



Australian Government

Department of Health
and Aged Care



Australian
Centre for
Disease
Control

2024 • Volume 48

Communicable Diseases Intelligence

Meningococcal Surveillance Australia Reporting period 1 July to 30 September 2023

Monica M Lahra and Tiffany R Hogan for the National Neisseria Network

Communicable Diseases Intelligence

Communicable Diseases Intelligence (CDI) is a peer-reviewed scientific journal published by the Health Protection Policy & Surveillance Division, Department of Health and Aged Care.

The journal aims to disseminate information on the epidemiology, surveillance, prevention and control of communicable diseases of relevance to Australia.

© 2024 Commonwealth of Australia as represented by the Department of Health and Aged Care

ISSN: 2209-6051 Online

This journal is indexed by Index Medicus and Medline.

Creative Commons Licence – Attribution-NonCommercial-NoDerivatives CC BY-NC-ND



This publication is licensed under a Creative Commons Attribution-Non-Commercial NoDerivatives 4.0 International Licence from <https://creativecommons.org/licenses/by-nc-nd/4.0/legalcode> (Licence). You must read and understand the Licence before using any material from this publication.

<https://creativecommons.org/licenses/by-nc-nd/4.0/legalcode> (Licence). You must read and understand the Licence before using any material from this publication.

Restrictions

The Licence does not cover, and there is no permission given for, use of any of the following material found in this publication (if any):

- the Commonwealth Coat of Arms (by way of information, the terms under which the Coat of Arms may be used can be found at www.pmc.gov.au/resources/commonwealth-coat-arms-information-and-guidelines);
- any logos (including the Department of Health and Aged Care's logo) and trademarks;
- any photographs and images;
- any signatures; and
- any material belonging to third parties.

Disclaimer

Opinions expressed in *Communicable Diseases Intelligence* are those of the authors and not necessarily those of the Australian Government Department of Health and Aged Care or the Communicable Diseases Network Australia. Data may be subject to revision.

Enquiries

Enquiries regarding any other use of this publication should be addressed to the CDI Editor at: cdi.editor@health.gov.au

Communicable Diseases Network Australia

Communicable Diseases Intelligence contributes to the work of the Communicable Diseases Network Australia. www.health.gov.au/cdna

Editor

Christina Bareja

Deputy Editor

Simon Petrie

Design and Production

Lisa Thompson

Editorial Advisory Board

David Durrheim, Mark Ferson, Clare Huppertz, John Kaldor, Martyn Kirk, Meru Sheel and Stephanie Williams

Contacts

CDI is produced by:

Health Protection Policy & Surveillance Division
Australian Government Department of Health and Aged Care

GPO Box 9848, (MDP 6)
CANBERRA ACT 2601

www.health.gov.au/cdi

cdi.editor@health.gov.au

Submit an Article

You are invited to submit your next communicable disease related article to *Communicable Diseases Intelligence* (CDI) for consideration. More information regarding CDI can be found at: www.health.gov.au/cdi.

Further enquiries should be directed to:

cdi.editor@health.gov.au.

Meningococcal Surveillance Australia

Reporting period 1 July to 30 September 2023

Monica M Lahra and Tiffany R Hogan for the National Neisseria Network

The reference laboratories of the National Neisseria Network, Australia report data on invasive meningococcal disease (IMD) cases confirmed by culture and or molecular techniques for the Australian Meningococcal Surveillance Programme (AMSP). Culture-positive cases and molecular-based diagnoses are defined as IMD by the Communicable Diseases Network Australia National Guidelines for Public Health Units.¹ Data contained in the quarterly reports are restricted to a description of the number of cases by jurisdiction and serogroup, when known. Some minor corrections to data in Table 1 may be made in subsequent reports if additional data are received.

