



According to the national laboratory notification system, there were 18,406 confirmed cases of chlamydia (oculogenital infection caused by *Chlamydia trachomatis*) in 2003. This figure corresponds to an annual incidence of 342 per 10⁵. Since 1994, 260,000-280,000 analyses have been carried out annually, by which chlamydia has been detected in about 5% of those investigated. The proportion positive was 6.9% in 2003, [table 1](#).

Table 1. Number of analyses and number of laboratory diagnosed cases of chlamydia, 1994-2003. Percentage positive in ()

Year	Analyses	Cases	(%)
1994	277,464	13,869	(5.0)
1995	271,555	13,380	(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)
2003	268,008	18,406	(6.9)

The age distribution was largely unchanged in 2003 relative to the previous years, with 80% of the males and 89% of the females being in the age group 15-29 years, [table 2](#).

Table 2. Age specific incidence of chlamydia for cases where both age and sex were stated, 2003

Age	Males		Females	
	No.	Per 10 ⁵	No.	Per 10 ⁵
<1	26	79	43	138
1-4	0	0	1	1
5-9	0	0	3	2
10-14	3	2	64	40
15-19	883	602	3,843	2,745
20-24	2,420	1,555	4,969	3,252
25-29	1,457	792	2,207	1,217
30-34	618	315	730	384
35-39	280	128	347	165
40-44	142	73	122	65
45-49	58	31	39	21
50+	66	8	46	5
Total	5,953	224	12,414	457

Males made up 32% of the diagnosed cases. In the years 1994-2002, this proportion has been increasing steadily from 23% to 32%. 93% of all cases were diagnosed in general or specialist practice. Only in the municipalities of Copenhagen and Frederiksberg, as well as the counties of Ringkøbing, Aarhus and Viborg, was the M/F ratio of the incidence above 0.5, [table 3](#).

CHLAMYDIA 2003

Figure 1. Chlamydia diagnostics in Denmark, 1994-2003

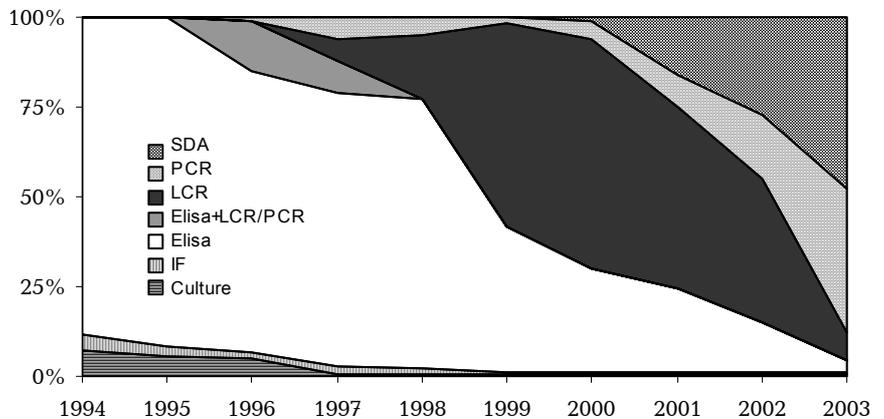


Table 3. Incidence per 10⁵ of laboratory diagnosed chlamydia, by county and sex, and M/F ratio by county, 2003

County	No. per 10 ⁵		M/F ratio
	M	F	
Cph & Frb			
Municipalities	470	816	0.58
Copenhagen	216	382	0.56
Frederiksborg	148	333	0.44
Roskilde	146	360	0.41
West Zealand	167	376	0.45
Storstrøm	133	301	0.44
Bornholm	74	354	0.21
Funen	202	490	0.41
South Jutland	177	504	0.35
Ribe	214	441	0.49
Vejle	187	440	0.43
Ringkøbing	183	367	0.50
Aarhus	243	445	0.55
Viborg	203	390	0.52
North Jutland	215	455	0.47
Total	224	457	0.49

Diagnosis

In 96% (85% in 2002) of the cases, the diagnosis was made by DNA amplification methods (PCR, LCR and SDA). Neither ELISA nor LCR were used after the second quarter of 2003, [figure 1](#).

In 2,329 patients (13%), chlamydia was diagnosed by analysis of urine by DNA amplification methods. Analysis of urine samples was reported from 12 of 18 laboratories.

Table 4. Chlamydia in children under 1 year

Age (months)	Swab site	
	Eye	Other/Not stated
< 1	35	0
1-5	6	1
6-12	1	0
Not stated	26	1
Total	68	2

Chlamydia in children

Chlamydia was diagnosed in 141 children under 15 years, including 70 (50%) under 1 year. Of the 70 children under 1 year, 68 had conjunctivitis, [table 4](#). In 42 children under 1 year with conjunctivitis, where the age was stated in months, 83% were under 1 month old, while 14% were 1-5 months old.

On suspicion of sexual abuse of children or adults, culture as method of investigation for chlamydia is recommended, because the reliability of the positive test result in this situation is especially important.

For specimen taking, chlamydia swabs for urogenital specimens and chlamydia transport medium should be used.

