



Public Health  
England

Protecting and improving the nation's health

# ***Campylobacter* data 2007 to 2016**

## **May 2018**

National laboratory data for residents of England and Wales

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## Key points for 2016

The reported number of cases decreased from 55,697 in 2015 to 52,381 in 2016, a decline of 3,316 cases.

The region that reported the highest number of *Campylobacter* laboratory reports was the South East with 9,055.

55% of *Campylobacter* laboratory confirmed cases were male.

The section of the population with the highest number of laboratory reports was the 50 – 59 year age group.

The peak month for *Campylobacter* reporting in 2016 was June.

# Campylobacter data, 2007 to 2016

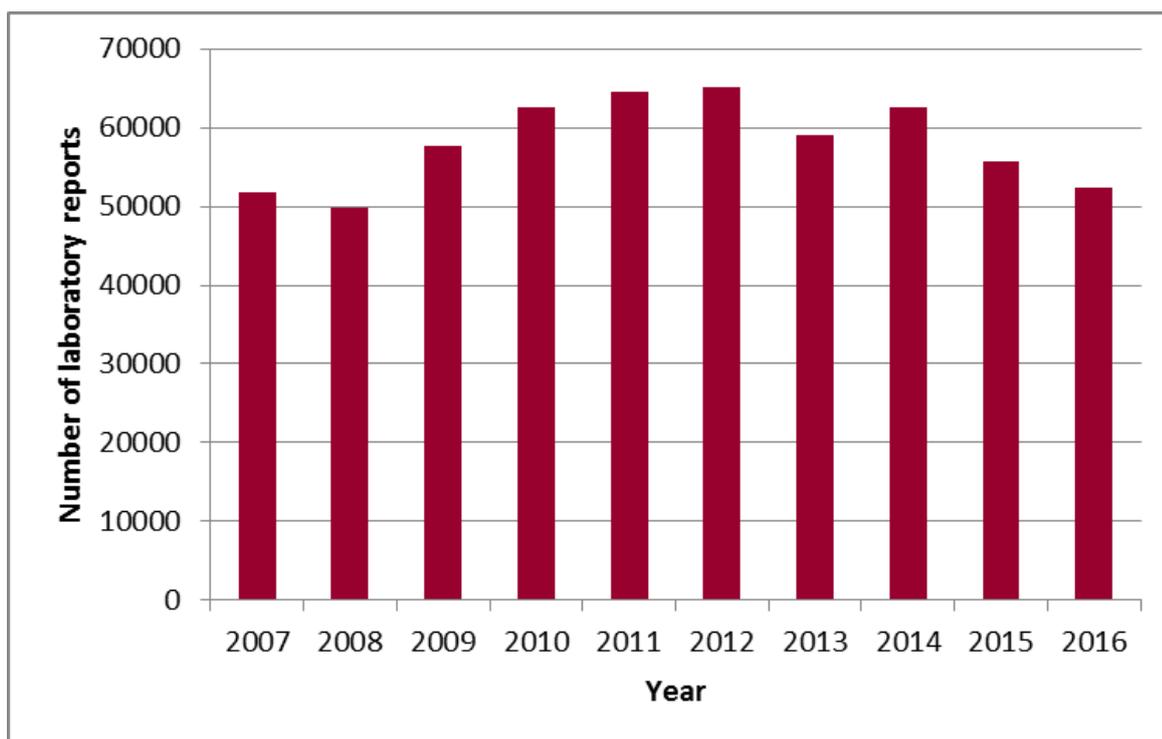
All data presented in this report are correct as of 3 November 2017.