In the first three quarters of 2023, IMD notifications in Australia increased by 18.6% (n = 102) compared to the same period in 2022 (n = 86). However, the number of IMD notifications is less than that reported in 2019 (n = 162; Q3 2019).² Factors contributing to a reduction in IMD in Australia since 2019 include the change from monovalent serogroup C to serogroup A, C, W and Y vaccination in 2018; expanded coverage on the National Immunisation Programme for infants and then adolescents in Australia; and the public health restrictions during the pandemic.³

Of the 102 IMD notifications for 2023 to date, 98 have a serogroup determined at the time of report. MenB disease is the most prevalent in Australia, currently accounting for 83% (81/98) of notifications in the first three quarters of 2023 and 85% (100/117) in 2022 in IMD where a serogroup was detected.⁴

Author details

Monica M Lahra^{1,2}

Tiffany R Hogan¹

1. The World Health Organization Collaborating Centre for STI and AMR, Sydney and Neisseria Reference Laboratory, NSW Health Pathology, Microbiology, The Prince of Wales Hospital, Randwick, NSW 2031, Australia
2. School of Medical Sciences, Faculty of Medicine, the University of New South Wales, Kensington, NSW 2052, Australia

Corresponding author

Professor Monica M Lahra

The World Health Organization Collaborating Centre for STI and AMR, Sydney and Neisseria Reference Laboratory, NSW Health Pathology Microbiology, The Prince of Wales Hospital, Randwick, NSW 2031, Australia

Telephone: +61 2 9382 3678

Facsimile: +61 2 9382 3720

Email: monica.lahra@health.nsw.gov.au

Table 1: Number of laboratory confirmations of invasive meningococcal disease, Australia, 1 July to 30 September 2023, by serogroup and state or territory

Jurisdiction	Serogroup														
	A		B		C		W		Y		ND ^a		All		
	Year	Q3	ytd ^b	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd
Australian Capital Territory	2023	0	0	2	2	0	0	0	0	0	0	0	0	2	2
	2022	0	0	0	0	0	0	0	0	0	0	0	0	0	1
New South Wales	2023	0	0	4	19	0	0	0	2	3	5	0	0	7	26
	2022	0	0	13	21	0	0	0	0	0	0	0	1	13	22
Northern Territory	2023	0	0	0	0	0	0	1	1	0	0	0	0	1	1
	2022	0	0	2	2	0	0	0	0	0	0	0	0	2	2
Queensland	2023	0	0	10	28	0	0	0	0	0	1	2	11	31	
	2022	0	0	9	15	0	0	0	2	3	5	1	1	13	23
South Australia	2023	0	0	6	16	0	0	2	3	0	0	0	0	8	19
	2022	0	0	5	11	0	0	0	0	0	0	1	1	6	12
Tasmania	2023	0	0	0	2	0	0	1	1	0	0	0	0	1	4
	2022	0	0	1	1	0	0	0	0	0	0	0	0	1	1
Victoria	2023	0	0	6	12	0	0	1	2	1	1	1	1	9	16
	2022	0	0	3	10	0	0	0	0	0	0	0	1	3	11
Western Australia	2023	0	0	0	2	0	0	0	0	0	1	0	0	0	3
	2022	0	0	3	9	0	0	1	3	0	2	0	0	4	14
Australia	2023	0	0	28	81	0	0	5	9	4	8	2	4	39	102
	2022	0	0	36	69	0	0	1	5	3	8	2	4	42	86

a ND: not determined.

b ytd: year to date, data from 1 January to 30 September 2023.

References

1. Australian Government Department of Health and Aged Care, Communicable Diseases Network Australia (CDNA). *Invasive Meningococcal Disease: CDNA National Guidelines for Public Health Units*. Canberra: Australian Government Department of Health and Aged Care; 4 July 2017. Available from: <https://www.health.gov.au/sites/default/files/documents/2020/02/invasive-meningococcal-disease-cdna-national-guidelines-for-public-health-units.pdf>.
2. Lahra MM, Hogan TR, for the National Neisseria Network. Australian Meningococcal Surveillance Programme annual report, 2019. *Commun Dis Intell (2018)*. 2020;44. doi: <https://doi.org/10.33321/cdi.2020.44.62>.
3. George CRR, Booy R, Nissen MD, Lahra MM. The decline of invasive meningococcal disease and influenza in the time of COVID-19: the silver linings of the pandemic playbook *Med J Aust*. 2022;216(10):504–7. <https://doi.org/10.5694/mja2.51463>.
4. Lahra MM, George CRR, van Hal S, Hogan TR, for the National Neisseria Network. Australian Meningococcal Surveillance Programme Annual Report, 2022. *Commun Dis Intell (2018)*. 2023;47. doi: <https://doi.org/10.33321/cdi.2023.47.44>.