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Increases in Age-Group–Specific Injury Mortality — United States, 1999–2004

From 1979 to 1999, total injury mortality rates* declined overall in the United States, despite increases in suicide rates in the late 1980s and in homicide rates in the early 1990s (CDC, unpublished data, 2007). From 1999 to 2004, however, total injury mortality rates increased 5.5%, from 53.3 to 56.2 per 100,000 population, the first sustained increase in 25 years. To assess this increase, CDC analyzed the most recent data from the National Vital Statistics System (NVSS). This report summarizes the results of that analysis, which determined that U.S. mortality rates increased from 1999 to 2004 for unintentional injuries, suicides, and injuries of undetermined intent; homicide rates were stable. Among persons aged 45–54 years, the total injury mortality rate increased 24.5%, including an 87.0% increase in the mortality rate from unintentional poisoning (most commonly drug poisoning) and a 48.0% increase in suicide by hanging/suffocation. Among persons aged 20–29 years, the total injury mortality rate increased 7.7%, including a 92.5% increase in the death rate from unintentional poisoning and a 31.7% increase in suicide by hanging/suffocation. Parallel increases in multiple categories and mechanisms of injuries within these two age groups suggest an increase in one or more shared risk factors (e.g., drug abuse); prevention programs that focus on shared risk factors might help reduce deaths from injuries.

Mortality data on deaths among residents in the United States were obtained from death certificate information recorded by NVSS and accessed via the CDC WISQARS online database.† For this study, the total injury category included deaths from unintentional injury, suicide, homicide, injury of undetermined intent, legal intervention, and operations of war.§ Rates were age-adjusted to the 2000 standard U.S. population using bridged-race¶ population figures. Percentage changes from 1999 to 2004 in death rates by age group were calculated for the three most common injury categories, and correlations in age-group–specific changes among these categories were tested using Pearson correlation coefficients.

The analysis indicated that, overall in the United States, injury mortality increased 5.5% from 1999 to 2004. Unintentional injury mortality rates increased 6.6%, suicide increased 4.3%, and deaths from injury of undetermined intent increased 20.6%. Rates of homicide declined 2.0%, and rates of death by legal intervention declined 9.5% (Table 1). Increases in poisoning mortality accounted for 61.9% of the increase in unintentional injury, 28.0% of the increase in suicide, 81.2% of the increase in deaths

* Rates include deaths from unintentional injury, suicide, homicide, injury of undetermined intent, legal intervention, and operations of war.

† Available at http://www.cdc.gov/ncipc/wisqars/default.htm. Rates obtained via WISQARS can be different from those provided by the compressed mortality files of NVSS because updated population figures are used for WISQARS calculations.

§ Based on *International Classification of Diseases, Tenth Revision* codes for unintentional injury (V01–X59 and Y85–Y86), suicide (X60–X84, Y87.0, and *U03), homicide (X85–Y09, Y87.1, and *U01–*U02), undetermined intent (Y10–Y34,Y87.2, and Y89.9), legal intervention (Y35 and Y89.0), and operations of war (Y36).

¶ Information regarding bridged-race categories is available at http://www.cdc.gov/nchs/about/major/dvs/popbridge/popbridge.htm.

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from injury of undetermined intent, and 55.7% of the increase in total injury mortality.

The numbers of deaths by age group were sufficient to examine age-group–specific changes in death rates for the three most common injury categories: unintentional injury, suicide, and homicide. Increases in unintentional injury occurred among persons aged 20–64 years (Figure). Suicide increases occurred among persons aged 40–64 years. Homicide rates declined for all persons except those aged 25–34 and 45–54 years. For unintentional injury and homicide, rates declined for persons aged <20 years. For all three categories, rates generally declined for persons aged ≥65 years. The age-group–specific changes for suicide and homicide correlated in direction and magnitude with those for unintentional injury ($r = 0.62$, $p = 0.01$ for unintentional injury versus suicide; $r = 0.86$, $p<0.001$ for unintentional injury versus homicide). The correlation between suicide and homicide was not statistically significant ($r = 0.42$, $p = 0.10$).

Injury mechanisms were analyzed for the two age groups with the greatest percentage changes in injury mortality rates from 1999 to 2004: persons aged 20–29 years and persons aged 45–54 years (Figure). Among persons aged 20–29 years, the unintentional injury rate increased 12.1%, primarily the result of a 92.5% increase in the rate for poisoning deaths. The 1999 and 2004 suicide rates were similar for this age group; the rate for hanging/suffocation suicides increased 31.7%, but the rate for firearm suicides declined 13.2% (Table 2). In this age group, the increase in unintentional poisoning accounted for 54.0% of the 7.7% increase in the overall injury mortality rate.

Among persons aged 45–54 years, the unintentional injury rate increased 28.0% from 1999 to 2004, largely as the result of an 87.0% increase in the rate for poisoning deaths. The suicide rate increased 19.5% during the same period, largely as a result of increases of 23.7% in poisoning suicides and 48.0% in hanging/suffocation suicides (Table 2). In this age group, the increase in unintentional poisoning accounted for 51.6% of the 24.5% increase in the overall injury mortality rate.

Reported by: *L Paulozzi, MD, Div of Unintentional Injury Prevention; A Crosby, MD, Div of Violence Prevention; G Ryan, PhD, Office of Statistics and Programming, National Center for Injury Prevention and Control, CDC.*

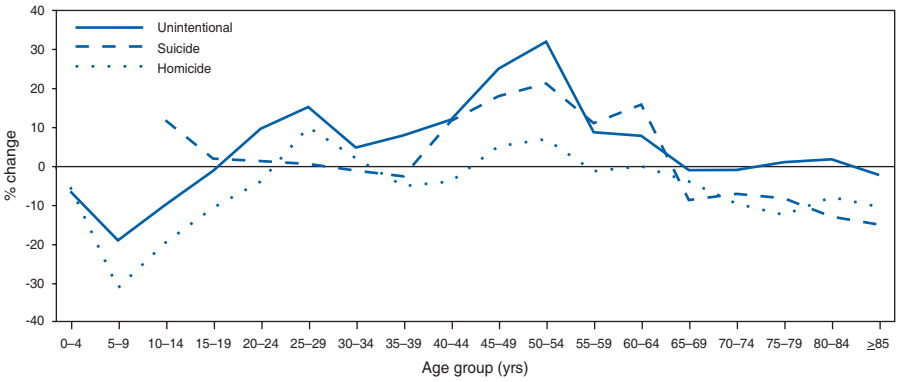
Editorial Note: The rate for unintentional injury deaths, the largest component of the total injury mortality rate, declined in the United States from 1979 until leveling in the late 1990s; the rate began to increase in 1999 (CDC, unpublished data, 2007). Findings in this report indicate the increase in the unintentional injury mortality rate since 1999 has been restricted to persons aged 20–64 years. From

TABLE 1. Injury mortality rates,* by category and most common mechanism — National Vital Statistics System (NVSS),† United States, 1999 and 2004

Category	Mechanism	1999 Rate	1999 No.	2004 Rate	2004 No.	Rate change %§
Unintentional	Motor-vehicle traffic	14.7	40,965	14.6	43,432	-0.1
	Poisoning	4.4	12,186	7.1	20,950	62.5
	Fall	4.8	13,162	6.2	18,807	28.9
	Total	**35.3**	**97,860**	**37.6**	**112,012**	**6.6**
Suicide	Firearm	6.0	16,599	5.6	16,750	-5.6
	Poisoning	1.8	4,893	2.0	5,800	10.8
	Hanging/suffocation	1.9	5,427	2.5	7,336	28.6
	Total	**10.5**	**29,199**	**10.9**	**32,439**	**4.3**
Homicide	Firearm	3.8	10,828	3.9	11,624	2.5
	Total	**6.0**	**16,889**	**5.9**	**17,357**	**-2.0**
Undetermined intent	Poisoning	0.9	2,595	1.2	3,455	26.6
	Total	**1.4**	**3,917**	**1.7**	**4,976**	**20.6**
Legal intervention	**Total**	**0.1**	**398**	**0.1**	**372**	**-9.5**
Total¶		**53.3**	**148,286**	**56.2**	**167,184**	**5.5**

* Per 100,000 population, age adjusted to 2000 U.S. standard population.
† NVSS rates obtained via the CDC WISQARS online database (available at http://www.cdc.gov/ncipc/wisqars/default.htm). Rates obtained via WISQARS can be slightly different from those provided by the compressed mortality files of NVSS because updated population figures are used for WISQARS calculations.
§ Calculated from rates expressed to four decimal places, before rounding.
¶ Total also includes operations of war.

FIGURE. Percentage change in injury mortality rates,* by category and age group — National Vital Statistics System (NVSS),† United States, 1999 versus 2004



* Per 100,000 population, age adjusted to 2000 U.S. standard population.
† NVSS rates obtained via the CDC WISQARS online database (available at http://www.cdc.gov/ncipc/wisqars/default.htm). Rates obtained via WISQARS can be slightly different from those provided by the compressed mortality files of NVSS because updated population figures are used for WISQARS calculations.

1999 to 2004, the greatest increases in death rates for unintentional injury, suicide, and homicide have occurred among persons aged 20–29 and 45–54 years. The parallel changes in these age groups across injury categories and injury mechanisms might be related to changes in one or more shared risk factors.

Increases in poisoning deaths were a common factor in the increases in death rates from unintentional injury, injury of undetermined intent, and suicide. Approximately 95% of poisoning deaths that are unintentional or of undetermined intent and 75% of poisoning suicides are caused by drug poisoning (CDC, unpublished data, 2007). Therefore, the increases in poisoning rates determined by this study represent increases in drug poisoning. The increase in drug poisoning mortality likely is related to an increase in drug abuse, especially prescription drug abuse, since 1999 (*1*,*2*). During 2002–2005, the illicit use of drugs other than marijuana by persons aged 18–25 years increased from 7.9% to 8.8%. Illicit use of such drugs did not increase for all persons aged ≥26 years, but did increase among persons aged 50–59 years, from 2.7% to 4.4% (*3*).

The reason that substantial increases in hanging/suffocation suicides occurred in both of the age groups examined is uncertain. However, in addition to resulting in poisoning deaths, drug use can contribute indirectly to deaths through other mechanisms. Because drugs have pharmacologic effects (e.g., impairing coordination and removing inhibitions against risky or aggressive behavior), drug use might have contributed to the observed age-group–specific increases in nonpoisoning suicide, homicide, and unintentional deaths from falls, motor-vehicle traffic, fire/burns, and choking/suffocation. Furthermore, the cost of illicit drugs places an economic burden on drug abusers that contributes to risk for suicide or involvement in violent crime, and the system for distribution of illicit drugs promotes interpersonal violence and risk for homicide (*4*).

Epidemiologic evidence suggests that drug abuse has had measurable effects on rates of violence in the United States. Homicide rates among persons aged 20–29 years peaked during the crack cocaine poisoning epidemic of the late 1980s and early 1990s (CDC, unpublished data, 2007). Increasing suicide rates among adolescents from the 1970s through the early 1990s coincided with their increased exposure to alcohol and other drugs (*5*). Both drug users and nonusers living with drug users have higher rates of suicide and homicide (*6*). Drug

users have rates of suicide and homicide 15–25 times those of the general population (*7*).

The findings in this report are subject to at least two limitations. First, death certificates do not record information regarding substance-abuse history or other risk factors (e.g., loss of social support or stressful life events) (*8*) that might have helped explain the increase in injury deaths from 1999 to 2004. Second, incorrect or incomplete information might result in misclassification of the intent of the deceased, especially when distinguishing between suicidal and unintentional drug poisoning.

Addressing the increase in total injury mortality in the United States will require concerted action by substance abuse, mental health, law enforcement, and public health agencies at local, state, and national levels. Integrated prevention programs that use various interventions (e.g., monitoring health behaviors, promoting help-seeking behavior, and enhancing availability of health and social support services), such as the U.S. Air Force suicide prevention program (*9*), might help reduce the number of deaths from unintentional injury, suicide, and homicide.

TABLE 2. Injury mortality rates* for persons aged 20–29 years and 45–54 years, by category and most common mechanism — National Vital Statistics System (NVSS),† United States, 1999 and 2004

Category	Mechanism	1999 Rate	1999 No.	2004 Rate	2004 No.	Rate change %§
Aged 20–29 yrs						
Unintentional	Motor-vehicle traffic	22.0	8,322	23.1	9,390	5.1
	Poisoning	4.3	1,656	8.3	3,363	92.5
	Drowning	1.3	500	1.2	490	-8.5
	Total	**33.8**	**12,849**	**37.9**	**15,395**	**12.1**
Suicide	Firearm	6.9	2632	6.0	2432	-13.2
	Hanging/suffocation	3.0	1,147	4.0	1,602	31.7
	Poisoning	1.4	550	1.5	586	1.4
	Total	**12.3**	**4,684**	**12.4**	**5,028**	**1.1**
Homicide	Firearm	10.9	4,125	11.4	4,612	4.5
	Cut/pierce	1.2	470	1.4	577	15.0
	Unspecified	0.5	195	0.6	246	18.9
	Total	**13.9**	**5,267**	**14.2**	**5,751**	**2.2**
Total¶		**61.8**	**23,497**	**66.5**	**26,996**	**7.7**
Aged 45–54 yrs						
Unintentional	Motor-vehicle traffic	13.1	4,799	14.6	6,088	11.5
	Poisoning	7.8	2,844	14.5	6,033	87.0
	Fall	2.3	824	2.8	1,184	26.2
	Fire/burn	1.0	377	1.2	504	17.5
	Choking/suffocation	1.0	374	1.1	468	9.8
	Total	**31.8**	**11,639**	**40.7**	**16,942**	**28.0**
Suicide	Firearm	7.3	2,677	8.0	3,349	10.0
	Poisoning	3.4	1,235	4.2	1,737	23.7
	Hanging/suffocation	2.0	732	3.0	1,231	48.0
	Total	**13.9**	**5,081**	**16.6**	**6,906**	**19.5**
Homicide	Firearm	2.4	893	2.6	1,062	4.7
	Cut/pierce	0.7	249	0.8	331	17.0
	Unspecified	0.5	198	0.7	301	33.7
	Total	**4.6**	**1,668**	**4.8**	**2,008**	**6.0**
Total¶		**52.6**	**19,233**	**65.4**	**27,216**	**24.5**

* Per 100,000 population, age adjusted to 2000 U.S. standard population.
† NVSS rates obtained via the CDC WISQARS online database (available at http://www.cdc.gov/ncipc/wisqars/default.htm). Rates obtained via WISQARS can be slightly different from those provided by the compressed mortality files of NVSS because updated population figures are used for WISQARS calculations.
§ Calculated from rates expressed to four decimal places, before rounding.
¶ Total also includes deaths of undetermined intent, from legal intervention, and from operations of war.

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Outbreak of Cutaneous Larva Migrans at a Children's Camp — Miami, Florida, 2006

On July 19, 2006, the director of a children's aquatic sports day camp notified the Miami–Dade County Health Department (MDCHD) of three campers who had received a diagnosis of cutaneous larva migrans (CLM), or "creeping eruption," a skin condition typically caused by dog or cat hookworm larvae of the genus *Ancylostoma* (*1*). MDCHD conducted an investigation to determine the source and magnitude of the outbreak and prevent additional illness. This report summarizes the results of that investigation, which identified exposure to cat feces in a playground sandbox as the likely source of infection. Although CLM outbreaks are reported rarely to the Florida Department of Health, evidence indicates that CLM is a potential health hazard in Florida (*2*). This disease cluster highlights the importance of appropriate environmental hygiene practices and education in preventing CLM.

