



DIRECTORATE
OF HEALTH

CONTENTS:

Gonorrhoea cases still on the increase **p. 1**

Contract on a centralised vaccination registry **p. 2**

Editorial Board

Dr H. Briem,
Chief Epidemiologist
Ms A. St. Atladottir
Ms B. Laxdal
Ms G. Sigmundsdottir
Ms S. Haukdottir
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

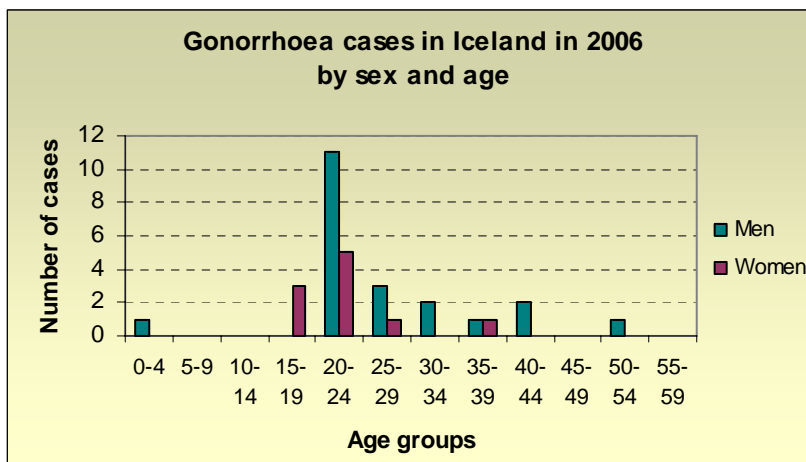
The contents of this newsletter may be reproduced provided that the source is quoted.

GONORRHOEA CASES STILL ON THE INCREASE

In 2006, a total of 31 cases of gonorrhoea were diagnosed at the Department of Clinical Microbiology of the University Landspítali Hospital (LUH), which is an increase as compared with the previous

different from previous years when practically every gonorrhoea case originated abroad.

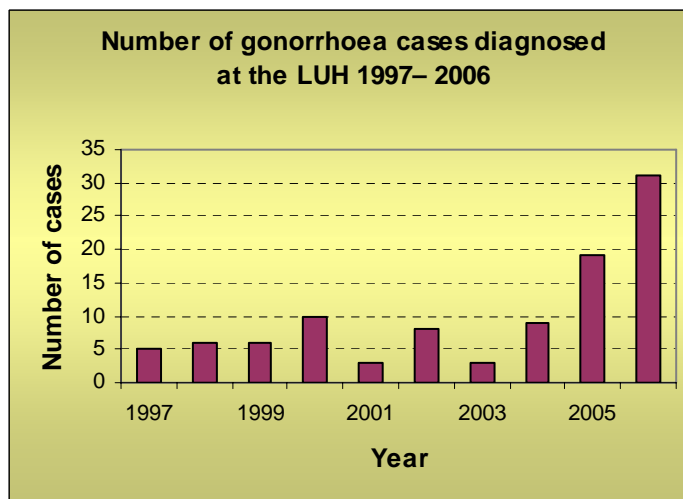
The main symptoms of gonorrhoea are



year. The infection is most often diagnosed in people aged 20–24 years, the majority of whom are men. Most cases come from the capital area, in all 26, while three cases are from Akranes, one is from the South of Iceland and another from the East of Iceland.

Most of the infected individuals (26) were diagnosed and treated at the Clinic for Sexually Transmitted Infections at the LUH, which is also responsible for contact tracing. Contact tracing is important in order to sever the routes of transmission. It entails identifying everyone at risk of having been infected and, in case of a potential infection, providing them with treatment. It appears that the majority of infections are of domestic origin, which is

abnormal vaginal/urethral discharge and dysuria, but it must be emphasised that women are more often asymptomatic than men. Furthermore, infertility is a known complication of the disease, particularly among women, and it is therefore of great importance to seek medical attention if there is any suspicion of an infection.



CONTRACT ON A CENTRALISED VACCINATION REGISTRY

It appears that the majority of infections are of domestic origin, which is different from previous years.

Health professionals can easily access information on previous vaccinations that an individual may have had.

According to the Communicable Diseases Act, the Chief Epidemiologist for Iceland is responsible for maintaining a centralised registry of all vaccinations performed in Iceland. The Act stipulates that the registry must include data on the individual being vaccinated, the vaccine injected, the date of vaccination, any complications resulting from the vaccination, and the reason for refusing to have a vaccination, in case of such a refusal.

The Chief Epidemiologist is under obligation to observe the same strict confidentiality regarding any personal information that may appear in the vaccination registry as applies to other patient records.

The advantages of keeping a centralised vaccination registry are chiefly the following:

- Accurate information on immunisation coverage.
- A reliable estimate of the risk of an outbreak of vaccine-preventable diseases in Iceland.
- Easy identification of individuals who have not been vaccinated and are at risk of contracting a vaccine-preventable disease.
- Health professionals can easily access information on previous vaccinations that an individual may have had.
- Individuals can get information on their previous vaccinations irrespective of where they were performed.



On 1 March 2007, a contract was signed between eMR Software, Inc., and the Chief Epidemiologist for Iceland on the Chief Epidemiologist's centralised vaccination data base, following a successful pilot project on the electronic transfer of vaccination data completed in 2005.

According to the contract earlier vaccination data on the Icelandic public will be electronically imported into the Chief Epidemiologist's data base, in addition to the simultaneous on-line transfer of vaccination data from health care institutions into the data base.

To begin with, the data base will be connected to all health care institutions in the country employing the Saga health data registration system. Thereby, in addition to submitting data into the data base, health professionals using the Saga system will also be able to retrieve information on earlier vaccinations of their clients from it. Similar connections with other health data registration systems are to follow. The strictest confidentiality will be observed in all handling of personal data.

It is expected that linking to all primary health care centres in the country, the Landspítali University Hospital and the Regional Hospital in Akureyri will be completed by the end of 2007.