



DIRECTORATE
OF HEALTH

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Editorial Board

Dr H. Briem,
Chief Epidemiologist
Ms A. St. Atladottir
Ms G. Sigmundsdottir
Ms S. Hauksdottir
Mr TH. Gudnason

Editor
Ms J. M. Gudnadottir

DIRECTORATE OF HEALTH
CHIEF EPIDEMIOLOGIST
FOR ICELAND

Austurströnd 5
170 Seltjarnarnes
Tel: +354 510 1900
Fax: +354 510 1920

E-mail: mottaka@landlaeknir.is
Website: www.landlaeknir.is

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FEWER CASES OF CHLAMYDIA IN 2005

In 2005 the number of chlamydia cases in Iceland declined as compared with the previous year (see table). Chlamydia is most prevalent in the age group 20–24 years (Fig. 1), followed by the age group 15–19 years. The incidence peaked in the years 2001–2002, the increase almost exclusively being in the age group 15–24 year. In 2003 the number of cases went down again in the same age groups. The total number of diagnosed cases of chlamydial infection at present is similar to what it was before the peak of 2001–2002.

Year	No. of cases	No./100.000 inhab.	Change over previous year (%)
1998	1550	566	—
1999	1687	609	8,8
2000	1819	647	7,8
2001	2122	744	16,7
2002	2088	726	-1,6
2003	1638	566	-21,6
2004	1735	593	5,9
2005	1633	552	-5,9

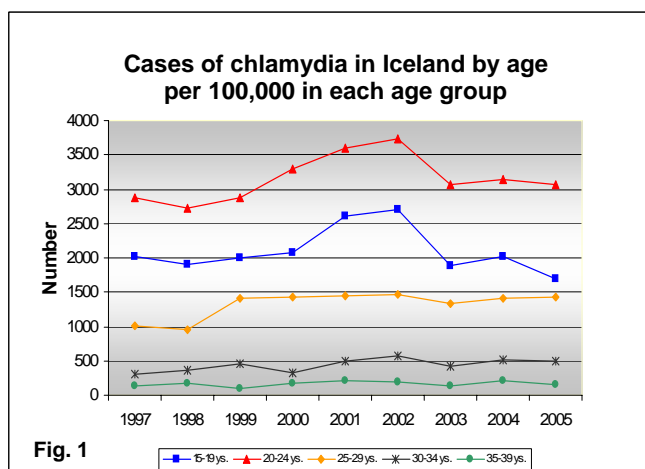


Fig. 1

similar in the past few years, while the percentage of samples positive for chlamydia has gone down (Fig. 3). This is an indication that the prevalence of chlamydia has actually decreased.

Chlamydial infection is caused by a bacterium, *Chlamydia trachomatis*. This bacterium can cause an infection in both the genitals and eyes and is transmitted from person to person through mucous membranes, usually during sexual intercourse. The

Women are more often diagnosed with chlamydial infection than men are, which can partly be explained by the fact that more women than men are tested for the disease (Fig. 2). The number of samples sent for chlamydia diagnosis at the Landspítali - University Hospital laboratories has been

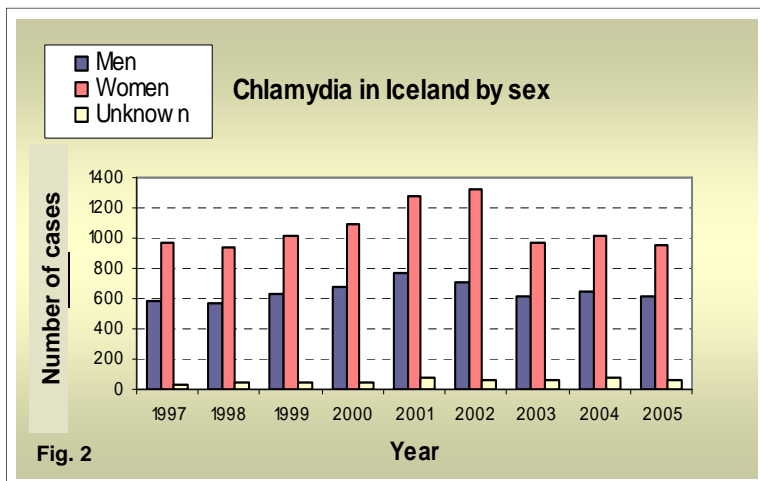


Fig. 2

The total number of diagnosed cases of chlamydial infection at present is similar to what it was before the peak of 2001–2002.

symptoms in men and women are similar, abnormal genital discharge and sometimes a burning sensation and itching in the urine canal and when urinating. In addition, women sometimes experience irregular menstruation and lower-abdominal pain.

