Quarterly Surveillance Report



Notifiable Sexually Transmissible Infections and Blood-borne Viruses in Western Australia

Period ending 30 June 2020 Vol. 19 (3), issued August 2020

Contents

[Summary 2](#_Toc48809281)

[Chlamydia 2](#_Toc48809282)

[Gonorrhoea 4](#_Toc48809283)

[Infectious syphilis 6](#_Toc48809284)

[HIV 9](#_Toc48809285)

[Hepatitis B 12](#_Toc48809286)

[Hepatitis C 14](#_Toc48809287)

**Notes:**

1. All data in this report are provisional and subject to future revision.
2. To help place the data in this report in perspective, comparisons with other reporting periods are provided. As no formal statistical testing has been conducted, some caution should be taken with interpretation.
3. Notifications for Christmas Island, Curtin, Leonora, Perth and Yongah Hill Immigration Detention Centres have been excluded from all analyses because of potential bias introduced through the inclusion of cases detected by screening of asylum seekers at these locations in previous years.

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# Summary

Table 1 **Number and percentage change of STI and BBV notifications by reporting period, WA**



Notes: 1 Historical five-year mean (i.e. from 2014 to 2018) for the current quarter.

2 Percentage change of the number of notifications in the current quarter compared to the historical five-year mean of the same quarter. Positive values indicate an increase compared to the historical five-year mean of the same quarter. Negative values indicate a decrease compared to the historical five-year mean of the same quarter.

3 Historical five-year mean (i.e. from 2014 to 2018) for the current 12-month period.

4 Percentage change of the number of notifications in the current 12-month period compared to the historical five-year mean for the same 12-month period. For interpretation of positive and negative values, see note 2.

# Chlamydia

Figure 1 Number of chlamydia notifications in WA by month, for the two most recent 12-month periods



* The number of chlamydia notifications for the 12-month period from July 2019 to June 2020 was comparable to the previous 12-month period and the previous five-year mean, reflecting relative stability in chlamydia notifications over this period (Table 1).

Table 2 Number and proportion of chlamydia notifications in WA by sex, for the two most recent 12-month periods



Notes: N/A = Not applicable

In addition to the number of notifications above, there were two notifications among transgender people in the 12-month period from July 2019 to June 2020 and three notifications among transgender people in the 12-month period from July 2018 to June 2019

**Table** 3 **Number and proportion of chlamydia notifications in WA by age group, for the two most recent 12-month periods**



* The largest proportion of chlamydia notifications was among 20 to 24 year olds, and notifications among this age group remained stable in comparison to the previous 12-month period. Notifications among 15 to 19 year olds decreased by 11%.

**Table** 4 **Number and crude rate of chlamydia notifications in WA by Aboriginality, for the two most recent 12-month periods**



Notes: Rate = Crude notification rate per 100,000 population

N/A = Not applicable

**Table** 5 **Number and crude rate of chlamydia notifications in WA by region, for the two most recent 12-month periods**



Notes: Rate = Crude notification rate per 100,000 population

Metropolitan = East Metropolitan + North Metropolitan + South Metropolitan

Other = Overseas residents diagnosed in WA

Unknown = Unknown residential address within WA

N/A = Not applicable

* While chlamydia notification rates declined or remained relatively stable in many regions, there was a small increase in the South West region.

# Gonorrhoea

**Figure** 2 **Number of gonorrhoea notifications in WA by month, for the two most recent 12-month periods**

 

* The total number of gonorrhoea notifications in the most recent 12-month period was comparable to the previous 12-month period and 25% higher than the previous five-year mean (Table 1).
* In the current 12-month period, 60% of notifications had a completed enhanced surveillance form provided by notifying clinicians, compared to the previous five-year mean of 78%.

**Table** 6 **Number and proportion of gonorrhoea notifications in WA by sex, for the two most recent 12-month periods**



Notes: N/A = Not applicable

In addition to the number of notifications above, there were three notifications among transgender people in the 12-month period from July 2019 to June 2020 and five notifications among transgender people in the 12-month period from July 2018 to June 2019

**Table** 7 **Number and proportion of gonorrhoea notifications in WA by age group, for the two most recent 12-month periods**



* The 20 to 34 year age group comprised 59% of gonorrhoea notifications and increased by 8% in comparison to the previous 12-month period.

**Table** 8 **Number and crude rate of gonorrhoea notifications in WA by Aboriginality, for the two most recent 12-month periods**



Notes: Rate = Crude notification rate per 100,000 population

N/A = Not applicable

**Table** 9 **Number and crude rate of gonorrhoea notifications in WA by region, for the two most recent 12-month periods**



Notes: Rate = Crude notification rate per 100,000 population

Metropolitan = East Metropolitan + North Metropolitan + South Metropolitan

Other = Overseas residents diagnosed in WA

Unknown = Unknown residential address within WA

N/A = Not applicable

* Gonorrhoea notification rates remained stable or increased in most regions, most notably in the Great Southern, where the rate doubled. There was a significant decrease in the Goldfields region (51%).

