

Table 5. Australian Sentinel Practice Research Network reports, weeks 40 to 43, 1998.

| Week number | 40 | | 41 | | 42 | | 43 | |
|---------------------------------|-----------------|------------|-----------------|------------|-----------------|------------|-----------------|------------|
| Week ending on | 11 October 1998 | | 18 October 1998 | | 25 October 1998 | | 1 November 1998 | |
| Doctors reporting | 51 | | 57 | | 54 | | 54 | |
| Total encounters | 6157 | | 7663 | | 6589 | | 7037 | |
| Condition | Rate per 1,000 | | Rate per 1,000 | | Rate per 1,000 | | Rate per 1,000 | |
| | Reports | encounters | Reports | encounters | Reports | encounters | Reports | encounters |
| Influenza | 25 | 4.1 | 31 | 4.0 | 22 | 3.3 | 20 | 2.8 |
| Rubella | 5 | 0.8 | 3 | 0.4 | 0 | 0.0 | 1 | 0.1 |
| Measles | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 | 0 | 0.0 |
| Chickenpox | 6 | 1.0 | 14 | 1.8 | 10 | 1.5 | 14 | 2.0 |
| Pertussis | 4 | 0.6 | 1 | 0.1 | 2 | 0.3 | 8 | 1.1 |
| HIV testing (patient initiated) | 11 | 1.8 | 4 | 0.5 | 14 | 2.1 | 11 | 1.6 |
| HIV testing (doctor initiated) | 4 | 0.6 | 10 | 1.3 | 7 | 1.1 | 3 | 0.4 |
| Td (ADT) vaccine | 41 | 6.7 | 46 | 6.0 | 37 | 5.6 | 49 | 7.0 |
| Pertussis vaccination | 37 | 6.0 | 49 | 6.4 | 40 | 6.1 | 43 | 6.1 |
| Reaction to pertussis vaccine | 2 | 0.3 | 4 | 0.5 | 0 | 0.0 | 1 | 0.1 |
| Ross River virus infection | 3 | 0.5 | 3 | 0.4 | 0 | 0.0 | 0 | 0.0 |
| Gastroenteritis | 94 | 15.3 | 79 | 10.3 | 62 | 9.4 | 63 | 9.0 |

The NNDSS is conducted under the auspices of the Communicable Diseases Network Australia New Zealand. The system coordinates the national surveillance of more than 40 communicable diseases or disease groups endorsed by the National Health and Medical Research Council (NHMRC). Notifications of these diseases are made to State and Territory health authorities under the provisions of their respective public health legislations. De-identified core unit data are supplied fortnightly for collation, analysis and dissemination. For further information, see CDI 1998;22:4-5.

LabVISE is a sentinel reporting scheme. Twenty-one laboratories contribute data on the laboratory identification of viruses and other organisms. Data are collated and published in Communicable Diseases Intelligence every four weeks. These data should be interpreted with caution as the number and type of reports received is subject to a number of biases. For further information, see CDI 1998;22:8.

ASPREN currently comprises about 100 general practitioners from throughout the country. Up to 9,000 consultations are reported each week, with special attention to 12 conditions chosen for sentinel surveillance in 1998. CDI reports the consultation rates for all of these. For further information, including case definitions, see CDI 1998;22:5-6.

Additional Reports

Gonococcal surveillance

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The Australian Gonococcal Surveillance Programme (AGSP) reference laboratories in the various States and Territories report data on sensitivity to an agreed 'core' group of antimicrobial agents on a quarterly basis. The antibiotics which are currently routinely surveyed are the penicillins, ceftriaxone, ciprofloxacin and spectinomycin, all of which are administered as single dose regimens. When *in vitro* resistance to a recommended agent is demonstrated in 5% or more of isolates, it is usual to reconsider the inclusion of that agent in current treatment schedules. Additional data are also provided on other antibiotics from time to time. At present all laboratories also test isolates for the presence of high level resistance

to the tetracyclines. Tetracyclines are however not a recommended therapy for gonorrhoea. Comparability of data is achieved by means of a standardised system of testing and a programme-specific quality assurance process. Because of the substantial geographic differences in susceptibility patterns in Australia, regional as well as aggregated data are presented.

Reporting period 1 April to 30 June 1998

The AGSP laboratories examined 939 isolates of *Neisseria gonorrhoeae* for sensitivity to the penicillins, ceftriaxone, quinolones and spectinomycin and for high level resistance to the tetracyclines in the June quarter of 1998.

Penicillins

Resistance to this group of antibiotics (penicillin, ampicillin, amoxycillin) was present in a high proportion of isolates examined in Melbourne (36%) and Sydney (45%). In