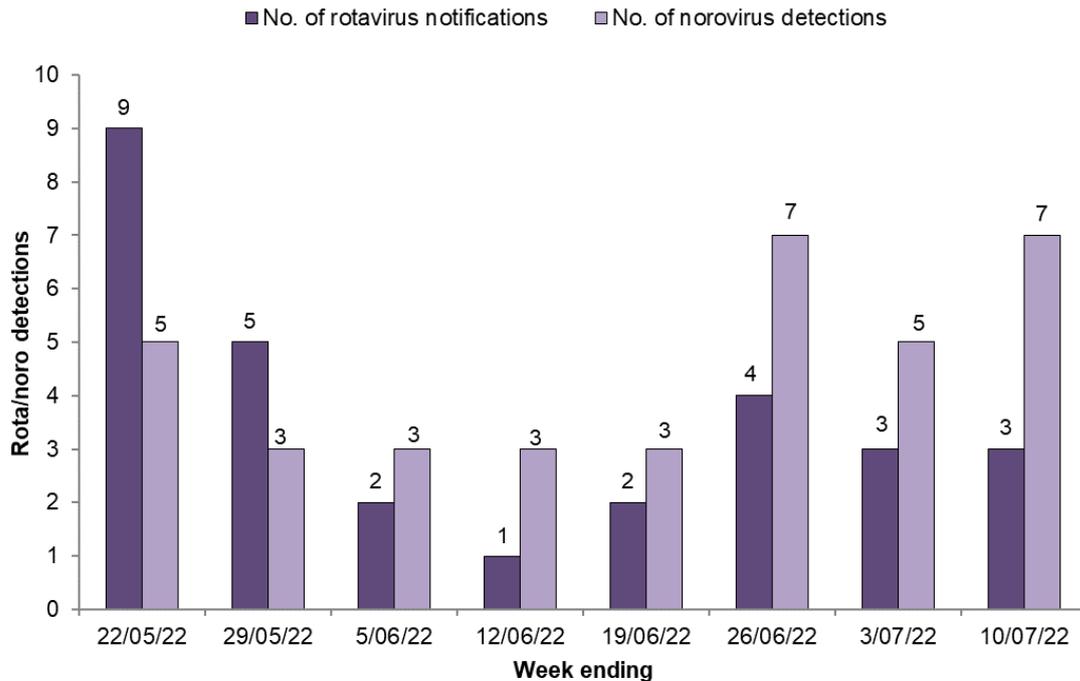
The rate of gastroenteritis presentations to sentinel GPs was stable in the past week and below the previous five-year average for presentations at this time of year (Figure 8).

Figure 8. Number of gastroenteritis presentations per 1000 consultations at sentinel GPs (Australian Sentinel Practices Research Network) in WA by week, 2017 to 2022 YTD



Rotavirus notifications to the Department of Health were stable in the past week and norovirus detections at PathWest increased (Figure 9).

Figure 9. Number of rotavirus notifications to the Department of Health and norovirus detections at PathWest in the last eight weeks, 2022

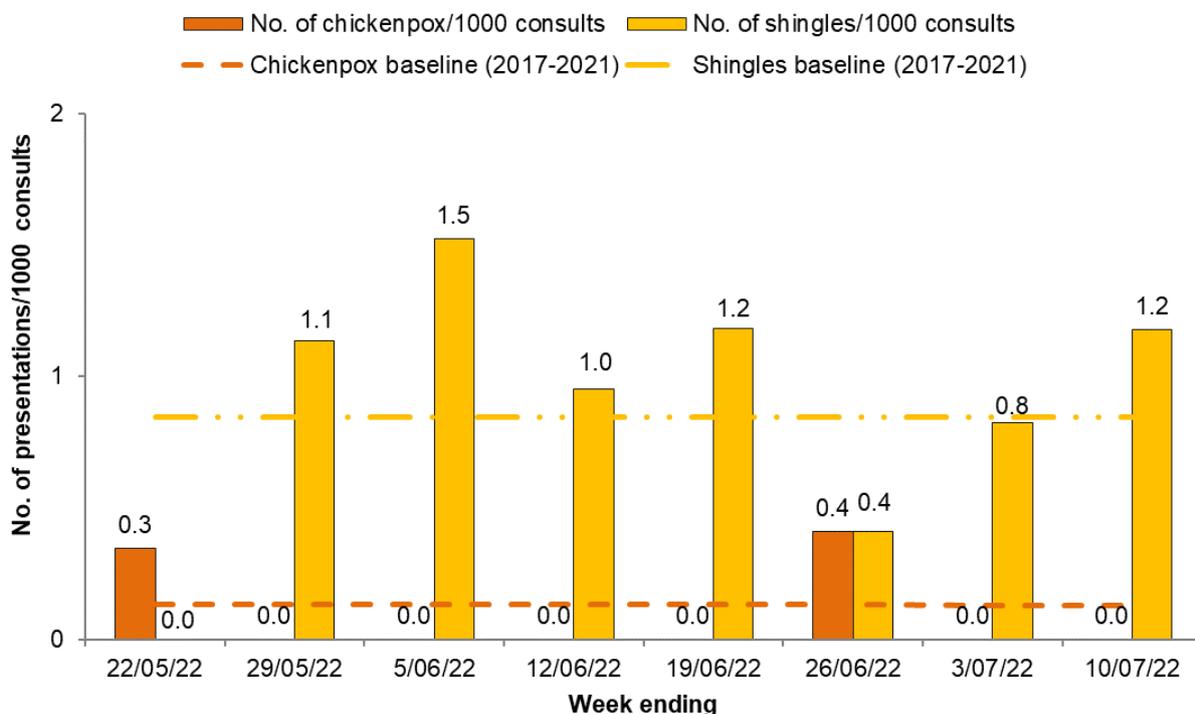


Note: Rotavirus notifications reported to the Department of Health include detections from all WA pathology laboratories. Norovirus detections are from PathWest only.

