



## Infection reports

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### Enteric

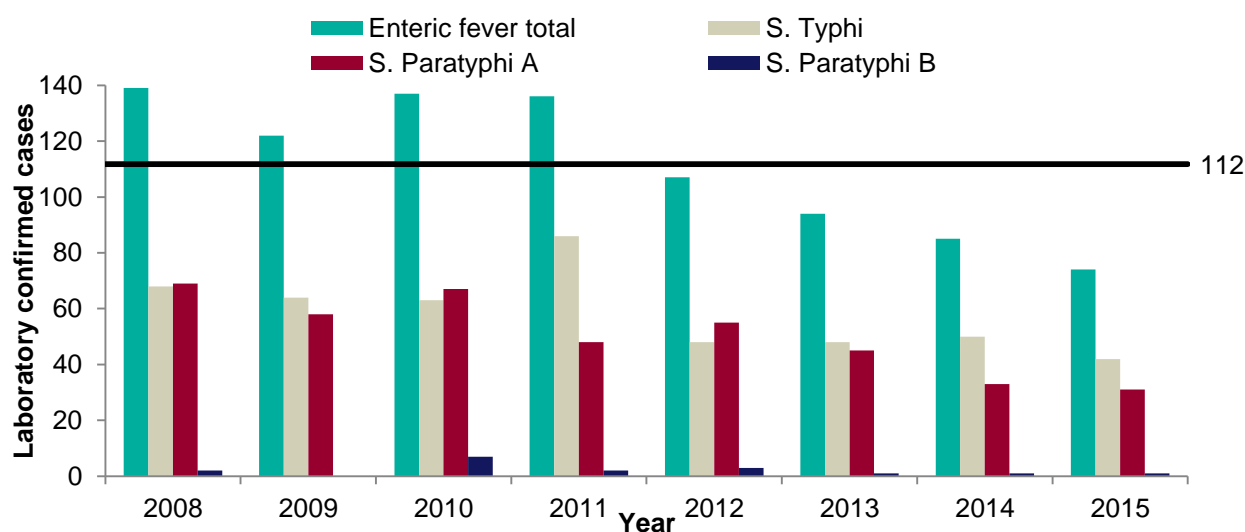
## Enteric fever surveillance quarterly report (England, Wales and Northern Ireland): second quarter 2015

*This quarterly report summarises the epidemiology of laboratory confirmed cases of typhoid and paratyphoid reported in England, Wales and Northern Ireland between April and June 2015. It includes both reference laboratory and enhanced enteric fever surveillance data. All data for 2015 presented below are provisional; more detailed reports will be produced on an annual basis. More information about enteric fever surveillance, including previous reports, is available on the PHE website [1].*

### National summary

In the second quarter (Q2) of 2015, 74 laboratory confirmed cases of enteric fever were reported in England and Wales (table 1), 13% lower than the second quarter of 2014 (85) and 34% below the rolling mean (112) for Q2 2008 to 2015 (figure 1). There were no provisional cases reported in Northern Ireland for Q2.

**Figure 1. Laboratory confirmed cases of enteric fever by organism, England, Wales and Northern Ireland: second quarter 2008 – 2015**



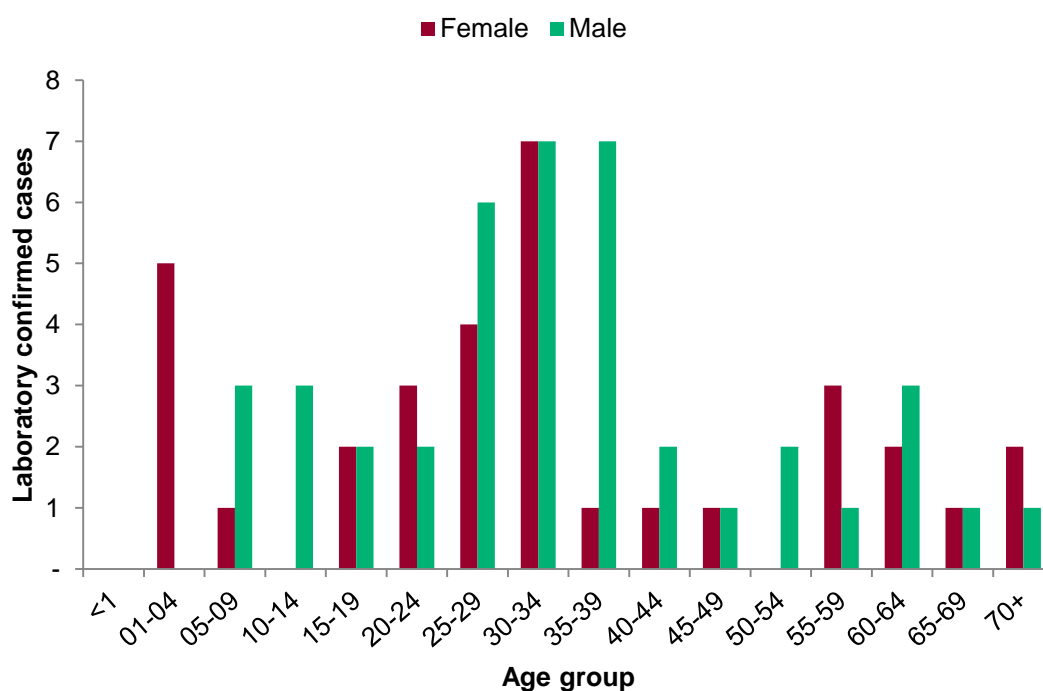
**Table 1. Laboratory confirmed cases of enteric fever, England, Wales and Northern Ireland: second quarter 2008 – 2015**