The camp property, which is located in Miami, includes swimming pools and a main building, volleyball court, playground with a sandbox, picnic area, and beach for boating and swimming. The camp consisted of four, 2-week sessions held during June 5–July 28, 2006, and was divided into two programs: a half-day session for children aged 2–6 years, and a full-day session for children aged 5–15 years. Approximately 300 campers and 80 staff members attended each session.

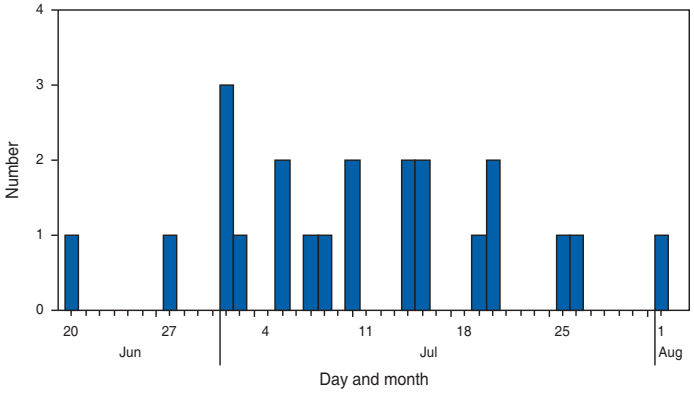
On July 20, camp administrators announced to all current campers, their parents, and staff members that three children had received CLM diagnoses. Parents were asked to look for various symptoms of infection, including a snake-shaped (serpiginous) red rash, itching, and pus-containing lesions. In addition, camp administrators provided information about CLM to the households of any other campers and staff members who attended sessions during the summer. MDCHD advised that persons with signs or symptoms seek medical care and contact the health department to make a report.

MDCHD received a total of 22 reports of persons (four staff members and 18 campers, including the three initial patients) with signs or symptoms of CLM. To identify cases, MDCHD staff members conducted telephone interviews of these persons by using a 60-item questionnaire that collected information regarding demographic variables, illness history, and activity history. A case was defined as illness consistent with CLM in a staff member or camper who attended the camp at any time during June 5–July 20, 2006, and had symptoms during June 5–August 20. All 22 persons who reported signs or symptoms met the case definition. Although no laboratory samples were obtained, all 22 patients had received a clinical diagnosis of CLM.

MDCHD conducted a descriptive, cross-sectional study of the 22 cases and an environmental health assessment of the camp property. Illness onset occurred during June 20–August 1 (Figure). The median age of campers was 4 years (range: 2–6 years); median age of staff members was 17 years (range: 16–19 years). Patients had signs and symptoms including erythema (100%), pruritic rashes (100%), serpiginous lesions (77.3%), changing location of rash or lesions (50.0%), blistering lesions (27.3%), and pus-containing lesions (18.2%). Lesions were noted on the buttocks (68.2%), feet (45.5%), legs (27.3%), hands (9.1%), groin (9.1%), and abdomen (4.5%). Nine (40.9%) of the patients had lesions in more than one location either during a single episode or during the course of the infection. All but two patients used a nonprescription topical ointment at home before seeking medical attention, and all 22 patients sought medical attention. MDCHD contacted every physician to confirm CLM diagnoses. Patients were treated with thiabendazole, mebendazole, albendazole, or ivermectin.

The mean length of time patients were at the camp was 3.7 weeks. Approximately 40.9% attended for 2 weeks, and 27.3% attended for ≥6 weeks. At the time interviews were conducted (July 19–September 2), six (27.3%) of the 22 patients were still attending the camp, and 18 (81.8%) were still experiencing symptoms. All 22 patients participated in the half-day camp for children aged 2–6 years. Although campers and staff members for both the half-day and full-day camps were exposed to sand from the beach and the volleyball court, only those in the half-day camp were allowed in the playground area, which included a sand-

FIGURE. Number of cases of cutaneous larva migrans (N = 22) linked to day camp outbreak, by date of onset — Miami, Florida, July 2006



box containing approximately 400 cubic feet of sand that had been placed in the box 2 years previously. Campers were in or around the sandbox for approximately 1 hour each day, and all campers wore bathing suits while in this area. Fourteen (63.7%) of the 22 who became ill did not wear shoes while sitting in the sandbox. Four (18.2%) of the persons reported seeing cats near the sandbox.

MDCHD investigators arrived at the site on July 19 to investigate the camp grounds and interview camp administrators. Camp administrators had sectioned off the sandbox already to prevent children from using the area; the camp director had researched CLM online and identified contaminated sandboxes as possible sources of infection. During their initial visit to the site, MDCHD investigators observed cats around the playground sandbox and noticed animal feces inside the sandbox; no fecal samples were collected. Interviews with the camp director revealed that general beach areas, to which all campers in both age groups were exposed, were frequented by dogs; therefore, the sand in general beach areas also was considered a possible source of exposure. Additional possible sources of exposure considered included 1) having pets at home (10 patients [45%]; eight dogs, one cat, one unknown); 2) being exposed to another nearby beach in the week before symptom onset (nine [41%]); and 3) sharing personal items such as towels or clothes with other campers (four [18%]).

After analyzing initial data collected during July 19–25, MDCHD suspected that the sandbox was the source of infection. Staff members inspected the camp again on July 26 and did not find feces in the sandbox for laboratory testing. Immediately after the July 26 inspection, sand in the sandbox was removed and replaced. Two feral cats were removed from the premises by animal control and euthanized; the cats were not tested for hookworm. MDCHD staff recommended to camp administrators that the sandbox be covered with a tarp when not in use to prevent fecal contamination and to change the sand regularly in accordance with American Academy of Pediatrics and American Public Health Association standards (*3*). Administrators also were advised to report stray animals to animal control for removal and to inspect the sandbox daily and remove feces to reduce the number of potentially infective larvae; larvae typically do not emerge from their eggs in ≤24 hours. After the interventions were implemented on July 26, three additional cases were reported through September 2; however, these persons might have been exposed before the interventions were in place.

Reported by: *E O'Connell, MPH, J Suarez, F Leguen, MD, G Zhang, MD, M Etienne, A Torrecilla, A Jimenez, MPH, F Farahi, MPH, M Alzugaray, D Rodriguez, MPH, Miami–Dade County Health Dept; S Pizano, DVM, Miami–Dade County Animal Svcs; C Blackmore, DVM, PhD, D Goodman, PhD, RS Hopkins, MD, P Ragan, PhD, Florida Dept of Health. J Schulte, DO, T Doyle, MPH, CDC.*

Editorial Note: CLM is caused by dermal contact with sand or soil contaminated with eggs that are shed in the feces of hookworm-infected animals. In a study of feral cats in Florida, 75% were infected with *Ancylostoma tubaeforme,* and 33% were infected with *Ancylostoma braziliense* (*2*); *A. braziliense* is the species most commonly associated with CLM in humans (*4*). Although no stool samples were obtained from the cats in this study, the sandbox was considered the likely source of infection because only campers and staff members who were exposed to the sandbox were infected, and cat feces were observed in that area. In addition, each morning before camp, staff members raked the sand, burying any visible feces, which likely spread fecal matter throughout the sandbox.

CLM outbreaks are more common in tropical or subtropical climates (*5*). Risk factors include contact with warm, moist, sandy soil and travel to an area where the disease is endemic (*6*). The larvae cannot complete their life cycle in a human host because they cannot penetrate the epidermal membrane of the skin; therefore, cutaneous infections usually resolve spontaneously within weeks or months, although disease duration as long as 55 weeks has been reported. Complications can include secondary bacterial infections, Löffler syndrome, and eosinophilic enteritis (*1*). In addition, pregnant women and children are at risk for complications from hookworm anemia.* CLM diagnosis usually is based on physical examination and activity history. Effective treatment is primarily with antihelminthic agents; other treatments include nitrogen cryotherapy. Orally administered albendazole or ivermectin or topically administered thiabendazole are the recommended therapies (*7*). However, both treatments can have side effects, such as nausea, diarrhea, anorexia, dizziness, headache, swelling of lymph nodes, and allergic reactions; safety of these drugs during pregnancy has not been established (*8*), placing increased importance on prevention (*9*).

Hookworm treatment for cats and dogs is the primary means for preventing CLM. Pet owners should take their animals to a veterinarian to be tested and treated for hookworms on a biannual or yearly basis (*10*). In addition, stray animals should be reported to animal control, and animal feces should be removed promptly from areas of human activity (*2*).

* Additional information available at http://www.cdc.gov/ncidod/dpd/parasites/hookworm/factsht_hookworm.htm and http://www.cdc.gov/ncidod/dpd/women.htm.

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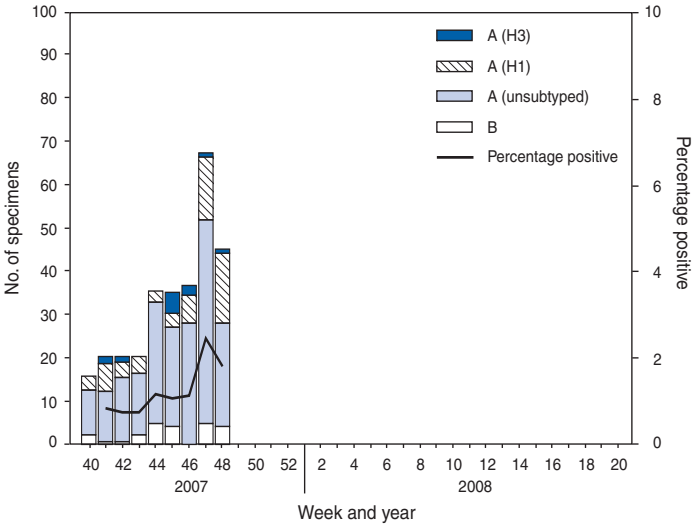
Update: Influenza Activity — United States, September 30–December 1, 2007

During September 30–December 1, 2007, influenza activity remained low in the United States. This report summarizes U.S. influenza activity* since September 30, the start of the 2007–08 influenza season (*1*).

Viral Surveillance

During September 30–December 1, 2007,† World Health Organization (WHO) and National Respiratory and Enteric Virus Surveillance System collaborating laboratories in the United States tested 24,897 respiratory specimens for influenza viruses, and 559 (2.2%) were positive (Figure 1). Of these, 515 (92%) were influenza A viruses, and 44 (8%) were influenza B viruses. One hundred thirty-five (26%) of the 515 influenza A viruses were subtyped; 112 (83%) of these were influenza A (H1) viruses, and 23 (17%) were influenza A (H3) viruses. Influenza virus–positive tests have been reported from the District of Columbia (DC) and 32 states in all nine surveillance regions since September 30.

FIGURE 1. Number* and percentage of respiratory specimens testing positive for influenza reported by World Health Organization and National Respiratory and Enteric Virus Surveillance System collaborating laboratories, by type, week, and year — United States, September 30–December 1, 2007



* N = 559 (of 24,897 tested).

Antigenic Characterization

WHO collaborating laboratories in the United States are requested to submit a subset of their influenza isolates to CDC for further antigenic characterization. Viral isolates are necessary for antigenic characterization. Many of the positive tests reported to CDC are from rapid antigen testing and, therefore, cannot be characterized further. Since September 30, 2007, U.S. laboratories have submitted approximately 80 influenza isolates for antigenic characterization, the majority of these during November 18–December 1. To date, CDC has antigenically characterized 27 influenza viruses; 19 (70%) of these were influenza A (H1) isolates, five (19%) were influenza A (H3) isolates, and three (11%) were influenza B isolates. Other isolates received since September 30 are being grown and characterized.

* The CDC influenza surveillance system collects five categories of information from 10 data sources. Viral surveillance: U.S. World Health Organization collaborating laboratories, the National Respiratory and Enteric Virus Surveillance System, and novel influenza A virus case reporting. Outpatient illness surveillance: U.S. Influenza Sentinel Provider Surveillance Network and the U.S. Department of Veterans Affairs/U.S. Department of Defense BioSense Outpatient Surveillance System. Mortality: 122 Cities Mortality Reporting System and influenza-associated pediatric mortality reports. Hospitalizations: Emerging Infections Program and New Vaccine Surveillance Network. Summary of geographic spread of influenza: state and territorial epidemiologist reports.

† As of December 1, 2007, reporting is incomplete.

All of the 19 influenza A (H1) viruses were A/Solomon Islands/3/2006-like, a recent antigenic variant of A/New Caledonia/20/99 and the strain recommended by WHO as the influenza A (H1) component for both the 2007–08 Northern Hemisphere influenza vaccine and the 2008 Southern Hemisphere influenza vaccine. Two influenza A (H3) isolates were A/Wisconsin/67/2005-like, the strain included in the 2007–08 Northern Hemisphere vaccine formulation. Three influenza A (H3) isolates were antigenically similar to A/Brisbane/10/2007, the strain recommended as the 2008 A (H3) component of influenza vaccines for the Southern Hemisphere.

Each of the three influenza B viruses characterized belongs to the B/Yamagata/16/88 lineage. Influenza B viruses currently circulating worldwide can be divided into two antigenically distinct lineages represented by the B/Yamagata/16/88 and B/Victoria/02/87 viruses. The recommended influenza B component for the 2007–08 influenza vaccine is a B/Malaysia/2506/2004-like virus, belonging to the B/Victoria lineage.

Novel Influenza A Viruses

One case of novel influenza A infection was reported from Michigan during the week ending November 3, 2007; a child aged 18 months was infected with swine influenza A (H1N2) virus in August 2007 after attending an agricultural event where swine were exhibited. The child walked through a barn containing pigs but was reported to have had no direct contact with the animals. The child recovered from the illness; no contacts of the child were reported to be ill.

Outpatient Illness Surveillance

Since September 30, 2007, weekly percentages of outpatient visits for influenza-like illness (ILI)[§] reported by approximately 1,300 U.S. sentinel providers in 50 states, New York City, Chicago, and DC have ranged from 0.9% to 1.6%. Weekly percentages of outpatient visits for acute respiratory illness (ARI)[¶] reported by approximately 800 U.S. Department of Veterans Affairs (VA) BioSense outpatient treatment facilities and 350 U.S. Department of Defense (DoD) BioSense[**] outpatient treatment facilities have ranged from 1.8% to 2.4%. During the week ending December 1, approximately 1.6% of outpatient visits through the U.S. sentinel providers were attributed to ILI, and 2.4% of outpatient visits to the VA and DoD BioSense facilities were attributed to ARI, both of which are below the respective national baselines of 2.2%[††] and 3.2%[§§] (Figure 2). For the week ending December 1, all nine regions reported percentages of outpatient visits for ARI below their respective region-specific baselines. ARI data from the VA and DoD BioSense facilities also are analyzed

[§] Defined as a temperature of ≥100.0°F (≥37.8°C), oral or equivalent, and cough and/or sore throat, in the absence of a known cause other than influenza.

