Scottish antimicrobial use and resistance in humans in 2015

50/3501 Health Protection Scotland and Information Services Division are today publishing a report on antibiotic use and resistance in Scotland during 2015.

This latest report shows that while work by the Scottish Antimicrobial Prescribing Group (SAPG) to improve the quality of antibiotic prescribing is proving successful, continued efforts are required to further reduce unnecessary antibiotic use.

The report is intended to support NHS boards, hospitals and primary care in their long-term planning of antimicrobial prescribing. In particular, this report should be of use to antimicrobial management teams (AMTs), infection prevention and control teams (ICTs) and microbiologists.


West Nile virus increase in transmission

50/3502 Further to Current note 50/3104 (at http://www.hps.scot.nhs.uk/ewr/redirect.aspx?id=68976), the European Centre for Disease Prevention and Control (ECDC) noted on 26 August that 43 West Nile virus cases had been reported in the EU during the preceding two weeks, indicating a clear increase compared to a total of 54 cases during the whole 2015 transmission season.

Despite this recent peak in reported West Nile fever transmission in the EU, the overall number of cases was still within the expected ranges for the disease transmission season.

In the preceding week, 32 new cases had been reported in EU member states, and 11 cases in the week before.

During the immediately preceding week, notifications of West Nile fever cases in humans had been received from:

- Austria: the first two cases for the season;
- Hungary: four new cases, three in the newly affected area of Budapest;
- Italy: 10 new confirmed cases, nine in the newly affected provinces;
- Romania: 15 new cases, five in the newly affected areas;
- for the first time Cyprus has reported a West Nile fever case, but investigations are still ongoing to estimate the risk of local transmission.
During the week before this, 11 new cases had been reported in the EU, by Hungary, Romania and Spain.

In countries neighbouring the EU (Israel, Russia and Serbia), 19 and 21 new cases had been reported in the preceding week and the week before, respectively. [Source: ECDC News Release, 26 August 2016. http://ecdc.europa.eu/en/press/news/_layouts/forms/News_DispForm.aspx?ID=1471&List=8db7286c-fe2d-476c-9133-18ff4cb1b568]


International measures to stop spread of wild poliovirus

50/3503 The 10th meeting of the Emergency Committee under the International Health Regulations (IHR) (2015) regarding the international spread of wild poliovirus was convened by the WHO Director General on 11 August 2016.

As with the ninth meeting, the Emergency Committee reviewed the data on circulating vaccine-derived polioviruses (cVDPV) as well as circulating wild poliovirus (WPV1). The Committee was concerned by the two new cases of WPV1 reported from different local government areas (Gwoza and Jere) in Borno State, Nigeria during July 2016. These cases, together with the cVDPV reported in May 2016, suggested polioviruses have been circulating undetected in Borno for several years and indicate significant gaps in surveillance.

The Committee was concerned that Gwoza district borders with the north province of Cameroon and is considered inaccessible. Historically poliovirus transmission has occurred in the Lake Chad area, and the international borders around Borno with Cameroon, Chad and Niger, such that the risk of international spread between these four countries was considered extremely high and might already be occurring.

The progress being made in Afghanistan and Pakistan was recognised and it was noted that there had been no spread of WPV1 between these two countries since the previous meeting. The Committee was, however, concerned at the deteriorating security in parts of Afghanistan making more children inaccessible, and potentially delaying the completion of global polio eradication in 2016. Globally there were significant vulnerable areas and populations that were inadequately immunised due to conflict and poor coverage. These vulnerable areas included countries in the Middle East, the Horn of Africa, and Central Africa.

The Committee agreed that the situation still constituted a Public Health Emergency of International Concern (PHEIC) and recommended the extension of the temporary recommendations (http://www.polioeradication.org/Keycountries/PolioEmergency.aspx) for a further three months to the following countries:

Countries currently exporting wild poliovirus (WPV) or cVDPV:

- Afghanistan (last exportation WPV 6 June 2015);
- Pakistan (last exportation WPV 1 February 2016).

