

# Invasive Pneumococcal Disease Quarterly Report

October–December 2016

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by  
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## Introduction

Since 17 October 2008, invasive pneumococcal disease (IPD) has been notifiable to the local Medical Officer of Health under the Health Act 1956. On 1 June 2008, pneumococcal conjugate vaccine (PCV) was added to the New Zealand childhood immunisation schedule. Initially the 7-valent conjugate vaccine (PCV7), Prevenar®, was used. In July 2011, Prevenar® was replaced on the schedule with the 10-valent conjugate vaccine (PCV10), Synflorix®. In July 2014, Synflorix® was replaced by the 13-valent conjugate vaccine (PCV13), Prevenar13®.

PCV10 covers the seven serotypes in PCV7 (4, 6B, 9V, 14, 18C, 19F and 23F) as well as serotypes 1, 5 and 7F. PCV13 covers the 10 serotypes in PCV10 as well as serotypes 3, 6A and 19A. The recommended schedule is four doses, given at 6 weeks, 3 months, 5 months and 15 months of age.

These quarterly reports are part of an enhanced surveillance programme to monitor the impact of PCV vaccination, including the changes in vaccine valency, on the epidemiology of IPD in New Zealand.

## Methods

The data presented in this report (including immunisation status) is based on the information recorded on EpiSurv, the national notifiable disease surveillance system, as at 28 February 2017. Any changes made to EpiSurv data by public health unit staff after this date will not be reflected in this report.

Denominator data used to determine all disease rates in this report was derived from the 2015 and 2016 mid-year population estimates published by Statistics New Zealand unless otherwise specified. Rates have not been calculated where there are fewer than five notified cases in any category.

The Fisher's exact test was used to determine statistical significance. Results are considered statistically significant when the *P* value is  $\leq 0.05$ .

*Streptococcus pneumoniae* isolates are serotyped at ESR by the capsular antigen reaction (Neufeld test) using the Danish system of nomenclature and sera obtained from the Statens Serum Institut. Methods have not been established at ESR to identify the strain type when only pneumococcal DNA, rather than an isolate, is available. Therefore, the serotype can only be determined for culture-positive IPD cases. Serotype data for invasive isolates of *S. pneumoniae* was matched with the relevant IPD case notification.

## Case definition

A case of invasive pneumococcal disease is defined as:

- the isolation of *S. pneumoniae* from CSF, blood or other normally sterile site; or
- the detection by nucleic acid amplification test of pneumococcal DNA in CSF, blood or other normally sterile site; or
- a positive newer-generation *S. pneumoniae* antigen test on CSF or pleural fluid.<sup>1</sup>

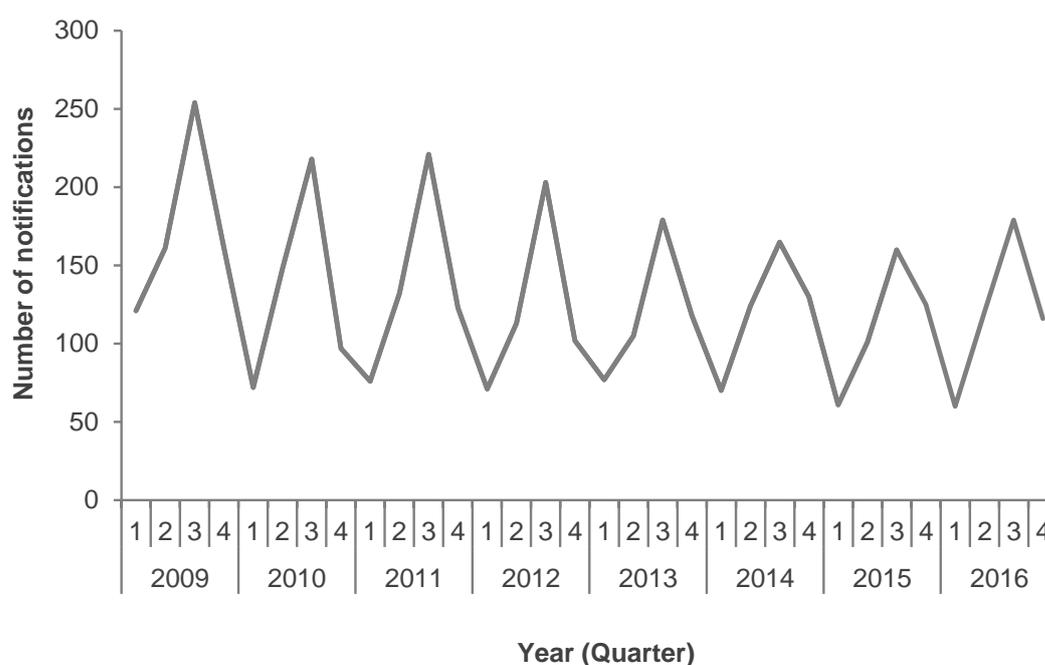
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<sup>1</sup> A positive *S. pneumoniae* antigen test on pleural fluid was added to the case definition in mid-September 2016.

