

LONDON BOROUGH OF CAMDEN	WARDS: All
REPORT TITLE Health Protection Update from the Director of Public Health	
REPORT OF Director of Health and Wellbeing	
FOR SUBMISSION TO Health and Wellbeing Board	DATE 18 th December 2024
SUMMARY OF REPORT This report provides an update on health protection issues and epidemiology in Camden. Local Government Act 1972 – Access to Information No documents that require listing have been used in the preparation of this report. Contact Officer: Alison Quinn Senior Strategist Health Protection 5 Pancras Square N1C 4AG Alison.Quinn@Camden.gov.uk	
RECOMMENDATION The Health and Wellbeing Board is asked to note the contents of the report.	

Signed:



Kirsten Watters, Director of Health and Wellbeing

Date: 6th December 2024

1. Purpose of Report

An update on health protection issues and epidemiology in Camden.

2. Areas of Focus

Mpox

Mpox (formerly known as monkeypox) is a viral infection. There are 2 genetic groups of mpox virus (Clade I and Clade IIb), and infection can cause a high temperature, headache, flu-like symptoms, swollen glands in the neck, armpits and groin, and a skin rash with blisters, spots or ulcers. Transmission can occur through contact with lesions, body fluids (including sexual contact) or respiratory droplets, and contaminated material e.g. towels / bedding. Clade II mpox is associated with milder disease and it caused a global outbreak in 2022-23, including in the UK, that was primarily driven through sexual contact

Until recently Clade I Mpox had only been reported in five countries in Central Africa but there is now increasing transmission in several countries in east and central Africa. Travel-associated cases have also been reported in countries outside of the African continent, including 4 cases in the UK, all from the same household. These cases have completed their isolation period and have fully recovered. Their contacts have all been followed up by UKHSA. One additional case was detected in Leeds, unconnected to the 4 previous cases, and recently returned from Uganda - contacts of this case are also being followed up. The overall risk to the wider community remains low.

Winter Respiratory Viruses

As of the latest available data (25 Nov) influenza activity is increasing across multiple indicators - test positivity, hospital admissions and ICU admissions have all increased. RSV (Respiratory Syncytial virus) activity has also increased and was circulating at medium level of activity.

Norovirus (causes diarrhoea and vomiting)

Norovirus activity has remained high in recent weeks with a decrease noted around the time of the half-term school break followed by an increase again.

Measles

The numbers of measles cases have fallen steadily over the past few months but are still elevated compared to the number of cases reported prior to the declaration of a standard incident in January 2024. The measles incident has been reduced from a standard incident to routine incident following dynamic risk assessment on 12.11.24 and multi-agency IMT (Incident Management Team) has been stood down. Measles cases will continue to be managed in a dedicated measles cell by UKHSA (United Kingdom Health Security Agency) and management of cases will move from level 3 to level 2.

Pertussis (Whooping cough)

Pertussis is a disease that peaks every 3 to 5 years and infants are at highest risk of developing complications with pertussis. We saw a very large increase in the number of cases reported this year with cases peaking in May and cases have decreased since then back to baseline levels.

3. Finance Comments of the Executive Director Corporate Services

The Executive Director of Corporate Services has been consulted on the contents of the report and has no comments to add to the report

4. Legal Comments of the Borough Solicitor

The Health and Wellbeing Board was set up under the Health and Social Care Act 2012 and has a duty to encourage health and social care services to work in an integrated manner to advance the health and wellbeing of the people in its area. The Board is responsible for the joint strategic needs assessment (JSNA) and joint local health and wellbeing strategies (JLHWS) under s116 and 116A of the Local Government and Public Involvement in Health Act 2007. The statutory guidance in relation to JSNA and JLHWS states that the ICB, NHS CB and Local Authorities plans for commissioning services should be informed by the JSNA and JLHWS and if not, the relevant bodies should explain why. Local services should be based on the JSNA and take account of the JLHWS.

The Board should consider how the information in the report assists the Board in its functions.

5. Environmental Implications

There are no environmental implications to the contents of this report.

REPORT ENDS