

Facsimile Cover Sheet

Wharangi Nama Waea

Date/Te Ra: **3 October 2014**


To/Kia: General Practitioners, Practice Nurses, Pharmacists, After-hours Centers and Paediatricians, ID Physicians, Emergency Departments in the greater Wellington and Wairarapa region	From/Na:
Name of Agency/Wahi Mahi:	Fax Number/Nama Waea:

Public Health Alert- Yersinia Update and Measles testing update

I would be grateful if you could distribute the following information to relevant staff in your organisation.

If you would also like to receive this by email for ease of distribution, storage and retrieval please advise RPH of your email on rph@huttvalleydhd.org.nz.

Kind regards,



Dr Jill McKenzie

Medical Officer of Health

Regional Public Health

Public Health Alert – 3 October 2014



To: General Practitioners, Practice Nurses, Pharmacists, After-Hours Centres and Paediatricians, ID Physicians, Emergency Departments in the greater Wellington and Wairarapa region

From: Dr Jill McKenzie

Update on Yersiniosis Outbreak

This is an update to the Public Health Alert from 26 September regarding an increase in Yersiniosis illness in the region. There is an ongoing investigation into the reason for high case numbers of Yersiniosis nationally.

Thank you for continuing to prioritise advising your patients if they have a positive Yersinia result and that public health will shortly be in contact by telephone for an interview to review possible sources of their infection. The following information is to support clinical assessment of potential cases and prevention of further cases.

National Increase in Cases

Nationally from 1 September to 1 October 2014 there have been a total of 182 notifications of Yersiniosis. This is approximately three times the number of notified cases at this time in previous years. Sixty cases have been confirmed as *Y. pseudotuberculosis*. This is unusual as most cases of Yersiniosis are due to *Y. enterocolitica*. Cases have been reported from 10 DHBs across the country, with most cases in the Auckland, Christchurch, and Wellington areas. Thirty nine cases have been hospitalised.

Presentation of Yersiniosis

Cases have presented with abdominal pain, many mimicking appendicitis with or without diarrhoea. Some have been assessed at Emergency Departments or been admitted to hospital. CT scans and laparoscopies have shown terminal ileitis and mesenteric adenitis.

Case Demographics

Initial investigations have indicated that cases have generally been in the 20 - 50 year age group, with an approximately even distribution by sex. The majority of cases have stated their ethnicity as European or other.

Potential Sources

Analysis has not identified a common risk exposure, but further investigations and analyses are underway. *Y. pseudotuberculosis* has many potential animal reservoirs, and person to person spread is uncommon. Outbreaks of *Y. pseudotuberculosis* are not common, and have been associated with the consumption of fresh vegetable produce in previous outbreaks.

Further Information and Resources and Prevention of Yersiniosis

Please refer to the previous Public Health Alert 26 September 2014 (www.rph.org.nz under the 'Health Professionals' tab). This includes a factsheet on Yersiniosis.

Information on minimising the risks of foodborne infections can be found at:

<http://www.foodsmart.govt.nz/food-safety/foodborne-illnesses/>
http://www.foodsmart.govt.nz/elibrary/fresh_produce_food.htm

Measles Testing Update

To enable the laboratory to prioritise specimen processing and interpret results, clinical details (including vaccination history if known), and the reason for testing **MUST be provided** on the request form.

PCR testing should only be requested when you suspect a person has acute measles and fits the suspected case definition of:

morbilliform rash **and** fever (or history of fever) still present at rash onset, and 1 of cough, or coryza or conjunctivitis or koplik spots.

If a person presents in the prodromal phase, prior to rash onset and reports they have been in contact with a confirmed case of measles please ring the on-call Medical Officer of Health on 04 570 9002 to discuss testing

PCR will NOT provide any information about whether a person has measles immunity or whether a person has been exposed to measles.

Measles IgG (serology) will indicate if a person has a protection from previous vaccination or measles disease. People born in NZ before 1969 can be assumed to have measles protection and do not require serology testing.

Note: Staff taking a throat swab for measles should wear a N95 mask and eye protection.