## Results

There were 116 IPD cases notified in the October–December 2016 quarter, compared with 125 cases in the same quarter in 2015. IPD displays a distinct seasonal pattern with a winter peak and summer trough (Figure 1). The notification rate for the latest 12-month period ending December 2016 (10.1 per 100,000 population, 475 cases) was similar to the rate for the previous 12-month period ending December 2015 (9.7 per 100,000, 447 cases).

**Figure 1. Number of cases of invasive pneumococcal disease by quarter reported, January 2009–December 2016**



The distribution of IPD cases and rates by age group is presented in Table 1. During the latest 12-month period, the highest rate was in the  $\geq 65$  years age group (27.3 per 100,000 population, 191 cases). Comparing the latest 12-month period with the previous 12-month period, there was a significant increase in IPD cases in the 2–4 years age group (10 to 24 cases).

**Table 1. Number of cases and rates of invasive pneumococcal disease by age group**

Age group	Oct-Dec 2016	12 months ending Dec 2016		12 months ending Dec 2015	
	Cases	Cases	Rate <sup>a</sup>	Cases	Rate <sup>a</sup>
<2 years	8	22	18.5	14	11.8
2–4 years	5	24	12.9	10	5.3
5–64 years	53	238	6.5	207	5.7
$\geq 65$ years	50	191	27.3	216	32.0
<b>Total</b>	<b>116</b>	<b>475</b>	<b>10.1</b>	<b>447</b>	<b>9.7</b>

<sup>a</sup> Rate is expressed as cases per 100,000 population.

The distribution of IPD cases and rates by region is presented in Table 2. The highest rate for the latest 12-month period was in the Northern region (12.6 per 100,000 population, 227 cases). This was a significant increase compared with the previous 12-month period (9.6 per 100,000, 168 cases).

**Table 2. Number of cases and rates of invasive pneumococcal disease by region**

Region	Oct-Dec 2016	12 months ending Dec 2016		12 months ending Dec 2015	
	Cases	Cases	Rate <sup>a</sup>	Cases	Rate <sup>a</sup>
Northern <sup>b</sup>	55	227	12.6	168	9.6
Midland <sup>c</sup>	20	94	10.5	104	11.8
Central <sup>d</sup>	17	74	7.1	96	9.3
Southern <sup>e</sup>	24	80	8.4	79	8.5
<b>Total</b>	<b>116</b>	<b>475</b>	<b>10.1</b>	<b>447</b>	<b>9.7</b>

<sup>a</sup> Rate is expressed as cases per 100,000 population.

<sup>b</sup> Includes Northland, Waitemata, Auckland and Counties Manukau DHBs.

<sup>c</sup> Includes Waikato, Lakes, Bay of Plenty, Tairāwhiti and Taranaki DHBs.

<sup>d</sup> Includes Hawke's Bay, Whanganui, MidCentral, Hutt Valley, Capital & Coast, Wairarapa and Nelson Marlborough DHBs.