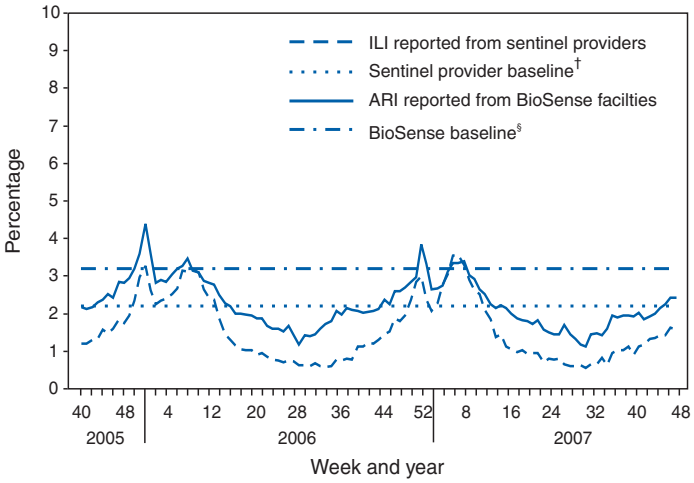
[¶] Based on *International Classification of Diseases, Ninth Revision* codes for ARI: 460–66 and 480–88.

[**] BioSense is a national surveillance system that receives, analyzes, and evaluates health data from multiple sources, including 1) approximately 1,150 VA/DoD hospitals and ambulatory-care clinics; 2) multihospital systems, local hospitals, and state and regional syndromic surveillance systems in 37 states; and 3) Laboratory Corporation of America (LabCorp) test orders.

[††] The national and regional baselines are the mean percentage of visits for ILI during noninfluenza weeks for the previous three seasons plus two standard deviations. A noninfluenza week is a week during which <10% of specimens tested positive for influenza. National and regional percentages of patient visits for ILI are weighted on the basis of state population. Use of the national baseline for regional data is not appropriate.

[§§] The national, regional, and age-specific baselines are the mean percentage of visits for ARI during noninfluenza weeks for the previous three seasons plus two standard deviations. A noninfluenza week is a week during which <10% of specimens tested positive for influenza. Use of the national baseline for regional data is not appropriate.

FIGURE 2. Percentage of outpatient visits for influenza-like illness (ILI) and acute respiratory illness (ARI) reported by the Sentinel Provider Surveillance Network and the U.S. Department of Veterans Affairs/U.S. Department of Defense BioSense Outpatient Surveillance System, by week and year — United States, 2005–06, 2006–07, and 2007–08 influenza seasons*



* As of December 1, 2007.

† The national and regional baselines are the mean percentage of visits for ILI during noninfluenza weeks for the previous three seasons plus two standard deviations. A noninfluenza week is a week during which <10% of specimens tested positive for influenza. National and regional percentages of patient visits for ILI are weighted on the basis of state population. Use of the national baseline for regional data is not appropriate.

§ The national and regional baselines are the mean percentage of visits for ARI during noninfluenza weeks for the previous three seasons plus two standard deviations. A noninfluenza week is a week during which <10% of specimens tested positive for influenza. Use of the national baseline for regional data is not appropriate.

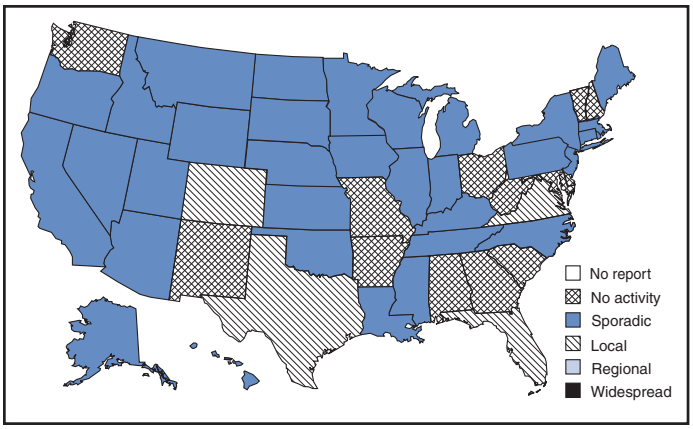
by age groups (0–4 years, 5–17 years, 18–49 years, 50–64 years, and ≥65 years). The percentages of outpatient visits for ARI for all five age groups were below their respective age-specific baselines.

State-Specific Activity Levels

For the week ending December 1, 2007, influenza activity[¶¶] was reported as local in four states (Colorado, Florida, Texas, and Virginia) and as sporadic in 33 states and DC (Figure 3). Thirteen states reported no activity. To date, no states have reported regional or widespread influenza activity this season.

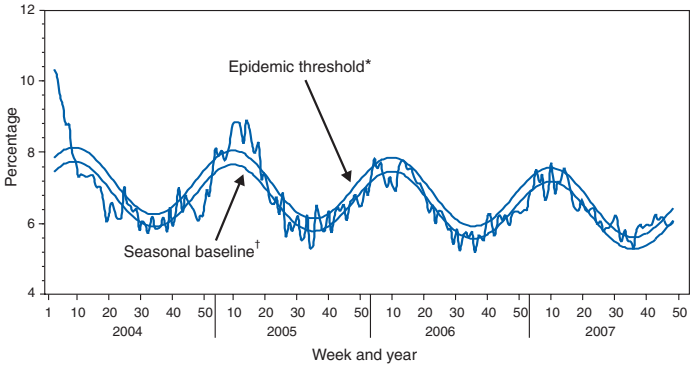
[¶¶] Levels of activity are 1) *no activity*; 2) *sporadic*: isolated laboratory-confirmed influenza cases or a laboratory-confirmed outbreak in one institution, with no increase in activity; 3) *local*: increased ILI, or at least two institutional outbreaks (ILI or laboratory-confirmed influenza) in one region with recent laboratory evidence of influenza in that region; virus activity no greater than sporadic in other regions; 4) *regional*: increased ILI activity or institutional outbreaks (ILI or laboratory-confirmed influenza) in at least two but less than half of the regions in the state with recent laboratory evidence of influenza in those regions; and 5) *widespread*: increased ILI activity or institutional outbreaks (ILI or laboratory-confirmed influenza) in at least half the regions in the state with recent laboratory evidence of influenza in the state.

FIGURE 3. Estimated influenza activity levels reported by state epidemiologists, by state and level of activity* — United States, week ending December 1, 2007



* Levels of activity are 1) *no activity*; 2) *sporadic*: isolated laboratory-confirmed influenza cases or a laboratory-confirmed outbreak in one institution, with no increase in activity; 3) *local*: increased influenza-like illness (ILI), or at least two institutional outbreaks (ILI or laboratory-confirmed influenza) in one region with recent laboratory evidence of influenza in that region; virus activity no greater than sporadic in other regions; 4) *regional*: increased ILI activity or institutional outbreaks (ILI or laboratory-confirmed influenza) in at least two but less than half of the regions in the state with recent laboratory evidence of influenza in those regions; and 5) *widespread*: increased ILI activity or institutional outbreaks (ILI or laboratory-confirmed influenza) in at least half the regions in the state with recent laboratory evidence of influenza in the state.

FIGURE 4. Percentage of all deaths attributed to pneumonia and influenza (P&I) reported by the 122 Cities Mortality Reporting System, by week and year — United States, 2004–2007



* The epidemic threshold is 1.645 standard deviations above the seasonal baseline.
† The seasonal baseline is projected using a robust regression procedure that applies a periodic regression model to the observed percentage of deaths from P&I during the preceding 5 years.

Pneumonia- and Influenza-Related Mortality

For the week ending December 1, 2007, pneumonia and influenza (P&I) was listed as an underlying or contributing cause of death for 6.1% of all deaths reported through the 122 Cities Mortality Reporting System (Figure 4). This percentage is below the epidemic threshold of 6.4% for that period. During the 2007–08 influenza season, the weekly percentage of deaths attributed to P&I has ranged from 5.7% to 6.1%. The percentage of deaths attributed to P&I exceeded the epidemic threshold for 3 consecutive weeks during September 30–October 20 but has remained below the epidemic threshold since the week ending October 27.[***]

[***] The seasonal baseline proportion of P&I deaths is projected using a robust regression procedure in which a periodic regression model is applied to the observed percentage of deaths from P&I that were reported by the 122 Cities Mortality Reporting System during the preceding 5 years. The epidemic threshold is 1.645 standard deviations above the seasonal baseline.

[†††] NVSN conducts surveillance in Monroe County, New York; Hamilton County, Ohio; and Davidson County, Tennessee. NVSN provides population-based estimates of laboratory-confirmed influenza hospitalization rates in children aged <5 years admitted to NVSN hospitals with fever or respiratory symptoms. Children are prospectively enrolled, and respiratory samples are collected and tested by viral culture and reverse transcription–polymerase chain reaction (RT-PCR). EIP conducts surveillance in 60 counties associated with 12 metropolitan areas: San Francisco, California; Denver, Colorado; New Haven, Connecticut; Atlanta, Georgia; Baltimore, Maryland; Minneapolis/St. Paul, Minnesota; Albuquerque, New Mexico; Las Cruces, New Mexico; Albany, New York; Rochester, New York; Portland, Oregon; and Nashville, Tennessee. EIP conducts surveillance for laboratory-confirmed, influenza-related hospitalizations in persons aged <18 years. Hospital laboratory and admission databases and infection-control logs are reviewed to identify children with a positive influenza test (i.e., viral culture, direct fluorescent antibody assays, RT-PCR, or a commercial rapid antigen test) from testing conducted as a part of their routine care.

Influenza-Associated Pediatric Hospitalizations

Pediatric hospitalizations associated with laboratory-confirmed influenza infections are monitored by two population-based surveillance networks, the Emerging Infections Program (EIP) and the New Vaccine Surveillance Network (NVSN).[†††] To date, no influenza-associated pediatric hospitalizations have been reported from NVSN this season. During September 30–November 24, 2007, the preliminary laboratory-confirmed influenza-associated hospitalization rate reported by EIP for children was within the expected range for this time of year. For children aged 0–17 years, the influenza-associated hospitalization rate was 0.006 per 10,000. For children aged 0–4 years and 5–17 years, the rates were 0.01 and 0.003 per 10,000, respectively.

Influenza-Related Pediatric Mortality

One influenza-associated pediatric death occurring during the 2007–08 season has been reported to CDC through the National Notifiable Diseases Surveillance System. The death occurred in Texas during the week ending November 10, 2007, and was reported to CDC during the week ending December 1.

Reported by: *WHO Collaborating Center for Surveillance, Epidemiology, and Control of Influenza. M Patton, L Blanton, MPH, L Brammer, MPH, A Budd, MPH, T Wallis, MS, D Shay, MD, J Bresee, MD, A Klimov, PhD, N Cox, PhD, Influenza Div, National Center for Immunization and Respiratory Diseases, CDC.*

Editorial Note: During September 30–December 1, 2007, the United States experienced a low level of influenza activity typical for this time of year. Influenza seasons can vary substantially in terms of timing and pattern of onset, peak, decline, and overall severity. Although influenza activity has peaked as early as November, February has been the peak month in 11 of the past 20 years. Influenza activity for the 2007–08 season thus far is similar to that observed for the same period during the past 5 years, with the exception of the 2003–04 season, which began unusually early. To date, no states have reported regional or widespread activity for the 2007–08 season. For the same period during the past 5 years, with the exception of the 2003–04 season, the number of states reporting regional or widespread activity ranged from zero to six. Similarly, no surveillance system components during the same period have indicated influenza activity above baseline levels, except during the 2003–04 season.

P&I mortality exceeded threshold levels for the first 3 weeks of this season (September 30–October 27) and for the 4 weeks before the start of the season (September 2–29), but has remained below the epidemic threshold since the week ending October 27. During the weeks when the P&I baseline was exceeded, no increase in influenza activity was detected in any other surveillance component. Both national and regional percentages of deaths attributed to P&I during those 7 weeks were similar to the percentages reported for the same period during the previous year. The baseline percentage of P&I deaths is projected for the current season based on P&I data from the previous 5 years. Because the 5-year period used to project the 2007–08 season baseline included three mild seasons, the elevation might be an artifact of a low baseline. CDC will continue to closely monitor trends in P&I mortality.

In 2007, human infection with a novel influenza A virus, including swine influenza viruses, became a nationally notifiable condition. One case of human infection with swine influenza virus has been reported in the United States since September 30, 2007. Although human infection with swine influenza viruses is uncommon, sporadic cases can occur, usually among persons in direct contact with ill pigs or who have been in places where pigs have been present (e.g., agricultural fairs or farms). Clinicians should consider swine influenza A in the differential diagnosis of patients with ILI who have had recent contact with pigs. The sporadic cases identified in recent years have not resulted in sustained human-to-human transmission or community outbreaks. However, human infections with swine influenza viruses or any other nonhuman or novel influenza virus should be identified quickly and investigated to determine possible sources of exposure, identify additional cases, and evaluate the possibility of human-to-human transmission because transmission patterns might change with variations in swine influenza viruses.

Vaccination is the best method for prevention of influenza and its potentially severe complications. Influenza vaccine should be administered to any person who wants to reduce the likelihood of becoming ill with influenza or transmitting influenza to others. Annual influenza vaccination, as recommended by the Advisory Committee on Immunization Practices (ACIP) (*2*), is targeted toward persons at increased risk for influenza-related complications and severe disease (e.g., children aged 6–59 months, pregnant women, persons aged ≥50 years, and persons aged 5–49 years with certain chronic medical conditions) and their close contacts (e.g., health-care workers and household contacts of persons at increased risk, including contacts of children aged <6 months) (*2*). In addition, all children aged 6 months–9 years who have not been vaccinated previously at any time should receive 2 doses of influenza vaccine, and

those who only received 1 dose in their first year should receive 2 doses in the following year (*2*).

To maximize the benefit from vaccination, persons should be vaccinated before increases of influenza activity occur in their community. Because influenza activity remains low in all parts of the United States and does not typically peak until January or later, persons not yet vaccinated should get vaccinated and vaccine providers should continue to encourage vaccination in December and beyond (*2*).

Given the low levels of influenza activity in the United States this season, few virus samples are yet available for antigenic characterization and might not be representative of the virus strains that will predominate this season. How well the current vaccine strains will match the strains that circulate this season will be determined as more strains become available for analysis. However, even in years that the vaccine and circulating strains are not optimally matched, the vaccine still provides protection against related influenza viruses (*3*–*5*).

Influenza surveillance reports for the United States are posted online weekly during October–May and are available at http://www.cdc.gov/flu/weekly/fluactivity.htm. Additional information regarding influenza viruses, influenza surveillance, the influenza vaccine, and avian influenza is available at http://www.cdc.gov/flu.

Acknowledgments

This report is based on data contributed by participating state and territorial health departments and state public health laboratories, World Health Organization collaborating laboratories, National Respiratory and Enteric Virus Surveillance System collaborating laboratories, the U.S. Influenza Sentinel Provider Surveillance System, the U.S. Department of Veterans Affairs/U.S. Department of Defense BioSense Outpatient Surveillance System, the New Vaccine Surveillance Network, the Emerging Infections Program, and the 122 Cities Mortality Reporting System.

