

Weekly

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Transmission of Malaria in Resort Areas — Dominican Republic, 2004

Malaria is caused by any of four Plasmodium parasites carried by Anopheles mosquitoes and usually is transmitted by the bite of an infective female Anopheles. In rural areas of the Dominican Republic, P. falciparum malaria is endemic, with the highest risk in the far western region of the country, and prophylactic medication with chloroquine is recommended for incoming travelers. Conversely, urban and resort areas in the Dominican Republic have been considered nonmalarious, and prophylactic medication has not been recommended for persons traveling to these areas (1). However, since November 2004, CDC has received reports of three malaria cases in U.S. travelers returning from areas in La Altagracia and Duarte provinces (Figure) previously considered nonmalarious. An additional 14 cases of malaria in La Altagracia Province, in the far eastern region of the country, have been reported in European and Canadian travelers. This report describes three of these 17 malaria cases and summarizes the overall investigation, which led to expansion of CDC recommendations for chloroquine prophylaxis to include all of La Altagracia and Duarte provinces.

Case Reports

Case 1. During the third week of November 2004, a woman aged 47 years was admitted to an intensive care unit (ICU) in the United States with multisystem organ failure, including acute respiratory distress syndrome and renal failure. She had a 6-day history of fever, chills, abdominal pain, headache, nausea, and vomiting that began 24–36 hours after returning from a 1-week vacation to a resort in Punta Cana in La Altagracia Province. The patient had been examined twice by a health-care provider in an outpatient setting and sent home. Two days before hospital admission, she had jaundice. On admission, the patient had *P. falciparum* malaria on blood

FIGURE. Provinces with resort and urban areas where malaria is not endemic but where 17 cases were reported — Dominican Republic, 2004



smear (35% parasitemia), anemia (hemoglobin: 10.4 g/dL [normal: 12–18 g/dL]), leukocytosis (white blood cell count: 35,000/ μ L [normal: 5,000–10,000/ μ L]), severe thrombocytopenia (platelet count: 5,000/ μ L [normal: 130,000–400,000/ μ L]), and was obtunded. The patient was started on intravenous



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Notifiable Disease Morbidity and 122 Cities Mortality Data

Patsy A. Hall Deborah A. Adams Felicia J. Connor Rosaline Dhara Donna Edwards Mechelle Hester Tambra McGee Pearl C. Sharp quinidine gluconate, and the parasitemia cleared in 2 days. On the fifth day of hospitalization, the quinidine was discontinued, and the patient was placed on doxycycline. The patient underwent hemodialysis for renal failure; she improved and was discharged to a rehabilitation center, where she remained as of December 30, 2004. Her husband reported that they had stayed at an all-inclusive resort in Punta Cana during their entire week in the Dominican Republic and did not travel to other areas. In addition, the patient had not traveled to any other malarious areas nor received any blood transfusions during the preceding year.

Case 2. In late November, a man aged 71 years visited an emergency department in Canada 10 days after returning home from a week at a resort in Punta Cana and after 4 days of fever, myalgias, and malaise. Viral infection was diagnosed, and the man was discharged home. The next day, he saw his family doctor, who also diagnosed a viral illness. The following day, the patient's condition deteriorated substantially, and he was admitted to the hospital with hypotension, hypoxia, acute renal failure, and respiratory failure requiring mechanical ventilation. Two days after admission, the patient had a blood smear that demonstrated a 9% P. falciparum parasitemia. He was treated with intravenous quinidine and doxycycline and underwent hemodialysis. The patient reported taking a day trip to Santo Domingo while in the Dominican Republic but reported no other travel. During the preceding year, he had not traveled to any other malarious areas nor received any blood transfusions. As of December 30, the patient remained hospitalized.

Case 3. In late November, a man aged 39 years was admitted to an ICU in Canada 12 days after returning home from a resort in Punta Cana, where he had stayed for 2 weeks. The patient reported having fevers and chills for 9 days and later had jaundice. One day after admission, he had a blood smear revealing 2% *P. falciparum* parasitemia and was treated with chloroquine and quinine. The patient was anemic and had acute respiratory distress syndrome, acute renal failure, and cerebral malaria; he underwent exchange transfusion. During the preceding year, the patient had not traveled to any other malarious areas nor received any blood transfusions. As of December 30, the patient remained hospitalized.

Epidemiologic Investigation

After receiving reports of malaria in two U.S. travelers to the Dominican Republic, CDC contacted the Pan American Health Organization, World Health Organization, and Ministry of Health (MoH) in the Dominican Republic, which initiated investigations. Seventeen patients (i.e., three from the United States, six from Canada, and eight from European

* Proposed.

countries) were identified*; *P. falciparum* malaria was confirmed in all of them. Sixteen of the patients had traveled to Punta Cana resorts in La Altagracia Province and one to San Francisco de Macorís in Duarte Province. Sixteen returned home during November 3–16, and one returned December 20; all were admitted to hospitals, and six required treatment in ICUs. As of December 30, no deaths had been reported; three patients remained hospitalized. Seven of the patients confirmed that they had not traveled to any other malarious areas nor received any blood transfusions during the preceding year.

Prevention and Control Measures

On November 24, CDC expanded its recommendations for chloroquine prophylaxis for travelers to the Dominican Republic to include all of La Altagracia and Duarte provinces, in addition to rural areas countrywide (2). The revised recommendations advise clinicians and travelers about the expanded malaria risk area so that any febrile persons who have visited these areas will receive prompt diagnosis and treatment to avoid severe complications. Major networks of blood collection agencies and the Food and Drug Administration also were contacted. Similar alerts were issued by health officials in Europe and by the Public Health Agency of Canada.

The MoH investigation included active case detection and entomologic investigations in La Altagracia and Duarte provinces. In Duarte Province, officials confirmed that no other cases had been reported during 2003-2004. Nonetheless, MoH is taking precautionary measures, including enhanced surveillance. In La Altagracia Province, MoH surveillance data have identified an increase in cases of malaria beginning in November 2004 among migrant workers in the Bavaro Zone, 10 miles from the Punta Cana resort area. MoH intensified control measures in the Bavaro Zone, which include 1) presumptive treatment of all construction and hotel workers by using directly observed therapy with chloroquine and primaquine, and 2) mosquito control through residual and spatial insecticide spraying and application of larvicide to suspected breeding sites. Measures instituted in the Punta Cana resort area include intensified surveillance and larvicide application.

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Editorial Note: This report describes an outbreak of malaria in areas in the Dominican Republic previously thought to be nonmalarious. P. falciparum is the only malaria parasite in the Dominican Republic and has remained susceptible to chloroquine. Because P. falciparum malaria can be rapidly fatal, travelers should be aware of risk areas so that they can take appropriate preventive measures; clinicians should consider malaria in their diagnosis and treatment of febrile illness in travelers. Malaria can be prevented by taking an antimalarial drug and by preventing mosquito bites. Chloroquine is the recommended drug for malaria prevention for persons traveling to the Dominican Republic and is highly efficacious and well tolerated by most travelers. To prevent mosquito bites, travelers should use insect repellent containing up to 50% DEET and wear long-sleeved clothing; if not staying in screened or air-conditioned housing, they should sleep under a net, preferably one treated with insecticide. Rapid intervention is crucial for ill travelers with suspected malaria (3). In nearly all cases in this outbreak, delays in diagnosis and treatment occurred; in certain cases, delays contributed to serious illness.

During July 1999–March 2000, a previous outbreak in the Dominican Republic occurred among European travelers to Punta Cana, principally in the Bavaro Zone. Factors identified as contributing to that outbreak were 1) the increased breeding of *A. albimanus* mosquitoes, the predominant malaria vector in the Dominican Republic, in the wake of Hurricanes Mitch and George and 2) malaria-infected migrant workers. In 1999, approximately 3,000 malaria cases were reported in the Dominican Republic, a 50% increase over the number of cases in 1998 (4). During the 1999–2000 outbreak, CDC travel recommendations were temporarily expanded to recommend chloroquine prophylaxis for all areas in La Altagracia Province; this recommendation was rescinded 2 months later after MoH increased surveillance and controlled the outbreak.

In September 2004, Hurricane Jeanne struck the Dominican Republic. The east coast, including Punta Cana and the Bavaro Zone, received heavy rains and flooding, which might have resulted in increased breeding of mosquitoes. In addition, construction in Punta Cana and the Bavaro Zone has brought in many migrant workers from areas where malaria is

^{*} The first U.S. patient was reported through the Emerging Infections Network, a provider-based sentinel network developed by the Infectious Disease Society of America. The other two U.S. patients were reported through the CDC Malaria Hotline. The Public Health Agency of Canada, the GeoSentinel Network, and the European Network on Imported Infectious Disease Surveillance reported six cases in travelers from Canada and eight cases in travelers from Europe.

endemic. The ongoing MoH investigation will attempt to determine whether these factors have contributed to the recent increased transmission. MoH surveillance data indicate that, on average, approximately 1,500–2,500 malaria cases are reported annually in the Dominican Republic; in 2004, a total of 2,012 cases had been reported through November.

Effective surveillance systems and rapid communication among surveillance networks are crucial to detecting cases of malaria and intervening in areas that are usually nonmalarious. During this outbreak, rapid communication among surveillance networks in North America, Europe, and the Caribbean led to prompt diagnoses and timely public health interventions to prevent additional cases among residents of and travelers to the Dominican Republic.

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Fatal Rat-Bite Fever — Florida and Washington, 2003

Rat-bite fever (RBF) is a rare, systemic illness caused by infection with Streptobacillus moniliformis. RBF has a casefatality rate of 7%-10% among untreated patients (1). S. moniliformis is commonly found in the nasal and oropharyngeal flora of rats. Human infection can result from a bite or scratch from an infected or colonized rat, handling of an infected rat, or ingestion of food or water contaminated with infected rat excreta (1). An abrupt onset of fever, myalgias, arthralgias, vomiting, and headache typically occurs within 2-10 days of exposure and is usually followed by a maculopapular rash on the extremities (1). This report summarizes the clinical course and exposure history of two rapidly fatal cases of RBF identified by the CDC Unexplained Deaths and Critical Illnesses (UNEX) Project in 2003. These cases underscore the importance of 1) including RBF in the differential diagnoses of acutely ill patients with reported rat exposures and 2) preventing zoonotic infections among persons with occupational or recreational exposure to rats.

