

INVASIVE MENINGOCOCCAL DISEASE (IMD), BACTERIAL/VIRAL MENINGITIS & *HAEMOPHILUS INFLUENZAE* INFECTIONS IN IRELAND

A REPORT BY THE HEALTH PROTECTION SURVEILLANCE CENTRE IN COLLABORATION WITH THE IRISH MENINGOCOCCAL AND MENINGITIS REFERENCE LABORATORY



Q2-2013

15th July 2013

Provisional Figures

Summary

Q2-2013

Twenty-six cases of invasive meningococcal disease (IMD) were notified in Q2-2013, two of which was reported to have died. No imported cases were reported in this quarter. There was one IMD related outbreak reported during this period.

Cases of bacterial meningitis by specified, notifiable diseases were also reported, consisting of 10 *Streptococcus pneumoniae* and one case each of *Streptococcus pyogenes* and tuberculosis. In addition, there were two cases of bacterial meningitis not otherwise specified (NOS) and 41 cases of viral meningitis (NOS) reported.

A total of seven cases of *Haemophilus influenzae* were reported during the second quarter of 2013, one of which was associated with meningitis and was not typed, the remaining six were non-typeable/non-capsulated. No deaths in association with *H. influenzae* infection were reported during Q2-2013.

Introduction

Meningococcal disease became a notifiable disease on the 1st January 2004 with the implementation of the Infectious Disease (Amendment) (No. 3) Regulations 2003 (SI No. 707 of 2003). Prior to this, it was notifiable under the category bacterial meningitis (including meningococcal septicaemia).

Most forms of bacterial meningitis are now notifiable under the specific disease pathogen name as listed in the legislation. For bacterial meningitis pathogens not listed, these forms of meningitis are notifiable under the disease termed 'bacterial meningitis (not otherwise specified)'. Since 1st January 2012, revised versions of the case definitions of meningococcal disease, bacterial and viral meningitis have come into effect and are detailed in the HPSC Case Definitions for Notifiable Diseases booklet on the HPSC website (www.hpsc.ie).

An enhanced surveillance system is in place for [IMD and other forms of bacterial meningitis](#). Details of this surveillance system are described in the meningococcal disease chapter of the HPSC

Annual Report 2005. In October 2000, the MenC conjugate vaccine was introduced in Ireland to the infant schedule at 2, 4 and 6 months. A catch-up campaign targeting those less than 23 years of age was also run at the time. An enhanced surveillance system is also in place for [Haemophilus influenzae \(invasive\) disease](#).

Data presented in this report were extracted from CIDR on 15th July 2013. **These figures are provisional.** Incidence rates for 2013 were calculated using 2011 Census of Population as denominator data.

Results

Meningococcal Disease (IMD)

IMD Cases by Serogroup & Case Classification

In Q2-2013, 26 cases of IMD were notified, 22 of which were attributable to serogroup B, one to serogroup Y and three for which no serogroup was identified. Of the 26 cases notified, 24 were classified as confirmed and two as possible (Table 1).

Table 1. Classification of IMD cases notified in Q2-2013

Case Classification	Invasive Meningococcal Disease					Total IMD
	Grp. B	Grp. C	Grp. W135	Grp. Y	No organism/serogroup detected	
Confirmed	22	0	0	1	1	24
Probable	0	0	0	0	0	0
Possible	0	0	0	0	2	2
Not specified	0	0	0	0	0	0
Total	22	0	0	1	3	26

In contrast, in the same quarter of the previous three years, 2010 to 2012, the average number of IMD cases was 37; for serogroup B it was 33.3 and for serogroup C it was 0.3 (Figure 1; Appendix 1). Over the same period of time, the average annual number of confirmed, probable and possible cases was 34.3, 0.3 and 2.3, respectively.