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3. Nichol KL, Nordin JD, Nelson DB, et al. Effectiveness of influenza vaccine in the community-dwelling elderly. N Engl J Med 2007;357:1373–81.
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5. Shuler CM, Iwamoto M, Bridges CB, et al. Vaccine effectiveness against medically attended, laboratory-confirmed influenza among children aged 6 to 59 months, 2003–2004. Pediatrics 2007;119:e587–95.

Notice to Readers

Updated Information Regarding Antiretroviral Agents Used as HIV Postexposure Prophylaxis for Occupational HIV Exposures

In 1996, the U.S. Public Health Service first recommended using antiretrovirals as postexposure prophylaxis (PEP) after occupational exposure to human immunodeficiency virus (HIV) (*1*). Since the updated HIV PEP recommendations in 2005 (*2*), two important changes to antiretroviral use have occurred that affect the management of occupational exposures.

First, Kaletra® (Abbott Laboratories, Abbott Park, Illinois), a combination protease inhibitor, is no longer available in its original formulation: capsules containing 133 mg of lopinavir and 33 mg of ritonavir. Although the recommended daily prescribed amount of Kaletra ingredients is unchanged, the dosing regimen has changed as a result of the new Kaletra formulation. The previous dosing regimen for the capsule formulation was three capsules twice daily. Kaletra is now manufactured only in tablet form, with each tablet containing 200 mg of lopinavir and 50 mg of ritonavir. To achieve the same recommended daily prescribed amount of the tablet formulation, two tablets of 200 mg of lopinavir and 50 mg of ritonavir should be taken twice daily. Health-care providers should not prescribe three tablets twice a day of the new Kaletra formulation; that dose would be the equivalent of 1,200 mg of lopinavir and 300 mg of ritonavir daily, a higher dose than the recommended 800 mg of lopinavir and 200 mg of ritonavir daily.

Second, on September 10, 2007, Pfizer, Inc. issued a letter* warning health-care providers about the use of Viracept® (nelfinavir) (Pfizer, Inc., New York, New York), another protease inhibitor, because the Viracept manufactured in Europe contained high levels of ethyl methane mesylate (EMS). EMS is a byproduct of the manufacturing process and a known animal carcinogen, mutagen, and teratogen. The level at which EMS might become carcinogenic or teratogenic in humans is not known. The warning in the letter applies to pregnant women and states that information about the ability of EMS to cross the placenta or to enter breast milk is currently unknown. A review of data from the Antiretroviral Pregnancy Registry, which collects data on approximately 6,000 HIV-infected pregnant women, indicated that, during January 1989–January 2007, no statistically significant difference was

* Available at http://www.viracept.com/pdf/viracept_hcpletter_9_10_07.pdf.

observed in the prevalence of birth defects among the infants of women who used Viracept compared with those whose mothers used other antiretroviral therapies (*3*). Nonetheless, the Food and Drug Administration (FDA) recommends that pregnant women limit their exposure to EMS during pregnancy. Until further notice, pregnant women who need to begin antiretroviral therapy or HIV PEP should not be offered regimens containing Viracept. As a precautionary measure, pregnant women currently receiving Viracept should be switched to an alternative antiretroviral therapy while Pfizer and FDA work to implement a long-term EMS specification for Viracept. Specific recommendations for use of antiretroviral agents in pregnant HIV-1–infected patients are indicated in the U.S. Department of Health and Human Services guidelines (*4*) and can be consulted to determine an alternative treatment option.

Because nearly 80% of U.S. health-care personnel are female (*5*) and many of these women are of child-bearing age, this updated information about Viracept might be relevant to the choice of drugs included in an HIV PEP regimen taken by female health-care personnel. Additional information and guidance regarding management of specific exposures are available from the National Clinicians' Post-Exposure Prophylaxis Hotline by telephone (888-448-4911) or online (http://www.ucsf.edu/hivcntr).

References

1. CDC. Update: provisional Public Health Service recommendations for chemoprophylaxis after occupational exposure to HIV. MMWR 1996; 45:468–72.
2. CDC. Updated U.S. Public Health Service guidelines for the management of occupational exposures to HIV and recommendations for postexposure prophylaxis. MMWR 2005;54(No. RR-9):1–17.
3. Antiretroviral Pregnancy Registry Steering Committee. Antiretroviral Pregnancy Registry international interim report for 1 January 1989 through 31 January 2007. Wilmington, NC: Registry Coordinating Center; 2007. Available at http://www.apregistry.com.
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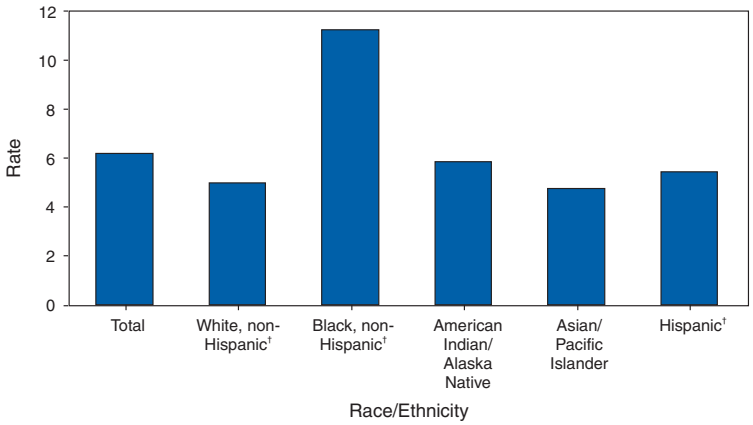
5. US Department of Labor, Bureau of Labor Statistics. Employed persons by detailed industry and sex, 2006 annual average. Available at http://www.bls.gov/cps/wlf-table14-2007.pdf.

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Fetal Mortality Rates,* by Race/Ethnicity of Mother — United States, 2004



* Fetal deaths at ≥20 weeks gestation per 1,000 live births and fetal deaths in specified group.
† Excludes data for Oklahoma, which did not report Hispanic ethnicity.

In 2004, a total of 25,655 fetal deaths at ≥20 weeks gestation were reported in the United States, nearly as many as infant deaths (27,860). The U.S. fetal mortality rate was 6.20 per 1,000 live births and fetal deaths. The fetal mortality rate for non-Hispanic black women (11.25) was approximately twice the rates for non-Hispanic white (4.98), American Indian/Alaska Native (5.84), Asian/Pacific Islander (4.77), and Hispanic women (5.43). Additional information is available at http://www.cdc.gov/nchs/about/major/fetaldth/abfetal.htm.

SOURCE: MacDorman MF, Munson ML, Kirmeyer S. Fetal and perinatal mortality, United States, 2004. Natl Vital Stat Rep 2007;56(3). Available at http://www.cdc.gov/nchs/products/pubs/pubd/nvsr/nvsr.htm#vol56.

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending December 8, 2007 (49th Week)*

Disease	Current week	Cum 2007	5-year weekly average†	Total cases reported for previous years 2006	2005	2004	2003	2002	States reporting cases during current week (No.)
Anthrax	—	—	—	1	—	—	—	2	
Botulism:									
foodborne	—	17	1	20	19	16	20	28	
infant	—	78	2	97	85	87	76	69	
other (wound & unspecified)	—	20	1	48	31	30	33	21	
Brucellosis	1	113	2	121	120	114	104	125	CA (1)
Chancroid	—	29	1	33	17	30	54	67	
Cholera	—	7	0	9	8	5	2	2	
Cyclosporiasis§	—	92	2	136	543	171	75	156	
Diphtheria	—	—	—	—	—	—	1	1	
Domestic arboviral diseases§,¶:									
California serogroup	—	41	0	67	80	112	108	164	
eastern equine	—	4	0	8	21	6	14	10	
Powassan	—	1	—	1	1	1	—	1	
St. Louis	—	5	—	10	13	12	41	28	
western equine	—	—	—	—	—	—	—	—	
Ehrlichiosis§:									
human granulocytic	9	483	12	646	786	537	362	511	NY (4), MN (4), MD (1)
human monocytic	19	645	6	578	506	338	321	216	NY (1), MN (4), MD (1), NC (4), GA (1), TN (1), AR (7)
human (other & unspecified)	—	147	1	231	112	59	44	23	
Haemophilus influenzae,**									
invasive disease (age <5 yrs):									
serotype b	—	17	0	29	9	19	32	34	
nonserotype b	1	131	2	175	135	135	117	144	WV (1)
unknown serotype	3	186	4	179	217	177	227	153	NY (1), TN (1), AZ (1)
Hansen disease§	—	59	2	66	87	105	95	96	
Hantavirus pulmonary syndrome§	—	27	1	40	26	24	26	19	
Hemolytic uremic syndrome, postdiarrheal§	2	210	4	288	221	200	178	216	OH (1), GA (1)
Hepatitis C viral, acute	9	659	20	802	652	713	1,102	1,835	NY (1), OH (1), MN (2), CA (5)
HIV infection, pediatric (age <13 yrs)††	—	—	5	52	380	436	504	420	
Influenza-associated pediatric mortality§,§§	—	76	0	43	45	—	N	N	
Listeriosis	14	656	13	875	896	753	696	665	PA (1), OH (2), DE (2), VA (2), NC (1), FL (1), LA (1), WA (1), CA (3)
Measles¶¶	—	28	0	55	66	37	56	44	
Meningococcal disease, invasive***:									
A, C, Y, & W-135	1	256	5	318	297	—	—	—	MN (1)
serogroup B	1	123	4	193	156	—	—	—	IN (1)
other serogroup	—	30	0	32	27	—	—	—	
unknown serogroup	5	527	12	651	765	—	—	—	MN (2), FL (1), TX (1), CA (1)
Mumps	4	690	15	6,584	314	258	231	270	PA (1), FL (3)
Novel influenza A virus infections	—	4	—	N	N	N	N	N	
Plague	—	6	0	17	8	3	1	2	
Poliomyelitis, paralytic	—	—	—	—	1	—	—	—	
Poliovirus infection, nonparalytic§	—	—	—	N	N	N	N	N	
Psittacosis§	—	9	0	21	16	12	12	18	
Q fever§	2	158	1	169	136	70	71	61	MN (1), TN (1)
Rabies, human	—	—	0	3	2	7	2	3	
Rubella†††	—	11	0	11	11	10	7	18	
Rubella, congenital syndrome	—	—	—	1	1	—	1	1	
SARS-CoV§,§§§	—	—	—	—	—	—	8	N	
Smallpox§	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome§	1	91	2	125	129	132	161	118	CT (1)
Syphilis, congenital (age <1 yr)	3	432	8	380	329	353	413	412	NY (1), NC (1), FL (1)
Tetanus	—	19	1	41	27	34	20	25	
Toxic-shock syndrome (staphylococcal)§	1	72	2	101	90	95	133	109	CA (1)
Trichinellosis	—	7	0	15	16	5	6	14	
Tularemia	—	110	2	95	154	134	129	90	
Typhoid fever	2	309	4	353	324	322	356	321	FL (1), OK (1)
Vancomycin-intermediate *Staphylococcus aureus*§	1	21	—	6	2	—	N	N	FL (1)
Vancomycin-resistant *Staphylococcus aureus*§	—	—	0	1	3	1	N	N	
Vibriosis (noncholera *Vibrio* species infections)§	6	341	1	N	N	N	N	N	GA (1), FL (1), AL (1), CO (1), CA (2)
Yellow fever	—	—	—	—	—	—	—	1	

—: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts.

* Incidence data for reporting year 2007 are provisional, whereas data for 2002, 2003, 2004, 2005, and 2006 are finalized.

† Calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years. Additional information is available at http://www.cdc.gov/epo/dphsi/phs/files/5yearweeklyaverage.pdf.

§ Not notifiable in all states. Data from states where the condition is not notifiable are excluded from this table, except in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.

¶ Includes both neuroinvasive and nonneuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II.

** Data for *H. influenzae* (all ages, all serotypes) are available in Table II.

†† Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Implementation of HIV reporting influences the number of cases reported. Updates of pediatric HIV data have been temporarily suspended until upgrading of the national HIV/AIDS surveillance data management system is completed. Data for HIV/AIDS, when available, are displayed in Table IV, which appears quarterly.

§§ Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. One case occurring during the 2007–08 influenza season has been reported. A total of 73 cases were reported for the 2006–07 influenza season.

¶¶ No measles cases were reported for the current week.

*** Data for meningococcal disease (all serogroups) are available in Table II.

††† No rubella cases were reported for the current week.

§§§ Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases.

