

CHLAMYDIA 2002

No. 48, 2003

In 2002, 16,203 cases of oculogenital *Chlamydia trachomatis* infection were reported to the national laboratory notification system. The number represents an annual incidence of 302 per 10⁵. Since 1994, 260,000-280,000 analyses have been carried out annually, and chlamydia has been detected in approximately 5% of those investigated, [table 1](#).

Table 1. No. of analyses and no. of laboratory-diagnosed cases of chlamydia, 1994-2002, % in ()

Year	Analyses	Cases	(%)
1994	277,464	13,869	(5.0)
1995	271,555	13,038	(4.8)
1996	281,579	13,369	(4.7)
1997	271,652	13,596	(5.0)
1998	272,920	12,831	(4.7)
1999	262,131	13,930	(5.3)
2000	268,471	14,735	(5.5)
2001	280,694	15,150	(5.4)
2002	275,447	16,203	(5.9)

The age distribution was practically unchanged compared with the preceding years, as 81% of the men and 90% of the women were in the age group 15-29 years, [table 2](#).

Table 2. Age-specific incidence per 10⁵ of chlamydia for those cases where information was provided about both age and gender, 2002

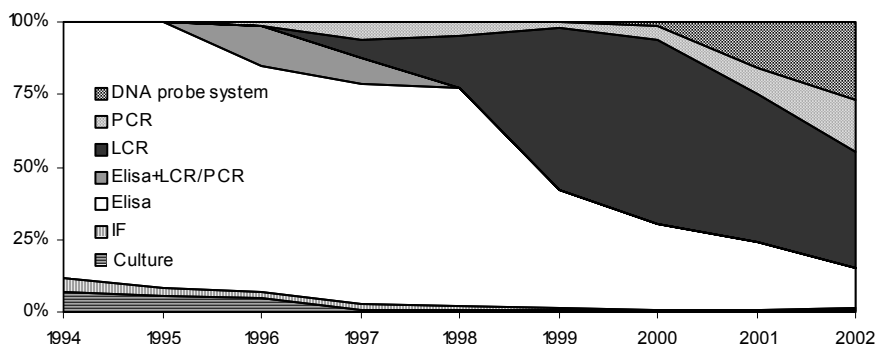
Year	Males		Females	
	No.	Per 10 ⁵	No.	Per 10 ⁵
<1	28	84	37	116
1-4	0	0	0	0
5-9	1	1	0	0
10-14	8	5	58	37
15-19	776	538	3,437	2,487
20-24	2,085	1,308	4,504	2,878
25-29	1,354	712	1,916	1,024
30-34	508	255	633	330
35-39	252	116	260	125
40-44	97	50	82	44
45-49	38	20	26	14
50+	50	6	29	3
Total	5,197	196	10,982	405

The increase in the number of cases from 2001 to 2002 was 258 among females and 802 among males with 32% of the diagnosed cases in 2002 being males. This proportion has been steadily increasing from 23% in 1994.

Diagnosis

In 85% of cases, the diagnosis was made by DNA methods (DNA probe system, PCR and LCR), and this represents an increase from 76% in 2001. By the end of 2002, a DNA probe system was used in four clini-

Fig. 1. Methods used for laboratory diagnosis of chlamydia in Denmark, 1994-2002



cal microbiology departments. This method was used for 32% of the patients who were diagnosed positive with a DNA method, as against 21% in 2001.

Table 3. Incidence per 10⁵ of laboratory-diagnosed chlamydia, by county, gender and M/F ratio, 2002

County	No. per 10 ⁵		M/F ratio
	M	F	
Cph & Frb			
Municipalities	374	619	0.60
Copenhagen	166	337	0.49
Frederiksborg	123	259	0.47
Roskilde	138	353	0.39
West Zealand	160	332	0.48
Storstrøm	120	306	0.39
Bornholm	73	357	0.21
Funen	177	395	0.45
South Jutland	150	393	0.38
Ribe	192	365	0.53
Vejle	170	403	0.42
Ringkøbing	169	382	0.44
Aarhus	261	472	0.55
Viborg	164	393	0.42
North Jutland	185	429	0.43
Total	196	405	0.48

In 1,380 patients (9%), chlamydia was detected by analysis of urine with DNA methods. In 2001, the proportion was 3%. Twelve out of 18 laboratories reported analysis of urine samples, as against nine in 2001.

Chlamydia in the rectum

Chlamydia in the rectum was detected in five males and five females. Routine investigation for *C. trachomatis* in rectal swabs is not recommended, however, the possibility of infection of sexual partners by transmission to and from the rectum ought to be considered in persons who have had unprotected anal sex.

