

## Waikato Public Health Bulletin

Teenaa koutou katoa. We hope you enjoy this edition of the Waikato Public Health Bulletin and we welcome your feedback.

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### Syphilis

In the latter half of 2022, there was a notable 41% increase in infectious syphilis notifications. This surge marked the most significant increase since the late 2018/early 2019 period when notifications rose by 26%.

The increase in notifications is primarily attributed to a sharp rise in reported cases among men. Specifically, there was a 40% increase in notifications among men who have sex with men (MSM) during 2022 Quarters 1-3, and notifications among men who have sex with women (MSW) more than doubled during the same period.

The Sexual Health Service has seen a sharp increase in syphilis cases, especially among heterosexual individuals. It is strongly recommended to include HIV and syphilis testing as part of routine STI screening, as syphilis can be asymptomatic and manifest diverse symptoms in its secondary stage.

Consider syphilis testing in cases with unusual skin rashes, oral, genital or perianal ulcers, lymphadenopathy, hepatitis and/or

neurological symptoms. Syphilis can affect any body system and cause end organ damage in its secondary stage.

In Waikato, infectious syphilis cases rose from 40 to 56 between 2021 and 2022, and 2023 has seen even higher numbers, especially among young heterosexual individuals. As of the current date in 2023, there have been a total of 78 syphilis cases at the Sexual Health Service for the year. The Sexual Health Service has already treated 45 infectious syphilis cases in 2023 including 17 between July and September.

Testing is strongly encouraged, including among asymptomatic women of reproductive age, as a significant portion of syphilis cases in this group (40%) is found in pregnant women undergoing routine antenatal screening. The Sexual Health Service suspects a substantial number of undiagnosed cases.

Māori and Pacific whānau are disproportionately affected by congenital syphilis, a preventable yet potentially devastating condition.

The Sexual Health Service is more than willing to provide care and treatment for individuals with positive syphilis serology. Referrals for such cases can be sent to the Sexual Health Service via BPAC.

### STI Notification Process

It is important that sexually transmitted infection (STI) notifications for syphilis, gonorrhoea, AIDS are made using the correct process.

**Please go to the Institute of Environmental Science and Research (ESR) [STI surveillance webpage](#) for the appropriate**

**notification (case report) forms and follow the relevant instructions.**

Notification must be made through this process, and cannot be made by phone. These notifications must be made using non-identifiable data.

**Please note that these STI notifiable diseases should not be reported to the Public Health Service.**

Cases of HIV infection are notified directly by laboratories, but the AIDS Epidemiology Group will then send a link to an HIV notification form for completion by notifying health practitioners.

You can also find the ESR STI surveillance webpage link under the STI section of the Te Whatu Ora Waikato [Notifiable and communicable diseases webpage](#).

## Measles & MMR Reminder

There have been two cases of measles identified in Taamaki Makaurau Auckland in late September. Te Whatu Ora have released a [media statement](#) on 26/9/23.

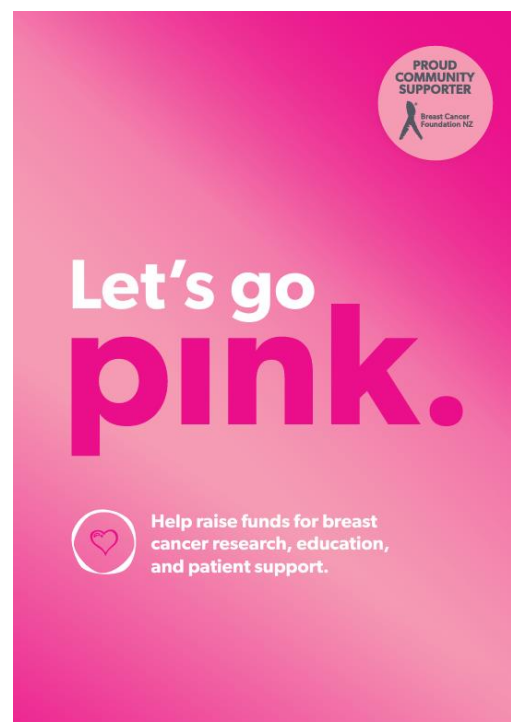
Measles is a highly contagious viral disease that can be life threatening. In 2017, Aotearoa New Zealand was verified by the World Health Organization as having eliminated endemic measles. However, measles is often imported into our country following international travel. We continue to be at high risk of a measles outbreak due to low immunisation rates and therefore insufficient levels of immunity across the population to prevent community transmission.