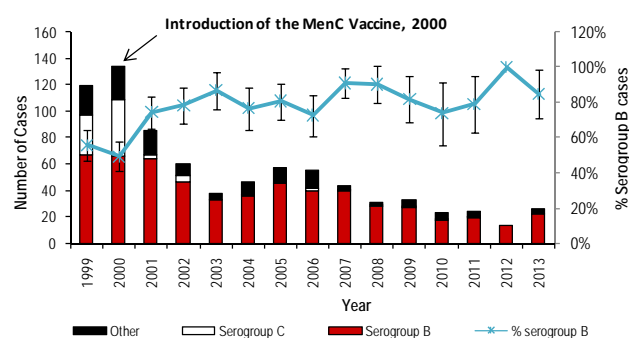


Figure 1. Number of IMD cases notified in Ireland by serogroup in Q2 of each year between 1999 and 2013 with percentage of annual cases attributable to serogroup B with 95% confidence intervals

In Q2-2013 serogroup B disease accounted for 84.6% (n=22/26) of all IMD notifications. In contrast, 81.7% (n=49/60) of all cases in the Q2 period of the previous three years, 2010 to 2012, were attributable to serogroup B (Figure 1, Appendix 1).

There were three confirmed cases reported on CIDR in Q2-2003 not included in the list of laboratory tested *N. meningitidis* isolates provided to the HPSC in July 2013 by the Irish Meningococcal and Meningitis Reference Laboratory: one was a non-serogrouped case in the West diagnosed by culture of a pus specimen from a sterile site; another was a serogroup B case in the East in a foreign-born national diagnosed by PCR of a CSF specimen; and the third case was also a serogroup B from the North-East diagnosed by both blood culture and CSF PCR.

IMD Trends & Outbreaks

There were twice as many IMD cases reported in Q2-2013 compared to Q2-2012. However, these Q2 figures are a continuation of a downward trend observed since 1999 (Appendix 1). IMD cases have fallen by 78.3% since Q2-1999 (Appendix 2). Since Q2-1999 the number of serogroup B cases has also declined by 67.1% (Appendix 1). Figure 2 presents the decline in IMD cases by serogroup and epidemiological year since 1999/2010.

There was one IMD related outbreak identified during Q2-2013. It involved six members of an extended family, the first member of which was reported back in March 2010 in HSE-E.

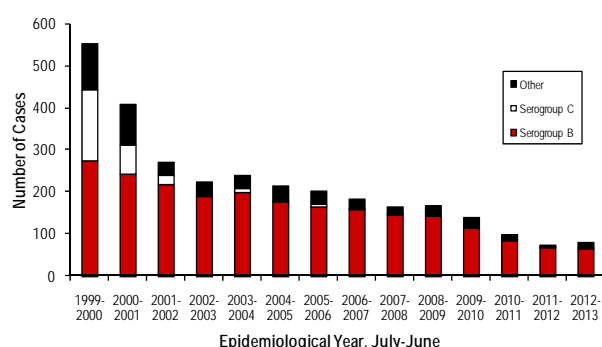


Figure 2. Number of IMD cases notified in Ireland by serogroup by epidemiological year, 1999-2000 to 2012-2013

IMD Cases by HSE Area and Age Group

The crude incidence rate in Q2-2013 was 0.6 cases per 100,000 population ranging from a low of 0.3/100,000 in HSE-MW to a high of 0.8/100,000 in HSE-SE (Appendix 3).

The burden of IMD disease is typically highest in the <1 year old age group and in Q2-2013 the incidence rate was 15.2 cases per 100,000 population. The next age group with the highest burden

of IMD disease was the 1-4 year age group (2.5 cases/100,000) (Appendix 4).

IMD associated deaths

Two IMD deaths were reported in Q2-2013 and both were attributable to serogroup B infections, one in an elderly adult aged 80-84 years and the other in an infant aged 7-12 months (Appendix 5). The number of Q2 deaths associated with IMD cases has fallen from seven in 2000 to two in 2013.

Other Forms of Bacterial Meningitis

Streptococcus pneumoniae meningitis

In Q2-2013, 10 cases of *S. pneumoniae* infection presenting as meningitis were notified with an age range of between one month and 85 years. Of these 10 cases, two had typing details reported, both of which were 7F strains and were unvaccinated, one was aged between 45-49 year and the other was <5 months old. The 7F strain is covered by the PCV13 vaccine. Of the remaining eight cases, the age range was two months to 85 years, three were unvaccinated, two were incompletely vaccinated and the vaccination status of the remaining three cases were unknown. Two deaths due to *S. pneumoniae* meningitis were reported in patients >65 years.

