



Sexually transmitted diseases

In the first nine months of 2019, 1315 people have been diagnosed with chlamydia infection, of whom 602 were males and 713 were women, 95 were diagnosed with gonorrhoea, 85 males and 10 women, 28 were diagnosed with syphilis, of whom 25 were males and 3 were women. During this period, 26 persons were diagnosed with HIV infection, 21 of whom were males and 5 were women, all of them foreigners, except one.

Chlamydia infection, which is the most common sexually transmitted disease (STD) in Iceland, is at a lower rate at

present compared to previous years. HIV infection is mainly diagnosed among foreigners, many of whom have a known HIV infection before coming to the country and are already being treated.

It is noteworthy that the incidence of gonorrhoea continues to increase and is still most commonly detected in Icelandic males (80%). The incidence of syphilis, however, has decreased somewhat over the summer months although the incidence is still high. As previously mentioned, these STDs are different from chlamydia in terms of

gender ratio as women form the majority of cases diagnosed with chlamydia. To achieve success in the fight against STDs, individuals need to be more careful in their sex life (reduce the number of sexual partners and use condoms) and seek medical advice immediately for suspected STDs, so that treatment can be started as soon as possible, thereby shortening the communicable period. In the near future, guidelines will be issued for healthcare professionals on the investigation and treatment of STDs.

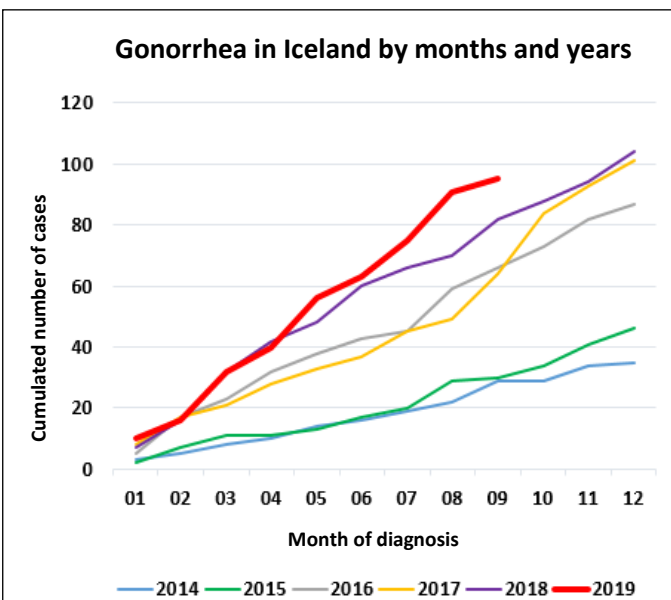


Fig. 1

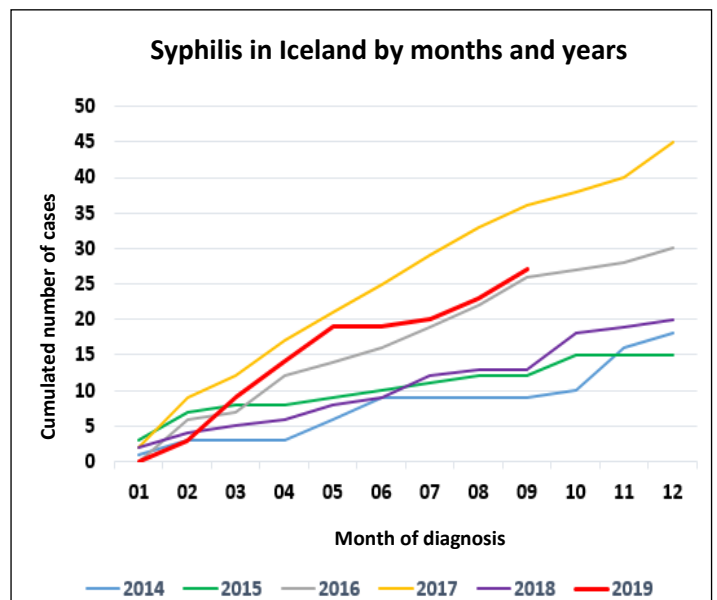


Fig. 2

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Hepatitis C

So far in 2019, an unusually high number of people have been diagnosed in Iceland with hepatitis C, or 72. Of these, about 22 are re-infected individuals who had previously been cured of the infection. Most of these are Icelandic citizens and the gender ratio is fairly equal. At the beginning of 2016, a three-year anti-hepatitis C treatment programme began in this country, seeking to find infected individuals and offer them treatment aimed at eradicating the infection. The vast majority of those diagnosed with hepatitis C have accepted the offered treatment, or about 730 individuals, most of whom have been cleared of the infection. At the beginning of the campaign, it was estimated that around 700 people were infected with hepatitis C, while today they are estimated to be around 60. However, the incidence of the disease (rate of newly diagnosed cases) has decreased slightly, whereas the number of re-infections has increased.