# Infectious syphilis

**Figure** 3 **Number of infectious syphilis notifications in WA by region and exposure category, for the two most recent 12-month periods**



Notes: In addition to the number of notifications above, there was one notification among a transgender person in the 12-month period from July 2019 to June 2020 and three notifications among transgender people in the 12-month period from July 2018 and June 2019

* One congenital syphilis case was reported in the second quarter of 2020 in an Aboriginal child in the metropolitan region.
* The total number of infectious syphilis notifications was 20% higher than the previous 12-month period and almost double the previous five-year mean (Table 1).
* In the current 12-month period, 75% of notifications had a completed enhanced surveillance form provided by notifying clinicians, which was 18% lower than the previous five-year mean of 92%.
* In the Perth metropolitan area, the number of notifications categorised as MSM increased by 17% in comparison to the previous 12-month period (n=246 vs. 211) and was 47% higher than the previous five-year mean of 168 cases per 12-month period.
* The number of notifications in the Perth metropolitan area categorised as heterosexual increased by 59% in comparison to the previous 12-month period (n=137 vs. 86) and was three-times the previous five-year mean of 45 cases per 12-month period. The increase was particularly marked among females, and 22% (n=14/65) were pregnant at the time of diagnosis.

**Table** 10 **Number and crude rate of infectious syphilis notifications by Aboriginality for the two most recent 12-month periods, WA**



Notes: Rate = Crude notification rate per 100,000 population

N/A = Not applicable

* The infectious syphilis notification rate increased by 25% among Aboriginal people and by 13% among non-Aboriginal people, resulting in a slightly higher rate ratio compared to the previous 12-month period.

**Table** 11 **Number and crude rate of infectious syphilis notifications by region for the two most recent 12-month periods, WA**



Notes:Rate = Crude notification rate per 100,000 population

Metropolitan = East Metropolitan + North Metropolitan + South Metropolitan

Other = Overseas residents diagnosed in WA

Unknown = Unknown residential address within WA

N/A = Not applicable

* Notifications in the Kimberley, Pilbara and Goldfields regions have increased as part of a larger outbreak in northern Australia that commenced in January 2011 in the Northern Territory. Further information about the infectious syphilis outbreak affecting Aboriginal people living in northern Australia is available from: <http://www.health.gov.au/internet/main/publishing.nsf/Content/ohp-infectious-syphilis-outbreak.htm>.
* The infectious syphilis notification rate remained highest in the Kimberley region and increased by 25% in comparison to the previous 12-month period. A total of 324 infectious syphilis cases (132 male, 192 female) were notified from the beginning of the outbreak in the region in June 2014 to June 2020. Prior to 2014, there had been no infectious syphilis notifications in the region for two years.
* In the Pilbara region, a total of 163 infectious syphilis cases (75 male, 88 female) were notified from the beginning of the outbreak in the region in February 2018 to June 2020. Prior to February 2018, there had been on average two infectious syphilis notifications per 12-month period in the region.
* In the Goldfields region, a total of 38 infectious syphilis cases (15 male, 23 female) were notified from the beginning of the outbreak in the region in January 2019 to June 2020.

# HIV

* The following analysis of HIV notifications data includes cases diagnosed for the first time in WA and excludes notifications of HIV cases previously diagnosed overseas.

Figure 4 Number of HIV notifications in WA by quarter, for the two most recent 12-month periods (excludes cases previously diagnosed outside WA)



* There were 96 HIV cases notified in the July 2019 to June 2020 period, a 39% increase compared to the previous 12-month period (n=69) (Table 1).
* The increase was largely due to a rise in HIV notifications in the October to December 2019 quarter, which was twice the number reported in the previous quarter (20 to 41 cases) and mostly comprised of notifications in heterosexual males (n=18) and men who have sex with men (n=16). The number of HIV notifications has since declined, decreasing 54% to 18 cases in the January to March 2020 quarter, and remaining stable in the April to June 2020 quarter (n=17) (Figure 4).
* Over the two 12-month reporting periods, the number of male HIV cases increased by 49% (53 to 79 cases) while the number of female cases remained stable (n=16 cases). Correspondingly, the male: female ratio for new HIV diagnoses increased over the two periods (3.3 vs 4.9).

Table 12 Number and proportion of HIV notifications in WA by age group, for the two most recent 12-month periods (excludes cases previously diagnosed outside WA)



* Compared to the previous 12-month reporting period, the largest increases were reported in cases aged 40 years and older, where the number of HIV notifications increased by 51% over the two reporting periods (37 to 56 cases) (Table 12).
* The median age of HIV notifications in the July 2019 to June 2020 period was 42 years (range: 7 to 74 years), which was two years older than the median age reported for the previous 12-month period (40 years; range: less than 1 year to 73 years).

Table 13 Number and crude rate of HIV notifications in WA by Aboriginality, for the two most recent 12-month periods (excludes cases previously diagnosed outside WA)



Note: Rate = Crude notification rate per 100,000 population

* The number of Aboriginal people diagnosed with HIV in WA remained stable at three cases (Table 13).