## 1. Annual data (2007-2016)

**Table 1: Annual laboratory reports of *Campylobacter* in England and Wales (2007-2016)**

Year	Number of laboratory reports	Laboratory reports per 100,000 population
2007	51831	95.30
2008	49891	90.97
2009	57685	104.44
2010	62588	112.38
2011	64527	114.88
2012	65044	114.98
2013	59040	103.67
2014	62494	108.86
2015	55697	96.22
2016	52381	89.72

**Figure 1: Annual laboratory reports of *Campylobacter* in England and Wales (2007-2016)**



## 2. Regional data (2016)

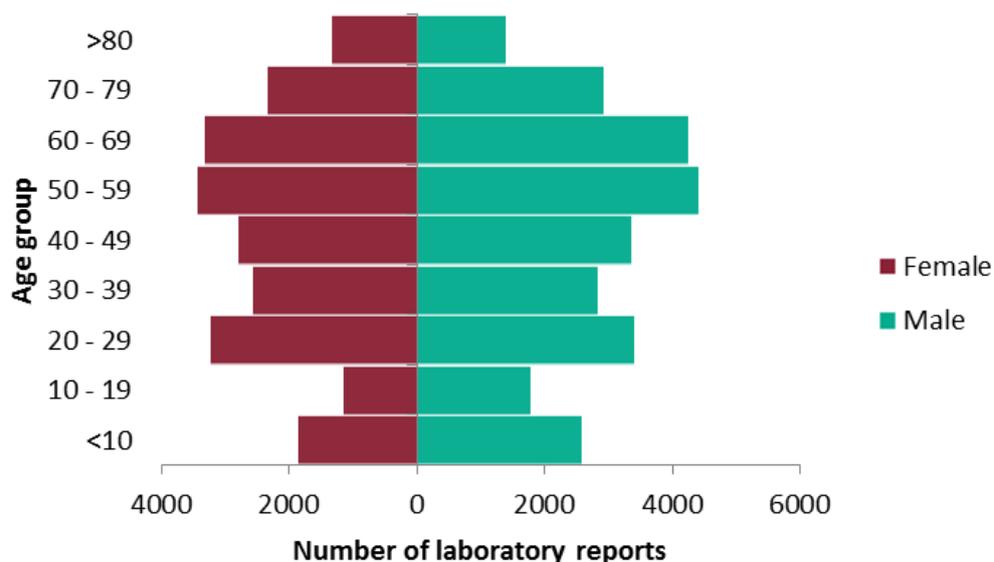
**Table 2: Regional distribution\* of laboratory reports of *Campylobacter* in England and Wales (2016)**

Country	Region	Laboratory reports
England	East Midlands	3819
	East of England	5273
	London	5094
	North East	2856
	North West	6016
	South East	9055
	South West	6573
	Yorkshire and The Humber	4995
	West Midlands	5211
Wales	Wales	3497

\*Regional classification based on place of residence of reported cases and classified using NUTS1 codes.

## 3. Age/sex distribution (2016)

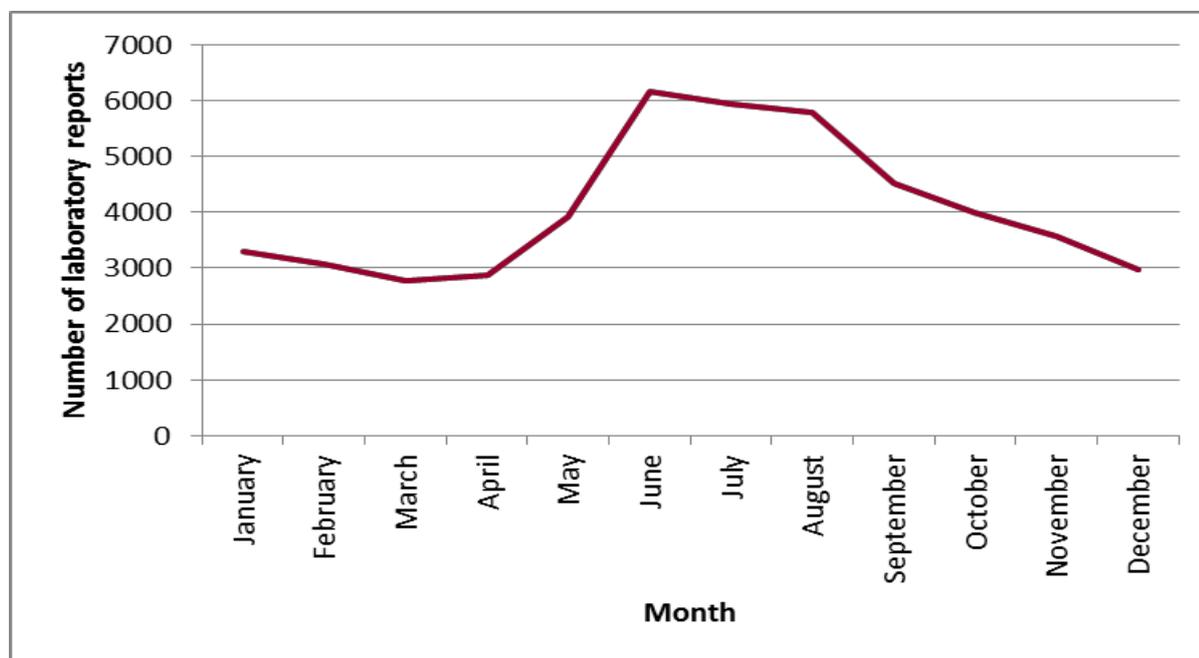
**Figure 2: Age/sex distribution of laboratory reports of *Campylobacter* reported in England (2016)\***