Case Reports

Florida. In early September 2003, a previously healthy woman aged 52 years visited an emergency department (ED) with a 2-day history of headache, abdominal pain, diarrhea, lethargy, right axillary lymphadenopathy, progressive myalgias, and pain in her distal extremities. On physical examination, she was afebrile and hypotensive (blood pressure: 82/40 mmHg) with left-sided abdominal tenderness and scleral icterus; no rash was noted. Laboratory tests indicated a mildly elevated white blood cell count of 13,800 cells/µL (normal: 5,000–10,000 cells/µL), thrombocytopenia (71,000 platelets/µL [normal: 130,000–500,000 platelets/µL]), elevated alanine aminotransferase of 112 U/L (normal: 20-52 U/L), elevated aspartate aminotransferase of 154 U/L (normal: <40 U/L), elevated total bilirubin of 5.8 mg/dL (normal: 0.2–1.2 mg/dL), elevated blood urea nitrogen of 55 mg/dL (normal: 7-23 mg/ dL), and elevated creatinine of 2.9 mg/dL (normal: 0.7-1.5 mg/dL).

The patient was admitted to the intensive care unit, where she became increasingly hypoxic with marked anemia (hemoglobin: 8.6 g/dL [normal: 12–16 g/dL]) and increasingly severe thrombocytopenia (32,000 platelets/ μ L). She was treated with ciprofloxacin, metronidazole, and vancomycin for possible gram-negative sepsis and received two blood transfusions; however, she died approximately 12 hours after admission. A maculopapular rash was noted postmortem. No autopsy was performed.

Peripheral blood smears obtained before death revealed abundant neutrophils and intracellular collections of filamentous bacteria (Figure). Premortem blood from a tube containing no additives or separators was inoculated onto a blood agar plate and incubated in CO_2 at 95°F (35°C). After 72 hours, the culture demonstrated slight growth of gramnegative filamentous bacteria. UNEX was contacted for assistance, and diagnostic specimens were submitted to CDC for further laboratory evaluation. At CDC, the isolate was subcultured onto media enriched with 20% solution of sterile normal rabbit serum and incubated in a candle jar for 48 hours. Biochemical analyses identified the bacterial isolate as *S. moniliformis*. The 16S rRNA gene sequences amplified from DNA extracted from the patient's blood and the bacterial isolate were consistent with *S. moniliformis*.

The patient had been employed at a pet store. She was bitten on her right index finger by a rat in the store 2 days before symptom onset and 4 days before arriving at the ED. She selftreated the wound by using antiseptic ointment immediately after being bitten. In addition, she had regular contact with several pet rats, cats, a dog, and an iguana at her home; however, no bites from these animals were reported. None of the animals were tested for *S. moniliformis*.

trust-wor-thy: adj

('trəst-"wər-thē) 1 : worthy of belief
2 : capable of being depended upon;
see also *MMWR*.



know what matters.



FIGURE. *Streptobacillus moniliformis* bacilli in a neutrophil (peripheral blood smear, Wright stain, original magnification: 100X)



Photo/CDC

Washington. In late November 2003, a previously healthy woman aged 19 years was pronounced dead on arrival at a hospital ED. No laboratory studies were performed in the ED. An acquaintance reported that the patient had experienced a 3-day history of fever, headache, myalgias, nausea, and profound weakness without cough, vomiting, diarrhea, or rash. Before her transport to the ED, she exhibited anxiety, confusion, and labored breathing. ED staff noted that she appeared jaundiced. The body was transported to the coroner's office, where an autopsy was performed.

Cultures of blood and tissue from autopsy were negative for pathogenic organisms. A toxicology screen was negative. Serologic assays for leptospirosis, Epstein-Barr virus, cytomegalovirus, and viral hepatitis were negative for recent infection. Histopathology revealed findings suggestive of a systemic infectious process that included disseminated intravascular coagulopathy and inflammatory cell infiltrates in the liver, heart, and lungs. UNEX was contacted for assistance, and project staff facilitated the submission of diagnostic specimens to CDC for further laboratory evaluation. Immunohistochemical assays performed at CDC for Leptospira spp., Bartonella quintana, spotted fever and typhus group rickettsiae, flaviviruses, hantaviruses, and influenza viruses were negative. Clusters of filamentous bacteria were identified in sections of the liver and kidney by using a silver stain. The 16S rRNA gene sequence amplified from DNA extracted from paraffinembedded, formalin-fixed samples of liver and kidney was consistent with S. moniliformis.

The patient worked as a dog groomer and lived in an apartment with nine pet rats. One pet rat with respiratory symptoms had recently been prescribed oral doxycycline after having been evaluated at a veterinary clinic. Doxycycline was subsequently used to treat a second ill rat. None of the rats were tested for *S. moniliformis*. The patient had no known animal bites during the 2 weeks preceding her death.

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Editorial Note: Although rapidly fatal pediatric cases of RBF have been described previously (2,3), similar mortality among adults has not been reported. Mortality attributed to severe systemic complications (e.g., endocarditis, myocarditis, meningitis, pneumonia, or multiple organ failure) has been documented in certain adult patients (1, 4). Both patients described in this report died within 12 hours of presentation, allowing little opportunity for assessment and treatment. These case reports demonstrate that infection with S. moniliformis can cause fulminant sepsis and death in previously healthy adults. As a result, prevention of severe disease might depend on increasing the awareness of appropriate risk-reduction activities and possible symptoms of RBF among persons who have exposure to rats. Intravenous penicillin is the treatment of choice, and prompt therapy can prevent severe complications (1). Because rapid laboratory confirmation of infection with S. moniliformis might not be possible, clinicians should consider initiating empiric therapy for patients with a compatible clinical presentation and exposure history.

Clinicians should consider RBF in the differential diagnosis for unexplained febrile illness or sepsis in patients reporting rat exposure. Initial symptoms might be nonspecific (Box), but a maculopapular rash and septic arthritis commonly develop (1,5). However, as demonstrated by the cases in this report, patients can have severe disease before the onset of typical symptoms. Despite its name, approximately 30% of patients with RBF do not report having been bitten or scratched by a rat (1,5). Risk factors for RBF include handling rats at home and in the workplace (e.g., laboratories or pet stores). RBF is rare in the United States, with only a few cases documented each year (1,6,7). However, because RBF is not a nationally notifiable disease, its actual incidence has not been well described.

In the cases described here, diagnosis of RBF was delayed in part because of the inability to rapidly isolate or identify *S. moniliformis*. If infection with *S. moniliformis* is suspected,

BOX. Epidemiology, clinical findings, diagnosis, treatment, and prevention and reporting of rat-bite fever (RBF) caused by *Streptobacillus moniliformis*

Epidemiology/Ecology

- Zoonotic disease caused by infection with *S. moniliformis*, a fastidious gram-negative bacillus.
- Spirillum minus also causes RBF outside the United States.
- *S. moniliformis* is part of the normal respiratory flora of rats. Other rodents might also be reservoirs.
- Transmitted to humans by contact with infected rats or by ingestion of rat excreta. Person-to-person transmission has not been reported.
- Incubation period: 2–10 days.
- Cases are rare, but disease incidence is not well characterized.
- Case-fatality rate as high as 10% in untreated patients.

Clinical Findings

- Initial symptoms are nonspecific and include fever, chills, myalgias, arthralgias, headache, and vomiting.
- Patients can have a maculopapular rash on the extremities or septic arthritis 2–4 days after fever onset.
- Severe manifestations can include endocarditis, myocarditis, meningitis, pneumonia, sepsis, and death.

Diagnosis

- Blood or synovial fluid culture, collected in tubes without sodium polyanethol sulfonate (SPS). Inoculate into media supplemented with 20% solution of sterile normal rabbit serum and incubate in humid environment with 5%–10% CO₂ at 98.6°F (37°C). Hold cultures ≥5 days.
- Pleomorphic bacilli in Gram-, Wright-, or silver-stained blood smears or tissues supports diagnosis.
- For assistance, contact a state public health laboratory or CDC Meningitis and Special Pathogens Branch, telephone 404-639-3158.

Treatment

- Intravenous penicillin, 1.2 million units/day for 5–7 days, followed by oral penicillin or ampicillin 500 mg four times a day for 7 days if improvement is observed.
- Oral tetracycline 500 mg four times a day or intramuscular streptomycin 7.5 mg/kg twice daily are alternatives.

Prevention and Reporting

- Wear protective gloves, practice regular hand washing, and avoid hand-to-mouth contact when handling rats or cleaning rat cages.
- Adults should closely supervise children aged <5 years to prevent bites and hand-to-mouth contact.
- If bitten by a rat, promptly clean and disinfect the wound.
- Efficacy of antimicrobial prophylaxis is unknown.
- Not a notifiable disease; however, unexplained deaths and critical illnesses or rare diseases of public health importance might be reportable in certain states.

specific media and incubation conditions should be used (8) (Box). In the absence of a positive culture, identification of pleomorphic gram-negative bacilli in appropriate specimens might support a preliminary diagnosis (1). In the event of an unexplained death in a person with rat exposure, performing an autopsy might also be critical to identifying an etiology.

Because of the high prevalence of colonization and asymptomatic infection with *S. moniliformis* among rodents (Box), testing and treatment of rats is not practical. Disease prevention should center on risk reduction among persons with frequent rat exposure. Adherence to simple precautions while handling rats can reduce the risk for RBF and other potential rodent-borne zoonotic infections, wound infections, and injuries. Persons should wear gloves, practice regular hand washing, and avoid hand-to-mouth contact when handling rats or cleaning rat cages (1,9). If bitten by a rat, persons should promptly clean and disinfect the wound, seek medical attention, and report their exposure history. A tetanus toxoid booster should be administered if ≥ 10 years have lapsed since the last dose (9,10).