Figure 3 shows that the treatment programme that has been underway in Iceland in the last 3 to 4 years has significantly reduced the number of

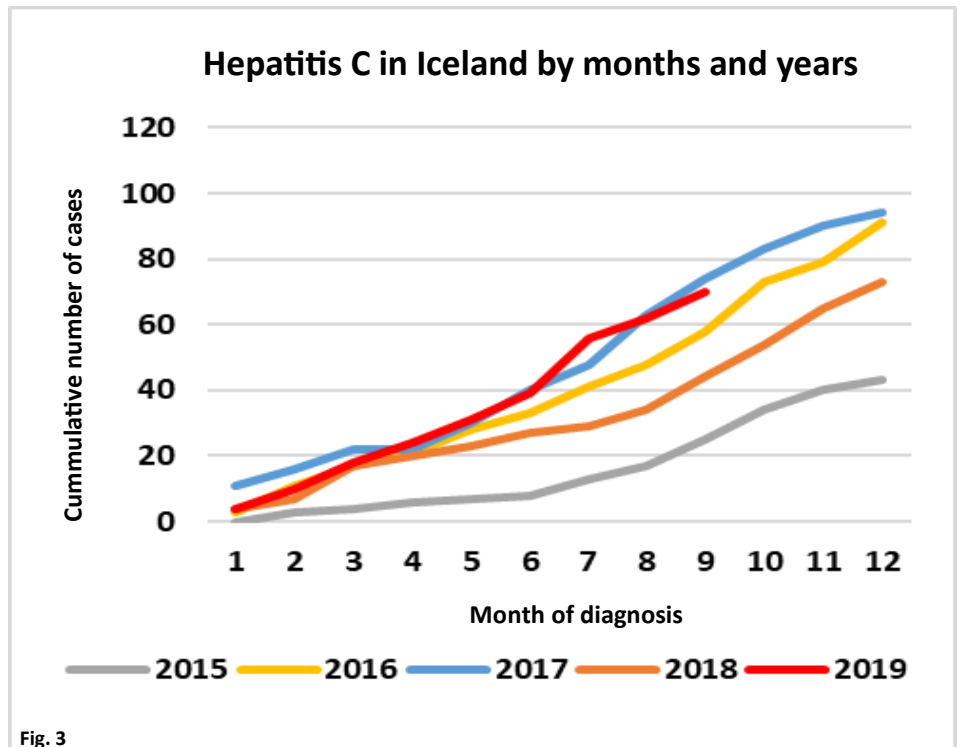


Fig. 3

infected individuals, but it also shows that it is difficult to reduce new infections and re-infections. Undoubtedly, the reason is that the number of intravenous (IV) drug users has expanded in recent years combined with the fact that the main transmission

route of hepatitis C infection is through contaminated syringes and needles. This suggests that preventative measures, such as education and the provision of needle exchange facilities for IV drug users, need to be strengthened.

Nordic conference on health preparedness



The Nordic countries have held annual conferences on their public health preparedness and exchanged information (in this field) ever since the 1980s. These countries have alternated the hosting of these annual conferences. When one such conference was

held in Svalbard on 10–13 September 2001, following the attacks on the New York Twin Towers, the Nordic health authorities decided to make this a formal partnership by establishing a health authority working group (the Svalbard Group), whose role was to

identify hazards and to propose joint actions and countermeasures against incidences related to radiation, biological agents and chemical accidents. The mutual support of the countries in these matters was to be considered. This agreement was signed by the Nordic

Ministers for Health and Social Affairs in Svolveær in Norway in 2002. Since the beginning, Icelanders have been involved in the work of the Svalbard Group and the Chief Epidemiologist has represented Iceland in the group on behalf of the Icelandic health authorities as well as a representative from Landspítali University Hospital. In recent years, societal incidents have also been on the group's task list.

This year, the annual Nordic public health preparedness conference was held here in Iceland, in Vík í Mýrdal, during 18–19 September 2019. The meeting was attended by representatives from all the Nordic countries, including Greenland and the Faroe Islands. The aim of the conference was to look at public health preparedness and response in small communities where resources are limited. About 60 people were invited to the conference and many from the staff of the Southern Iceland Institute of Health (HSU) attended. Representatives of the HSU gave presentations on the health care response to ash fall and earthquakes and traffic road accidents on the Icelandic

ring road. The Southern Iceland Police gave an account of the collaboration between the health services, the police and volunteers and representatives of the Red Cross and ICE-SAR (Landsbjörg), providing insight into the collaboration between the health services and volunteers in a civil protection situation. The Chief Epidemiologist gave a talk about the reaction to a Shiga toxin E. coli epidemic in the farm Efstidalur II in Southern Iceland and the health threats caused by climate change.