\*Age/sex data not available for all Welsh laboratory reports so are not included. For data from England, 94 laboratory reports with unknown case age or sex recorded.

#### 4. Seasonal variation (2016)

**Figure 3: Seasonality of laboratory reports of *Campylobacter* reported in England (2016)\***



\*Excludes Welsh data.

#### 5. Foodborne outbreak data (2016)

**Table 3: Foodborne outbreaks of *Campylobacter* reported in England and Wales (2016)**

Agent	Total Affected	Laboratory confirmed	Hospitalised	Deaths	Setting	Food Description
<i>Campylobacter</i> sp.	21	9	0	0	Restaurant	Chicken liver pate
<i>Campylobacter</i> sp.	51	3	0	0	School	No food identified
<i>Campylobacter</i> sp.	15	1	0	0	Pub	Chicken liver parfait
<i>Campylobacter</i> sp.	4	4	0	0	Restaurant	Duck liver pate
<i>Campylobacter</i> sp.	3	3	0	0	Pub	Chicken liver pate
<i>Campylobacter</i> sp.	7	3	0	0	Catering service	Chicken liver parfait, chicken satay, chicken nuggets
<i>Campylobacter</i> sp.	49	14	0	0	Restaurant	Chicken liver parfait
<i>Campylobacter</i> sp.	23	2	0	0	Restaurant	Whipped chicken liver

## Data sources

Public Health England's Second Generation Surveillance System (SGSS). This is a live laboratory reporting system. Therefore, numbers are subject to change. Data provided in this report are new extractions from this system and provide updated figures to previously published reports. In 2014, PHE upgraded the laboratory reporting system. So direct comparisons between data reported from the previous system (LabBase2) and the new system (SGSS) may require cautious interpretation.

Electronic Foodborne and Non-Foodborne Gastrointestinal Outbreak Surveillance System (eFOSS).

# Acknowledgements

We are grateful to:

- the microbiologists, local authorities, health protection and environmental health specialists who have contributed data and reports to national surveillance system
- the epidemiologists and information officers who have worked on the national surveillance of intestinal infectious diseases
- Gastrointestinal Bacterial Reference Unit (GBRU) for providing the Reference Laboratory Services and laboratory surveillance functions and expertise
- PHE Information Management Department for maintenance and quality assurance of PHE national surveillance databases used for Gastrointestinal Infections (GI) pathogen surveillance at the national level
- PHE Local Public Health Laboratories and Food Water and Environmental Microbiology Services for providing a surveillance function for GI pathogens and testing of food and environmental samples routinely and during outbreak investigations
- we are grateful to all colleagues who have investigated and reported outbreaks to the Electronic Foodborne and Non-Foodborne Gastrointestinal Outbreak Surveillance System (eFOSS)

Public Health England (PHE) has a statutory obligation to collect and report outbreaks of foodborne disease. This is aligned to the requirements of the zoonoses directive 2003/99/EC. This directive requires that EU member states investigate and report all foodborne outbreaks to the European Food Safety Authority (EFSA). Additionally, information on other zoonotic disease outbreaks is included in eFOSS, ie non-foodborne outbreaks (mode of transmission covering animal contact, person to person contact and recreational water).