<sup>e</sup> Includes West Coast, Canterbury, South Canterbury and Southern DHBs.

A culture was received at ESR for serotyping from 109 (94.0%) of the 116 cases notified in the October–December 2016 quarter. Table 3 shows the number of IPD cases due to each of the serotypes included in PCV7, PCV10 and PCV13, and due to non-PCV13 serotypes.

The number of IPD cases due to PCV13 serotypes decreased 12.5% between the last two 12-month periods (216 to 189 cases). In contrast, the number of IPD cases due to non-PCV13 serotypes increased 23.4% between the last two 12-month periods (214 to 264 cases), with notable increases in types 8 and 33F. The increases in IPD due to non-PCV13 types occurred in the ≥5 years age group (Table 3).

The three most prevalent serotypes during the last 12 months were 19A, 22F and 7F, although between the last two 12-month periods there were decreases (albeit small for 22F) in IPD due to each of these serotypes. During the last 12 months, in the <2 years age group there was one case of IPD due to a PCV10 type and eight cases due to an additional PCV13 type. Notably there were nine cases of serotype 19A IPD in the 2-4 years age group compared to just one case in the previous 12-month period (Table 3). Type 19A was the major contributor to the significant increase in IPD in the 2-4 years age group between the last two 12-month periods (Table 1).

Table 4 shows the immunisation status for cases notified in the October–December 2016 quarter who were age-eligible for PCV (ie, cases born after 1 January 2008 and aged ≥6 weeks). Immunisation status was based on information recorded in EpiSurv (ie, data was not matched to the National Immunisation Register). Immunisation information was recorded for 12 out of the 14 cases. Three of the 12 cases were due to a PCV13 type: two cases of type 19A IPD and one case of type 3 disease. The remaining age-eligible cases were due to type 7F (a PCV10 serotype) non-PCV13 types (6 cases) or the serotype causing disease was not known (2 cases).

**Table 3. Number of invasive pneumococcal disease cases by serotype and age group**

Serotypes	Age group											
	<2 years			2–4 years			≥5 years			Total		
	Q4 2016 <sup>a</sup>	2016 <sup>b</sup>	2015 <sup>c</sup>	Q4 2016 <sup>a</sup>	2016 <sup>b</sup>	2015 <sup>c</sup>	Q4 2016 <sup>a</sup>	2016 <sup>b</sup>	2015 <sup>c</sup>	Q4 2016 <sup>a</sup>	2016 <sup>b</sup>	2015 <sup>c</sup>
4	0	0	0	0	1	1	4	20	16	4	21	17
6B	0	0	1	0	0	0	1	1	1	1	1	2
9V	0	0	0	0	0	0	0	2	4	0	2	4
14	0	0	0	0	0	0	1	7	3	1	7	3
18C	0	0	0	0	0	0	0	2	2	0	2	2
19F	0	0	0	0	0	0	5	12	19	5	12	19
23F	0	0	0	0	0	0	0	2	6	0	2	6
<b>Total PCV7</b>	<b>0</b>	<b>0</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>11</b>	<b>46</b>	<b>51</b>	<b>11</b>	<b>47</b>	<b>53</b>
1	0	0	0	0	0	0	0	1	1	0	1	1
5	0	0	0	0	0	0	0	2	0	0	2	0
7F	1	1	0	0	0	0	8	32	38	9	33	38
<b>Total PCV10</b>	<b>1</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>1</b>	<b>1</b>	<b>19</b>	<b>81</b>	<b>90</b>	<b>20</b>	<b>83</b>	<b>92</b>
3	1	2	0	1	2	2	4	23	31	6	27	33
6A	0	0	0	0	0	0	0	1	1	0	1	1
19A	1	6	2	1	9	1	15	63	87	17	78	90
<b>Total PCV13</b>	<b>3</b>	<b>9</b>	<b>3</b>	<b>2</b>	<b>12</b>	<b>4</b>	<b>38</b>	<b>168</b>	<b>209</b>	<b>43</b>	<b>189</b>	<b>216</b>
6C	0	0	1	0	1	1	4	17	24	4	18	26
8	0	0	1	0	0	0	8	29	17	8	29	18
9N	1	2	0	0	0	0	5	12	9	6	14	9
10A	0	0	0	0	0	0	3	9	4	3	9	4
11A	0	0	0	0	0	0	1	8	5	1	8	5
12F	0	0	0	0	0	0	0	6	4	0	6	4
15A	0	0	0	0	1	0	1	13	6	1	14	6
15B	1	2	1	0	1	2	1	4	10	2	7	13
16F	0	0	0	0	0	0	2	11	5	2	11	5
17F	0	0	0	0	0	0	0	8	3	0	8	3
22F	1	1	1	1	2	1	11	36	38	13	39	40
23A	0	0	2	0	0	0	3	9	14	3	9	16
23B	0	0	0	0	0	1	4	18	11	4	18	12
31	0	0	0	0	0	0	2	7	5	2	7	5
33F	1	3	2	1	1	0	3	19	12	5	23	14
35	0	0	0	0	1	1	3	8	3	3	9	4
38	0	0	0	0	1	0	0	5	3	0	6	3
Other types <sup>d</sup>	0	2	3	0	1	0	9	26	24	9	29	27
<b>Total non-PCV13</b>	<b>4</b>	<b>10</b>	<b>11</b>	<b>2</b>	<b>9</b>	<b>6</b>	<b>60</b>	<b>245</b>	<b>197</b>	<b>66</b>	<b>264</b>	<b>214</b>

