

Rheumatic Fever Report

January to December 2014

This report provides an overview of rheumatic fever in New Zealand in 2014 using both notification data from EpiSurv and hospitalisation data from the National Minimum Dataset (NMDS). The data presented is based on information recorded on EpiSurv as at 20 March 2015 and on the NMDS as at 10 February 2015.

Notifications for initial episodes of rheumatic fever with an onset date between 1 January and 31 December 2014 were linked with first episode rheumatic fever hospitalisations (as defined by the [Better Public Services rheumatic fever target](#)) with a discharge date in 2014. Non matching cases were then followed up to see whether they met the case definition for rheumatic fever (as per the [Communicable Disease Control Manual](#)). Those that did not meet the definition were excluded.

There were 143 cases of first episode rheumatic fever between 1 January and 31 December 2014, giving a rate of 3.2 per 100,000 population. Of the 143 cases, 120 were both notified and hospitalised, 20 were notified only and three were hospitalised but not notified. A total of eight notified-only and 24 hospitalised-only cases were excluded as not meeting the definition for rheumatic fever. Table 1 shows the number and incidence rate per 100,000 for first episode rheumatic fever cases in 2014 by age group and ethnicity.

TABLE 1: First episode rheumatic fever cases by ethnicity and age group, 2014

Prioritised ethnicity	0-4 years		5-14 years		15-24 years		25+ years		Total	
	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹	Number	Rate ¹
Total	1	-	102	16.9	31	4.8	9	0.3	143	3.2
Māori	1	-	50	34.5	11	8.8	4	1.2	66	9.8
Pacific	0	0.0	50	89.9	19	35.0	4	2.9	73	26.3
European / Other	0	0.0	2	-	1	-	1	-	4	0.1

1. Rate per 100,000 population, based on 2014 mid-year population estimates from Statistics New Zealand

Note: For categories with ≤ 10 cases rates are considered unstable and should be interpreted with caution. Rates have not been calculated where there were fewer than four cases.

Current initiatives in the Rheumatic Fever Prevention Programme include the provision of free sore throat services in the community and in primary schools in high incidence areas. These programmes target 4-19 year olds and 5-12 year olds respectively. Table 2 shows the number and incidence rate per 100,000 for first episode rheumatic fever in 2014 by ethnicity for these age groups.

TABLE 2: First episode rheumatic fever cases by ethnicity and age groups targeted by current initiatives, 2014

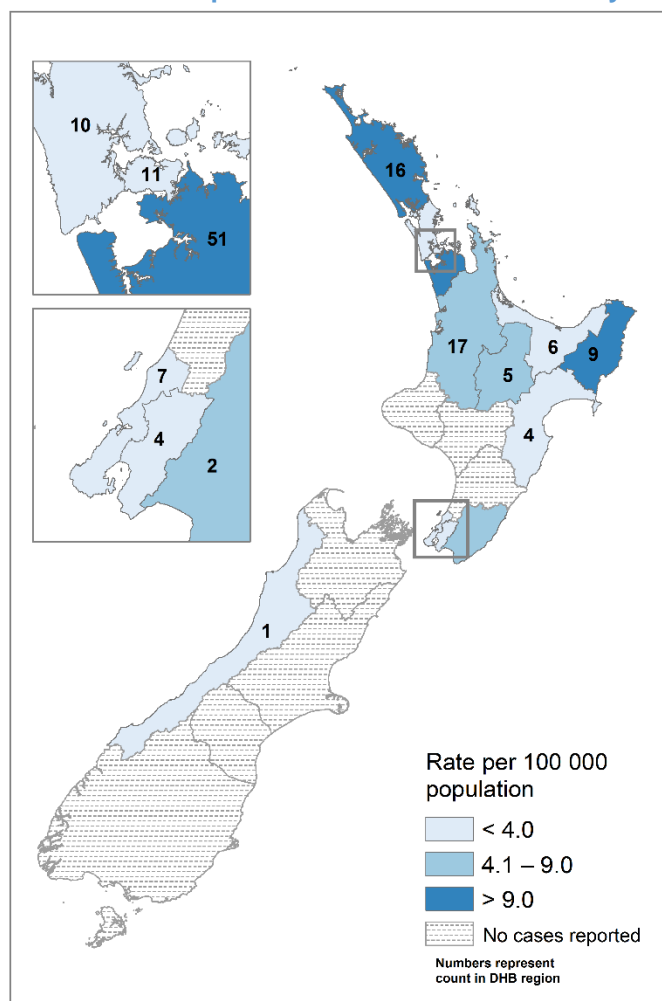
Prioritised ethnicity	5-12 years		4-19 years	
	Number	Rate ¹	Number	Rate ¹
Total	81	16.7	120	12.3
Māori	39	33.3	57	25.1
Pacific	41	91.8	60	67.1
European / Other	1	-	3	-

1. Rate per 100,000 population, based on 2014 mid-year population estimates from Statistics New Zealand

Note: For categories with ≤ 10 cases rates are considered unstable and should be interpreted with caution. Rates have not been calculated where there were fewer than four cases.

Figure 1 shows the geographical distribution of first episode rheumatic fever for 2014.

FIGURE 1: First episode rheumatic fever cases by District Health Board, 2014



For DHBs with ≤ 10 cases rates are considered unstable and should be interpreted with caution.

The official basis for monitoring the Better Public Services target is first episode rheumatic fever hospitalisations. The following graphs show the trend in the rate of hospitalised cases since 2002 for the total population and since 2009 for Māori and Pacific peoples.

FIGURE 2: First episode rheumatic fever hospitalisations, annual rate per 100,000, 2002-2014

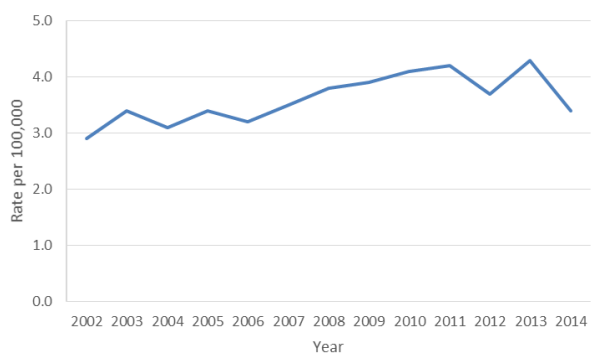


FIGURE 3: First episode rheumatic fever hospitalisations, annual rate per 100,000, Māori and Pacific peoples, 2009-2014