We need at least 95% of people living in New Zealand to be immunised to prevent an outbreak of measles. Importantly this would also protect peepi too young to be vaccinated, and those who are severely immunocompromised.

On average, one dose is 95% effective against measles, and two doses is more than 99% effective. The second MMR dose is not a booster – it is given to increase vaccine efficacy and address primary vaccine failure. This occurs in 5% of recipients of the first dose who do not stimulate an immune response and lack protective immunity despite vaccination. Measles is easily preventable with immunisation. The measles, mumps, and rubella (MMR) vaccine is free to those born on/after 1 January 1969.

It is safe for people to have the MMR vaccine again if they are unsure whether they've had it before. Check out the [MMR tool](#), which helps people find out if they or their whaanau member need a MMR vaccine. For more information visit the [immunise website](#).

## Breast Cancer Awareness Month



## Breast Cancer Foundation NZ

October is breast cancer awareness month.  
Breast Cancer Foundation New Zealand

(BCFNZ) is a not-for-profit charitable trust. Their vision is zero deaths from breast cancer. The donations received helps BCFNZ achieve this vision through; early detection education, supporting those with breast cancer, research & medical grants and advocacy. Visit the [BCFNZ website](#) for more information on how you can support Kiwis impacted by breast cancer.

### BreastScreen Midland

Mammography screening is provided on mobile units in most rural towns every two years and permanently in: Hamilton, Thames, Tauranga, Mount Maunganui, Whakatane, Rotorua and Taupo.

For more information visit [Te Whatu Ora Waikato website](#) or [Time to Screen website](#).

The Mobile Screening Unit will be coming to the following communities in the month of October. Please check out the Mobile Unit [Schedule](#) for more information or call 0800 270 200.

#### Mobile Unit Schedule

##### Te Kuiti (Until 13 Oct)

The Esplanade beside the Rose Gardens

##### Tokoroa (Until 13 Oct)

South Waikato Health Centre car park,  
Gate 3, Tokoroa Hospital, Maraetai Road

##### Kawhia (16-19 Oct)

Behind the Community Hall, 141 Jervois St

##### Ngaruawahia (16 Oct – 10 Nov)

Memorial Hall car park, Galileo St

##### Huntly (24 Oct–1 Dec)

Countdown Supermarket Carpark, Tumate  
Mahuta Drive

### New Zealand ShakeOut Whakahaumarū Aotearoa – 19 October

New Zealand ShakeOut is our national earthquake drill and tsunami hiikoi. New Zealand Shakeout is taking place Thursday 19 October 2023 at 9.30am.

ShakeOut takes place across the world to remind people of the right action to take during an earthquake.

#### Drop, Cover and Hold.

You can also practice a tsunami hiikoi (evacuation walk) if you're in a coastal area.



Do not run outside during an earthquake.

It is frightening to stay in a building after an earthquake, but it is much safer than going outside.

When you eventually evacuate, take your wallet, coat, bag and grab bag. You are more vulnerable if you leave these personal items behind. Open areas with no tall buildings or power lines nearby are the best evacuation assembly areas.





- [Multiple languages](#)
- [New Zealand Sign Language](#)
- [Alternate formats](#)

Voting help is also available at the Settlement Centre Waikato for those with English as a second language. Voting will be available at this site from October 3-14.

Sign up for ShakeOut [here](#). See how your workplace, household and whaanau can get involved in the New Zealand ShakeOut. Find instructions on how you can get prepared and take part [here](#).

## Voting Information and Support

The general election is on 14 October 2023. This is your chance to have a say on the issues that affect you, your whaanau and your community.

To vote, you need to be enrolled and your details need to be up to date. You can do this [online](#). Voting begins from Monday 2 October until 7pm on Saturday 14 October.

You can find your closest voting place at [vote.nz](#) or call 0800 36 76 56.

Voting information is available in:

## Staff News

We extend a warm welcome to two new staff members who have joined the Waikato Public Health Service.