Viral rashes

The rate of shingles presentations to sentinel GPs increased above the baseline level in the past week. There were no chickenpox presentations (Figure 10).

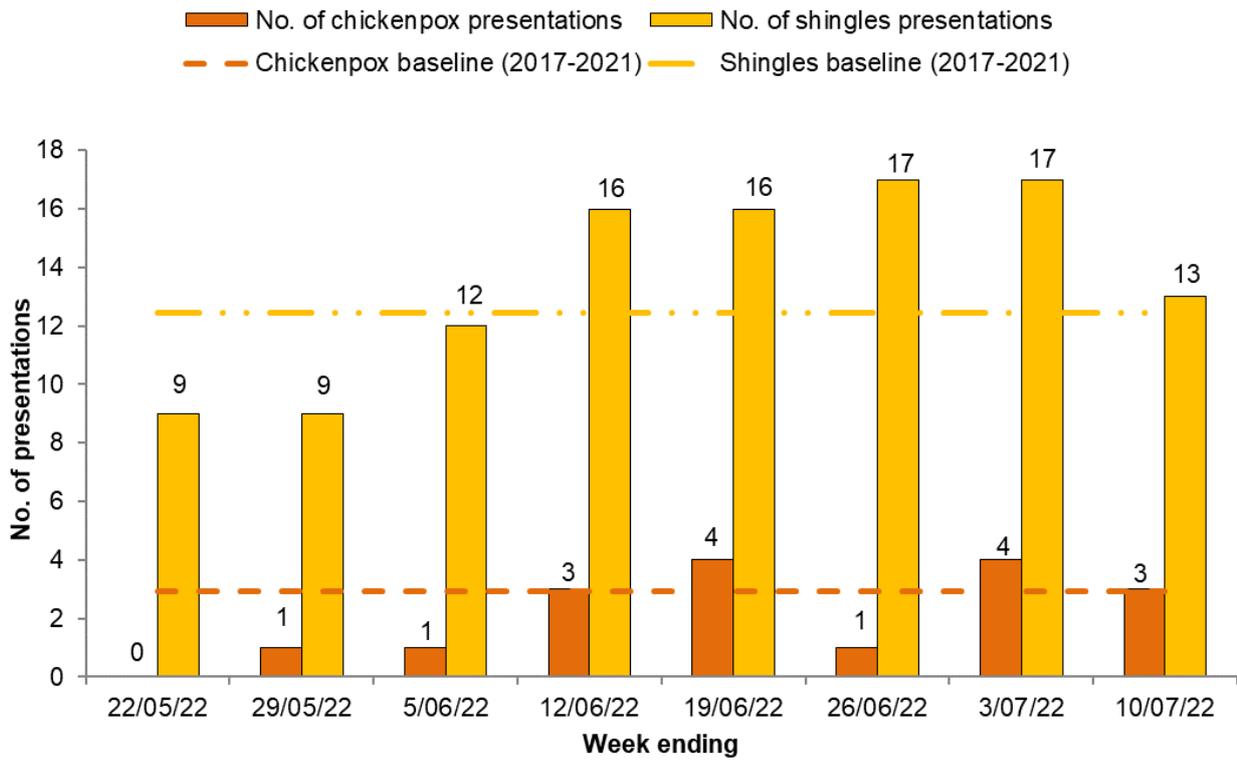
Figure 10. Number of varicella-zoster presentations per 1000 consultations at sentinel GPs (Australian Sentinel Practices Research Network) in WA in the last eight weeks, 2022



Note: Baseline levels for chickenpox and shingles presentations to WA ASPREN GPs per thousand consultations were calculated using the mean of weekly WA ASPREN data from week 1, 2017 to week 52, 2021.

The number of shingles and chickenpox presentations to EDs decreased in the past week (Figure 11).

Figure 11. Number of varicella-zoster presentations to Emergency Departments in WA in the last eight weeks, 2022



Note: Baseline levels for varicella-zoster virus presentations to Emergency Departments in WA were calculated using the mean of weekly EDIS data from week 1, 2017 to week 52, 2021.

This document can be made available in alternative formats on request for a person with disability.

© Department of Health 2022

Copyright to this material is vested in the State of Western Australia unless otherwise indicated. Apart from any fair dealing for the purposes of private study, research, criticism or review, as permitted under the provisions of the *Copyright Act 1968*, no part may be reproduced or re-used for any purposes whatsoever without written permission of the State of Western Australia.

healthywa.wa.gov.au