Table 14 Number and proportion of HIV notifications in WA by exposure, for the two most recent 12-month periods (excludes cases previously diagnosed outside WA)



* Compared to the previous 12-month period, there was a 41% increase in the number of HIV notifications in MSM reported in the current period (Table 14), however the number remained 29% lower than the previous five-year average (n=49). Most MSM who were newly diagnosed with HIV in the current period reported acquiring their infection in Australia (74%; n=28).
* There was a 39% increase in the number of male heterosexual HIV cases compared to the previous 12-month period (Table 14). The majority of these cases were men who acquired HIV overseas (75%; n=24), of whom the majority acquired HIV in South-East Asia (75%; n=18).
* In the most recent 12-month period, most male heterosexual cases who acquired HIV in South-East Asia were Australian-born men (61%; n=11). Of the 12 cases who reported a reason for visiting South-East Asia in the current reporting period, most stated they were on holiday when the likely exposure to HIV had occurred (67%; n=8).
* In addition, most males reporting heterosexual acquisition in South-East Asia in the current reporting period were aged 45 years or older (67%; n=12), representing an older cohort of cases in comparison to total HIV cases reported in WA.
* The number of female HIV notifications attributed to heterosexual exposures remained stable compared to the previous 12 months (Table 14). Most of these cases had acquired HIV overseas (62%; n=8).

# Hepatitis B

**Figure** 5 **Number of hepatitis B notifications in WA by disease status, for the two most recent 12-month periods**



**Table** 15 **Number of newly acquired and unspecified hepatitis B notifications in WA, for the two most recent 12-month periods**



* The number of newly acquired hepatitis B notifications decreased by 47% while the number of unspecified hepatitis B notifications remained relatively stable in comparison to the previous 12-month period.

**Table** 16 **Number and proportion of hepatitis B notifications (newly acquired + unspecified) in WA by sex, for the two most recent 12-month periods**



Note: N/A = Not applicable

* The number of total hepatitis B notifications decreased by 11% among males and remained relatively stable among females compared to the previous 12-month period.

**Table** 17 **Number and proportion of hepatitis B notifications (newly acquired + unspecified) in WA by age group, for the two most recent 12-month periods**



* The largest proportion of total hepatitis B notifications was among 30 to 39 year olds (32%) and notifications among this age group remained stable in comparison to the previous 12-month period. Notifications among 20 to 29 year olds decreased by 23%.

**Table** 18 **Number and crude rate of hepatitis B notifications (newly acquired + unspecified) in WA by Aboriginality, for the two most recent 12-month periods**



Notes:Rate = Crude notification rate per 100,000 population

N/A = Not applicable

* The total hepatitis B notification rate decreased by 19% among Aboriginal people and by 8% among non-Aboriginal people compared to the previous 12-month period.

**Table** 19 **Number and crude rate of hepatitis B notifications (newly acquired + unspecified) in WA by region, for the two most recent 12-month periods**



Notes:Rate = Crude notification rate per 100,000 population

Metropolitan = East Metropolitan + North Metropolitan + South Metropolitan

Other = Overseas residents diagnosed in WA

Unknown = Unknown residential address within WA

N/A = Not applicable

* Trends in the total hepatitis B notification rate varied between regions and the small number of notifications in most non-metropolitan regions makes it difficult to interpret any changes in trends.

Hepatitis C

**Figure** 6 **Number of hepatitis C notifications in WA by disease status, for the two most recent 12-month periods**



Table 20 Number of hepatitis C notifications in WA by disease status, for the two most recent 12-month periods



* The number of newly acquired hepatitis C notifications increased by 8% while the number of unspecified hepatitis C notifications remained stable in comparison to the previous 12-month period.

**Table** 21 **Number, proportion and ratio of hepatitis C notifications (newly acquired + unspecified) in WA by sex, for the two most recent 12-month periods**



Note: N/A = Not applicable

* The number of total hepatitis C notifications remained relatively stable among males and decreased by 16% among females compared to the previous 12-month period.

**Table** 22 **Number and proportion of hepatitis C notifications (newly acquired + unspecified) in WA by age group, for the two most recent 12-month periods**



* Total hepatitis C notifications increased by 19% among 20 to 29 year olds and decreased by 15% among 30 to 39 year olds in comparison to the previous 12-month period.

**Table** 23 **Number and crude rate of hepatitis C notifications (newly acquired + unspecified) in WA by Aboriginality, for the two most recent 12-month periods**



Notes: Rate = Crude notification rate per 100,000 population

N/A = Not applicable

* The total hepatitis C notification rate remained stable among Aboriginal people and decreased by 11% among non-Aboriginal people, resulting in a higher rate ratio compared to the previous 12-month period.

**Table** 24 **Number and crude rate of hepatitis C notifications (newly acquired + unspecified) in WA by region, for the two most recent 12-month periods**



Notes:Rate = Crude notification rate per 100,000 population

Metropolitan = East Metropolitan + North Metropolitan + South Metropolitan

Other = Overseas residents diagnosed in WA

Unknown = Unknown residential address within WA

N/A = Not applicable

* Total hepatitis C notification rates decreased in most regions but increased in the South West and Wheatbelt regions.

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