For further information on *Streptococcus pneumoniae* notifications please refer to the latest report available at <http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/PneumococcalDisease/SurveillanceReport> S.

Bacterial meningitis by other specified notifiable diseases (excluding *Haemophilus influenzae* and *S. pneumoniae*)

In Q2-2013, only two cases of bacterial meningitis by specified notifiable diseases were reported, one of which were attributable to *Streptococcus pyogenes* in a <5 years old child and one to tuberculosis (*Mycobacterium africanum*) in an adult aged 45-49 years (Appendix 6).

Bacterial meningitis (not otherwise specified)

Only two cases of bacterial meningitis due to pathogens not otherwise specified (NOS) under the Infectious Disease (Amendment) (No. 3) Regulations (S.I. No. 707 of 2003) were notified during Q2-2013. The causative organism was identified in one of these cases as *Escherichia coli*. The age range was between <1 month and 64 years. One case was classified as confirmed, and the other as probable (Appendix 6).

Viral Meningitis (Specified and Not Otherwise Specified)

There were no reported cases of viral meningitis by specified notifiable diseases during Q2-2013.

Forty-one viral meningitis notifications (NOS) (age range two weeks to 39 years) were reported in Q2-2013 compared to 40 in Q2-2012 and 48 in Q2-2011. In Q2-2013, 33 of the 41 cases (80.5%) had their causative organism identified: 24 enterovirus (serotypes not determined), eight cases of human herpes virus type 6 and one varicella zoster virus (Figure 3, Appendix 7).

The highest frequency of cases occurred in children <1 year of age (n=17/41; 41.5%) followed by adults aged ≥25 years (n=12/41; 29.3%). Of the 20 cases under 10 years of age reported in this quarter, 9 (45%) were attributable to enterovirus and eight (40%) to human herpes virus type 6 and three (15%) had no causative organism identified (figure 4). There were no viral meningitis (NOS) outbreaks reported during Q2-2013.

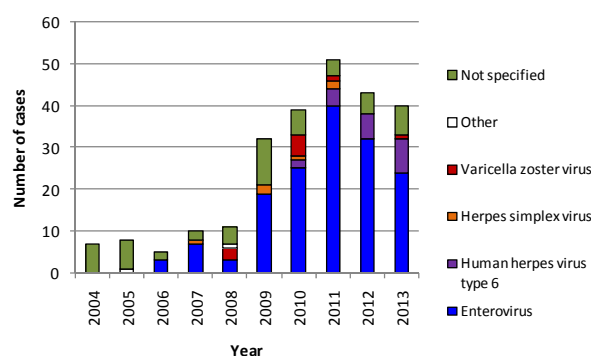


Figure 3. Number of viral meningitis (NOS) cases notified in Ireland by organism type in Quarter 2, 2004-2013

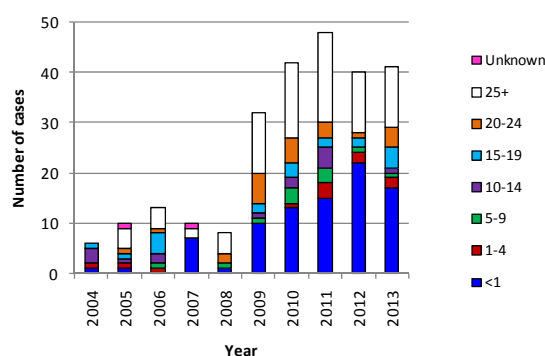


Figure 4. Number of viral meningitis (NOS) cases notified in Ireland by age group (years) in Quarter 2, 2004-2013

Haemophilus influenzae infections

H. influenzae Cases by Type, Case Classification

In Q2-2013, seven cases of invasive *H. influenzae* were notified in Ireland: six non-typeable/non-capsulated and one that was not typed. This compares to five and 16 cases in total in the same quarter in 2012 and 2011, respectively (Figure 5, Table 2, Appendices 8, 9). There were two confirmed cases reported on CIDR in Q2-2003 not included in the list of laboratory tested *H. influenzae* isolates provided to the HPSC in July 2013 by the Irish Meningococcal and Meningitis Reference Laboratory: one was a non-typeable case in the North-East diagnosed by a joint fluid culture and the other has not yet been typed from the Mid-West diagnosed by PCR of a CSF specimen. Appendices 10 and 11 give a breakdown of all Q2 cases notified since 2004 by HSE area and age group, respectively.

