



DIRECTORATE  
OF HEALTH

Chief Epidemiologist for Iceland

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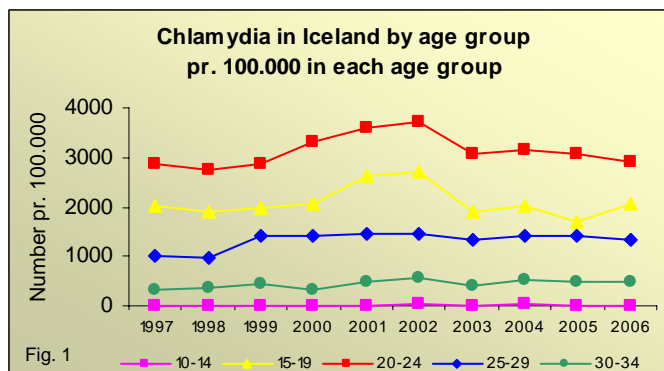
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## CHLAMYDIA CASES IN 2006

In 2006, a total of 1729 cases of chlamydia were diagnosed in Iceland, which is a slight increase compared with the previous year (cf. table). The infection was diagnosed more often among women than men and the sex ratio has remained more or less constant between years, cf. the table. Chlamydia was most prevalent in the age group 20–24 years, followed by those aged 15–19 years (fig. 1). The highest incidence of chlamydial infection occurred among people aged 18–19 years. From the age of 25 years, however, the incidence decreased again and became rarer with higher age.

| Year | Cases, total | Men (%) | Women (%) | Un-known (%) |
|------|--------------|---------|-----------|--------------|
| 1997 | 1586         | 37      | 61        | 2            |
| 1998 | 1549         | 37      | 60        | 3            |
| 1999 | 1687         | 38      | 60        | 2            |
| 2000 | 1819         | 37      | 60        | 3            |
| 2001 | 2123         | 37      | 60        | 3            |
| 2002 | 2088         | 34      | 63        | 3            |
| 2003 | 1638         | 37      | 59        | 4            |
| 2004 | 1735         | 37      | 59        | 4            |
| 2005 | 1622         | 38      | 58        | 4            |
| 2006 | 1729         | 38      | 59        | 3            |



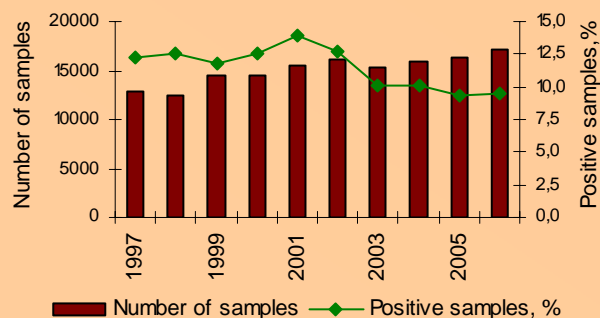
Two laboratories in Iceland, at the departments of clinical microbiology at the Landspítali University Hospital (LUH) and the Akureyri Regional Hospital, receive samples for diagnosing chlamydia, the majority of which are diagnosed at the LUH laboratory. The number of samples handled there has increased a little in the past four years while at the same time the percentage of positive diagnoses has decreased (fig. 2).

In the latter part of last year Sweden reported a new strain of the chlamydia bacterium which had been spreading in

Sweden without being detected by existing means of investigation. The LUH has initiated an investigation to examine whether this strain has spread to Iceland. A search for the new strain was conducted in over 1000 samples submitted for chlamydia diagnosis. About 10% of these samples were diagnosed with chlamydia, and less than

2% of the positive samples appear to belong to the new strain. The initial conclusions, therefore, indicate that the strain has not gained foothold in Iceland.

Fig. 2 Number of samples at the LUH laboratory and % of positive samples 1997–2006



*In 2006, a total of 1729 chlamydia cases were diagnosed in Iceland; the highest incidence was among people aged 18-19 years.*

## INFLUENZA AND RSV INFECTION THIS SEASON

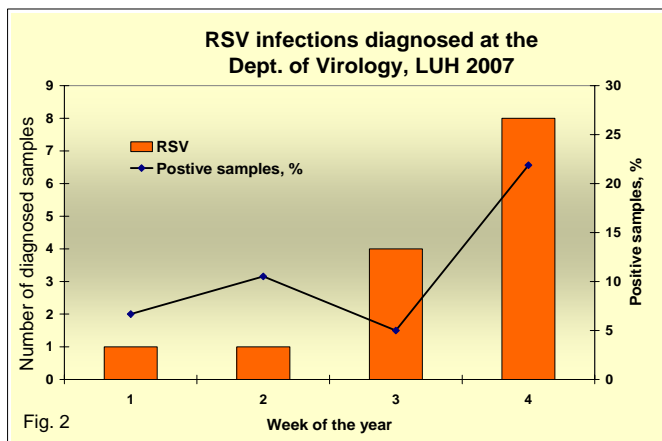
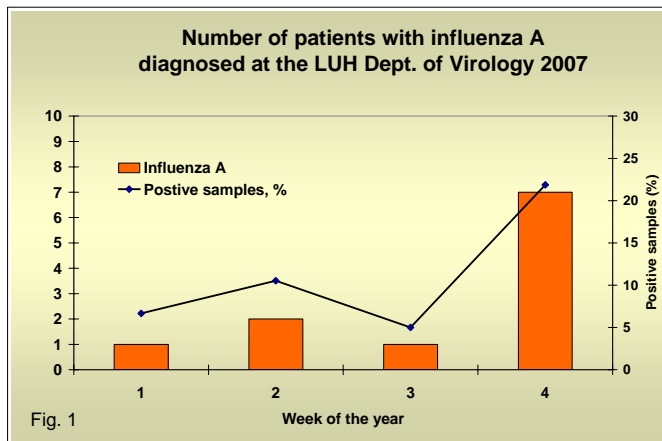
This season's influenza has been making a slow start in Europe and was hardly noticeable until towards the end of 2006. Up until now, influenza activity has been most pronounced in Northern Ireland, Scotland, Luxembourg, Spain and Switzerland. It peaked in Scotland in the second week of January 2007 and is now subsiding. By far the greatest number of influenza cases in Europe belong to strain A (98%), while only 2% are of strain B. At the moment, influenza is becoming more common in Southern France, Hungary and Romania.

Influenza activity in Iceland began in the first week of January of this year and has been on a gradual increase since then (fig. 1). The figure also reveals that a larger proportion of nasopharyngeal viral samples submitted for laboratory diagnosis is being diagnosed with the influenza virus, which up until now has exclusively been of the strain A H3N2.

### RSV infections

At the same time, there has been an increase in RSV (*respiratory syncytial virus*) infections (fig. 2). RSV can cause severe respiratory infections in infants that may lead to bron-

chitis, pneumonia and otitis media. A look at visits to the emergency unit of the Children's Hospital at the Landspítali University Hospital (LUH) reveals a great increase towards the end of January 2007 as compared with January 2006 (fig. 3). A corresponding increase in visits to the adult LUH emergency department has not been observed. This leads to the conclusion that so far this year, it is mainly children who are hit by RSV infections and possibly also by influenza.



*There was a great increase in visits to the LUH Children's Hospital towards the end of January 2007 as compared with January 2006.*