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Chlamydia†					Coccidioidomycosis					Cryptosporidiosis				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	11,636	20,820	25,398	974,503	963,789	161	144	658	7,125	7,581	51	85	979	9,993	5,333
New England	743	705	1,357	33,280	31,708	—	0	1	2	—	—	4	40	301	368
Connecticut	—	227	829	9,791	9,280	N	0	0	N	N	—	0	40	40	38
Maine§	66	50	74	2,407	2,150	—	0	0	—	—	—	1	5	50	49
Massachusetts	566	301	673	15,353	14,373	—	0	0	—	—	—	2	11	107	171
New Hampshire	34	38	73	1,961	1,888	—	0	1	2	—	—	1	5	50	46
Rhode Island§	53	63	106	2,944	2,908	—	0	0	—	—	—	0	3	11	14
Vermont§	24	19	45	824	1,109	N	0	0	N	N	—	1	3	43	50
Mid. Atlantic	2,158	2,780	4,284	135,890	119,057	—	0	0	—	—	1	10	113	1,285	634
New Jersey	180	404	528	19,437	19,167	N	0	0	N	N	—	0	6	41	42
New York (Upstate)	590	537	2,758	26,277	23,266	N	0	0	N	N	1	3	20	235	166
New York City	744	933	1,971	46,123	39,427	N	0	0	N	N	—	1	7	90	149
Pennsylvania	644	808	1,800	44,053	37,197	N	0	0	N	N	—	5	103	919	277
E.N. Central	1,592	3,247	6,214	160,144	159,130	—	1	3	33	42	11	20	131	1,684	1,296
Illinois	513	1,004	1,370	47,195	50,676	—	0	0	—	—	—	2	13	151	189
Indiana	387	395	646	19,449	18,702	—	0	0	—	—	2	2	14	113	99
Michigan	495	709	1,024	34,292	33,870	—	0	3	22	36	—	3	11	182	140
Ohio	67	772	3,637	41,881	36,649	—	0	1	11	6	7	5	61	554	344
Wisconsin	130	370	446	17,327	19,233	N	0	0	N	N	2	7	59	684	524
W.N. Central	68	1,201	1,465	55,539	58,522	—	0	54	8	1	7	15	125	1,564	836
Iowa	—	158	252	7,973	7,911	N	0	0	N	N	—	2	61	601	170
Kansas	—	153	294	7,000	7,421	N	0	0	N	N	—	1	16	145	77
Minnesota	—	253	302	11,459	12,297	—	0	54	—	—	5	3	34	290	214
Missouri	—	462	551	21,380	21,632	—	0	1	8	1	—	2	13	173	186
Nebraska§	—	94	183	3,956	5,077	N	0	0	N	N	2	1	21	163	95
North Dakota	2	27	61	1,320	1,698	N	0	0	N	N	—	0	11	26	9
South Dakota	66	49	84	2,451	2,486	N	0	0	N	N	—	2	16	166	85
S. Atlantic	2,956	3,881	6,760	185,693	185,627	—	0	1	3	5	27	20	69	1,200	1,147
Delaware	27	66	140	3,262	3,408	—	0	0	—	—	—	0	4	20	15
District of Columbia	—	111	166	5,354	3,074	—	0	0	—	—	—	0	2	3	16
Florida	1,414	1,187	1,767	55,302	46,408	N	0	0	N	N	12	10	35	642	527
Georgia	—	584	3,822	23,124	33,790	N	0	0	N	N	6	4	22	226	270
Maryland§	352	393	696	18,948	20,138	—	0	1	3	5	—	0	2	30	20
North Carolina	78	519	1,905	24,656	31,891	—	0	0	—	—	8	1	18	121	96
South Carolina§	451	516	3,030	29,166	21,648	N	0	0	N	N	—	1	15	79	128
Virginia§	628	485	621	23,007	22,530	N	0	0	N	N	1	1	5	68	65
West Virginia	6	63	92	2,874	2,740	N	0	0	N	N	—	0	5	11	10
E.S. Central	735	1,536	2,162	74,300	72,526	—	0	0	—	—	1	4	63	591	180
Alabama§	49	471	590	22,223	21,902	N	0	0	N	N	—	1	14	116	71
Kentucky	258	155	691	8,186	8,729	N	0	0	N	N	—	1	40	246	40
Mississippi	—	359	959	18,123	17,913	N	0	0	N	N	—	0	11	96	24
Tennessee§	428	515	722	25,768	23,982	N	0	0	N	N	1	1	19	133	45
W.S. Central	695	2,348	3,006	113,924	108,377	—	0	1	2	1	2	4	41	353	391
Arkansas§	301	173	328	8,991	7,768	N	0	0	N	N	—	0	8	32	23
Louisiana	178	359	851	17,807	16,964	—	0	1	2	1	1	1	4	56	86
Oklahoma	216	259	467	12,008	11,954	N	0	0	N	N	1	1	11	118	40
Texas§	—	1,545	2,065	75,118	71,691	N	0	0	N	N	—	1	29	147	242
Mountain	471	1,272	1,706	59,222	66,619	148	98	293	4,736	5,084	2	8	580	2,891	399
Arizona	53	484	834	21,319	21,971	148	95	293	4,594	4,944	—	1	6	48	29
Colorado	199	191	379	9,582	15,524	N	0	0	N	N	1	2	26	206	73
Idaho§	91	55	252	3,480	3,065	N	0	0	N	N	—	1	71	451	38
Montana§	—	42	73	1,788	2,481	N	0	0	N	N	1	1	7	68	135
Nevada§	11	178	293	8,784	8,026	—	1	5	57	62	—	0	3	17	14
New Mexico§	—	153	395	7,877	9,468	—	0	2	18	21	—	2	9	110	43
Utah	98	108	209	5,271	4,733	—	1	7	64	55	—	1	499	1,937	18
Wyoming§	19	23	35	1,121	1,351	—	0	1	3	2	—	0	8	54	49
Pacific	2,218	3,344	4,362	156,511	162,223	13	40	311	2,341	2,448	—	2	16	124	82
Alaska	72	87	157	4,061	4,205	N	0	0	N	N	—	0	2	3	4
California	1,746	2,672	3,627	126,765	126,895	13	40	311	2,341	2,448	—	0	0	—	—
Hawaii	—	109	134	5,210	5,304	N	0	0	N	N	—	0	0	—	4
Oregon§	304	160	394	8,335	9,039	N	0	0	N	N	—	2	16	121	74
Washington	96	226	621	12,140	16,780	N	0	0	N	N	—	0	0	—	—
American Samoa	—	10	32	95	46	N	0	0	N	N	—	0	0	—	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	15	34	661	823	—	0	0	—	—	—	0	0	—	—
Puerto Rico	618	124	543	7,366	4,878	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	3	7	76	245	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly.
† Chlamydia refers to genital infections caused by *Chlamydia trachomatis*.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Giardiasis					Gonorrhea					*Haemophilus influenzae*, invasive All ages, all serotypes†				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	187	306	1,513	16,269	16,802	3,947	6,791	8,941	317,669	335,667	33	42	184	2,102	2,158
New England	2	25	54	1,310	1,376	112	109	259	5,290	5,340	3	3	19	164	167
Connecticut	1	6	18	339	290	—	44	204	2,009	2,201	2	0	7	50	44
Maine§	1	3	10	181	178	—	2	8	113	124	—	0	4	13	19
Massachusetts	—	9	29	521	595	96	51	128	2,592	2,285	—	2	6	74	76
New Hampshire	—	0	3	27	24	2	2	6	135	178	—	0	2	16	14
Rhode Island§	—	0	15	78	111	9	8	16	386	484	—	0	10	7	6
Vermont§	—	3	9	164	178	5	1	4	55	68	1	0	1	4	8
Mid. Atlantic	35	57	127	2,825	3,339	560	694	1,537	34,787	31,744	6	9	27	428	452
New Jersey	—	6	11	256	457	97	117	159	5,707	5,226	—	1	5	61	81
New York (Upstate)	24	23	108	1,107	1,199	177	120	1,035	6,547	5,917	3	3	15	126	137
New York City	3	15	25	754	892	114	195	346	9,308	9,844	1	2	6	91	82
Pennsylvania	8	14	29	708	791	172	248	613	13,225	10,757	2	3	10	150	152
E.N. Central	29	47	83	2,335	2,683	586	1,277	2,588	64,826	66,092	7	5	15	274	361
Illinois	—	13	31	645	671	194	364	499	17,497	19,081	—	2	6	79	108
Indiana	N	0	0	N	N	147	161	307	8,313	8,286	3	1	7	57	74
Michigan	1	11	20	523	672	187	294	482	14,297	14,513	1	0	5	26	29
Ohio	24	15	37	785	777	19	351	1,567	18,667	17,605	3	2	5	98	86
Wisconsin	4	7	21	382	563	39	127	207	6,052	6,607	—	0	2	14	64
W.N. Central	8	22	553	1,406	1,711	4	375	514	17,268	18,407	4	3	24	131	151
Iowa	—	5	23	291	280	—	38	60	1,736	1,822	—	0	1	1	2
Kansas	—	3	11	171	189	—	43	86	1,981	2,087	—	0	2	9	18
Minnesota	—	0	514	176	486	—	65	86	2,943	3,098	3	0	17	59	79
Missouri	4	10	23	491	528	—	196	266	9,147	9,574	1	1	5	39	34
Nebraska§	4	2	8	154	110	—	24	57	1,140	1,332	—	0	2	18	9
North Dakota	—	0	16	28	22	—	2	4	82	145	—	0	2	5	9
South Dakota	—	1	6	95	96	4	5	11	239	349	—	0	0	—	—
S. Atlantic	37	58	106	2,714	2,634	1,623	1,525	3,209	74,188	83,292	6	10	34	539	530
Delaware	—	1	6	39	38	12	26	43	1,225	1,406	—	0	3	8	1
District of Columbia	—	0	7	34	62	—	47	71	2,160	1,754	—	0	1	3	8
Florida	17	24	47	1,210	1,069	590	478	717	22,540	22,756	1	3	8	152	155
Georgia	9	10	42	590	616	—	248	2,068	9,641	16,970	—	2	7	108	112
Maryland§	1	4	18	237	232	91	115	227	5,759	6,808	2	1	6	79	77
North Carolina	—	0	0	—	—	499	302	675	13,839	16,449	—	0	9	51	53
South Carolina§	1	2	8	103	103	206	206	1,361	12,198	10,012	—	1	4	45	37
Virginia§	7	9	22	453	479	224	124	220	5,970	6,235	—	1	22	65	66
West Virginia	2	0	21	48	35	1	18	37	856	902	3	0	6	28	21
E.S. Central	3	10	23	516	440	263	596	860	28,875	29,630	1	2	9	121	108
Alabama§	1	5	11	240	210	10	201	261	9,542	10,178	—	0	3	26	22
Kentucky	N	0	0	N	N	93	57	268	3,204	3,205	—	0	1	2	5
Mississippi	N	0	0	N	N	—	146	310	6,977	7,071	—	0	2	9	13
Tennessee§	2	5	16	276	230	160	182	261	9,152	9,176	1	1	6	84	68
W.S. Central	3	7	55	368	332	261	982	1,201	47,190	47,832	1	2	34	94	83
Arkansas§	—	2	13	107	129	68	78	123	3,863	4,058	—	0	2	8	8
Louisiana	—	2	10	120	83	109	221	384	10,317	10,292	—	0	2	7	20
Oklahoma	3	3	42	141	120	84	98	235	4,620	4,521	1	1	29	71	47
Texas§	N	0	0	N	N	—	596	745	28,390	28,961	—	0	3	8	8
Mountain	23	32	69	1,701	1,615	79	248	346	11,707	14,702	5	4	11	237	198
Arizona	—	3	11	185	159	17	103	175	4,451	5,476	3	1	6	85	80
Colorado	18	10	26	555	525	37	45	93	2,268	3,547	1	1	4	55	49
Idaho§	5	3	19	194	181	7	4	19	256	191	1	0	1	8	7
Montana§	—	2	8	106	100	—	1	48	109	189	—	0	1	2	—
Nevada§	—	1	7	90	107	1	46	87	2,208	2,681	—	0	1	7	14
New Mexico§	—	2	5	104	76	—	31	63	1,572	1,668	—	1	4	39	30
Utah	—	7	33	425	430	15	16	34	769	832	—	0	3	36	14
Wyoming§	—	1	4	42	37	2	1	5	74	118	—	0	1	5	4
Pacific	47	61	558	3,094	2,672	459	693	875	33,538	38,628	—	2	16	114	108
Alaska	2	1	5	74	107	9	10	27	465	581	—	0	3	13	11
California	38	43	93	2,099	2,127	407	603	734	29,184	31,807	—	0	10	34	30
Hawaii	—	0	4	11	52	—	12	24	611	861	—	0	1	1	19
Oregon§	—	9	17	425	386	35	22	63	1,058	1,373	—	1	6	63	48
Washington	7	8	449	485	—	8	42	142	2,220	4,006	—	0	5	3	—
American Samoa	—	0	0	—	N	—	0	2	3	2	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	2	13	112	97	—	0	0	—	1
Puerto Rico	—	6	21	308	248	11	5	23	299	283	—	0	1	2	3
U.S. Virgin Islands	—	0	0	—	—	—	1	3	23	39	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Data for *H. influenzae* (age <5 yrs for serotype b, nonserotype b, and unknown serotype) are available in Table I.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Hepatitis (viral, acute), by type† A					Hepatitis (viral, acute), by type† B					Legionellosis				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	54	51	201	2,603	3,262	47	79	405	3,713	4,135	36	43	106	2,225	2,613
New England	—	2	6	109	175	—	1	5	71	112	—	2	13	117	172
Connecticut	—	0	3	25	40	—	0	5	29	47	—	0	5	38	49
Maine§	—	0	1	3	8	—	0	2	13	24	—	0	1	7	10
Massachusetts	—	1	4	49	81	—	0	1	4	19	—	0	3	21	67
New Hampshire	—	0	3	12	22	—	0	1	5	10	—	0	2	8	15
Rhode Island§	—	0	2	12	16	—	0	3	15	9	—	0	6	34	23
Vermont§	—	0	1	8	8	—	0	1	5	3	—	0	2	9	8
Mid. Atlantic	2	8	21	404	371	2	8	21	419	492	4	13	37	707	933
New Jersey	—	2	6	100	104	—	1	8	83	156	—	1	11	86	117
New York (Upstate)	1	1	11	71	88	1	2	13	84	61	2	4	22	216	311
New York City	1	3	9	144	115	—	2	6	88	112	—	2	11	120	181
Pennsylvania	—	2	5	89	64	1	3	8	164	163	2	5	21	285	324
E.N. Central	3	6	13	276	334	4	9	23	406	463	9	9	27	495	585
Illinois	—	2	5	94	99	—	2	6	104	124	—	1	12	87	120
Indiana	—	0	7	29	26	1	0	21	54	54	—	1	7	50	48
Michigan	—	2	5	80	116	1	2	8	104	134	3	3	10	148	144
Ohio	3	1	4	66	52	2	2	7	123	118	6	3	17	200	226
Wisconsin	—	0	3	7	41	—	0	3	21	33	—	0	1	10	47
W.N. Central	8	2	18	161	124	3	2	15	129	135	—	2	9	100	80
Iowa	—	1	4	42	12	—	0	3	24	20	—	0	2	10	11
Kansas	—	0	1	6	26	—	0	2	9	11	—	0	1	3	9
Minnesota	7	0	17	69	17	3	0	13	21	18	—	0	6	28	24
Missouri	—	0	2	23	42	—	1	5	59	62	—	1	3	43	22
Nebraska§	1	0	2	15	18	—	0	1	10	19	—	0	2	12	9
North Dakota	—	0	3	—	—	—	0	1	—	—	—	0	1	—	—
South Dakota	—	0	1	6	9	—	0	1	6	5	—	0	1	4	5
S. Atlantic	12	10	21	475	528	14	18	56	901	1,137	14	7	25	376	460
Delaware	—	0	1	8	13	—	0	2	15	46	—	0	2	8	12
District of Columbia	—	0	5	14	8	—	0	1	1	9	—	0	1	1	33
Florida	6	3	7	149	205	9	7	14	325	389	7	3	10	147	150
Georgia	—	1	4	66	55	1	2	7	118	192	2	0	2	24	37
Maryland§	—	1	5	71	59	—	2	6	105	143	1	1	4	74	104
North Carolina	3	0	9	60	99	—	0	16	124	148	2	1	4	44	37
South Carolina§	1	0	4	18	23	—	1	5	57	92	—	0	2	17	6
Virginia§	2	1	5	80	60	4	2	8	117	68	1	1	3	44	65
West Virginia	—	0	2	9	6	—	0	23	39	50	1	0	4	17	16
E.S. Central	1	2	5	99	118	2	7	14	329	315	2	2	6	96	106
Alabama§	—	0	3	18	13	—	2	6	112	92	—	0	1	11	9
Kentucky	1	0	2	20	31	1	1	7	71	68	1	1	3	47	47
Mississippi	—	0	4	8	9	—	0	8	25	13	—	0	1	—	4
Tennessee§	—	1	5	53	65	1	3	8	121	142	1	1	4	38	46
W.S. Central	5	5	43	239	369	17	17	169	825	873	2	2	16	111	74
Arkansas§	—	0	2	11	45	—	1	7	62	76	—	0	3	8	4
Louisiana	—	0	3	29	36	—	1	6	76	59	—	0	1	4	10
Oklahoma	—	0	8	11	9	5	1	38	123	70	—	0	3	6	7
Texas§	5	4	39	188	279	12	12	135	564	668	2	2	13	93	53
Mountain	5	5	13	236	267	2	3	7	162	135	1	2	6	103	120
Arizona	5	3	11	172	166	—	1	4	48	U	1	0	5	35	37
Colorado	—	0	3	22	40	1	0	3	31	34	—	0	2	21	26
Idaho§	—	0	2	8	9	—	0	1	13	14	—	0	1	6	11
Montana§	—	0	2	9	11	—	0	3	—	2	—	0	1	3	6
Nevada§	—	0	1	4	11	1	1	3	37	39	—	0	2	8	10
New Mexico§	—	0	2	11	14	—	0	2	11	23	—	0	2	9	5
Utah	—	0	2	7	14	—	0	4	19	22	—	0	3	18	25
Wyoming§	—	0	1	3	2	—	0	1	3	1	—	0	1	3	—
Pacific	18	11	92	604	976	3	10	106	471	473	4	2	11	120	83
Alaska	—	0	1	4	1	—	0	2	9	8	—	0	0	—	1
California	15	10	40	522	923	3	7	31	353	379	4	1	11	91	82
Hawaii	—	0	1	1	12	—	0	1	2	8	—	0	0	—	—
Oregon§	—	1	2	28	40	—	1	4	57	78	—	0	1	9	—
Washington	3	0	52	49	—	—	1	74	50	—	—	0	2	20	—
American Samoa	—	0	0	—	—	—	0	0	—	—	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	1	10	52	63	—	1	9	67	64	—	0	2	5	1
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Data for acute hepatitis C, viral are available in Table I.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Lyme disease					Malaria					Meningococcal disease, invasive† All serogroups				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	159	266	1,271	19,792	18,586	10	21	105	1,032	1,329	7	20	87	936	1,057
New England	21	40	300	3,458	4,336	—	1	5	51	52	—	1	3	38	50
Connecticut	11	13	214	1,649	1,666	—	0	3	2	10	—	0	1	6	10
Maine§	10	4	61	481	290	—	0	2	8	4	—	0	1	7	9
Massachusetts	—	2	27	211	1,431	—	0	3	29	26	—	0	2	19	22
New Hampshire	—	8	88	824	612	—	0	4	8	9	—	0	1	1	4
Rhode Island§	—	0	74	162	235	—	0	1	—	2	—	0	1	2	2
Vermont§	—	1	13	131	102	—	0	2	4	1	—	0	1	3	3
Mid. Atlantic	50	137	640	9,955	9,488	2	5	14	261	351	—	2	8	125	162
New Jersey	—	29	153	2,204	2,392	—	0	1	—	88	—	0	2	14	21
New York (Upstate)	36	55	426	3,207	3,620	2	1	5	67	45	—	1	3	35	36
New York City	—	1	25	189	300	—	3	8	157	170	—	0	4	27	57
Pennsylvania	14	46	315	4,355	3,176	—	0	4	37	48	—	1	5	49	48
E.N. Central	—	9	163	1,470	1,685	2	2	6	103	156	1	3	9	138	165
Illinois	—	1	12	126	109	—	0	6	41	80	—	1	3	42	42
Indiana	—	0	7	43	23	—	0	2	10	12	1	0	4	28	24
Michigan	—	0	6	54	55	—	0	2	16	19	—	0	3	25	29
Ohio	—	0	3	19	42	2	0	3	27	27	—	1	2	34	47
Wisconsin	—	8	147	1,228	1,456	—	0	2	9	18	—	0	2	9	23
W.N. Central	40	6	195	675	812	1	0	12	52	61	3	1	5	67	63
Iowa	—	1	11	115	97	—	0	1	3	2	—	0	3	16	19
Kansas	—	0	2	9	4	—	0	1	3	8	—	0	1	2	4
Minnesota	40	2	188	512	694	1	0	11	29	39	3	0	3	22	16
Missouri	—	0	5	29	5	—	0	1	8	6	—	0	3	17	14
Nebraska§	—	0	1	7	11	—	0	1	6	4	—	0	2	5	6
North Dakota	—	0	7	3	—	—	0	1	2	1	—	0	3	2	1
South Dakota	—	0	0	—	1	—	0	1	1	1	—	0	1	3	3
S. Atlantic	41	66	179	3,948	2,091	3	4	13	233	325	1	3	11	163	193
Delaware	6	11	34	678	462	—	0	1	4	5	—	0	1	1	5
District of Columbia	—	0	7	13	59	—	0	1	3	5	—	0	0	—	2
Florida	3	1	11	85	32	2	1	7	54	57	1	1	7	59	70
Georgia	1	0	1	4	8	—	0	5	32	87	—	0	5	31	18
Maryland§	5	31	113	2,196	1,164	1	1	5	58	78	—	0	2	20	15
North Carolina	3	0	8	49	29	—	0	4	21	28	—	0	4	22	32
South Carolina§	—	0	4	27	18	—	0	1	7	10	—	0	2	14	22
Virginia§	18	13	62	818	305	—	1	6	52	53	—	0	2	14	20
West Virginia	5	0	14	78	14	—	0	1	2	2	—	0	2	2	9
E.S. Central	1	1	5	50	35	1	0	3	34	24	—	1	4	47	44
Alabama§	—	0	3	12	11	—	0	1	5	9	—	0	2	9	7
Kentucky	—	0	2	5	7	—	0	1	8	4	—	0	2	12	11
Mississippi	—	0	1	1	3	—	0	1	2	6	—	0	4	10	5
Tennessee§	1	0	4	32	14	1	0	2	19	5	—	0	2	16	21
W.S. Central	2	1	6	68	24	—	1	29	78	95	1	1	15	91	90
Arkansas§	—	0	1	1	—	—	0	1	2	4	—	0	2	9	11
Louisiana	—	0	1	2	1	—	0	2	14	8	—	0	4	26	35
Oklahoma	—	0	0	—	—	—	0	3	5	7	—	0	4	16	11
Texas§	2	1	6	65	23	—	1	25	57	76	1	1	11	40	33
Mountain	—	0	4	38	30	—	1	6	60	74	—	1	4	59	68
Arizona	—	0	1	1	10	—	0	3	12	23	—	0	2	12	15