However, many people never develop any

symptoms and can carry the infection for a long time.

Chlamydia can be treated with antibiotics and treatment is important to prevent serious complications such as infertility in women and further spread of the infection to others.

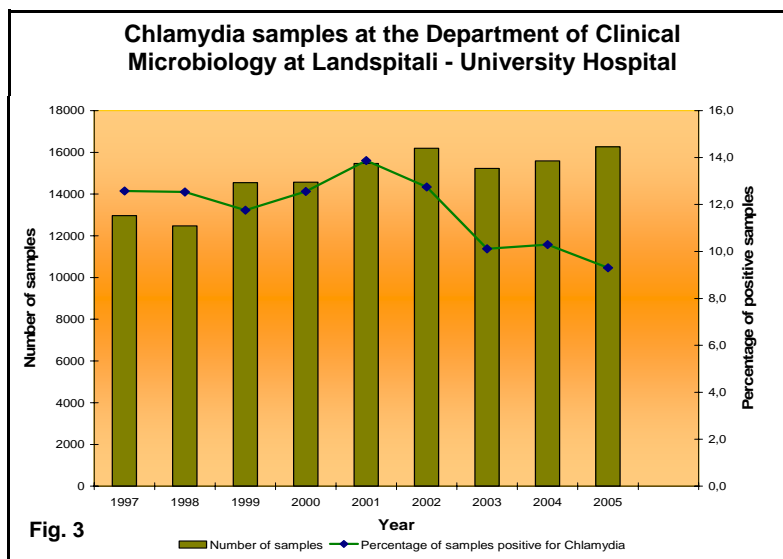


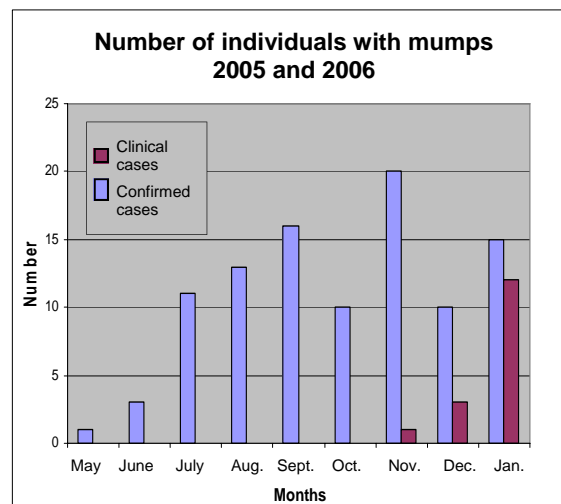
Fig. 3

VIRAL INFECTIONS IN JANUARY

Mumps. In January 2006, 15 individuals in Iceland were diagnosed serologically with mumps in addition to 12 clinically diagnosed cases. Six of the confirmed cases were individuals born after 1985 but it is not clear how many of those had been vaccinated. Mumps continues to spread despite the vaccination campaign that started in the beginning of December 2005. It is estimated that approximately 9,000 individuals have now been vaccinated.

Physicians are still encouraged to report all individuals diagnosed with mumps to the Chief Epidemiologist even if the diagnosis is not serologically confirmed.

Respiratory infections. In January 2006, the following respiratory viruses were diagnosed at the Landspítali - University Hospital Department of Virology (see table below).



Although the figures do not represent the actual number of patients suffering from respiratory infections, they indicate that RSV (*Respiratory syncytial virus*) and influenza were not widespread in January.

Influenza A	Parainfluenza 1	Parainfluenza 2	RSV	Adenovirus	Enterovirus
2	6	1	2	9	2

Mumps continues to spread despite the vaccination campaign that started in the beginning of December 2005.