Comments

The number of chlamydia analyses in 2003 was at the same level as in previous years.

The increase in the number of laboratory diagnosed chlamydia may be due to increased application of DNA amplification methods, increased contact tracing, and an altered age and sex distribution among those investigated. However, the latter cannot be demonstrated, as the obligatory laboratory notification system for chlamydia applies exclusively to patients with positive samples. It is thus impossible to determine whether there is a real increase in incidence of chlamydia. Males still constitute only about a third of the diagnosed cases of chlamydia, and there is still reason to investigate further for chlamydia in males.

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Individually notifiable diseases

Number of notifications received in the Department of Epidemiology, Statens Serum Institut.

Figures for 2004 are preliminary.

Table 1	Week 44 2004	Cum. 2004 ¹⁾	Cum. 2003 ¹⁾
AIDS	0	36	29
Anthrax	0	0	0
Botulism	0	0	1
Cholera	0	1	0
Creutzfeldt-Jakob	0	7	5
Diphtheria	0	0	0
Food-borne diseases	15	530	484
of these, infected abroad	1	84	107
Gonorrhoea	8	285	136
Haemorrhagic fever	0	0	0
Hepatitis A	11	198	69
of these, infected abroad	3	61	37
Hepatitis B (acute)	2	34	39
Hepatitis B (chronic)	5	125	168
Hepatitis C (acute)	1	1	7
Hepatitis C (chronic)	5	222	253
HIV	5	270	211
Legionella pneumonia	4	90	78
of these, infected abroad	1	25	24
Leprosy	0	0	0
Leptospirosis	1	7	2
Measles	0	0	0
Meningococcal disease	0	70	90
of these, group B	0	39	48
of these, group C	0	11	20
of these, unspec. + other	0	20	22
Mumps	0	2	3
Neuroborreliosis	5	87	64
Ornithosis	0	5	12
Pertussis (children < 2 years)	8	192	98
Plague	0	0	0
Polio	0	0	0
Purulent meningitis			
Haemophilus influenzae	0	3	4
Listeria monocytogenes	0	1	1
Streptococcus pneumoniae	0	78	93
Other aethiology	0	6	4
Unknown aethiology	0	11	12
Under registration	5	20	-
Rabies	0	0	0
Rubella (congenital)	0	0	0
Rubella (during pregnancy)	0	0	0
Shigellosis	7	72	90
of these, infected abroad	5	59	73
Syphilis	0	109	50
Tetanus	0	0	0
Tuberculosis	7	387	350
Typhoid/paratyphoid fever	0	21	28
of these, infected abroad	0	19	21
Typhus	0	0	0
VTEC/HUS	5	128	98
of these, infected abroad	3	25	26

¹⁾ Cumulative number of cases notified in 2004 and in the corresponding period of 2003

Selected laboratory-diagnosed infections

Number of specimens, isolates, and/or notifications received at Statens Serum Institut.

Table 2	Week 44 2004	Cum. 2004 ²⁾	Cum. 2003 ²⁾
Bordetella pertussis (all ages)	29	835	422
Gonococci	10	346	214
of these, females	0	43	25
of these, males	10	303	189
Listeria monocytogenes	2	31	25
Mycoplasma pneumoniae			
Resp. specimens ³⁾	42	277	162
Serum specimens ⁴⁾	21	337	426
Pathogenic int. bacteria ⁵⁾			
Campylobacter	96	3316	3094
S. Enteritidis	17	466	666
S. Typhimurium	4	404	393
Other zoon. salmonella	4	438	435
Yersinia enterocolitica	5	194	203
Streptococci ⁶⁾			
Group A streptococci	3	106	124
Group C streptococci	0	19	19
Group G streptococci	1	92	103
S. pneumoniae	24	1019	985

²⁾ Cumulative number in 2004 and in the corresponding period of 2003

³⁾ Resp. specimens with positive PCR

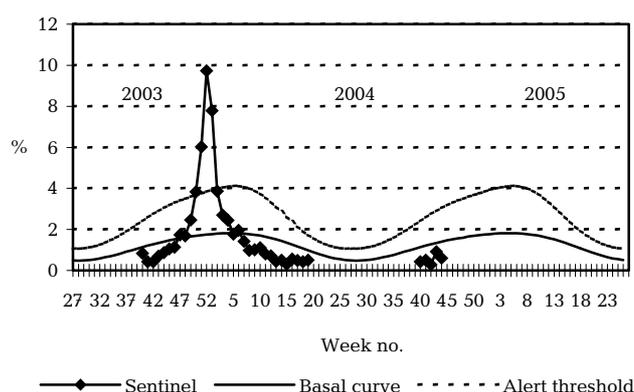
⁴⁾ Serum specimens with pos. complement fixation test, MPT

⁵⁾ See also www.germ.dk

⁶⁾ Isolated in blood or spinal fluid

Sentinel surveillance of the influenza activity

Weekly percentage of consultations, 2003/2004/2005



Sentinel: Influenza consultations (as percentage of total consultations)

Basal curve: Expected frequency of consultations under non-epidemic conditions

Alert threshold: Possible incipient epidemic