<sup>a</sup> Cases reported in the fourth quarter of 2016 (October–December 2016).

<sup>b</sup> Cases reported in the 12 months ending 31 December 2016.

<sup>c</sup> Cases reported in the 12 months ending 31 December 2015.

<sup>d</sup> Any of these other serogroups/serotypes accounted for ≤5 IPD cases during the 12 months ending 31 December 2016.

**Table 4. Immunisation status of the invasive pneumococcal disease cases notified in the October-December 2016 quarter and who were eligible for PCV**

Number of doses received <sup>a</sup>	Cases due to PCV7 serotypes: 4, 6B, 9V, 14, 18C, 19F or 23F <sup>b</sup>	Cases due to additional PCV10 serotypes: 1, 5 or 7F <sup>b</sup>	Cases due to additional PCV13 serotypes: 3, 6A or 19A <sup>b</sup>	Cases due to non-PCV13 serotypes <sup>b</sup>	Total <sup>b,c</sup>
	Number	Number	Number	Number	Number
0	0	1	0	0	2
1	0	0	0	0	0
2	0	0	0	1	1
3	0	0	1 <sup>d</sup>	2	3
4	0	0	2 <sup>e</sup>	3	6
<b>Total</b>	<b>0</b>	<b>1</b>	<b>3</b>	<b>6</b>	<b>12</b>

<sup>a</sup> Number of doses received prior to 14 days before onset of IPD. Onset of IPD was determined using the earliest episode date available from onset of illness date, hospitalised date or date reported to the public health unit.

<sup>b</sup> Only IPD cases eligible for PCV as part of the childhood immunisation schedule (ie, cases born after 1 January 2008 and aged ≥6 weeks) are presented.

<sup>c</sup> The total number of cases includes two cases where serotype information was not available.

<sup>d</sup> Case due to serotype 19A.

<sup>e</sup> Cases due to serotypes 3 and 19A.

Note: Immunisation status was unknown for two cases who were eligible for PCV (not included in table).

Ethnicity was recorded for 112 (96.6%) of the 116 IPD cases in the October-December 2016 quarter. The age-standardised rates of IPD were highest for the Pacific peoples (11.4 per 100,000, 23 cases) and Māori (5.4 per 100,000, 20 cases) ethnic groups. The rates for these two ethnic groups were, respectively, 6.0 and 2.8 times higher than the rate for the European or Other ethnic group (1.9 per 100,000, 65 cases) (Table 5).