H. influenzae Deaths

No deaths from *H. influenzae* were reported in Q2-2013.

H. influenzae meningitis

One case of invasive *H. influenzae* causing meningitis was reported in Q2-2013 (Table 3, Appendix 9). No typing details were available at the time of writing. The case occurred in the Mid-West in an adult aged 20-24 years and was unvaccinated. The total number of cases of *H. influenzae* meningitis in Q2 of each year since 2004 is 11, five (45.5%) of which attributable to type b (Hib) infections.

H. influenzae type b (Hib)

A true vaccine failure (TVF) is the occurrence of invasive Hib infection in an individual, despite having been fully vaccinated against Hib disease in the past. No Hib cases were reported in Q2-2013. The last reported TVF was in Q4-2010 in a 10 year old child (Figure 6). The occurrence of only one true Hib vaccine failure in six years between Q3-2007 and Q2-2013 is an indication of the positive impact of the Hib immunisation catch-

up booster campaign launched in November 2005 (Figure 6). A routine Hib booster is now recommended for all children at 13 months of age. Ensuring high uptake of the Hib booster is recommended to provide continued protection of the population from invasive Hib disease.

Table 2. Number of *H. influenzae* cases notified in the second quarter of 2013, 2012 and 2011

Number of cases	Q2-2011	Q2-2012	Q2-2013
All <i>H. influenzae</i>	16	5	7
All <i>H. influenzae</i> <5yrs	5	0	1
All <i>H. influenzae</i> ≥65yrs	6	2	1
<i>H. influenzae</i> type b	1	0	0
<i>H. influenzae</i> type b <5yrs	0	0	0
<i>H. influenzae</i> type b ≥65yrs	1	0	0
<i>H. influenzae</i> non-typeable	12	4	6
<i>H. influenzae</i> non-typeable <5yrs	3	0	1
<i>H. influenzae</i> non-typeable ≥65yrs	4	2	1

Table 3. Number of *H. influenzae* cases by clinical diagnosis notified in the second quarter, 2013, 2012 and 2011

Number of cases	Q2-2011	Q2-2012	Q2-2013	Total	Total (%)
Bacteraemia (without focus)	2	1	0	3	10.7%
Cellulitis	1	0	0	1	3.6%
Epiglottitis	0	0	0	0	0%
Meningitis	1	0	1	2	7.10%
Meningitis & septicaemia	0	0	0	0	0%
Osteomyelitis	0	0	0	0	0%
Other	1	0	0	1	3.6%
Pneumonia	2	3	0	5	17.9%
Septic arthritis	0	0	0	0	0%
Septicaemia	5	1	1	7	25%
Clinical diagnosis not reported	4	0	5	9	32.1%
Total	16	5	7	28	100%

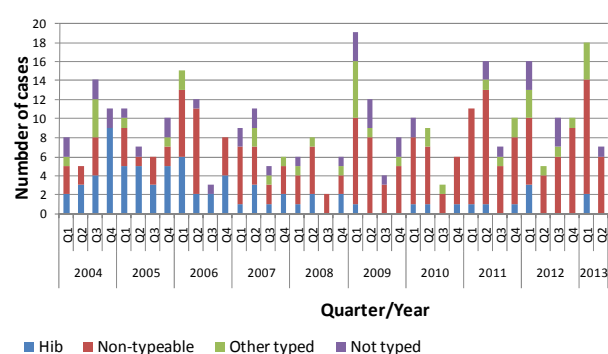


Figure 5. Quarterly number of invasive *H. influenzae* cases notified in Ireland by type, since 2004