Countries infected with wild poliovirus or cVDPV detected in the last six months but not currently exporting:

- Nigeria (WPV1 and cVDPV);
- Guinea (cVDPV);
• Laos People’s Democratic Republic (cVDPV);
• Madagascar (cVDPV);
• Myanmar (cVDPV).

In addition, all travellers to Somalia, Equatorial Guinea, Cameroon, Niger, Chad and Ukraine should ensure they have had a full primary course of poliomyelitis vaccine and be offered a booster if it has been more than 10 years since their last dose. While these countries were no longer infected with wild poliovirus or cVDPV, they remained vulnerable to international spread or to the emergence and circulation of VDPV.


ESCAIDE ‘late-breaker’ abstract call

50/3504 The 2016 European Scientific Conference on Applied Infectious Disease Epidemiology (ESCAIDE) will take place from 28 to 30 November 2016.

The later breaker call for abstracts will open on 1 September and may only be submitted online, through the ESCAIDE booking site. Late breaker abstracts may be eligible for both oral and poster presentation at the Conference. To be eligible, the abstract must:

• a) report on acute urgent public health problems OR b) contain novel, surprising findings; AND
• report data or information that was unavailable before 11 May 2016 (the deadline for submission in the general call for abstracts for ESCAIDE), AND
• have not been published before.


The programme and conference registration instructions are available on the ESCAIDE conference website (http://ecdc.europa.eu/en/escaide/Pages/ESCAIDE.aspx). For further information, contact: escaide.conference@ecdc.europa.eu.

Scottish Food Crime Hotline

50/3505 On 25 August, Food Standards Scotland (FSS) and independent charity Crimestoppers have today (25 August 2016) launched the free Scottish Food Crime Hotline to give members of the public and industry a dedicated telephone line to report anonymously any suspicions of food crime.

The new free hotline number – 0800 028 7926 – will be operational 24 hours a day, seven days a week. There will also be an option to report concerns via a non-traceable online form. The initiative will allow FSS’s Scottish Food Crime and Incidents Unit (SFCIU) to gather vital intelligence to target those involved in criminal activities, which cost the UK food and drink industry an estimated £1.17bn annually.

Food crime is defined as any deliberate manipulation, substitution, mislabelling or instance of fraud in relation to food. It is a serious issue for the sector and this new partnership with Crimestoppers should offer consumers a trusted platform to report any concerns of wrongdoing in relation to food and drink. Information provided will be used to help FSS and other enforcement agencies identify and where necessary, prosecute criminals who are defrauding and potentially endangering consumers.
The launch of the free hotline and online form is a milestone in the development of the SFCIU, which was established in response to the 2013 report from the then Minister for Public Health following the horsemeat incident. The Unit was launched in October 2015 with a remit of improving Scotland’s capability and capacity to combat food crime through improved intelligence, investigation resources and partnership working with the Police and other enforcement agencies.


Environmental incidents - SEISS reports (Bacterial levels – West Beach, North Berwick)

50/3506 The Scottish Environmental Incident Surveillance System (SEISS) recorded the following incident in the past week:

- High levels of bacteria in the water at West Beach, North Berwick, were recently found prompting East Lothian Council to set up signs warning the public against swimming / paddling there. On 22 August, however, the council noted that the Scottish Environment Protection Agency (SEPA) had confirmed that the water had returned to safe levels. SEPA and Scottish Water were continuing their investigations. [Source: East Lothian News Release, 22 August 2016. http://www.eastlothian.gov.uk/news/article/2260/west_beach_north_berwick_safe_for_swimming]

For more detailed information on SEISS, go to http://www.hps.scot.nhs.uk/enviro/ssdetail.aspx?id=107 or contact either Ian Henton or Colin Ramsay at HPS on 0141 300 1100.