**Table 5. Number of cases, and age-specific and age-standardised rate per 100,000 population of invasive pneumococcal disease by ethnic group and age group, October-December 2016 quarter**

Age group (years)	Māori		Pacific peoples		Asian		MELAA <sup>a</sup>		European or Other	
	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate	Cases	Rate
<2	3	-	1	-	1	-	0	-	3	-
<5	4	-	3	-	1	-	0	-	5	3.2
5-64	9	1.6	15	6.2	2	-	0	-	25	1.1
≥65	7	17.9	5	30.1	1	-	0	-	35	5.8
<b>Total cases and crude rate for all ages<sup>b</sup></b>	<b>20</b>	<b>2.9</b>	<b>23</b>	<b>8.0</b>	<b>4</b>	<b>-</b>	<b>0</b>	<b>-</b>	<b>65</b>	<b>2.1</b>
<b>Age-standardised rate<sup>c</sup></b>		<b>5.3</b>		<b>11.2</b>		<b>-</b>		<b>-</b>		<b>1.8</b>

<sup>a</sup> Middle Eastern/Latin American/African.

<sup>b</sup> Ethnicity was recorded for 112 (96.6%) of cases in the October-December 2016 quarter.

<sup>c</sup> The age-standardised rates are direct-standardised to the age distribution of the total New Zealand population.

Note: Denominator data used to determine disease rates for ethnic groups is based on the proportion of people in each ethnic group from the usually resident 2013 census population applied to the 2016 mid-year population estimates from Statistics New Zealand. Ethnicity is prioritised in the following order: Māori, Pacific peoples, Asian, MELAA and European or Other ethnicity (including New Zealander). Where there were fewer than five cases in any category, a rate has not been calculated.

In the October-December 2016 quarter, 110 (94.8%) of the 116 IPD cases had a residential address recorded that could be assigned a 2013 New Zealand Deprivation Index (NZDep13) score.

The most deprived areas (NZDep13 quintile 5) had the highest rate of IPD (4.8 per 100,000, 40 cases), 4.4 times the rate in the least deprived areas (1.1 per 100,000, 10 cases). Rates of IPD by deprivation index could only be calculated for all ages combined because population data by NZDep13 quintile and age groups was not available.

**Table 6. Number and percentage of invasive pneumococcal disease cases by quintiles of the 2013 New Zealand deprivation index and age group, October-December 2016 quarter**

NZDep13 quintile <sup>a</sup>	<2 years		2-4 years		5-64 years		≥65 years		Total		
	Cases	% <sup>b</sup>	Cases	% <sup>b</sup>	Cases	% <sup>b</sup>	Cases	% <sup>b</sup>	Cases	% <sup>b</sup>	Rate <sup>c</sup>
1	0	0.0	1	20.0	4	7.5	5	11.4	10	9.1	1.1
2	1	12.5	1	20.0	5	9.4	10	22.7	17	15.5	2.0
3	1	12.5	1	20.0	11	20.8	7	15.9	20	18.2	2.4
4	2	25.0	0	0.0	13	24.5	8	18.2	23	20.9	2.8
5	4	50.0	2	40.0	20	37.7	14	31.8	40	36.4	4.8
<b>Total<sup>d</sup></b>	<b>8</b>		<b>5</b>		<b>53</b>		<b>44</b>		<b>110</b>		

<sup>a</sup> Quintile of the 2013 New Zealand Deprivation Index (1 = least deprived and 5 = most deprived).

<sup>b</sup> Percentage of cases within the age group in the quintile.

<sup>c</sup> Rate per 100,000 population, based on the 2013 census data from Statistics New Zealand. These rates should not be compared with disease rates used elsewhere in the report which have been calculated using 2016 mid-year population estimates from Statistics New Zealand.

<sup>d</sup> Accurate New Zealand Deprivation Index (NZDep13) data was available for 110 (94.8%) cases notified in the October-December 2016 quarter.