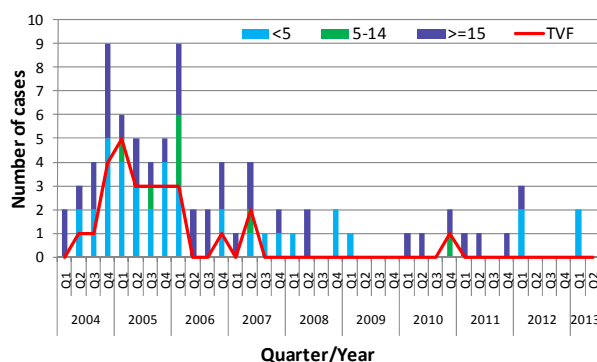


Figure 6. Quarterly number of Hib cases by age group and of true Hib vaccine failures (TVFs), since 2004

Non-typeable/non-capsulated *H. influenzae*

An emergence of non-typeable infections is evident: in 2004 the average quarterly number of non-typeable was 2.3 (95%CI -0.1, 4.6), increasing to 6.5 (95%CI 3.6, 9.4) in 2012.

In Q2-2013 the number of non-typeable cases was six, compared to an average of 7.3 cases in the same quarter between 2010 and 2012. Unlike Hib disease, non-typeable strains tend to occur more frequently in the ≥65 year old age group than in the <5 year old group (Figures 6, 7, Table 2).

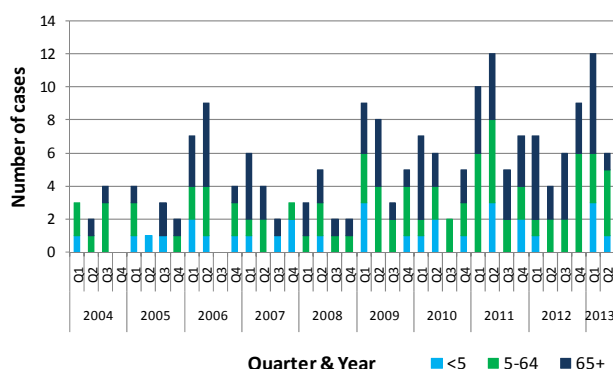


Figure 7. Quarterly number of non-typeable/non-capsulated cases by age group, since 2004

Notes regarding invasive *H. influenzae* notifications:

- Serotype should be determined for all isolates, regardless of patient age, and the results reported to HPSC.
- For all type b cases born since 1987, Hib vaccination status should be ascertained and the vaccine details reported to HPSC.
- On time Hib vaccinations (at 2, 4, 6 and 13 months of age) are strongly recommended to prevent unnecessary Hib disease occurring in children.
- An enhanced surveillance form should be completed for each notification. A copy is available at :

http://www.hpsc.ie/hpsc/A-Z/VaccinePreventable/Haemophilusinfluenzae/SurveillanceForms/File_1847.en.doc

Acknowledgements

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Appendices

Appendix 1. IMD Cases by Serogroup in Quarter 2, 1999- 2013

Serogroup	Q2-1999	Q2-2000	Q2-2001	Q2-2002	Q2-2003	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
Serogroup B	67	66	64	47	33	36	46	40	40	28	27	17	19	13	22
Serogroup C	30	43	3	4	0	1	0	2	1	1	1	1	1	0	0
Serogroup W135	0	0	1	2	0	0	2	1	0	0	0	0	1	0	0
Serogroup Y	1	1	0	1	0	1	2	1	0	0	2	0	0	0	1
Non-groupable (NG)	3	1	1	0	1	0	0	0	0	0	0	0	0	0	0
No organism detected	19	23	17	6	4	9	7	11	3	2	3	5	3	0	3
Total	120	134	86	60	38	47	57	55	44	31	33	23	24	13	26

Appendix 2. IMD Cases by Quarter, 1999- 2013

Quarter	1999	2000	2001	2002	2003	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	1999-2013 change
Q1	174	175	115	82	73	66	72	73	57	55	52	52	35	24	24	86.2%
Q2	120	134	86	60	38	47	57	55	44	31	33	23	24	13	26	78.3%
Q3	110	98	53	53	51	42	31	37	41	34	31	15	14	8	-	-
Q4	131	108	76	58	75	43	42	44	37	48	31	24	21	21	-	-
Total	535	515	330	253	237	198	202	209	179	168	147	114	94	66	50	-