Clinicians should contact their state health departments for assistance with diagnosis of unexplained deaths or critical illnesses and cases or clusters of suspected RBF or other zoonotic infections. UNEX coordinates surveillance for unexplained deaths possibly attributed to infection throughout the United States. Cases are reported by a network of health departments, medical examiners/coroners, pathologists, and clinicians. Epidemiologic and clinical data are collected, and available clinical and pathologic specimens are obtained for reference and diagnostic testing at state, CDC, and other laboratories. State and local health departments may contact UNEX for assistance with the evaluation of unexplained deaths that occur in their jurisdictions.

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Brief Report

Tularemia Associated with a Hamster Bite — Colorado, 2004

In April 2004, the Colorado Department of Public Health and Environment (CDPHE) was notified about a boy aged 3 years with diagnosed tularemia associated with a hamster bite. Tularemia has not been associated previously with pet hamsters. CDPHE conducted an investigation to determine whether other owners of hamsters were at risk. Clinicians and public health officials should be aware that pet hamsters are a potential source of tularemia.

During January 2-February 8, the boy was exposed to six hamsters that his family had purchased from a pet store in the Denver metropolitan area. Each hamster reportedly died from "wet tail disease" (i.e., diarrhea) within 1 week of purchase. One hamster bit the child on the left ring finger shortly before it died. Seven days later, the child had fever, malaise, painful left axillary lymphadenopathy, and skin sloughing at the bite site. After treatment with amoxicillin clavulanate failed, the patient underwent excisional biopsy of a left axillary lymph node 49 days after symptom onset for persistent painful lymphadenopathy and intermittent fever. Tissue culture yielded a suspected Francisella tularensis isolate, which was confirmed by real-time polymerase chain reaction and timed-release fluorescence at the CDPHE laboratory. Convalescent serology was positive at a titer of 4,096, and the isolate was identified by CDC as type B. No other risk factors for tularemia exposure were identified, including no other animal contact, no exposure to game meat, and no known mosquito, tick, or fly bites. The patient improved after treatment with ciprofloxacin.

Workers at the pet store reported an unusual number of deaths among hamsters but not other animals during January–February; no carcasses were available for testing. One of two cats kept as store pets had a positive serologic test for *F. tularensis* at a titer of 256. Neither cat had appeared ill to store employees.

Lists of employees, pet suppliers, and customers who purchased hamsters during December 2003–February 2004 were obtained from the store owner. Fifteen of 18 customers were located and interviewed. Eight of these had hamsters that died within 2 weeks of purchase, but all carcasses had been disposed of and were unavailable for testing. One customer and one employee who had febrile illness after being bitten by hamsters from the store were negative for *F. tularensis* by serologic testing. The same customer's hamster was available, and it was also negative for *F. tularensis* by serology and culture.

Approximately 80% of the 50 hamsters at the pet store came from customers who had pets with unanticipated litters. The other 20% were purchased from two small-pet breeders. These breeders were contacted, and neither reported an unusually high number of deaths of hamsters or other animals. One breeder also supplied animals to two pet stores in Wyoming. The Wyoming Department of Health had not been notified of any tularemia cases linked to these stores.

Confirmation of a hamster as the infectious source was limited by the delay between the patient's illness onset and diagnosis and subsequent lack of availability of implicated hamsters for testing. Nonetheless, the hamster that bit the patient was the most likely cause of infection because no other exposures or risk factors were identified. The positive serologic test for F. tularensis in a pet cat at the store suggested that other animals in the store might have been exposed to F. tularensis. In addition, the proximity of the onset of the patient's illness to the timing of the hamster bite, reports of illness among hamsters, and the deaths of hamsters at the pet store indicated an infected hamster as the likely source of illness. A possible scenario, similar to an outbreak of tularemia that involved zoo primates (1), is that infected wild rodents infested the store and spread the infection to hamsters by urinating and defecating through metal screens covering hamster cages. The infected cat might have had a subclinical or unrecognized illness after catching or eating an infected wild rodent.

The storeowner was advised to set traps for wild rodents and to inform the state health department of any recurrent animal deaths or reports of ill customers or staff. No other cases have been identified.

Although tularemia has been associated with hamster hunting in Russia (2), it has not been associated previously with pet hamsters in the United States. However, clinicians and public health officials should be aware that pet hamsters might be a potential source of tularemia. Moreover, because *F. tularensis* is a potential agent of biologic terrorism (3), clinicians should have a heightened awareness of tularemia.

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Notice to Readers

National Birth Defects Prevention Month and National Folic Acid Awareness Week

January is National Birth Defects Prevention Month, and January 24–30 is National Folic Acid Awareness Week. Birth defects affect approximately 120,000 (one in 33) newborns in the United States each year; they are the leading cause of infant mortality and contribute substantially to illness and long-term disability. Lifetime costs for those infants born in a single year with one or more of the 17 most clinically important birth defects has been estimated to total \$6 billion (1).

Health-care professionals can help prevent birth defects by encouraging women of childbearing age to follow healthy preconceptional and prenatal practices, including taking multivitamins containing folic acid and avoiding alcohol consumption. Taking the B vitamin folic acid before and during early pregnancy can prevent serious birth defects of the spine and brain (i.e., neural tube defects). The rates of such birth defects declined 26% after folic acid was first added to cereal-grain products in 1998. However, approximately 3,000 pregnancies each year in the United States continue to be affected by these defects (2). Similarly, alcohol consumption in pregnancy is widely known as a cause of fetal alcohol spectrum disorders, yet some women continue to consume alcohol during pregnancy (3).

Information on CDC activities regarding birth defects is available at http://www.cdc.gov/ncbddd. Information on Birth Defects Prevention Month is available from the March of Dimes (http://www.marchofdimes.com) and the National Birth Defects Prevention Network (http://www.nbdpn.org/ nbdpn/bdpm2005.html). Information on National Folic Acid Awareness Week is available from the National Council on Folic Acid (http://www.folicacidinfo.org).

References

- 1. CDC. Economic costs of birth defects and cerebral palsy—United States, 1992. MMWR 1995;44:694–9.
- CDC. Spina bifida and anencephaly before and after folic acid mandate—United States, 1995–1996 and 1999–2000. MMWR 2004;53:362–5.
- CDC. Alcohol consumption among women who are pregnant or who might become pregnant—United States, 2002. MMWR 2004;53: 1178–81.

Errata: Vol. 52, No. RR-11

In the *MMWR Recommendations and Reports*, "Treatment of Tuberculosis: American Thoracic Society, CDC, and Infectious Diseases Society of America," two errors occurred. In Table 3 (pages 4–5), the subheading of the second column under "Doses" should read, "1x/wk." On page 25, column 2, in section 3.2.1 Cycloserine, the adult dosage should read, "Serum concentration measurements aiming for a peak concentration of 20–35 mg/l are often useful in determining the optimum dose for a given patient."

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals December 25, 2004, with historical data



Ratio (Log scale)[†]

Beyond historical limits

* No rubella cases were reported for the current 4-week period yielding a ratio for week 51 of zero (0). † 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.

TABLE I. Summary of provisional cases of selected notifiable diseases, United States, cumulative, week ending December 25, 2004 (51st Week)*

	Cum. 2004	Cum. 2003		Cum. 2004	Cum. 2003
Anthrax	-	-	HIV infection, pediatric ⁺¹	149	197
Botulism:	-	-	Influenza-associated pediatric mortality**	-	NA
foodborne	23	19	Measles, total	37††	54 ^{§§}
infant	76	75	Mumps	231	217
other (wound & unspecified)	17	30	Plague	2	1
Brucellosis [†]	117	96	Poliomyelitis, paralytic	-	-
Chancroid	42	54	Psittacosis [†]	10	12
Cholera	4	1	Q fever [†]	71	65
Cyclosporiasis [†]	212	73	Rabies, human	7	2
Diphtheria	-	1	Rubella	12	7
Ehrlichiosis:	-	-	Rubella, congenital syndrome	-	1
human granulocytic (HGE) [†]	394	327	SARS-associated coronavirus disease [†] **	-	8
human monocytic (HME) [†]	321	272	Smallpox [†] 11	-	NA
human, other and unspecified	34	47	Staphylococcus aureus:	-	-
Encephalitis/Meningitis:	-	-	Vancomycin-intermediate (VISA)† 11	-	NA
California serogroup viral ^{†§}	91	108	Vancomycin-resistant (VRSA)† 1	1	NA
eastern equine ^{†§}	6	14	Streptococcal toxic-shock syndrome ⁺	99	152
Powassan [†] §	-	-	Tetanus	24	19
St. Louis ^{† §}	8	41	Toxic-shock syndrome	119	117
western equine ^{† §}	-	-	Trichinosis	7	6
Hansen disease (leprosy) [†]	81	85	Tularemia [†]	106	83
Hantavirus pulmonary syndrome ⁺	20	24	Yellow fever	-	-
Hemolytic uremic syndrome, postdiarrheal [†]	144	166			

-: No reported cases.

Incidence data for reporting years 2003 and 2004 are provisional and cumulative (year-to-date).

Not notifiable in all states. §

Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Infectious Diseases (ArboNet Surveillance).

¹ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update November 28, 2004.

** Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases.

Of 37 cases reported, 14 were indigenous, and 23 were imported from another country.

§ Of 54 cases reported, 31 were indigenous, and 23 were imported from another country.

[¶] Not previously notifiable.