Dr Elizabeth (Liz) Becker has joined the Clinical Team as a senior doctor in the role of Medical Officer of Specialist Scale (MOSS).

Izaac (Ihaka) Ratahi has joined the Health Improvement Team as a Health Improvement Advisor for Hauraki.

Haere mai!



Dr Elizabeth (Liz) Becker



Izaac (Ihaka) Ratahi

### Medical Officers of Health:

Dr Felicity Dumble, Dr Richard Wall, Dr Richard Vipond

#### After hours:

**MOoH:** 021 359 650     **HPO:** 021 999 521

If there is no answer, please contact Waikato Hospital's switchboard 07 839 8899 and ask for the on-call MOoH.

#### During office hours:

**Public Health (MOoH or HPO):** (07) 838 2569     **Notifications:** 07 838 2569 ext. 22041 or 22020

**Notifications outside Hamilton:** 0800 800 977     **Fax:** 07 838 2382

**Email:** [notifiablediseases@waikatodhb.health.nz](mailto:notifiablediseases@waikatodhb.health.nz)

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## Notifiable diseases – Trends

Notifiable diseases (Waikato District) - period to: October 2023

\*Stats NZ estimated 8.69% of the population resided in Waikato in 2021

Disease name	Waikato cases per month			Cases per month over the last year (mean)		
	August	September	Trend	Waikato	National	% Waikato*
Botulism	0	0	•	0.0	0.0	-
Brucellosis	0	0	•	0.1	0.4	25
Campylobacteriosis	58	61	▲	53.1	537.8	10
COVID-19	1,603	902	▼	4,533.3	55,286.8	8
Cryptosporidiosis	26	39	▲	9.3	70.6	13
Decompression sickness	0	0	•	0.0	0.1	0
Dengue fever	0	0	•	0.0	3.9	0
Diphtheria	0	0	•	0.0	0.5	0
Gastroenteritis - unknown cause	1	4	▲	1.7	20.7	8
Gastroenteritis / foodborne intoxication	8	5	▼	5.9	14.8	40
Giardiasis	11	13	▲	10.2	75.8	13
Haemophilus influenzae type b	0	0	•	0.1	0.3	33
Hepatitis A	0	0	•	0.3	5.2	6
Hepatitis B	1	0	▼	0.2	1.5	13
Hepatitis C	1	1	•	0.2	3.2	6
Hepatitis NOS	0	0	•	0.1	0.3	33
Hydatid disease	0	0	•	0.0	0.3	0
Invasive pneumococcal disease	7	2	▼	6.3	61.6	10
Latent tuberculosis infection	1	1	•	1.3	9.6	14
Lead Poisoning	0	0	•	0.0	0.0	-
Legionellosis	0	0	•	1.0	20.8	5
Leprosy	0	0	•	0.0	0.3	0
Leptospirosis	2	3	▲	2.6	15.7	17
Listeriosis	0	0	•	0.4	3.3	12
Listeriosis - perinatal	0	0	•	0.0	0.2	0
Malaria	0	0	•	0.1	4.2	2
Measles	0	0	•	0.0	0.5	0
Meningococcal disease	2	0	▼	0.4	5.6	7
Mumps	0	0	•	0.0	0.8	0
Murine Typhus	0	0	•	0.0	0.0	-
Pertussis	1	1	•	0.6	8.5	7
Q fever	0	0	•	0.0	0.0	-
Rheumatic fever - initial attack	1	0	▼	0.8	12.8	6
Rheumatic fever - recurrent attack	1	0	▼	0.3	1.0	30
Salmonellosis	4	3	▼	5.8	71.8	8
Shigellosis	0	2	▲	0.5	10.8	5
Taeniasis	0	0	•	0.0	0.1	0
Tetanus	0	0	•	0.0	0.1	0
Tuberculosis disease - new case	3	1	▼	2.3	24.8	9
Tuberculosis disease - relapse or reactivation	0	0	•	0.0	0.9	0
Tuberculosis infection - on preventive treatment	0	0	•	0.0	0.2	0
Typhoid fever	0	0	•	0.7	6.7	10
VTEC/STEC infection	4	13	▲	7.3	82.5	9
Yersiniosis	11	6	▼	8.7	120.6	7