Colorado	—	0	1	2	—	—	0	2	23	22	—	0	2	21	22
Idaho§	—	0	2	9	7	—	0	2	4	1	—	0	2	6	4
Montana§	—	0	2	4	—	—	0	1	3	2	—	0	1	2	5
Nevada§	—	0	2	8	4	—	0	1	2	4	—	0	1	3	6
New Mexico§	—	0	1	4	3	—	0	1	5	5	—	0	1	2	6
Utah	—	0	2	7	5	—	0	3	11	17	—	0	2	11	6
Wyoming§	—	0	1	3	1	—	0	0	—	—	—	0	1	2	4
Pacific	4	2	16	130	85	1	3	45	160	191	1	4	48	208	222
Alaska	—	0	1	9	3	—	0	1	2	23	—	0	1	1	4
California	4	2	9	114	75	—	2	7	113	148	1	3	10	155	171
Hawaii	N	0	0	N	N	—	0	0	—	8	—	0	0	—	10
Oregon§	—	0	1	4	7	—	0	3	17	12	—	0	3	30	37
Washington	—	0	8	3	—	1	0	43	28	—	—	0	43	22	—
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	N	0	0	N	N	—	0	1	4	2	—	0	1	8	7
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Data for meningococcal disease, invasive caused by serogroups A, C, Y, & W-135; serogroup B; other serogroup; and unknown serogroup are available in Table I.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Pertussis					Rabies, animal					Rocky Mountain spotted fever				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	60	171	1,479	8,197	13,481	42	100	187	5,144	5,308	53	32	211	1,996	2,032
New England	5	27	77	1,200	1,803	1	11	22	537	470	—	0	10	6	13
Connecticut	—	1	5	59	121	—	4	10	210	203	—	0	0	—	—
Maine†	—	1	13	74	151	—	2	5	80	123	—	0	1	1	N
Massachusetts	—	21	39	928	1,138	—	0	0	—	N	—	0	1	4	11
New Hampshire	1	1	6	59	219	—	1	4	52	47	—	0	1	1	1
Rhode Island†	2	0	31	29	68	—	0	4	37	30	—	0	9	—	1
Vermont†	2	0	9	51	106	1	3	13	158	67	—	0	0	—	—
Mid. Atlantic	16	24	155	1,131	1,772	5	25	56	1,338	521	—	1	6	75	86
New Jersey	—	2	10	139	291	N	0	0	N	N	—	0	3	18	39
New York (Upstate)	7	10	146	519	810	5	10	20	499	N	—	0	1	3	—
New York City	—	2	6	122	105	—	1	5	42	42	—	0	3	27	23
Pennsylvania	9	7	18	351	566	—	15	44	797	479	—	0	3	27	24
E.N. Central	13	28	79	1,267	2,180	5	3	48	387	162	—	1	4	42	64
Illinois	—	3	17	141	558	—	1	15	113	46	—	0	3	25	26
Indiana	3	0	45	55	224	—	0	1	12	11	—	0	2	4	6
Michigan	5	5	17	270	599	—	1	27	180	47	—	0	1	3	5
Ohio	5	12	54	602	584	5	0	11	82	58	—	0	2	10	26
Wisconsin	—	1	24	199	215	N	0	0	N	N	—	0	0	—	1
W.N. Central	5	12	151	692	1,227	1	4	13	253	301	1	5	35	439	195
Iowa	—	2	14	134	323	—	0	3	32	57	—	0	4	15	5
Kansas	—	2	12	122	299	—	2	7	101	77	—	0	1	1	1
Minnesota	—	0	119	211	164	1	0	6	39	39	—	0	1	2	3
Missouri	4	2	9	95	299	—	0	3	38	66	1	5	29	403	161
Nebraska†	1	1	12	65	95	—	0	0	—	—	—	0	2	14	25
North Dakota	—	0	18	8	25	—	0	6	21	25	—	0	0	—	—
South Dakota	—	1	7	57	22	—	0	2	22	37	—	0	1	4	—
S. Atlantic	10	17	163	870	1,082	29	39	76	1,989	2,212	38	14	112	943	1,142
Delaware	—	0	2	11	3	—	0	0	—	—	—	0	2	15	21
District of Columbia	—	0	1	2	6	—	0	0	—	—	—	0	1	1	1
Florida	4	4	18	207	199	—	0	29	115	176	1	0	4	22	16
Georgia	1	0	4	29	101	7	4	34	265	257	1	0	5	38	53
Maryland†	—	2	8	110	146	—	7	18	327	399	1	1	4	65	87
North Carolina	4	4	112	292	189	8	9	19	467	502	32	4	96	610	815
South Carolina†	—	1	8	68	188	—	0	11	46	174	—	0	7	60	40
Virginia†	1	2	11	121	204	14	13	31	693	596	3	2	11	127	106
West Virginia	—	0	19	30	46	—	0	11	76	108	—	0	3	5	3
E.S. Central	—	6	35	405	342	—	3	9	140	237	—	5	16	254	367
Alabama†	—	1	18	82	88	—	0	2	—	81	—	2	10	90	91
Kentucky	—	0	4	27	58	—	0	3	18	28	—	0	2	5	3
Mississippi	—	1	32	218	36	—	0	1	1	4	—	0	2	14	9
Tennessee†	—	1	7	78	160	—	2	7	121	124	—	2	10	145	264
W.S. Central	1	19	226	942	862	1	1	23	77	954	14	1	168	194	117
Arkansas†	—	1	17	135	93	1	0	2	32	31	9	0	53	101	51
Louisiana	—	0	2	19	24	—	0	1	—	7	—	0	1	3	5
Oklahoma	—	0	36	49	19	—	0	22	45	61	4	0	108	53	29
Texas†	1	15	174	739	726	—	0	14	—	855	1	0	7	37	32
Mountain	6	21	61	1,061	2,392	—	3	14	211	211	—	0	4	35	46
Arizona	1	4	13	195	494	—	2	12	145	138	—	0	1	9	11
Colorado	4	6	14	295	701	—	0	0	—	—	—	0	2	4	4
Idaho†	1	0	5	41	85	—	0	0	—	24	—	0	1	4	14
Montana†	—	0	7	43	114	—	0	3	20	15	—	0	1	1	2
Nevada†	—	0	3	9	71	—	0	1	1	5	—	0	0	—	—
New Mexico†	—	1	7	66	135	—	0	2	11	10	—	0	1	4	8
Utah	—	7	47	390	715	—	0	2	16	11	—	0	1	1	—
Wyoming†	—	0	4	22	77	—	0	4	18	8	—	0	2	12	7
Pacific	4	12	547	629	1,821	—	4	10	212	240	—	0	3	8	2
Alaska	—	0	8	50	90	—	0	6	40	17	N	0	0	N	N
California	1	3	167	191	1,538	—	3	8	160	198	—	0	3	6	—
Hawaii	—	0	1	4	87	N	0	0	N	N	N	0	0	N	N
Oregon†	—	2	14	111	106	—	0	3	12	25	—	0	1	2	2
Washington	3	3	377	273	—	—	0	0	—	—	N	0	0	N	N
American Samoa	—	0	0	—	—	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	1	—	63	—	0	0	—	—	N	0	0	N	N
Puerto Rico	—	0	1	1	3	—	1	5	47	77	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Salmonellosis					Shiga toxin-producing *E. coli* (STEC)†					Shigellosis				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	576	848	2,338	41,618	41,810	32	78	336	4,228	3,925	314	346	1,287	16,266	13,557
New England	1	35	424	2,073	2,204	—	4	77	285	281	—	4	47	231	266
Connecticut	—	0	409	409	503	—	0	71	71	75	—	0	44	44	67
Maine§	1	2	14	130	136	—	0	4	39	46	—	0	5	14	5
Massachusetts	—	22	57	1,198	1,184	—	2	10	130	104	—	3	8	144	164
New Hampshire	—	3	10	156	215	—	0	4	25	29	—	0	1	5	9
Rhode Island§	—	2	20	101	90	—	0	2	6	8	—	0	9	21	15
Vermont§	—	1	5	79	76	—	0	3	14	19	—	0	1	3	6
Mid. Atlantic	30	105	186	5,247	5,166	5	7	63	432	521	7	13	47	706	851
New Jersey	—	16	39	792	1,063	—	1	4	48	157	—	2	10	131	285
New York (Upstate)	20	27	112	1,368	1,259	1	3	15	196	165	3	3	42	152	219
New York City	1	25	51	1,293	1,219	—	0	5	45	43	—	5	11	262	261
Pennsylvania	9	33	69	1,794	1,625	4	3	47	143	156	4	2	21	161	86
E.N. Central	56	101	254	5,252	5,409	4	9	34	604	667	47	36	132	2,202	1,390
Illinois	—	30	187	1,605	1,537	—	1	10	89	102	—	11	26	537	655
Indiana	16	15	54	679	824	3	1	13	102	83	12	2	21	179	163
Michigan	3	18	41	878	953	—	1	8	97	92	1	1	7	71	150
Ohio	35	26	64	1,290	1,227	1	2	9	152	191	34	16	104	1,190	185
Wisconsin	2	16	50	800	868	—	3	10	164	199	—	4	13	225	237
W.N. Central	23	50	103	2,671	2,551	3	13	45	760	673	12	35	156	1,752	1,723
Iowa	—	9	19	450	445	—	2	38	174	163	—	2	6	91	126
Kansas	—	7	20	368	357	—	1	4	53	24	—	0	3	25	137
Minnesota	6	13	44	662	661	2	4	17	242	193	2	5	19	226	231
Missouri	11	15	29	731	733	—	2	12	151	159	10	22	72	1,260	635
Nebraska§	6	5	14	263	188	1	1	6	89	78	—	0	7	26	119
North Dakota	—	0	23	43	32	—	0	12	4	6	—	0	127	8	108
South Dakota	—	3	11	154	135	—	0	5	47	50	—	1	30	116	367
S. Atlantic	260	225	433	11,511	10,985	13	15	37	692	604	96	87	177	4,366	3,298
Delaware	1	2	8	133	147	—	0	2	15	14	—	0	2	10	11
District of Columbia	—	0	4	16	62	—	0	1	1	3	—	0	5	4	17
Florida	144	88	181	4,699	4,540	4	3	13	150	87	52	40	75	2,116	1,505
Georgia	22	35	88	2,022	1,763	1	2	9	106	83	37	29	95	1,615	1,291
Maryland§	12	15	43	850	746	2	1	6	92	122	3	2	7	108	129
North Carolina	54	28	110	1,575	1,562	5	2	24	141	108	—	0	14	97	151
South Carolina§	8	18	51	1,039	1,022	1	0	3	24	15	1	3	20	178	77
Virginia§	9	20	39	984	1,009	—	3	9	145	160	3	3	12	158	113
West Virginia	10	4	31	193	134	—	0	5	18	12	—	0	36	80	4
E.S. Central	34	61	142	3,137	2,820	—	4	26	305	294	36	46	175	2,725	818
Alabama§	9	16	65	904	859	—	1	19	62	31	3	12	36	661	318
Kentucky	6	10	22	544	432	—	2	12	120	100	11	6	35	480	234
Mississippi	2	15	101	873	770	—	0	1	5	11	17	12	110	1,278	107
Tennessee§	17	17	34	816	759	—	2	10	118	152	5	4	32	306	159
W.S. Central	33	80	595	4,170	4,963	—	3	73	152	231	46	41	655	1,986	1,893
Arkansas§	7	13	51	801	876	—	0	3	34	48	—	2	10	86	117
Louisiana	5	16	40	880	1,089	—	0	2	3	17	1	9	22	456	249
Oklahoma	21	10	103	630	480	—	0	3	17	43	2	2	63	127	128
Texas§	—	39	470	1,859	2,518	—	2	68	98	123	43	25	580	1,317	1,399
Mountain	26	50	90	2,508	2,527	—	8	42	525	530	21	17	40	914	1,449
Arizona	14	17	44	961	872	—	2	8	106	104	18	9	31	538	704
Colorado	10	11	24	546	584	—	1	17	145	108	3	2	6	120	235
Idaho§	—	3	9	145	173	—	1	16	127	102	—	0	2	12	15
Montana§	—	2	6	100	126	—	0	0	—	—	—	0	7	23	60
Nevada§	—	3	9	154	227	—	0	3	18	32	—	0	9	54	140
New Mexico§	—	5	13	255	247	—	0	3	37	46	—	2	6	98	173
Utah	—	5	18	277	254	—	1	9	92	118	—	1	5	37	70
Wyoming§	2	1	5	70	44	—	0	0	—	20	—	0	19	32	52
Pacific	113	109	890	5,049	5,185	7	8	164	473	124	49	28	256	1,384	1,869
Alaska	1	1	5	76	76	N	0	0	N	N	—	0	2	7	7
California	92	82	260	3,965	4,445	7	4	33	257	N	47	24	84	1,160	1,698
Hawaii	3	0	12	74	254	—	0	1	6	18	—	0	1	7	45
Oregon§	—	6	16	301	408	—	1	11	81	106	—	1	6	73	119
Washington	17	11	625	633	2	—	1	162	129	—	2	2	170	137	—
American Samoa	—	0	0	—	—	—	0	0	—	N	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	N	0	0	N	N	—	0	0	—	—
Puerto Rico	—	14	66	726	658	—	0	0	—	—	—	0	4	22	39
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Includes *E. coli* O157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Streptococcal disease, invasive, group A					*Streptococcus pneumoniae*, invasive disease, nondrug resistant† Age <5 years				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	56	96	261	4,560	4,945	32	32	108	1,515	1,286
New England	1	5	28	354	327	—	2	11	108	124
Connecticut	1	0	22	116	88	—	0	6	12	34
Maine§	—	0	3	26	18	—	0	1	3	—
Massachusetts	—	3	12	155	164	—	1	6	72	71
New Hampshire	—	0	4	34	35	—	0	2	11	12
Rhode Island§	—	0	12	6	8	—	0	1	8	7
Vermont§	—	0	2	17	14	—	0	1	2	—
Mid. Atlantic	7	16	41	827	895	2	4	37	260	189
New Jersey	—	2	10	121	139	—	1	5	40	62
New York (Upstate)	6	5	27	269	287	2	2	15	104	95
New York City	—	4	13	193	156	—	1	35	116	32
Pennsylvania	1	5	11	244	313	N	0	0	N	N
E.N. Central	7	16	34	755	934	3	4	14	205	343
Illinois	—	4	13	210	287	—	1	5	41	98
Indiana	5	2	12	117	110	1	0	10	21	52
Michigan	—	4	10	183	194	—	1	5	70	72
Ohio	2	4	14	214	228	2	1	7	60	75
Wisconsin	—	0	5	31	115	—	0	2	13	46
W.N. Central	—	5	32	316	335	1	2	6	117	109
Iowa	—	0	0	—	—	—	0	0	—	—
Kansas	—	0	3	30	52	—	0	1	3	13
Minnesota	—	0	29	153	149	1	1	6	73	66
Missouri	—	2	6	80	81	—	0	2	25	15
Nebraska§	—	0	3	24	31	—	0	2	15	10
North Dakota	—	0	3	18	12	—	0	2	1	5
South Dakota	—	0	2	11	10	—	0	0	—	—
S. Atlantic	16	23	52	1,177	1,130	7	5	14	267	81
Delaware	—	0	1	10	10	—	0	0	—	—
District of Columbia	—	0	3	8	18	—	0	1	—	2
Florida	4	6	16	296	278	3	1	5	65	—
Georgia	4	5	13	242	249	—	0	5	44	—
Maryland§	5	4	10	203	206	4	1	5	63	67
North Carolina	2	1	22	158	157	—	0	0	—	—
South Carolina§	1	1	7	92	61	—	1	4	52	—
Virginia§	—	3	11	142	125	—	0	4	36	—
West Virginia	—	0	3	26	26	—	0	4	7	12
E.S. Central	3	4	13	196	194	1	2	6	89	18
Alabama§	N	0	0	N	N	N	0	0	N	N
Kentucky	—	1	3	36	42	N	0	0	N	N
Mississippi	N	0	0	N	N	—	0	2	3	18
Tennessee§	3	3	13	160	152	1	2	6	86	—
W.S. Central	12	6	90	295	373	12	4	43	243	201
Arkansas§	—	0	2	17	24	1	0	2	12	20
Louisiana	—	0	4	16	16	—	0	4	29	23
Oklahoma	1	1	23	67	100	3	1	13	59	53
Texas§	11	3	64	195	233	8	2	27	143	105
Mountain	10	11	22	512	630	6	4	12	196	195
Arizona	4	4	11	194	322	4	2	8	115	107
Colorado	5	3	8	147	114	2	1	3	47	53
Idaho§	—	0	2	18	9	—	0	1	2	3
Montana§	N	0	0	N	N	N	0	0	N	N
Nevada§	—	0	1	1	—	—	0	1	1	2
New Mexico§	1	1	4	59	119	—	0	4	24	30
Utah	—	2	7	88	62	—	0	2	7	—
Wyoming§	—	0	1	5	4	—	0	0	—	—
Pacific	—	3	7	128	127	—	0	3	30	26
Alaska	—	0	3	30	N	—	0	3	30	N
California	N	0	0	N	N	N	0	0	N	N
Hawaii	—	2	5	98	127	—	0	1	—	26
Oregon§	N	0	0	N	N	N	0	0	N	N
Washington	N	0	0	N	N	N	0	0	N	N
American Samoa	—	0	0	—	—	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	N	0	0	N	N
Puerto Rico	—	0	0	—	—	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Includes cases of invasive pneumococcal disease, in children aged <5 years, caused by *S. pneumoniae*, which is susceptible or for which susceptibility testing is not available (NNDSS event code 11717).
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	*Streptococcus pneumoniae*, invasive disease, drug resistant†										Syphilis, primary and secondary				
	All ages					Age <5 years									
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	85	47	256	2,224	2,279	4	8	35	433	395	146	211	310	9,911	8,985
New England	—	2	12	90	127	—	0	3	11	5	3	5	14	250	199
Connecticut	—	0	5	50	96	—	0	2	4	—	—	0	6	33	53
Maine§	—	0	2	10	7	—	0	2	2	1	—	0	2	9	8
Massachusetts	—	0	0	—	—	—	0	0	—	—	2	3	8	149	110
New Hampshire	—	0	0	—	—	—	0	0	—	—	1	0	3	28	12
Rhode Island§	—	0	4	15	12	—	0	1	3	1	—	0	5	28	14
Vermont§	—	0	2	15	12	—	0	1	2	3	—	0	1	3	2
Mid. Atlantic	—	2	9	118	146	—	0	5	28	22	34	30	45	1,464	1,085
New Jersey	—	0	0	—	—	—	0	0	—	—	6	4	8	208	165
New York (Upstate)	—	1	5	38	50	—	0	4	8	9	3	3	14	129	137
New York City	—	0	0	—	—	—	0	0	—	—	23	18	35	874	536
Pennsylvania	—	1	6	80	96	—	0	2	20	13	2	5	10	253	247
E.N. Central	11	10	40	529	498	1	2	8	102	83	5	15	25	752	832
Illinois	—	1	8	60	24	—	0	5	30	6	1	7	14	348	400
Indiana	4	2	31	131	133	—	0	5	23	23	—	1	6	54	89
Michigan	—	0	1	2	16	—	0	1	1	2	2	2	9	112	105
Ohio	7	5	38	336	325	1	1	5	48	52	1	4	9	185	174
Wisconsin	N	0	0	N	N	—	0	0	—	—	1	1	4	53	64
W.N. Central	49	2	124	180	95	1	0	15	17	13	—	7	14	315	269
Iowa	—	0	0	—	—	—	0	0	—	—	—	0	2	16	18
Kansas	—	0	11	64	—	—	0	2	6	—	—	0	2	20	27
Minnesota	46	0	123	46	51	1	0	15	6	10	—	1	4	62	46
Missouri	3	1	5	59	39	—	0	1	1	3	—	4	11	208	157
Nebraska§	—	0	1	2	1	—	0	0	—	—	—	0	1	2	7
North Dakota	—	0	0	—	—	—	0	0	—	—	—	0	0	—	1
South Dakota	—	0	1	9	4	—	0	1	4	—	—	0	3	7	13
S. Atlantic	22	20	59	957	1,078	2	4	14	203	196	70	49	180	2,354	2,026
Delaware	—	0	1	9	—	—	0	1	2	—	2	0	3	17	17
District of Columbia	—	0	1	5	25	—	0	0	—	2	—	3	12	162	110
Florida	13	11	29	547	563	1	2	8	118	122	56	17	40	896	679
Georgia	7	7	17	335	386	1	1	7	75	72	—	8	153	384	403
Maryland§	—	0	1	1	—	—	0	0	—	—	2	6	15	291	282
North Carolina	—	0	0	—	—	—	0	0	—	—	8	5	23	301	282
South Carolina§	—	0	0	—	—	—	0	0	—	—	1	2	11	90	64
Virginia§	N	0	0	N	N	—	0	0	—	—	1	4	16	207	179
West Virginia	2	1	17	60	104	—	0	1	8	—	—	0	1	6	10
E.S. Central	3	3	9	162	173	—	1	3	36	29	15	18	31	847	669
Alabama§	N	0	0	N	N	—	0	0	—	—	4	7	17	349	299
Kentucky	1	0	2	24	32	—	0	1	3	6	1	1	7	55	66
Mississippi	—	0	2	—	26	—	0	0	—	—	—	2	9	97	68
Tennessee§	2	2	9	138	115	—	0	3	33	23	10	7	15	346	236
W.S. Central	—	2	12	131	75	—	0	3	19	9	11	35	54	1,719	1,478
Arkansas§	—	0	1	3	10	—	0	0	—	2	1	2	10	117	76
Louisiana	—	1	4	60	65	—	0	2	9	7	7	9	23	436	314
Oklahoma	—	0	10	68	—	—	0	2	10	—	3	1	4	60	68
Texas§	—	0	0	—	—	—	0	0	—	—	—	21	39	1,106	1,020
Mountain	—	1	6	57	87	—	0	3	17	38	2	8	30	393	478
Arizona	—	0	0	—	—	—	0	0	—	—	—	3	22	183	192
Colorado	—	0	0	—	—	—	0	0	—	—	2	1	5	41	63
Idaho§	N	0	0	N	N	—	0	0	—	—	—	0	1	1	3
Montana§	—	0	0	—	—	—	0	0	—	—	—	0	2	4	1
Nevada§	—	0	3	19	18	—	0	2	4	3	—	2	6	100	132
New Mexico§	—	0	0	—	—	—	0	0	—	—	—	1	7	45	68
Utah	—	0	6	24	36	—	0	3	11	25	—	0	2	16	19
Wyoming§	—	0	2	14	33	—	0	1	2	10	—	0	1	3	—
Pacific	—	0	0	—	—	—	0	0	—	—	6	39	60	1,817	1,949
Alaska	—	0	0	—	N	—	0	0	—	—	—	0	1	7	11
California	N	0	0	N	N	—	0	0	—	—	2	36	57	1,648	1,724
Hawaii	—	0	0	—	—	—	0	0	—	—	—	0	2	8	17
Oregon§	N	0	0	N	N	—	0	0	—	—	—	0	2	16	25
Washington	N	0	0	N	N	—	0	0	—	—	4	2	12	138	172
American Samoa	N	0	0	N	N	—	0	1	1	—	—	0	4	4	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	N	0	0	N	N	—	0	0	—	—	1	3	10	155	143
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting year 2007 are provisional.
† Includes cases of invasive pneumococcal disease caused by drug-resistant *S. pneumoniae* (DRSP) (NNDSS event code 11720).
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 8, 2007, and December 9, 2006 (49th Week)*

