



Australian Government

Department of Health  
and Aged Care



Australian  
Centre for  
Disease  
Control

2025 • Volume 49

# Communicable Diseases Intelligence

## Meningococcal Surveillance Australia Reporting period 1 July to 30 September 2024

Monica M Lahra and Tiffany R Hogan for the National Neisseria Network

# Communicable Diseases Intelligence

*Communicable Diseases Intelligence* (CDI) is a peer-reviewed scientific journal published by the Health Security & Emergency Management Division, Department of Health and Aged Care.

The journal aims to disseminate information on the epidemiology, surveillance, prevention and control of communicable diseases of relevance to Australia.

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ISSN: 2209-6051 Online

This journal is indexed by Index Medicus and Medline.

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# Meningococcal Surveillance Australia

## Reporting period 1 July to 30 September 2024

Monica M Lahra and Tiffany R Hogan for the National Neisseria Network

The reference laboratories of the National Neisseria Network, Australia report data on invasive meningococcal disease (IMD) cases confirmed by culture and/or molecular techniques for the Australian Meningococcal Surveillance Programme (AMSP). Culture-positive cases and molecular-based diagnoses are defined as IMD by the Communicable Diseases Network Australia National Guidelines for Public Health Units.<sup>1</sup> Data contained in the quarterly reports are restricted to a description of the number of cases by jurisdiction and serogroup, when known, and expanded in 2024 to include antimicrobial resistance data for ceftriaxone, penicillin, ciprofloxacin and rifampicin. Some minor corrections to data in Table 1 may be made in subsequent reports if additional data are received.

IMD notifications in Australia in the third quarter of 2024 were higher than in the corresponding period of 2023; however, year-to-date notifications were similar to those reported in 2023 (Table 1).<sup>2</sup> In this quarter there were 50 notifications, and for 48/50 (96%), the serogroup was determined. Notably, the predominance of *N. meningitidis* serogroup B (MenB) IMD reported in 2022<sup>3</sup> has continued, accounting for 83% of notifications (40/48). In contrast, between 2019 and 2021, the proportion of IMD attributable to MenB was 50–62%.<sup>4</sup> There have not been any MenA IMD cases reported in Australia for many years and the first MenC IMD case for 2024 was reported in this quarter from Queensland. Antimicrobial susceptibility testing data on the 28 IMD diagnosed by culture detected one penicillin-resistant isolate from Queensland (MenC). All IMD isolates were susceptible to ceftriaxone and, where antimicrobial susceptibility testing was undertaken on ciprofloxacin and rifampicin (26/28), no resistance was detected. A full analysis of laboratory-confirmed cases of IMD in each calendar year is contained in the AMSP annual report published in *Communicable Diseases Intelligence*.

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**Table 1: Number of laboratory confirmations of invasive meningococcal disease, Australia, 1 July to 30 September 2024, by serogroup and state or territory**

Jurisdiction	Year	Serogroup															
		B			C			W			Y			ND <sup>a</sup>			All
		Q3	ytd <sup>b</sup>	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd	Q3	ytd	Q3	
Australian Capital Territory	2024	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	2023	2	2	0	0	0	0	0	0	0	0	0	0	0	0	0	2
New South Wales	2024	5	16	0	0	0	0	1	1	0	0	0	0	0	0	6	17
	2023	4	19	0	0	0	2	3	5	0	0	0	0	0	0	7	26
Northern Territory	2024	1	2	0	0	0	0	0	0	0	0	0	0	0	1	2	2
	2023	0	0	0	0	1	1	0	0	0	0	0	0	0	0	1	1
Queensland	2024	15	27	1	1	0	0	1	2	2	2	2	3	19	33	33	33
	2023	10	28	0	0	0	0	0	1	1	1	1	2	11	31	31	31
South Australia	2024	9	19	0	0	0	0	2	3	0	0	0	0	11	22	22	22
	2023	6	16	0	0	2	3	0	0	0	0	0	0	8	19	19	19
Tasmania	2024	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
	2023	0	2	0	0	1	1	0	0	0	0	0	1	1	4	4	4
Victoria	2024	5	11	0	0	0	0	1	4	0	0	0	1	6	16	16	16
	2023	6	12	0	0	1	2	1	1	1	1	1	1	9	16	16	16
Western Australia	2024	5	8	0	0	0	2	2	2	0	0	0	0	7	12	12	12
	2023	0	2	0	0	0	0	0	1	0	0	0	0	0	3	3	3
<b>Australia</b>	2024	<b>40</b>	<b>83</b>	<b>1</b>	<b>1</b>	<b>0</b>	<b>2</b>	<b>7</b>	<b>12</b>	<b>2</b>	<b>2</b>	<b>2</b>	<b>4</b>	<b>50</b>	<b>102</b>	<b>102</b>	<b>102</b>
	2023	<b>28</b>	<b>81</b>	<b>0</b>	<b>0</b>	<b>5</b>	<b>9</b>	<b>4</b>	<b>8</b>	<b>2</b>	<b>4</b>	<b>2</b>	<b>4</b>	<b>39</b>	<b>102</b>	<b>102</b>	<b>102</b>

a ND: not determined.

b ytd: year to date, data from 1 January to 30 September 2024.

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