Appendix 3. IMD Cases by HSE Area in Quarter 2, 1999-2013

HSE Area	Q2-1999	Q2-2000	Q2-2001	Q2-2002	Q2-2003	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013	Q2-2013 CIR*
HSE-E	55	63	31	25	10	13	11	19	17	6	10	6	9	4	10	0.62
HSE-M	6	10	3	5	2	4	11	7	0	4	2	2	0	0	2	0.71
HSE-MW	7	7	7	4	7	4	5	7	3	3	6	0	3	1	1	0.26
HSE-NE	9	6	2	4	5	2	3	5	7	5	3	5	3	4	2	0.45
HSE-NW	4	3	5	3	4	3	1	3	4	2	0	2	1	0	1	0.39
HSE-SE	15	15	15	8	7	9	7	2	2	3	4	3	4	2	4	0.80
HSE-S	18	21	14	8	3	10	14	7	6	6	6	5	3	1	4	0.60
HSE-W	6	9	9	3	0	2	5	5	5	2	2	0	1	1	2	0.45
Total	120	134	86	60	38	47	57	55	44	31	33	23	24	13	26	0.57

* CIR, crude incidence rate per 100,000

Appendix 4. IMD Cases by Age Group in Quarter 2, 1999-2013

Age Group (Yrs)	Q2-1999	Q2-2000	Q2-2001	Q2-2002	Q2-2003	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013	Q2-2013 CIR*
<1	40	25	24	11	10	13	13	9	13	10	10	8	8	2	11	15.19
1-4	36	46	26	22	15	20	20	25	16	10	9	8	7	7	7	2.47
5-9	16	19	8	11	4	3	5	6	2	2	1	2	1	0	2	0.62
10-14	12	13	6	7	2	2	6	4	2	0	1	1	0	0	1	0.33
15-19	9	22	9	4	2	6	5	4	6	2	5	1	3	2	2	0.71
20-24	5	4	9	2	1	1	2	1	0	2	2	0	0	0	1	0.34
25+	2	5	4	3	4	2	6	6	5	5	5	3	5	2	2	0.07
Total	120	134	86	60	38	47	57	55	44	31	33	23	24	13	26	0.57

* CIR, crude incidence rate per 100,000; Total includes two cases with unknown age details in 1999 and 2005

Appendix 5. Deaths associated with IMD by Serogroup in Quarter 2, 1999-2013

Serogroup	Q2-1999	Q2-2000	Q2-2001	Q2-2002	Q2-2003	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
Serogroup B	1	3	2	3	1	1	0	1	2	1	0	1	0	0	2
Serogroup C	0	4	0	0	0	0	0	0	0	0	0	0	0	0	0
Serogroup W135	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
Serogroup Y	0	0	0	0	0	0	1	0	0	0	0	0	0	0	0
Non-groupable (NG)	0	0	0	0	0	0	0	0	0	0	0	0	0	0	0
No organism detected	0	0	0	0	0	0	0	0	1	0	0	1	0	0	0
Total	1	7	2	3	1	1	1	1	3	1	0	2	0	0	2

Appendix 6. Other Bacterial Meningitis Cases by Causative Organism (Specified and Not Otherwise Specified) in Quarter 2, 2004-2013

Organism	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
<i>Leptospira spp.</i>	0	0	0	0	0	0	0	1	0	0
<i>Mycobacterium tuberculosis</i>	2	5	4	3	1	3	2	1	0	1
<i>Listeria spp.</i>	0	2	0	1	2	3	2	0	1	0
<i>Streptococcus agalactiae</i> *	1	0	2	2	0	3	2	3	0	0
<i>Streptococcus pneumoniae</i>	n/a	n/a	n/a	n/a	9	3	4	6	11	10
<i>Streptococcus pyogenes</i>	0	0	1	0	1	0	0	0	1	1
<i>Staphylococcus aureus</i>	0	1	1	0	1	1	3	0	0	0
<i>Proteus mirabilis</i>	0	0	0	0	0	0	0	0	1	0
<i>Streptococcus bovis biotype II/2</i>	0	0	0	0	0	1	0	0	0	0
<i>Escherichia coli</i>	0	0	0	0	2	0	0	1	1	1
<i>Pseudomonas aeruginosa</i>	0	1	0	0	0	0	0	0	0	0
Unknown	0	0	0	0	0	1	0	1	0	0
Not specified	7	4	7	7	1	4	6	4	4	1
Total	10	13	15	13	17	19	19	17	19	14