	AIDS		Chlamydia [†]		Coccidioi	domycosis	Cryptosp	oridiosis	Encephalitis/Meningitis West Nile [§]		
Reporting area	Cum. 2004 ¹¹	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	
UNITED STATES	39,097	42,812	850,325	848,663	5,888	4,079	3,305	3,354	888	2,866	
NEW ENGLAND Maine N.H. Vt.** Mass. R.I. Conn.	1,318 48 44 16 495 131 584	1,546 52 38 16 709 101 630	28,838 2,075 1,692 1,006 13,163 3,326 7,576	27,316 1,983 1,571 1,035 10,876 2,934 8,917	N - - - N	- N - - - N	166 20 30 26 59 4 27	189 20 25 32 78 16 18	- - - - -	31 2 - 12 5 12	
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	9,011 1,406 4,804 1,360 1,441	9,726 978 5,211 1,488 2,049	104,919 22,126 32,620 14,063 36,110	105,360 19,794 34,152 15,685 35,729	N N N	N N	525 180 113 33 199	440 131 125 19 165	17 5 2 1 9	223 - 57 21 145	
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	3,311 617 364 1,559 614 157	3,899 778 517 1,708 708 188	145,523 33,537 17,851 41,145 36,564 16,426	154,220 41,409 16,678 46,925 31,765 17,443	13 N - 13	7 N - 7	943 222 85 93 151 392	1,000 171 105 99 146 479	64 11 8 28 12 5	150 84 15 30 14 7	
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. S. Dak. Nebr.** Kans.	802 206 65 338 18 11 54 110	787 160 83 363 3 14 49 115	51,847 10,048 5,900 19,633 1,434 2,535 4,960 7,337	50,344 10,426 6,300 17,989 1,586 2,540 4,551 6,952	6 N 3 N - 3 N	4 N 1 3 N	416 135 89 78 12 43 28 31	577 150 122 50 14 45 24 172	85 13 26 2 6 7 18	696 48 81 39 94 151 194 89	
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C.** Ga. Fla.	11,845 143 1,363 911 615 86 1,080 709 1,558 5,380	11,989 213 1,571 991 850 85 1,042 790 1,829 4,618	164,300 2,918 19,191 3,334 20,940 2,727 27,865 18,786 27,506 41,033	158,541 2,961 16,328 3,097 18,761 2,518 25,201 14,308 34,816 40,551	N - N N - N	5 N 5 - N N - N	510 - 24 13 58 6 76 18 177 138	390 4 28 13 44 4 51 10 118 118	59 - 8 1 4 - 3 - 12 31	191 12 49 3 19 1 16 3 27 61	
E.S. CENTRAL Ky. Tenn.** Ala. Miss.	1,833 232 722 442 437	1,910 222 811 442 435	55,898 6,392 21,346 10,688 17,472	53,739 7,875 19,927 13,994 11,943	4 N N - 4	1 N - 1	121 45 29 24 23	128 24 40 54 10	60 1 13 15 31	91 11 21 25 34	
W.S. CENTRAL Ark. La. Okla. Tex.**	4,332 184 865 202 3,081	4,939 188 608 203 3,940	101,412 7,138 21,371 9,766 63,137	105,719 7,719 20,134 10,722 67,144	2 1 1 N N	- N N	119 17 7 20 75	124 20 5 20 79	215 12 81 14 108	611 23 101 56 431	
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	1,415 6 18 313 178 550 72 260	1,465 13 25 6 352 99 634 69 267	49,632 2,329 2,555 1,069 11,773 6,128 16,542 3,663 5,573	47,655 2,363 2,366 930 12,696 7,238 12,669 3,724 5,669	3,779 N 2 N 21 3,660 37 59	2,377 N 1 10 2,322 9 35	163 34 27 4 58 13 19 6 2	134 18 27 5 37 14 6 19 8	234 2 39 31 129 6 25	871 75 92 621 74 7 2	
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	5,230 373 282 4,383 56 136	6,551 490 242 5,691 19 109	147,956 17,275 8,277 114,102 3,436 4,866	145,769 16,292 7,375 113,071 3,674 5,357	2,084 N 2,084 -	1,685 N 1,685 - -	342 40 32 268 - 2	372 58 36 277 1	154 - - 154 -	2 - - 2 -	
Guam P.R. V.I. Amer. Samoa C.N.M.I.	2 642 18 U 2	5 1,024 33 U U	560 3,494 272 U 32	584 2,653 406 U U	N U	- N - U U	N U	- - - - -	- - - U	- - - U U	

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

N: Not notifiable.

 N: Not notifiable.
 U: Unavailable.
 -: No reported cases.
 C.N.M.I.: Commonwealth of Northern Mariana Islands.

 * Incidence data for reporting years 2003 and 2004 are provisional and cumulative (year-to-date).
 *

 * Chlamydia refers to genital infections caused by *C. trachomatis.*

 § Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Infectious Diseases (ArboNet Surveillance).

 ¶ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update

 November 28, 2004.

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

(STSL WEEK)					T					
		Escher	ichia coli, Ente	erohemorrhagi	n nooitiyo					
	015	7:H7	serogrou	n positive,	not sero	arouped	Giar	diasis	Gond	orrhea
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003
UNITED STATES	2,409	2,558	266	242	281	149	18,097	18,731	301,353	324,651
NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn.	163 11 23 12 70 13 34	154 10 19 18 67 4 36	42 1 5 - 10 1 25	46 4 3 - 9 - 30	18 - - 18 - -	13 - - 13 -	1,672 129 46 173 742 122 460	1,604 180 41 120 832 114 317	6,584 210 130 85 3,039 801 2,319	7,144 223 118 94 2,842 933 2,934
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	284 122 37 52 73	243 92 7 31 113	59 43 - 4 12	23 12 - 2 9	32 15 - 5 12	35 19 - 16	3,725 1,365 956 403 1,001	3,760 1,071 1,188 507 994	33,690 7,016 10,452 5,663 10,559	40,264 7,833 13,227 7,759 11,445
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	434 99 58 70 82 125	568 132 86 121 91 138	40 9 - 2 11 18	35 16 - 2 2 15	28 20 - 2 6	20 20 - -	2,688 798 - 514 684 692	3,185 883 919 767 616	61,767 17,456 6,627 18,202 15,250 4,232	68,829 21,969 6,537 21,143 13,674 5,506
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr. Kans.	495 112 123 99 15 33 71 42	441 130 103 84 13 28 48 35	47 21 20 2 4	53 21 19 4 4 5	18 1 - 8 7 - - 2	20 1 - 1 8 - - 10	2,131 811 300 556 23 80 149 212	2,062 789 270 505 45 83 141 229	16,374 2,960 1,042 8,452 93 305 1,031 2,491	17,536 3,103 1,499 8,519 97 217 1,545 2,556
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla.	173 3 21 1 39 3 - 8 25 73	149 11 17 1 40 5 - 4 27 44	35 N 5 - 18 - - 8 4	47 N 3 - 13 - - - 8 23	165 N 4 - 150 - 11	44 N - - 35 - 8	2,715 45 137 64 524 47 N 72 726 1,100	2,702 52 116 56 359 49 N 141 842 1,087	74,231 880 8,014 2,483 8,278 879 14,460 9,195 12,131 17,911	79,080 1,108 7,760 2,439 8,721 835 14,585 8,356 17,184 18,092
E.S. CENTRAL Ky. Tenn. Ala. Miss.	100 30 31 29 10	84 29 35 16 4	3 1 2 -	2 2 - -	9 6 3 -	6 6 - -	347 N 157 190	392 N 182 210	24,069 2,731 8,013 6,646 6,679	27,169 3,531 8,317 9,115 6,206
W.S. CENTRAL Ark. La. Okla. Tex.	82 16 4 20 42	98 12 3 29 54	3 1 - 2	4 - - 4	11 - 2 4 5	4 - - 4	322 121 53 148 N	290 143 14 133 N	39,927 3,571 10,304 4,153 21,899	43,942 4,178 11,428 4,429 23,907
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	242 16 50 9 50 9 29 52 27	316 17 83 5 67 13 38 70 23	36 - 7 2 7 N 3 1	27 - 16 1 4 5 N - 1	- - - N -	7 - - 7 - N -	1,519 81 181 26 507 68 177 351 128	1,578 113 202 23 453 51 242 355 139	10,841 70 88 59 2,573 915 4,010 571 2,555	10,196 115 68 43 2,776 1,154 3,511 392 2,137
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	436 144 68 213 1 10	505 116 101 274 5 9	1 - - -	5 1 4 - -		- - - - - -	2,978 394 436 1,982 88 78	3,158 376 400 2,203 87 92	33,870 2,722 1,255 28,283 486 1,124	30,491 2,688 975 25,064 553 1,211
Guam P.R. V.I. Amer. Samoa C.N.M.I.	N 3 - U	N 3 - U U	- - - U	- - - U U	- - - - -	- - - U U	143 - U	2 332 - U U	92 259 80 U 3	68 271 87 U U

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

1206

		Haemophilus influenzae, invasive													
	Alla	ages			Age <5			(viral, acute), by type							
	All ser	rotypes	Serot	ype b	Non-ser	otype b	Unknowr	serotype		A					
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003					
UNITED STATES	1,773	1,832	15	25	107	105	156	205	5,538	7,330					
NEW ENGLAND Maine N.H. Vt. Mass. B I	158 13 19 8 62 6	146 4 13 10 73 9	1 - - 1	2 - 1 - 1	6 - 2 - 1	5 - - 5 -	4 - 1 2	5 1 - 3 1	1,008 11 25 8 874 23	347 20 18 6 201 15					
Conn.	50	37	-	-	3	-	-	-	67	87					
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	389 125 78 73 113	384 134 70 70 110	1 1 - -	3 3 - -	5 5 - -	4 4 - -	38 6 14 4 14	49 9 13 11 16	677 114 270 138 155	1,795 133 446 208 1,008					
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	291 107 53 70 21 40	304 72 51 107 26 48	2 1 - 1 -	3 - - 3 -	8 2 4 - 2 -	6 1 - 5 -	37 16 1 13 4 3	56 12 9 24 1 10	523 50 95 184 142 52	667 166 70 183 203 45					
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. S. Dak. Nebr.	106 45 1 37 4 - 10	116 53 - 41 4 1 2	2 1 - - -	2 2 - - - -	4 - - -	7 7 - - -	12 1 - 7 - 2	14 2 11 -	174 32 54 44 1 4 12	179 44 35 59 2 - 13					
Kans. S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla.	9 404 - 68 - 17 62 6 100 110	412 101 2 55 17 41 7 77 112	- - - - 1 -	- 2 - - - - - - - 1	26 6 - 1 7 - 12	- 19 - - - 3 - - 8	2 25 - 1 3 1 - 18 2	24 - 1 - 2 2 8 5	986 6 105 7 135 6 103 26 314 284	26 1,679 9 177 43 101 14 124 41 778 392					
E.S. CENTRAL Ky. Tenn. Ala. Miss.	68 13 38 14 3	83 7 52 22 2	1 - - 1 -	1 - - 1 -	2 2 - -	3 2 1 -	9 1 6 2	10 1 6 3	144 30 80 10 24	264 32 192 24 16					
W.S. CENTRAL Ark. La. Okla. Tex.	80 3 15 61 1	79 6 22 47 4	1 - - 1	2 - - 2	9 - - 9 -	11 1 2 8	2 1 1 -	5 - 4 - 1	583 57 55 20 451	693 37 48 23 585					
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	182 5 1 46 37 62 18 13	164 6 2 36 20 78 12 10	4 - - 1 - 2 1	6 - - - - 6 -	27 - 1 - 8 13 2 3	23 - - 4 10 5 4	22 - 2 - 6 6 2 5 1	18 - - 6 2 4 4 -	451 8 21 5 3 23 278 49 14	461 8 18 1 63 24 258 38 51					
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	95 3 44 35 4 9	144 11 40 58 21 14	2 2 - - -	4 - 4 -	20 20 	27 7 - 20 -	7 1 3 1 1 1	24 3 4 10 7	992 60 67 833 5 27	1,245 68 61 1,094 9 13					
Guam P.R. V.I. Amer. Samoa C.N.M.I	- - U	- 1 - U	- - - - -	- - - U	- U	- - - U	- - U	- 1 - U	1 26 - U	2 86 - U					