Reporting area	Varicella (chickenpox)					West Nile virus disease†									
						Neuroinvasive					Nonneuroinvasive§				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2007	Cum 2006
United States	596	731	2,813	32,985	43,399	—	1	136	1,135	1,493	—	2	293	2,269	2,773
New England	6	14	124	679	4,011	—	0	2	7	9	—	0	2	5	3
Connecticut	—	0	76	2	1,565	—	0	2	4	7	—	0	1	1	2
Maine¶	—	0	6	—	224	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	0	1	—	1,141	—	0	2	3	2	—	0	2	3	1
New Hampshire	1	7	17	325	392	—	0	0	—	—	—	0	0	—	—
Rhode Island¶	—	0	0	—	—	—	0	0	—	—	—	0	1	1	—
Vermont¶	5	6	66	352	689	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	64	91	175	4,240	4,859	—	0	3	21	26	—	0	3	10	12
New Jersey	N	0	0	N	N	—	0	1	1	2	—	0	0	—	3
New York (Upstate)	N	0	0	N	N	—	0	1	2	8	—	0	1	1	4
New York City	—	0	0	—	—	—	0	3	13	8	—	0	3	5	4
Pennsylvania	64	91	175	4,240	4,859	—	0	1	5	8	—	0	1	4	1
E.N. Central	196	180	568	9,215	14,340	—	0	18	105	244	—	0	11	62	175
Illinois	—	3	11	159	132	—	0	13	60	127	—	0	8	36	88
Indiana	N	0	0	N	N	—	0	4	14	27	—	0	2	10	53
Michigan	64	83	258	3,774	4,831	—	0	5	13	43	—	0	0	—	12
Ohio	132	79	449	4,342	8,370	—	0	4	13	36	—	0	3	10	12
Wisconsin	—	15	80	940	1,007	—	0	2	5	11	—	0	2	6	10
W.N. Central	21	28	136	1,529	1,773	—	0	41	243	224	—	0	116	714	484
Iowa	N	0	0	N	N	—	0	4	12	22	—	0	3	17	15
Kansas	—	8	52	491	331	—	0	3	13	17	—	0	7	26	13
Minnesota	—	0	0	—	—	—	0	9	45	31	—	0	12	54	34
Missouri	21	14	78	889	1,288	—	0	9	58	51	—	0	2	14	11
Nebraska¶	N	0	0	N	N	—	0	5	18	45	—	0	15	126	219
North Dakota	—	0	60	84	45	—	0	11	49	20	—	0	48	318	117
South Dakota	—	1	14	65	109	—	0	9	48	38	—	0	32	159	75
S. Atlantic	59	92	239	4,648	4,421	—	0	12	42	18	—	0	6	35	14
Delaware	—	1	4	45	64	—	0	1	1	—	—	0	0	—	—
District of Columbia	—	0	8	14	46	—	0	0	—	—	—	0	0	—	2
Florida	32	25	76	1,200	N	—	0	1	3	3	—	0	0	—	—
Georgia	N	0	0	N	N	—	0	8	23	2	—	0	5	26	6
Maryland¶	N	0	0	N	N	—	0	2	6	10	—	0	2	4	1
North Carolina	—	0	0	—	—	—	0	1	4	1	—	0	1	2	—
South Carolina¶	4	19	72	994	1,182	—	0	2	3	1	—	0	1	2	—
Virginia¶	—	21	190	1,306	1,692	—	0	1	2	—	—	0	1	1	5
West Virginia	23	22	50	1,089	1,437	—	0	0	—	1	—	0	0	—	—
E.S. Central	6	10	571	633	30	—	0	11	68	118	—	0	14	95	101
Alabama¶	6	10	571	630	28	—	0	2	16	8	—	0	1	7	—
Kentucky	N	0	0	N	N	—	0	1	4	5	—	0	0	—	1
Mississippi	—	0	2	3	2	—	0	7	43	89	—	0	12	83	94
Tennessee¶	N	0	0	N	N	—	0	1	5	16	—	0	2	5	6
W.S. Central	198	160	1,640	9,475	11,201	—	0	29	219	373	—	0	13	98	236
Arkansas¶	10	10	105	634	1,090	—	0	5	13	24	—	0	2	7	5
Louisiana	—	2	11	106	195	—	0	5	25	91	—	0	3	11	89
Oklahoma	—	0	0	—	N	—	0	11	55	27	—	0	7	46	21
Texas¶	188	150	1,534	8,735	9,916	—	0	16	126	231	—	0	5	34	121
Mountain	43	52	131	2,527	2,764	—	0	36	271	393	—	1	141	1,004	1,486
Arizona	—	0	0	—	—	—	0	8	47	68	—	0	10	46	81
Colorado	32	21	62	1,022	1,415	—	0	17	96	66	—	0	65	459	279
Idaho¶	N	0	0	N	N	—	0	2	8	139	—	0	19	100	857
Montana¶	9	6	40	398	N	—	0	10	37	12	—	0	30	164	22
Nevada¶	—	0	1	1	10	—	0	1	1	34	—	0	3	10	90
New Mexico¶	2	5	37	352	363	—	0	8	39	3	—	0	6	21	5
Utah	—	12	73	720	908	—	0	8	28	56	—	0	7	39	102
Wyoming¶	—	0	9	34	68	—	0	4	15	15	—	0	33	165	50
Pacific	3	0	9	39	—	—	0	18	159	88	—	0	23	246	262
Alaska	3	0	9	39	N	—	0	0	—	—	—	0	0	—	—
California	—	0	0	—	N	—	0	17	152	81	—	0	21	227	197
Hawaii	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
Oregon¶	N	0	0	N	N	—	0	3	7	7	—	0	4	19	62
Washington	N	0	0	N	N	—	0	0	—	—	—	0	0	—	3
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	4	24	251	271	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	13	37	620	570	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

