



Issue date
23 February 2024

Distributed to:

Chief Executives
Directors of Clinical Governance
Director, Regulation and Compliance Unit

Action required by:

Chief Executives
Directors of Clinical Governance

We recommend you also inform:

Directors, Managers and Staff of:

- Emergency Departments
- Infectious Diseases
- PHU
- Nursing

Deadline for completion of action

26/02/2024

Expert Reference Group

Content reviewed by:

- Health Protection NSW

Clinical Excellence Commission

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Email: cec-recalls@health.nsw.gov.au

Internet Website:

<https://www.health.nsw.gov.au/sabs/Pages/default.aspx>

Intranet Website:

<https://internal.health.nsw.gov.au/quality/sabs/index.html>

Review date
February 2025

Updated: Clinician Alert - *Legionella pneumophila*

What is updated in this Safety Alert from SA001/24?

There have been three new confirmed cases of *Legionella pneumophila* who all spent time in areas surrounding Victoria Park. These cases are unrelated to the previous cluster in December 2023 – January 2024.

Situation

As of 20 February 2024, three confirmed cases of *Legionella pneumophila* with symptom onset between late January to early February 2024 have been recently notified. All cases spent time in areas surrounding Victoria Park, including parts of the University of Sydney Camperdown/Darlington Campus.

Background

Legionella pneumophila can contaminate air conditioning cooling towers, whirlpool spas, shower heads and other bodies of water. People outside may be exposed if they inhale aerosolised contaminated water.

The incubation period averages 5-6 days but may range from 2 to 10 days.

Assessment

Symptoms usually include fever, chills, cough, and shortness of breath. Cases may also have muscle aches, headache, fatigue, loss of appetite and diarrhoea.

It can be difficult to distinguish *Legionella pneumonia* from other types of pneumonia by symptoms alone. In adults, consider *Legionella* as a possible cause of pneumonia among other causes.

Clinical Recommendations

In patients presenting with an illness that is clinically compatible with *Legionella* infection, consider the following investigations:

1. Urinary antigen testing (for LP1 and LL)
2. Sputum culture
3. Atypical respiratory PCR (to detect legionella)
4. Atypical pneumonia serology (acute and convalescent sera)
5. Chest x-ray

Manage as per treatment guidelines for *Legionella pneumonia*.

- For patients with clinically consistent disease and/or epidemiological suspicion of pneumonia caused by *Legionella*, consider including treatment with appropriate antimicrobial cover e.g., azithromycin, ciprofloxacin or doxycycline.
- Refer to clinical guidelines or the relevant local specialty team for further advice on antimicrobial selection.

Required actions for the Local Health Districts/Networks

1. Distribute this Safety Alert to all relevant clinicians and clinical departments.
2. Include this Safety Alert in relevant handovers and safety huddles.
3. Confirm receipt and distribution of this Safety Alert within 72 hours to cec-recalls@health.nsw.gov.au