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

<u>(</u>)	H	epatitis (viral	, acute), by ty	ре							
		В	(Legio	nellosis	Lister	riosis	Lyme d	isease	
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	
UNITED STATES	6,528	6,965	846	1,060	1,863	2,082	662	653	18,140	19,842	
NEW ENGLAND	363	347	16	13	78	117	48	53	2,795	3,820	
Naine N.H.	4 41	1 23	-	2	- 11	2	7 4	4	53 207	166 175	
Vt.	5	4	8	11	6	6	2	1	51	43	
Mass.	214	206	6	-	28 18	55 17	15	18	1,079	1,521	
Conn.	93	95	2	-	15	28	18	22	1,171	1,334	
MID. ATLANTIC	1,234	748	146	127	523	596	156	129	11,734	13,066	
Upstate N.Y.	91	94	18	17	109	151	50	35	4,098	4,333	
N.J.	725	179	-	-	94	90	26	24 23	3,209	2,874	
Pa.	292	285	128	110	260	285	58	47	4,427	5,641	
E.N. CENTRAL	507	537	105	140	478	444	102	87	1,027	908	
Ind.	42	42	10	9	218	32	40 17	25 10	64 18	23	
III.	71	73	13	24	34	50	14	23	1	71	
Mich. Wis.	243 32	222 50	76	93 5	132 17	118 18	25 6	19 10	27 917	11 737	
W.N. CENTRAL	317	338	54	264	62	72	22	19	790	470	
Minn.	49	37	18	9	7	5	6	6	679	342	
Iowa Mo	14 190	14 234	- 35	1 251	6 34	11 36	3	1	44 55	52 69	
N. Dak.	4	2	-	-	2	1	-	-	-	-	
S. Dak. Nebr	- 42	2	- 1	- 3	5	2	2	-	1	1	
Kans.	18	17	-	-	4	11	-	2	3	4	
S. ATLANTIC	1,908	1,969	195	151	394	517	117	134	1,523	1,305	
Del. Md	42 164	12 130	28 26	- 9	13 80	28 131	N 18	N 27	301 802	208 687	
D.C.	19	12	3	-	11	19	-	2	11	13	
Va. W.Va	278	189	17 24	11	53	94 21	19 4	12	174	160 27	
N.C.	182	160	11	13	40	39	26	18	121	146	
S.C.	88 580	156 660	8	24	7	8	6 15	5	15	15	
Fla.	516	612	62	72	145	143	29	32	58	39	
E.S. CENTRAL	419	487	91	91	88	101	21	32	48	61	
Ky. Tenn	73 174	74 209	23	22 21	40	43 34	4	9	15 17	15 17	
Ala.	66	96	5	6	12	19	5	12	5	8	
Miss.	106	108	28	42	3	5	2	2	11	21	
W.S. CENTRAL Ark	606 77	1,140 83	129	153	76	79 2	34 2	50 1	92 8	92	
La.	63	114	69	100	6	1	3	5	5	7	
Okla. Tex	47 419	57 886	3 54	2 48	8 62	7 69	1 28	3 41	- 79	- 85	
MOUNTAIN	526	555	36	53	86	75	28	32	32	14	
Mont.	2	16	2	4	3	4	1	2	-	-	
Idaho Wyo	10	8 31	- 2	1	9	4	1	2	6 4	3	
Colo.	58	77	-	14	21	12	12	9	-	-	
N. Mex.	13 305	35 254	7	- 7	4 14	4	1	3 10	1	1	
Utah	58	50	5	-	24	27	5	2	14	2	
Nev.	71	84	15	27	4	11	8	4	1	3	
PACIFIC	648 52	844 80	74	68 19	78 13	81 10	134	117 10	99 13	106	
Oreg.	110	117	15	15	Ň	Ň	7	5	33	16	
Calif.	460	614	30	30	64	70	111	97	51	84	
Hawaii	11	27	7	4	-	1	5	5	N	N	
Guam	6	10	-	5	-	1	-	-	-	-	
P.R. VI	56	129	-	-	2	-	-	-	N	N	
Amer. Samoa	U	U	U	U	U	U	U	U	U	U	

 TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003

 (51st Week)*

Recommended Childhood and Adolescent Immunization Schedule — United States, 2005

Weekly

January 7, 2005 / Vol. 53 / Nos. 51 & 52

Harmonized Childhood and Adolescent Immunization Schedule, 2005

QuickGuide

The Advisory Committee on Immunization Practices (ACIP) periodically reviews the recommended childhood and adolescent immunization schedule to ensure that the schedule is current with changes in vaccine formulations and reflects revised recommendations for the use of licensed vaccines, including those newly licensed. Recommendations and format of the childhood and adolescent immunization schedule for July–December 2004 were approved by ACIP, the American Academy of Family Physicians (AAFP), and the American Academy of Pediatrics (AAP) and were published in April 2004 (1). That schedule updated previous ones by adding the recommendation that, beginning in fall 2004, healthy children aged 6–23 months, as well as household contacts and out-of-home caregivers for healthy children aged 0–23 months, receive annual influenza vaccine (2).

The childhood and adolescent immunization schedule for 2005 is unchanged from that published in April 2004 (Figure). In addition, the catch-up immunization schedule for children and adolescents who start late or who are >1 month behind remains unchanged from that published in January 2004 and again in April 2004 (Table). The childhood and adolescent immunization schedule and the catch-up immunization schedule for 2005 have been approved by ACIP, AAFP, and AAP.

The Recommended Childhood and Adolescent Immunization Schedule and the Catchup Childhood and Immunization Schedule have been adopted by the Advisory Committee on Immunization Practices, the American Academy of Pediatrics, and the American Academy of Family Physicians. The standard *MMWR* footnote format has been modified for publication of this schedule.

Vaccine Information Statements

The National Childhood Vaccine Injury Act requires that all health-care providers provide parents or patients with copies of Vaccine Information Statements before administering each dose of the vaccines listed in the schedule. Additional information is available from state health departments and at http://www.cdc.gov/nip/publications/vis.

Detailed recommendations for using vaccines are available from package inserts, ACIP statements on specific vaccines, and the 2003 Red Book (3). ACIP statements for each recommended childhood vaccine can be viewed, downloaded, and printed from the CDC National Immunization Program website at http:// www.cdc.gov/nip/publications/acip-list.htm. In addition, guidance on obtaining and completing a Vaccine Adverse Event Reporting System form is available at http://www.vaers.org or by telephone, 800-822-7967.

References

- 1. CDC. Recommended childhood and adolescent immunization schedule—United States, July–December 2004. MMWR 2004;53:Q1–Q3.
- CDC. Prevention and control of influenza: recommendations of the Advisory Committee on Immunization Practices (ACIP). MMWR 2004;53(No. RR-6).
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Suggested citation: Centers for Disease Control and Prevention. Recommended childhood and adolescent immunization schedule—United States, 2005. MMWR 2005;53 (Nos. 51&52):Q1–Q3.

Vaccine	Birth	1 mo	2 mos	4 mos	6 mos	12 mos	15 mos	18 mos	24 mos	4–6 yrs	11–12 yrs	13–18 yrs
Henatitic B ²	HepB#1	only if moth	er HBsAg (-)			Hep	B #3			HepB	series	
			HepB #2									
Diphtheria, tetanus, pertussis ³			DTaP	DTaP	DTaP		DT	aP		DTaP	Td	Td
<i>Haemophilus influenzae</i> type b ⁴			Hib	Hib	Hib ⁴	Н	ib					
Inactivated poliovirus			IPV	IPV		IF	PV			IPV		
Measles, mumps, rubella ⁵						MM	R #1			MMR #2	MMI	R #2
Varicella ⁶							Varicella			Vari	cella	
Pneumococcal ⁷			PCV	PCV	PCV	P	CV		PCV	PI	PV	
Influenza ⁸		red line or	for coloct	ad populati		Influenza	a (yearly)			Influenza	l <mark>a (yearly)</mark>	
Hepatitis A ⁹										Hepatitis	A series	
Range of recom	mended a	ges	Catch	-up immur	nization	Pre	adolesce	nt assessr	nent	-		

FIGURE. Recommended childhood and adolescent immunization schedule,¹ by vaccine and age — United States, 2005

1. This schedule indicates the recommended ages for routine administration of currently licensed childhood vaccines, as of December 1, 2004, for children aged ≤18 years. Any dose not administered at the recommended age should be administered at any subsequent visit when indicated and feasible. age groups that warrant special effort to administer those vaccines not previously administered. Additional vaccines might be licensed and recommended during the year. Licensed combination vaccines may be used whenever any components of the combination are indicated and other components of the vaccine are not contraindicated. Providers should consult package inserts for detailed recommendations. Clinically significant adverse events that follow immunization should be reported to the Vaccine Adverse Event Reporting System; guidance is available at http://www.vaers.org or by telephone, 800-822-7967.