* Incidence data for reporting year 2007 are provisional.

† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.

§ Not notifiable in all states. Data from states where the condition is not notifiable are excluded from this table, except in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.

¶ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE III. Deaths in 122 U.S. cities,* week ending December 8, 2007 (49th Week)

Reporting Area	All causes, by age (years)						P&I†
	All Ages	≥65	45-64	25-44	1-24	<1	Total
New England	404	279	79	23	12	11	35
Boston, MA	142	87	36	6	5	8	12
Bridgeport, CT	35	30	3	1	1	—	9
Cambridge, MA	12	9	2	1	—	—	—
Fall River, MA	21	10	5	4	—	2	3
Hartford, CT	54	34	11	4	4	1	3
Lowell, MA	19	18	—	1	—	—	2
Lynn, MA	7	5	1	1	—	—	1
New Bedford, MA	37	28	6	3	—	—	1
New Haven, CT	U	U	U	U	U	U	U
Providence, RI	U	U	U	U	U	U	U
Somerville, MA	1	—	1	—	—	—	—
Springfield, MA	41	29	9	1	2	—	1
Waterbury, CT	35	29	5	1	—	—	3
Worcester, MA	U	U	U	U	U	U	U
Mid. Atlantic	2,115	1,442	487	116	28	41	101
Albany, NY	52	40	8	1	—	3	4
Allentown, PA	27	24	2	1	—	—	4
Buffalo, NY	87	62	18	5	1	1	7
Camden, NJ	38	23	9	4	1	1	—
Elizabeth, NJ	10	7	1	2	—	—	—
Erie, PA	55	43	11	1	—	—	6
Jersey City, NJ	16	12	3	1	—	—	—
New York City, NY	1,070	712	262	63	9	23	44
Newark, NJ	18	5	3	4	5	1	1
Paterson, NJ	19	10	7	—	1	1	1
Philadelphia, PA	324	206	90	15	7	6	14
Pittsburgh, PA§	45	25	10	6	3	1	4
Reading, PA	34	31	3	—	—	—	4
Rochester, NY	143	109	28	5	—	1	7
Schenectady, NY	27	22	4	—	—	1	—
Scranton, PA	31	22	8	1	—	—	1
Syracuse, NY	59	43	13	2	—	1	2
Trenton, NJ	28	22	3	2	—	1	1
Utica, NY	10	8	1	1	—	—	1
Yonkers, NY	22	16	3	2	1	—	—
E.N. Central	2,201	1,441	534	117	49	60	134
Akron, OH	54	33	14	2	3	2	2
Canton, OH	38	26	10	2	—	—	—
Chicago, IL	325	201	82	25	8	9	31
Cincinnati, OH	132	77	28	12	3	12	16
Cleveland, OH	240	170	53	5	7	5	8
Columbus, OH	205	139	53	5	3	5	17
Dayton, OH	127	96	28	3	—	—	8
Detroit, MI	182	91	67	10	8	6	6
Evansville, IN	50	37	9	2	2	—	2
Fort Wayne, IN	77	52	15	7	1	2	2
Gary, IN	20	5	12	2	1	—	2
Grand Rapids, MI	58	41	10	3	1	3	5
Indianapolis, IN	200	128	47	10	5	10	11
Lansing, MI	50	39	8	1	2	—	1
Milwaukee, WI	111	69	22	16	2	2	5
Peoria, IL	47	35	7	3	—	2	3
Rockford, IL	41	29	8	3	1	—	2
South Bend, IN	70	48	21	1	—	—	2
Toledo, OH	118	82	29	3	2	2	5
Youngstown, OH	56	43	11	2	—	—	6
W.N. Central	633	421	151	22	18	17	44
Des Moines, IA	U	U	U	U	U	U	U
Duluth, MN	32	23	7	2	—	—	1
Kansas City, KS	22	15	5	—	2	—	8
Kansas City, MO	128	82	36	7	3	—	10
Lincoln, NE	47	34	10	—	1	1	3
Minneapolis, MN	84	54	15	4	4	7	7
Omaha, NE	99	66	23	2	2	6	9
St. Louis, MO	90	58	20	4	5	—	—
St. Paul, MN	63	46	12	2	1	2	2
Wichita, KS	68	43	23	1	—	1	4
S. Atlantic	1,213	754	305	76	41	37	56
Atlanta, GA	138	74	33	7	9	15	4
Baltimore, MD	176	102	51	16	4	3	16
Charlotte, NC	106	72	28	2	4	—	—
Jacksonville, FL	211	133	54	18	3	3	13
Miami, FL	122	86	24	5	3	4	1
Norfolk, VA	48	30	12	2	3	1	—
Richmond, VA	68	32	20	9	4	3	5
Savannah, GA	46	30	13	—	1	2	2
St. Petersburg, FL	57	37	11	2	3	4	3
Tampa, FL	229	149	58	15	5	2	12
Washington, D.C.	U	U	U	U	U	U	U
Wilmington, DE	12	9	1	—	2	—	—
E.S. Central	926	635	194	62	16	19	58
Birmingham, AL	187	123	43	9	6	6	12
Chattanooga, TN	86	61	18	4	—	3	2
Knoxville, TN	126	94	19	10	3	—	—
Lexington, KY	93	60	20	9	3	1	5
Memphis, TN	144	94	37	11	2	—	10
Mobile, AL	81	58	18	5	—	—	7
Montgomery, AL	56	46	4	3	1	2	6
Nashville, TN	153	99	35	11	1	7	16
W.S. Central	1,067	667	240	86	42	31	64
Austin, TX	102	67	28	4	—	3	2
Baton Rouge, LA	66	34	15	9	8	—	—
Corpus Christi, TX	38	29	6	1	1	1	4
Dallas, TX	224	117	61	21	13	12	6
El Paso, TX	101	75	16	5	1	4	3
Fort Worth, TX	107	79	20	4	2	2	8
Houston, TX	295	172	68	35	13	6	23
Little Rock, AR	73	48	17	4	2	2	5
New Orleans, LA¶	U	U	U	U	U	U	U
San Antonio, TX	U	U	U	U	U	U	U
Shreveport, LA	61	46	9	3	2	1	13
Tulsa, OK	U	U	U	U	U	U	U
Mountain	1,113	734	248	69	35	26	81
Albuquerque, NM	127	84	32	8	—	3	8
Boise, ID	U	U	U	U	U	U	U
Colorado Springs, CO	73	48	14	6	5	—	13
Denver, CO	75	49	16	7	3	—	7
Las Vegas, NV	287	180	76	19	5	7	13
Ogden, UT	23	17	4	2	—	—	—
Phoenix, AZ	178	117	31	13	9	7	6
Pueblo, CO	31	24	6	1	—	—	4
Salt Lake City, UT	136	83	37	6	7	3	9
Tucson, AZ	183	132	32	7	6	6	21
Pacific	1,713	1,184	359	89	39	40	134
Berkeley, CA	24	18	6	—	—	—	1
Fresno, CA	82	53	21	4	3	1	7
Glendale, CA	17	15	2	—	—	—	3
Honolulu, HI	61	44	13	1	1	2	5
Long Beach, CA	63	41	15	2	5	—	5
Los Angeles, CA	265	191	44	19	1	10	43
Pasadena, CA	34	27	6	1	—	—	3
Portland, OR	111	81	18	6	3	2	7
Sacramento, CA	190	123	51	11	3	2	5
San Diego, CA	180	116	41	5	9	8	9
San Francisco, CA	113	81	20	8	3	1	12
San Jose, CA	237	153	54	19	2	9	14
Santa Cruz, CA	37	25	6	3	2	1	1
Seattle, WA	142	102	24	7	6	3	5
Spokane, WA	65	46	17	2	—	—	8
Tacoma, WA	92	68	21	1	1	1	6
Total	11,385**	7,557	2,597	660	280	282	707

U: Unavailable. —:No reported cases.

* Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of ≥100,000. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

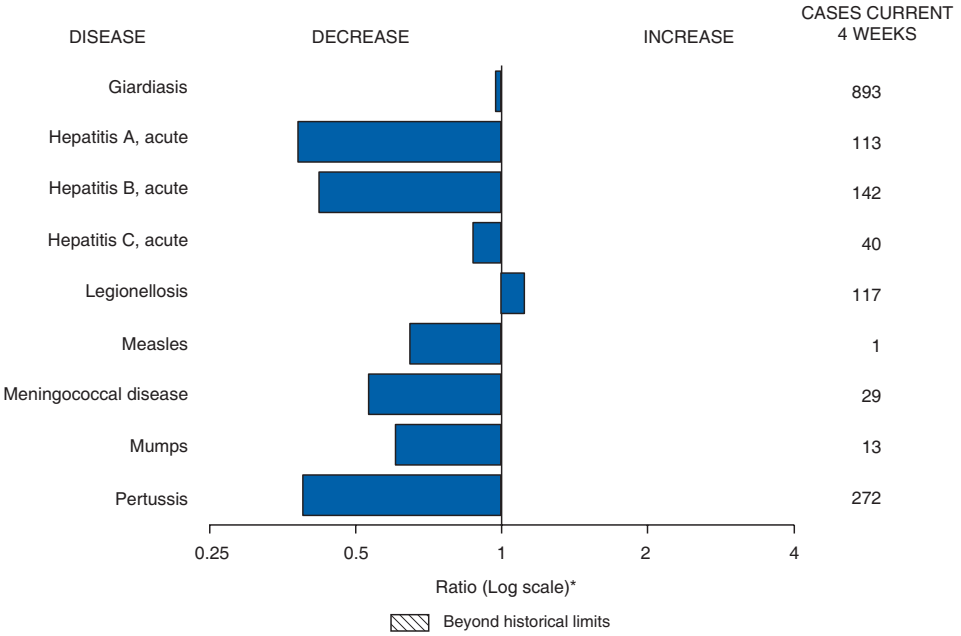
† Pneumonia and influenza.

§ Because of changes in reporting methods in this Pennsylvania city, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

¶ Because of Hurricane Katrina, weekly reporting of deaths has been temporarily disrupted.

** Total includes unknown ages.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals December 8, 2007, with historical data



* Ratio of current 4-week total to mean of 15 4-week totals (from previous, comparable, and subsequent 4-week periods for the past 5 years). The point where the hatched area begins is based on the mean and two standard deviations of these 4-week totals.

Notifiable Disease Data Team and 122 Cities Mortality Data Team

Patsy A. Hall

Deborah A. Adams
Willie J. Anderson
Lenee Blanton
Rosaline Dhara
Carol Worsham
Pearl C. Sharp

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