**Streptococcus agalactiae* < 90 days old only notifiable after 01/01/2012; n/a details of meningitis-related *S. pneumoniae* currently not available on CIDR for 2004-2007

Appendix 7. Viral Meningitis Cases, Not Otherwise Specified, by Causative Organism in Quarter 2, 2004-2013

Causative Organism	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
Enterovirus	0	0	3	7	3	19	25	40	32	24
Human herpes virus	0	0	0	0	0	0	2	4	6	8
Herpes simplex virus	0	0	0	1	0	2	1	2	0	0
Varicella virus	0	0	0	0	3	0	5	1	0	1
Echovirus	0	0	0	0	1	0	0	0	0	0
Coxsackievirus A	0	1	0	0	0	0	0	0	0	0
Not specified	6	9	10	2	1	11	9	1	2	8
Total	6	10	13	10	8	32	42	48	40	41

Appendix 8. *H. influenzae* Cases by Type in Quarter 2, 2004-2013

Type	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
b	3	5	2	3	2	0	1	1	0	0
e	0	0	0	0	0	1	0	1	0	0
f	0	0	0	2	1	0	2	0	1	0
Not type b	0	0	0	0	0	0	0	0	0	0
Non-typeable/non-capsulated	2	1	9	4	5	8	6	12	4	6
Not typed	0	1	1	2	0	3	0	2	0	1
Total	5	7	12	11	8	12	9	16	5	7

Appendix 9. *H. influenzae* Cases by Quarter 2004-2013

Quarter	2004	2005	2006	2007	2008	2009	2010	2011	2012	2013	2004-2013 change
1	8	11	15	9	6	19	8	11	16	18	125%
2	5	7	12	11	8	12	9	16	5	7	40%
3	14	6	3	5	2	4	3	7	10	-	-
4	11	10	8	6	6	8	6	10	10	-	-
Total	38	34	38	31	22	43	26	44	41	25	-
<i>Meningitis</i>	4	9	4	2	3	3	2	4	3	2	-
<i>Type b meningitis</i>	4	7	3	1	1	0	1	0	1	0	-

Appendix 10. *H. influenzae* Cases by HSE Area in Quarter 2, 1999-2013

HSE Area	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
HSE-E	1	4	4	4	3	1	2	8	0	0
HSE-M	0	1	1	0	0	1	1	1	0	1
HSE-MW	0	0	2	0	2	2	0	0	0	2
HSE-NE	0	0	1	0	0	0	1	3	1	2
HSE-NW	0	0	1	0	0	1	1	0	0	0
HSE-SE	3	0	1	3	1	2	1	2	3	0
HSE-S	1	0	2	1	1	5	3	0	0	2
HSE-W	0	2	0	3	1	0	0	2	1	0
Total	5	7	12	11	8	12	9	16	5	7

Appendix 11. *H. influenzae* Cases by Age Group in Quarter 2, 1999-2013

Age Group	Q2-2004	Q2-2005	Q2-2006	Q2-2007	Q2-2008	Q2-2009	Q2-2010	Q2-2011	Q2-2012	Q2-2013
0-5mo	0	0	0	0	0	0	2	1	0	0
6-11 mo	0	1	0	1	2	0	0	2	0	0
1-2 yrs	2	3	1	0	0	0	0	1	0	1
3-4 yrs	0	0	0	0	0	0	0	1	0	0
5-9 yrs	0	0	2	0	1	1	1	0	0	0
10-14 yrs	0	0	0	1	0	0	0	0	0	0
15-19 yrs	0	1	0	0	0	0	0	1	1	0
20-24 yrs	0	0	0	0	1	0	1	0	0	1
25-34 yrs	1	0	0	0	0	0	1	2	0	1
35-44 yrs	0	0	0	1	0	1	2	0	2	2
45-54 yrs	1	0	1	0	1	0	0	0	0	0
55-64 yrs	0	0	2	3	0	3	0	2	0	1
65+ yrs	1	2	6	5	3	7	2	6	2	1
Total	5	7	12	11	8	12	9	16	5	7