2. Hepatitis B (HepB) vaccine. All infants should receive the first dose of HepB vaccine soon after birth and before hospital discharge; the first dose may also be administered by age 2 months if the mother is hepatitis B surface antigen (HBsAg) negative. Only monovalent HepB may be used for the birth dose. Monovalent or combination vaccine containing HepB may be used to complete the series. Four doses of vaccine may be administered when a birth dose is administered. The second dose should be administered at least 4 weeks after the first dose, except for combination vaccines, which cannot be administered before age 6 weeks. The third dose should be administered at least 16 weeks after the first dose and at least 8 weeks after the second dose. The final dose in the vaccination series (third or fourth dose) should not be administered before age 24 weeks. Infants born to HBsAgpositive mothers should receive HepB and 0.5 mL of hepatitis B immune globulin (HBIG) at separate sites within 12 hours of birth. The second dose is recommended at age 1-2 months. The final dose in the immunization series should not be administered before age 24 weeks. These infants should be tested for HBsAg and antibody to HBsAg at age 9-15 months. Infants born to mothers whose HBsAg status is unknown should receive the first dose of the HepB series within 12 hours of birth. Maternal blood should be drawn as soon as possible to determine the mother's HBsAg status; if the HBsAg test is positive, the infant should receive HBIG as soon as possible (no later than age 1 week). The second dose is recommended at age 1-2 months. The last dose in the immunization series should not be administered before age 24 weeks.

3. Diphtheria and tetanus toxoids and acellular pertussis (DTaP) vaccine. The fourth dose of DTaP may be administered as early as age 12 months, provided 6 months have elapsed since the third dose and the child is unlikely to return at age 15–18 months. The final dose in the series should be administered at age \geq 4 years. Tetanus and diphtheria toxoids (Td) is recommended at age 11-12 years if at least 5 years have elapsed since the last dose of tetanus and diphtheria toxoid-containing vaccine. Subsequent routine Td boosters are recommended every 10 years.

Preadolescent assessment

4. Haemophilus influenzae type b (Hib) conjugate vaccine. Three Hib conjugate vaccines are licensed for infant use. If PRP-OMP (PedvaxHIB® or ComVax® [Merck]) is administered at ages 2 and 4 months, a dose at age 6 months is not required. DTaP/Hib combination products should not be used for primary immunization in infants at ages 2, 4, or 6 months but can be used as boosters after any Hib vaccine. The final dose in the series should be administered at age ≥12 months.

5. Measles, mumps, and rubella (MMR) vaccine. The second dose of MMR is recommended routinely at age 4-6 years but may be administered during any visit, provided at least 4 weeks have elapsed since the first dose and both doses are administered beginning at or after age 12 months. Those who have not previously received the second dose should complete the schedule by age 11-12 years.

6. Varicella vaccine. Varicella vaccine is recommended at any visit at or after age 12 months for susceptible children (i.e., those who lack a reliable history of chickenpox). Susceptible persons aged ≥13 years should receive 2 doses administered at least 4 weeks apart.

7. Pneumococcal vaccine. The heptavalent pneumococcal conjugate vaccine (PCV) is recommended for all children aged 2-23 months and for certain children aged 24-59 months. The final dose in the series should be administered at age >12 months. Pneumococcal polysaccharide vaccine (PPV) is recommended in addition to PCV for certain groups at high risk. See MMWR 2000;49(No. RR-9).

8. Influenza vaccine. Influenza vaccine is recommended annually for children aged ≥6 months with certain risk factors (including, but not limited to, asthma, cardiac disease, sickle cell disease, human immunodeficiency virus [HIV], and diabetes), health-care workers, and other persons (including household members) in close contact with persons in groups at high risk (see MMWR 2004;53[No. RR-6]). In addition, healthy children aged 6-23 months and close contacts of healthy children aged 0-23 months are recommended to receive influenza vaccine because children in this age group are at substantially increased risk for influenza-related hospitalizations. For healthy persons aged 5-49 years, the intranasally administered, live, attenuated influenza vaccine (LAIV) is an acceptable alternative to the intramuscular trivalent inactivated influenza vaccine (TIV). See MMWR 2004;53(No. RR-6). Children receiving TIV should be administered a dosage appropriate for their age (0.25 mL if aged 6-35 months or 0.5 mL if aged ≥3 years). Children aged ≤8 years who are receiving influenza vaccine for the first time should receive 2 doses (separated by at least 4 weeks for TIV and at least 6 weeks for LAIV).

9. Hepatitis A vaccine. Hepatitis A vaccine is recommended for children and adolescents in selected states and regions and for certain groups at high risk; consult your local public health authority. Children and adolescents in these states, regions, and groups who have not been immunized against hepatitis A can begin the hepatitis A immunization series during any visit. The 2 doses in the series should be administered at least 6 months apart. See MMWR 1999;48(No. RR-12).

Approved by the Advisory Committee on Immunization Practices (http://www.cdc.gov/nip/acip), the American Academy of Pediatrics (http://www.aap.org), and the American Academy of Family Physicians (http://www.aafp.org). Additional information about vaccines, including precautions and contraindications for vaccination and vaccine shortages, is available at http://www.cdc.gov/nip or from the National Immunization Information Hotline, 800-232-2522 (English) or 800-232-0233 (Spanish).

TABLE. Catch-up immunization schedule for children and adolescents who start late or who are >1 month behind, by age group, vaccine, and dosage interval - United States, 2005

	Minimum age for		Minimum interval between dos	ses		
Vaccine	dose 1	Dose 1 to dose 2	Dose 2 to dose 3	Dose 3 to dose 4	Dose 4 to dose 5	
DTaP ¹	6 wks	4 wks	4 wks	6 mos	6 mos ¹	
IPV ²	6 wks	4 wks	4 wks	4 wks ²		
HepB ³	Birth	4 wks	8 wks (and 16 wks after first dose)			
MMR ⁴	12 mos	4 wks ⁴				
Varicella	12 mos					
Hib ⁵	6 wks	4 wks: if first dose administered at age <12 mos 8 wks (as final dose): if first dose administered at age 12–14 mos No further doses needed if first dose administered at age ≥15 mos	4 wks ⁶ : if current age <12 mos 8 wks (as final dose) ⁶ : if current age ≥12 mos and second dose administered at age <15 mos No further doses needed if previous dose administered at age ≥15 mos	8 wks (as final dose): This dose only necessary for children aged 12 mos–5 yrs who received 3 doses before age 12 mos		
PCV ⁷	6 wks	 4 wks: if first dose administered at age <12 mos and current age <24 mos 8 wks (as final dose): if first dose administered at age ≥12 mos or current age 24–59 mos No further doses needed for healthy children if first dose administered at age ≥24 mos 	4 wks: if current age <12 mos 8 wks (as final dose): if current age ≥12 mos No further doses needed for healthy children if previous dose adminis- tered at age ≥24 mos	8 wks (as final dose): This dose only necessary for children aged 12 mos–5 yrs who received 3 doses before age 12 mos		

Catch-up schedule for children aged 4 months-6 years

Catch-up schedule for children aged 7-18 years

		Min	imum interval between doses
Vaccine	Dose 1 to dose 2	Dose 2 to dose 3	Dose 3 to booster dose
Td ⁸	4 wks	6 mos	 6 mos⁸: if first dose administered at age <12 mos and current age <11 yrs 5 yrs⁸: if first dose administered at age ≥12 mos and third dose administered at age <7 yrs and current age ≥11 yrs 10 yrs⁸: if third dose administered at age ≥7 yrs
IPV ⁹	4 wks	4 wks	IPV ^{2,9}
НерВ	4 wks	8 wks (and 16 wks after first dose)	
MMR	4 wks ⁴		
Varicella ¹⁰	4 wks		

Note: A vaccine series does not require restarting, regardless of the time that has elapsed between doses.

1. Diphtheria and tetanus toxoids and acellular pertussis (DTaP) vaccine. The fifth dose is not necessary if the fourth dose was administered after the fourth birthday. 2. Inactivated poliovirus (IPV) vaccine. For children who received an all-IPV or all-oral poliovirus (OPV) series, a fourth dose is not necessary if the third dose was administered at

age >4 years. If both OPV and IPV were administered as part of a series, a total of 4 doses should be administered, regardless of the child's current age. 3. Hepatitis B (HepB) vaccine. All children and adolescents who have not been immunized against hepatitis B should begin the HepB immunization series during any visit.

Providers should make special efforts to immunize children who were born in, or whose parents were born in, areas of the world where hepatitis B virus infection is moderately or highly endemic.

4. Measles, mumps, and rubella (MMR) vaccine. The second dose of MMR is recommended routinely at age 4-6 years but may be administered earlier if desired.

 5. Haemophilus influenzae type b (Hib) vaccine. Vaccine is not generally recommended for children aged ₂5 years.
 6. Hib vaccine. If current age is <12 months and the first 2 doses were PRP-OMP (PedvaxHIB[®] or ComVax[®] [Merck]), the third (and final) dose should be administered at age 12-15 months and at least 8 weeks after the second dose.

7. Pneumococcal conjugate (PCV) vaccine. Vaccine is not generally recommended for children aged \geq 5 years. 8. Tetanus and diphtheria toxoids (Td). For children aged 7–10 years, the interval between the third and booster dose is determined by the age when the first dose was administered. For adolescents aged 11-18 years, the interval is determined by the age when the third dose was administered.