Chlamydia in children

Chlamydia was detected in 136 children under the age of 15 years. A to-

tal of 69 (51%) of these were under one year old, and of the 69 cases, 62 had conjunctivitis. For 38 (61%) of all children with conjunctivitis, age was stated in months. Among these, 90% were under one month old, while 10% were 1-5 months old. When suspecting sexual abuse of children or adults, culture is recommended as the method of investigation for chlamydia to avoid false positive results. For specimen collection, a chlamydia swab for urogenital samples and a chlamydia transport medium must be used.

Comments

The number of laboratory analyses for chlamydia in 2002 was at the same level as for previous years. The increase in number of cases of laboratory-diagnosed chlamydia may be due to increased use of DNA methods, increased access to analysis of urine samples and an increased attention to males as a reservoir of infection, and hardly due to an increased prevalence. Males still constitute an increasing proportion of the diagnosed cases of chlamydia. As this proportion constitutes only one-third of all cases, it is vital that testing for chlamydia in males be intensified.

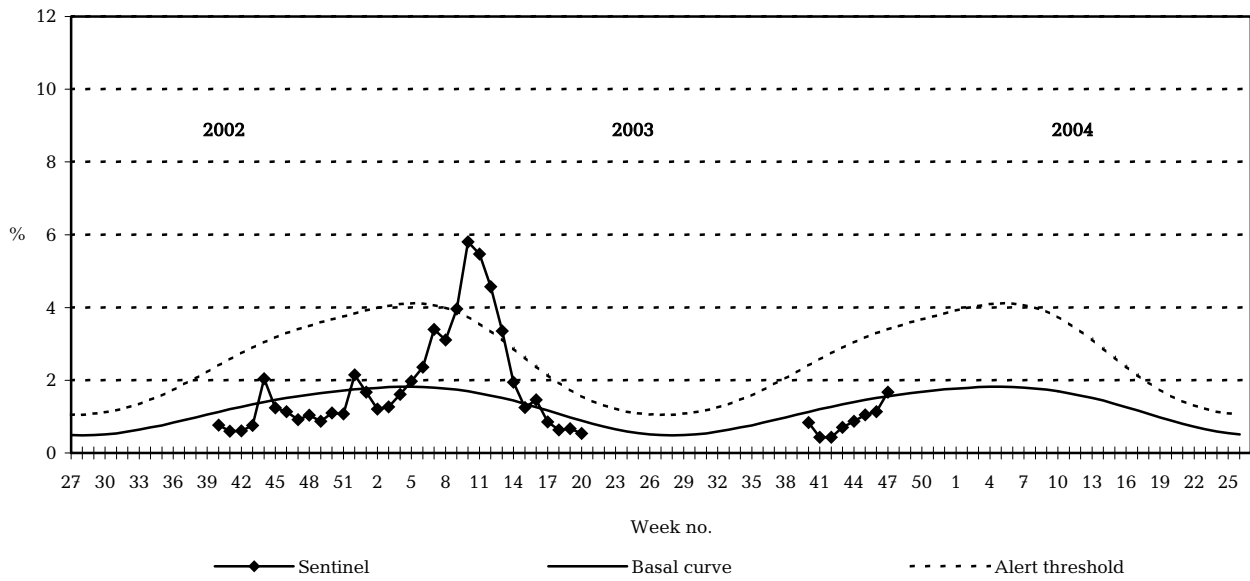
(S.V. Hjorth, S. Hoffmann, DBMP)

CONJUGATED VACCINE AGAINST GROUP C MENINGOCOCCI

The NeisVac-C, which is one of the registered conjugated vaccines against group C meningococci, has been re-registered to be given in a two-dose schedule, instead of the former three-dose schedule. Children aged 2-12 months should receive two doses at an interval of at least two months, while all others should receive one dose. For further information: see EPI-NEWS 38/01. (Department of Epidemiology)

26 November 2003

Sentinel surveillance of influenza activity
 Weekly percentage of consultations, 2002/2003/2004



Sentinel: Influenza consultations as percentage of total consultations
Basal curve: Expected frequency of influenza consultations under non-epidemic conditions
Alert threshold: Possible incipient epidemic

(Dept. of Epidemiology)

Secretion specimens received from the sentinel surveillance

Week no.	2003												2004																	
	44	45	46	47	48	49	50	51	52	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	
No. received	0	5	6	12	2																									
Influenza A				3																										
A, not typed																														
A/H3																														
A/H1																														
Influenza B																														

(Depts. of Epidemiology & Virology)