Organism	Laboratory confirmed cases							
	Q2 2015	Q2 2014	Q2 2013	Q2 2012	Q2 2011	Q2 2010	Q2 2009	Q2 2008
<i>Salmonella</i> Typhi	42	50	48	48	86	63	64	68
<i>Salmonella</i> Paratyphi A	31	33	45	55	48	67	58	69
<i>Salmonella</i> Paratyphi B	1	1	1	3	2	7	-	2
<i>Salmonella</i> Paratyphi C	-	1	-	-	-	-	-	-
<i>Salmonella</i> Typhi and Paratyphi A	-	-	-	1	-	-	-	-
<b>Enteric fever total</b>	<b>74</b>	<b>85</b>	<b>94</b>	<b>107</b>	<b>136</b>	<b>137</b>	<b>122</b>	<b>139</b>

### Age/sex distribution

In Q2 2015, the median age of cases was 32 years and 15% (for both males and females) were aged 16 years and under (figure 2). Males represented 55% of all cases.

**Figure 2. Laboratory confirmed cases of enteric fever by age and sex (N=74): second quarter 2015**



### Geographical distribution

London PHE Region reported 35% of the total cases during Q2 2015 (table 3). Only regions are shown in this report as the numbers are too small to disaggregate by health protection teams (HPTs); between one and 12 cases were reported by each of HPTs during the second quarter in 2015. HPT data is available on request.

**Table 3. Laboratory confirmed cases of enteric fever by region: second quarter 2015**

Region	Q2 2015	Q2 2014	% change
London	26	27	-3.7%
Midlands and East of England	17	20	-15.0%
North of England	21	23	-8.7%
South of England	9	15	-40.0%
Wales	1	-	-
Northern Ireland	-	-	-
<b>Grand Total</b>	<b>74</b>	<b>85</b>	<b>-12.9%</b>

### Travel history

In the second quarter of 2015, travel history was available for 62/74 cases (84%); of which 57 cases (77%) were presumed to be acquired abroad and five cases had not travelled outside the UK in the 28 days prior to symptoms.

### Travel-associated cases

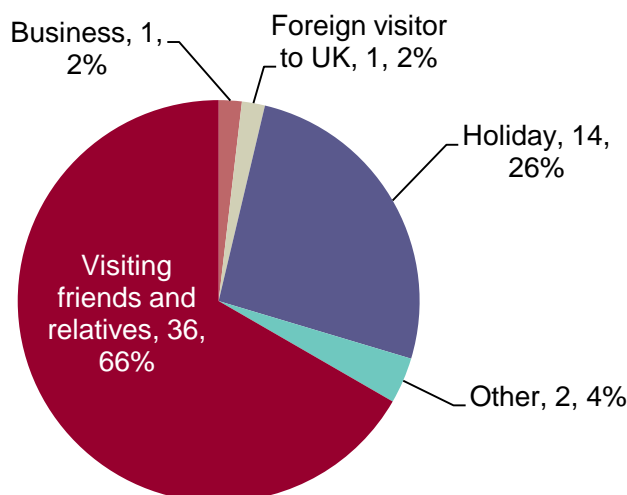
Travel-associated cases were likely to have acquired their infection in: India (29); Pakistan (18); Bangladesh (two); Thailand (two); Bolivia, Philippines, Tanzania, South Africa, Cambodia, Nepal, Malaysia, Mozambique, Senegal (one each).

Some cases travelled to more than one country so totals will not equal the number of total cases that travelled. Where multiple countries of travel have been stated by the case, only risk countries, as identified by the National Travel Health Network and Centre [2], were included for analysis. If a case travelled to multiple risk countries each country was counted individually. India and Pakistan continue to be the most frequently reported countries of travel for the second quarter of 2015.

### Reason for travel

Of the 57 cases that had travelled abroad, the reason for travel was known for 54 (95%). Among those, 66% (36/54) of cases travelled to visit friends and relatives (figure 4).

**Figure 4. Laboratory-confirmed cases of enteric fever that have travelled abroad (N=54) by reason for travel: second quarter 2015**



### **Non-travel-associated cases**

Five cases in the second quarter 2015 had enhanced information available stating they had not travelled abroad within 28 days of developing symptoms.

One of the cases reported falling into a river prior to the onset of illness. Another case had been in close contact with asymptomatic family members who had recently returned from Pakistan. A further case was suspected to have contracted *S. Paratyphi* infection from a family member who was also identified with the same organism.

The remaining two cases stated that they had not been in recent contact with a probable or confirmed case prior to the onset of illness. Neither of these remaining cases reported links to travellers from endemic countries and no other possible sources have been identified.

### **Data sources and acknowledgements**

Data were collated and analysed by the Travel and Migrant Health Section, National Infection Service, Colindale. Laboratory data were provided by Gastrointestinal Bacterial Reference Unit, National Infections Service, Colindale. Other surveillance data were provided by Environmental Health Officers and local health protection colleagues in PHE through enteric fever enhanced surveillance.

### **References**

1. GOV.UK website. Enhanced surveillance of enteric fever. Available at: <https://www.gov.uk/government/collections/typhoid-and-paratyphoid-guidance-data-and-analysis>
2. National Travel Health Network and Centre (NaTHNaC) website. Available at: <http://www.nathnac.org/>