9. IPV. Vaccine is not generally recommended for persons aged ≥18 years.

10. Varicella vaccine. Administer the 2-dose series to all susceptible adolescents aged ≥13 years.







<u> </u>	Ма	laria	Mening dise	ococcal ase	Perti	ussis	Rabies	, animal	Rocky Mountain spotted fever		
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	
UNITED STATES	1,284	1,309	1,224	1,620	18,245	10,098	5,790	6,630	1,497	959	
NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn.	84 6 5 4 47 7 15	65 3 6 2 32 3 19	68 11 7 3 35 2 10	73 6 5 3 44 2 13	1,848 34 96 122 1,537 47 12	1,856 12 98 70 1,580 20 76	682 54 30 37 308 38 215	587 70 29 38 207 67 176	27 - 1 21 3 2	9 - - 9 -	
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	337 54 179 58 46	352 55 192 61 44	154 39 25 34 56	200 53 41 29 77	2,822 1,859 161 244 558	1,421 769 145 183 324	927 509 13 - 405	897 419 6 62 410	100 5 24 33 38	40 - 13 16 11	
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	107 30 18 24 21 14	107 23 4 45 24 11	178 70 30 18 45 15	249 57 44 72 46 30	5,618 693 293 497 280 3,855	1,317 314 69 134 134 666	161 76 10 51 15 9	170 53 30 24 49 14	24 12 6 2 4	22 10 1 5 6	
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr. Kans.	66 25 4 20 3 1 4 9	52 23 6 7 1 3 -	83 23 18 20 2 2 4 14	124 26 29 1 1 7 14	2,399 480 274 525 745 73 72 230	522 146 155 150 7 5 15 44	553 89 104 59 62 90 53 96	630 41 103 43 56 131 98 158	134 4 106 4 19	65 2 51 - 5 4 1	
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla.	330 6 76 13 53 22 9 54 95	318 2 74 15 40 4 25 4 65 89	211 3 10 4 20 6 35 12 16 105	264 9 27 5 25 6 36 22 33 101	711 5 137 9 233 24 101 50 22 130	691 9 88 3 91 26 137 194 35 108	1,892 9 323 - 464 69 577 151 298 1	2,600 63 347 513 81 765 245 398 188	766 6 79 5 522 23 67 26	585 1 105 1 31 5 321 43 64 14	
E.S. CENTRAL Ky. Tenn. Ala. Miss.	28 4 7 12 5	30 9 7 7 7	61 12 15 17 17	92 19 30 20 23	278 83 135 43 17	156 47 75 19 15	136 23 36 66 11	206 37 101 64 4	174 2 88 48 36	126 3 69 21 33	
W.S. CENTRAL Ark. La. Okla. Tex.	108 8 5 7 88	132 4 5 4 119	120 18 36 10 56	182 18 42 21 101	944 78 12 33 821	742 45 11 92 594	1,048 49 - 103 896	1,135 25 5 196 909	239 154 5 71 9	101 44 1 42 14	
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	51 1 16 4 13 9 6	45 - 23 3 8 6 2	63 3 7 3 15 9 12 7 7	97 6 9 27 12 29 4 8	1,834 74 37 35 1,024 145 233 238 48	987 5 75 130 362 74 182 124 35	215 26 8 6 43 5 114 10 3	176 21 15 6 38 5 72 14 5	28 3 4 5 1 2 4 9	10 1 2 3 1 - 1	
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	173 20 18 130 2 3	208 30 11 160 1 6	286 32 56 187 3 8	339 41 61 217 7 13	1,791 752 504 498 12 25	2,406 748 438 1,142 66 12	176 6 162 8	229 7 213 9	5 - 3 2 -	1 - 1 -	
Guam P.R. V.I. Amer. Samoa C.N.M.I.	- - - U	1 2 - U U	1 11 - U	- 12 - U U	- 7 - U	1 4 - U U	60 U	67 - - - - - - - - - - 	N U	- N - U U	

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

MMWR

(JIST WEEK)					1		Stro	ntococcus nneu	imoniae inv	asivo
	Salmon	ellosis	Shigellosis		Streptococcal disease, invasive, group A		Drug resistant, all ages		Age <	5 years
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003
UNITED STATES	39,598	42,008	12,454	22,568	4,377	5,493	2,067	1,988	719	740
NEW ENGLAND	1,994	2,070	282	340	178	450	73	104	73	9
Maine	90	138	9	7	11	29	2	-	3	-
N.H.	135	140	10	9	19	33	-	-	N	N
vi. Mass	1 132	1 206	171	230	118	19	38	9 N	57	N
R.I.	136	125	20	20	21	16	19	10	10	4
Conn.	438	388	68	66	-	155	-	85	U	U
MID. ATLANTIC	5,337	4,816	1,113	2,328	692	924	138	134	123	108
Upstate N.Y.	1,218	1,145	404	583	227	343	58	72	87	76
N.Y. City N.I	948	1,294	228	356	103	144	0	0	7	4
Pa.	1,988	1,527	101	976	215	264	80	62	29	28
E N. CENTRAL	4 737	5 473	1 105	1 834	818	1 252	488	440	176	318
Ohio	1,197	1,305	171	298	220	283	342	285	81	98
Ind.	615	542	216	177	94	119	146	155	43	30
III. Mich	1,315	1,918	321	993	166	333	-	-	13	130
Wis.	818	923	173	133	202 56	167	N	N	39	60
	2 4 2 0	2 4 2 0	440	777	299	221	24	20	105	79
Minn.	632	554	66	102	139	159	- 24	- 20	70	55
Iowa	425	388	66	86	N	N	Ν	N	N	N
Mo.	624	868	179	354	58	77	19	16	14	3
N. Dak. S. Dak	42	39	3	10	15	1/	-	3	4	1
Nebr.	178	164	40	87	14	27	-	-	7	5
Kans.	392	288	82	121	41	29	N	N	10	8
S. ATLANTIC	10,910	10,882	2,709	6,658	840	907	997	1,051	62	18
Del.	101	100	9	164	3	7	4	1	N	N
Md.	804	838	149	576	180	223	-	26	46	- 7
Va	1 147	1 072	165	425	70	99	o N	N	N	, N
W. Va.	225	124	9	-	25	36	106	80	13	11
N.C.	1,648	1,392	473	985	125	103	N	N	U	U
S.C. Ga	914 1 840	811	314	516 1 150	38	39	/1 245	142	N	N
Fla.	4,169	4,467	938	2,769	220	208	563	565	N	N
E S. CENTRAL	2 451	2 894	768	1 027	190	201	124	146	6	-
Ky.	345	395	74	129	58	48	30	23	Ň	Ν
Tenn.	523	743	327	393	132	153	93	123	N	N
Ala. Miss	739	766	319	334	-	-	-	-	N	N
	0.005	530	40	5 700	-	-	70		100	100
W.S. CENTRAL	3,995	5,944	3,286	5,728	286	296	70 10	/8	130	138
La.	815	870	277	441	3	2	60	56	26	29
Okla.	396	463	490	836	63	90	N	N	46	65
Tex.	2,213	3,815	2,441	4,348	203	198	N	N	50	36
MOUNTAIN	2,348	2,228	836	1,261	517	509	50	11	42	71
Mont. Idaho	184	111	4	2	-	1	- N	- N	- N	- N
Wyo.	53	76	6	8	10	2	12	10	-	-
Colo.	532	490	157	327	136	139	-	-	39	53
N. Mex.	267	289	122	270	82	119	5	-	-	12
Ariz. Utah	238	223	420	504 49	232	34	31	1	3	6
Nev.	180	175	65	66	4	2	2	-	-	-
PACIFIC	5.396	5.281	1.906	2.615	568	623	103	4	2	-
Wash.	569	583	111	166	59	74	-	-	Ň	Ν
Oreg.	399	423	80	209	N	N	N	N	N	N
Gaill. Alaska	3,998	3,958 QA	1,064	2,183	3/5	415	N -	N -	N N	N N
Hawaii	370	223	45	46	134	134	103	4	2	-
Guam	26	43	33	41	-	-	-	-	-	-
P.R.	308	726	11	27	Ν	Ν	Ν	Ν	Ν	Ν
V.I.										-
Amer. Samoa C N M I	U	U	U	U	U	U	U	U	U	U
0.11.11.1.	0	0	-	0	-	0	-	0	-	0

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

1210

		Sypl	nilis						Varicella		
	Primary	& secondary	Cong	jenital	Tube	rculosis	Typho	oid fever	(Chicke	npox)	
Reporting area	Cum. 2004	Cum. 2003									
UNITED STATES	7,235	6,896	306	425	10,984	12,072	278	347	18,422	17,294	
NEW ENGLAND	175	211	5	1	378	410	21	28	722	3,386	
Maine	2	8	-	-	- 19	21	-	-	311	781	
Vt.	4	19	-	-	4	9	-	- 4	411	907	
Mass.	112	130	-	-	251	217	14	15	-	147	
R.I.	22	25	1	- 1	30 75	45	1	2	-	5 1 546	
	069	976	20	66	1 070	0 100	61	70	07	1,540	
Upstate N.Y.	966	44	4	13	276	2,130	8	12	- 07	42	
N.Y. City	603	509	15	31	950	1,078	22	36	-	-	
N.J. Pa	145 124	168 155	19 1	22	413	444	16 15	21 10	- 87	- 42	
EN CENTRAL	850	876	60	75	1 174	1 184	17	33	6 5 1 4	6 242	
Ohio	226	193	1	3	194	201	5	2	1,521	1,241	
Ind.	55	50	9	16	125	133	-	4	139	-	
Mich	362	370 247	32	21	534 234	569 217	- 9	10	4 224	4 026	
Wis.	32	16	-	1	87	64	3	-	628	975	
W.N. CENTRAL	139	147	5	6	444	460	12	6	130	81	
Minn.	20	44	1	-	181	194	8	2	- N	- N	
Mo.	85	58	2	4	114	110	2	1	5	1	
N. Dak.	-	2	-	-	4	4	-	-	82	80	
S. Dak. Nebr	- 6	2	-	- 1	36	20 27	- 2	- 1	43	-	
Kans.	23	23	2	1	59	73	-	-	-	-	
S. ATLANTIC	1,902	1,810	52	81	2,498	2,493	44	55	2,228	2,193	
Del. Md	9 355	6 306	1	- 12	17	23	- 11	- 11	5	29	
D.C.	93	48	1	-	71	-	-	-	26	31	
Va.	102	79	3	1	277	272	10	14	612	523	
vv. va. N C	2 186	2 148	- 12	- 19	24 334	21 362	- 8	- 9	1,276 N	1,325 N	
S.C.	113	94	8	14	167	168	-	-	309	284	
Ga.	341	494	2	13	402	513	5	6	-	-	
	701	033	10	22	900	000	10	15	-	-	
E.S. CENTRAL Kv.	47	315	19	12	122	124	3	8	-	-	
Tenn.	123	134	8	2	230	218	4	3	-	-	
Ala. Miss	156	112	8	7	153	236 110	-	4	-	-	
WS CENTRAL	1 144	920	50	80	1 042	1 801	27	30	6 167	4 634	
Ark.	39	50	-	3	111	105	-	-	- 0,107	4,004	
La.	267	172	-	1	-	-	-	-	51	16	
Tex.	814	635	48	75	785	1,543	26	29	6,116	4,618	
MOUNTAIN	333	332	45	35	509	445	8	8	2,574	716	
Mont. Idaho	3	- 15	- 2	- 3	14	5	-	- 1	-	-	
Wyo.	3	-	-	-	5	4	-	-	56	110	
Colo.	40	37	1	3	112	106	3	4	1,947	-	
Ariz.	156	185	41	19	222	213	2	2	-	-	
Utah	8	13	-	-	37	39	1	-	468	602	
Nev.	38	1 400	-	-	0.400	22	2	-	-	-	
Wash.	1,348	77	- 31	- 69	2,429	2,453	6	100	-	-	
Oreg.	27	45	-	-	74	103	2	4	-	-	
Calit.	1,165	1,272	30	67	1,979	1,943	67	91	-	-	
Hawaii	7	14	1	2	111	111	6	1	-	-	
Guam	-	1	-	-	15	53	-	-	112	153	
P.R.	165	203	5	14	84	100	-	-	276	597	
Amer. Samoa	Ŭ	Ů	Ū	U	U	Ū	U	U	U	U	
C.N.M.I.	2	U	-	U	10	U	-	U	-	U	