The Swedish representative also reported on how fake news of Ebola cases shook the Swedish health authorities. The Norwegians attended the conference in great numbers, and one of them gave a lecture on the Norwegian response to the difficulties posed by the cruise ship *Viking Sky* last March. Subsequently, a representative of the Coast Guard gave a presentation on preparedness on the coast of Iceland due to incidents at sea. The European Centre for Disease Prevention and Control (ECDC) was invited to

the Conference and a representative of the Centre reported on the work involved in preparing a handbook on preparedness and response to public health risks by local authorities. Subsequently, the municipality of Bláskógabyggð in Southern Iceland gave an account of the role of local authorities in times of an imminent or real public health risk as part of the project entitled Nordic Centre of Excellence on Resilience and Societal Security (NORD-RESS) that addresses risk assessment and endurance of societies, institutions and individuals.



From left: Sveinn Kristjan Runarsson, Björn Ingi Jonsson og Hermann Marino Maggyjaron. Members of the Southern Iceland police.



The above picture shows the participants in the Nordic conference on health preparedness, attended by representatives from Åland, Denmark, Finland, the Faroe islands, Greenland, Norway, Sweden and Iceland.

Outbreak of serious E. coli bacteria infections in children

During the period 13 to 16 July 2019, 24 individuals became infected with certain E. coli bacteria producing the toxin STEC. Of those infected, 22 were children (mean age four years) and five of them fell ill with haemolytic uremic syndrome (HUS), which is a serious disease. One of the children needed peritoneal dialysis for treatment.

Epidemiological research indicated that the infection could be traced to a farm in Southern Iceland (Efstadalur II) that offered tourists to mingle with animals as well as selling home-made ice cream. The germ in question was found in calves, soil and one farm worker. Various measures were taken in collaboration with the Southern Iceland Health Inspectorate and the Icelandic Food and Veterinary Authority. Ice production was temporarily stopped, animal contact was stopped, and all hygiene processes were overhauled and improved.

On Friday, September 20, residents of Efstadalur II met with representatives from the agencies that responded to the E. coli outbreak and reviewed the events that started when children began to become seriously ill after visiting the farm in June and July. Also invited to the meeting were representatives of the municipality of Bláskógabyggð, Auðhumla dairy company, and the civil protection district of Southern Iceland. The meeting was conducted according to the World Health Organization (WHO) methodology (After Action Review) and the meeting was

listed on the WHO information web site for a review.

STEC infections have been relatively rare in Iceland, but every year such sporadic infections are diagnosed, some of which are probably domestic. In 2007, an unusually high number of infections was detected in Iceland, which were assumed to have been transmitted through imported vegetables. The Icelandic Food and Veterinary Authority recently reported the presence of pathogenic bacteria in the



meat market in Iceland. The report revealed that STEC bacteria are found in 30% of lamb samples and 11.5% of beef samples. In addition, the bacteria can be found in unpasteurised milk. It is therefore imperative to be vigilant against these potential threats.

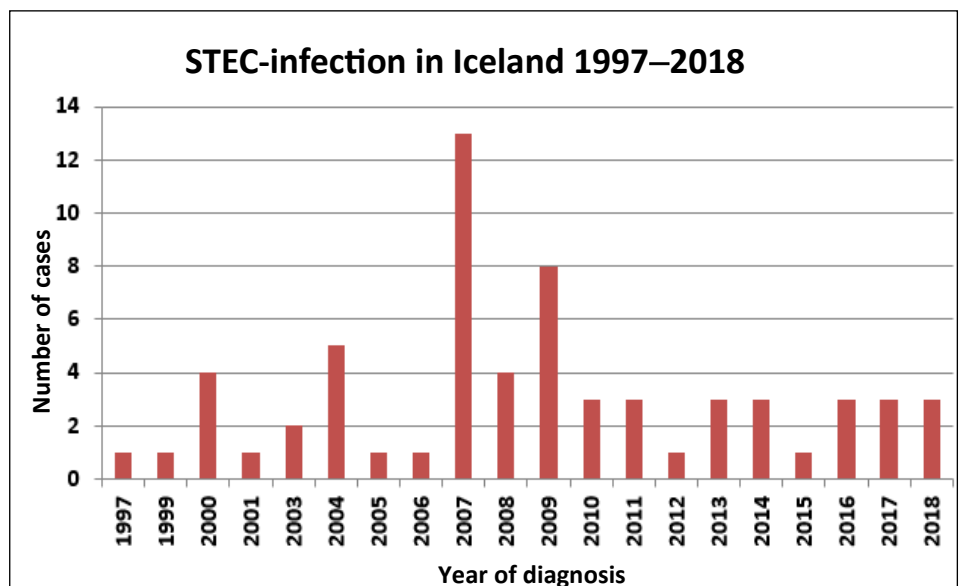


Fig. 4