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 2004, and December 20, 2003 (51st Week)*

TABLE III. Deaths in 122 U.S. cities.* week ending December 25, 2004 (51st Week)

	All causes, by age (years) All c			causes, by age (years)											
Reporting Area	All Ages	<u>≥</u> 65	45-64	25-44	1–24	<1	P&l⁺ Total	Reporting Area	All Ages	<u>></u> 65	45-64	25-44	1-24	<1	P&l⁺ Total
NEW ENGLAND	436	318	89	18	8	3	39	S. ATLANTIC	598	356	160	45	21	16	37
Boston, Mass.	108	74	25	4	3	2	7	Atlanta, Ga.	U	U	U	U	U	U	U
Bridgeport, Conn.	40	32	6	1	1	-	2	Baltimore, Md.	181	97	63	12	6	3	12
Cambridge, Mass.	21	18	2	1	-	-	4	Charlotte, N.C.	90	51	27	6	3	3	4
Hartford Conn	27	20	4	i.	2	-	i.	Miami Ela	0	0	11	11	11	11	11
Lowell Mass	25	21	4	-	-	-	6	Norfolk Va	40	22	8	5	2	3	5
Lynn, Mass.	7	5	2	-	-	-	-	Richmond, Va.	39	27	7	3	1	1	3
New Bedford, Mass.	23	19	1	3	-	-	1	Savannah, Ga.	20	14	3	1	1	1	4
New Haven, Conn.	19	13	6	-	-	-	2	St. Petersburg, Fla.	47	31	11	3	1	1	3
Providence, R.I.	47	30	13	2	1	1	6	Tampa, Fla.	165	102	38	14	7	4	6
Somerville, Mass.	5	1	4	-	-	-	-	Washington, D.C.	0	10	U	U	U	U	U
Springfield, Mass.	18	14	3	2	-	-	-	wilmington, Del.	16	12	3	I	-	-	-
Worcester Mass	61	47	11	2	1	-	5	E.S. CENTRAL	750	496	180	42	16	15	52
	1 007	1 400	000	-		10	100	Birmingham, Ala.	140	93	36	4	3	4	14
MID. AI LANTIC	1,897	1,408	339	114	15	18	132	Chattanooga, Tenn.	01	35	18	3	2	3	2
Albany, N. f. Allentown Pa	40	21	10	2	-	-	1	Levington Ky	95 25	17	20	4	4		2
Buffalo, N.Y.	86	69	11	3	1	2	8	Memphis, Tenn.	230	161	45	16	3	5	18
Camden, N.J.	U	U	U	Ū	U	Ū	Ū	Mobile, Ala.	65	43	18	3	1	-	5
Elizabeth, N.J.	16	11	4	1	-	-	1	Montgomery, Ala.	40	28	9	2	-	1	5
Erie, Pa.	50	38	10	2	-	-	2	Nashville, Tenn.	94	59	24	7	3	1	6
Jersey City, N.J.	30	15	11	4	-	-	-	W.S. CENTRAL	1.223	779	277	96	37	34	59
New York City, N.Y.	964	706	181	60	8	9	69	Austin, Tex.	69	48	13	3	2	3	5
Paterson N I	55	24	15	1	2	2	4	Baton Rouge, La.	59	45	11	1	2	-	-
Philadelphia Pa	224	164	42	17	_	1	11	Corpus Christi, Tex.	77	48	19	8	2	-	-
Pittsburgh, Pa.§	19	14	4	-	-	1	1	Dallas, Tex.	158	86	46	19	6	1	9
Reading, Pa.	32	26	5	1	-	-	2	El Paso, Tex.	92	58	18	11	2	3	4
Rochester, N.Y.	160	129	22	5	2	2	15	Houston Tex	276	166	68	23	4 Q	10	14
Schenectady, N.Y.	28	24	2	2	-	-	1	Little Bock, Ark.	18	14	- 00	23	2	-	1
Scranton, Pa.	38	33	4	1	-	-	1	New Orleans, La.	46	31	12	3	-	-	-
Syracuse, N.Y.	/0	61	2	3	-	1	6	San Antonio, Tex.	210	143	44	12	5	6	19
Litica NY	14	12	2	-	_	_	3	Shreveport, La.	51	36	8	3	1	3	4
Yonkers, N.Y.	22	17	2	2	1	-	1	Tulsa, Okla.	57	35	12	6	2	2	-
E N. CENTRAL	1 666	1 078	360	95	33	41	121	MOUNTAIN	854	582	171	72	19	9	62
Akron, Ohio	48	36	7	-	-	5	5	Albuquerque, N.M.	120	87	20	9	3	1	9
Canton, Ohio	29	20	7	2	-	-	7	Boise, Idano	44	33	10	2	1	-	3
Chicago, III.	342	165	74	23	6	16	12	Denver Colo	Ц	40	13	U U	L L	Ū	U.
Cincinnati, Ohio	54	37	11	4	-	1	4	Las Vegas, Nev.	226	144	57	21	4	-	21
Cleveland, Ohio	184	130	45	6	2	1	17	Ogden, Utah	21	16	2	3	-	-	1
Davton Ohio	90 69	49	15	3	1	4	6	Phoenix, Ariz.	75	45	16	9	4	-	3
Detroit. Mich.	162	82	51	16	9	4	12	Pueblo, Colo.	15	15	-	-	-	-	2
Evansville, Ind.	U	U	U	U	U	U	U	Salt Lake City, Utan	123	105	17	10	2	5	14
Fort Wayne, Ind.	61	39	14	5	1	2	4	Tucson, Anz.	155	105	32	10	3	3	9
Gary, Ind.	13	8	3	1	1	-	-	PACIFIC	1,194	835	232	80	24	22	98
Grand Rapids, Mich.	44	34	1	1	2	-	4	Berkeley, Calif.	13	/	5	-	-	1	3
Lansing Mich	154	103	40	3	2	2	10	Glandala Calif	1	1	0	0	0	0	1
Milwaukee Wis	97	77	14	6	-	-	6	Honolulu Hawaii	58	45	10	2	_	1	4
Peoria, III.	43	35	5	3	-	-	2	Long Beach, Calif.	33	26	6	1	-	-	2
Rockford, III.	59	42	10	4	-	3	4	Los Angeles, Calif.	102	60	24	9	4	5	7
South Bend, Ind.	37	29	6	1	1	-	3	Pasadena, Calif.	41	29	6	3	1	2	4
Toledo, Ohio	69	53	13	-	1	2	6	Portland, Oreg.	95	61	25	7	-	1	6
Youngstown, Onio	57	37	13	4	3	-	2	Sacramento, Calif.	156	116	23	11	3	3	19
W.N. CENTRAL	663	422	145	51	25	18	48	San Erancisco Calif	99	99 68	20	9	0	1	7
Des Moines, Iowa	65	49	12	4	-	-	5	San Jose Calif	213	153	36	13	7	4	17
Duluth, Minn.	23	17	4	1	1	-	2	Santa Cruz, Calif.	21	15	6	-	-	-	3
Kansas City, Kans.	22	10	10	3	1	1	3	Seattle, Wash.	99	69	21	8	1	-	6
Lincoln Nehr	00 8	50 8	- 19	4	-	-	4	Spokane, Wash.	57	41	10	5	1	-	5
Minneapolis. Minn	60	38	15	3	1	3	7	Tacoma, Wash.	61	42	14	3	1	1	2
Omaha, Nebr.	89	65	13	7	1	3	. 4	TOTAL	9,281 ¹	6,274	1,953	613	198	176	648
St. Louis, Mo.	173	90	46	17	13	6	12								
St. Paul, Minn.	58	40	12	4	1	1	5								
Wichita, Kans.	82	55	17	8	1	1	6	1							

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

¹ Total includes unknown ages.



FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals January 1, 2005, with historical data

Ratio (Log scale)[†]

Beyond historical limits

* No rubella cases were reported for the current 4-week period yielding a ratio for week 52 of zero (0). † 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.

TABLE I. Summary of provisional cases of selected notifiable diseases, United States, cumulative, week ending January 1, 2005 (52nd Week)*

<i>i</i> .					<u> </u>
	Cum. 2004	Cum. 2003		Cum. 2004	Cum. 2003
Anthrax	-	-	HIV infection, pediatric ^{†1}	149	197
Botulism:	-	-	Influenza-associated pediatric mortality**		NA
foodborne	23	19	Measles, total	37††	55 ^{§§}
infant	76	76	Mumps	236	219
other (wound & unspecified)	17	30	Plague	3	1
Brucellosis [†]	123	100	Poliomyelitis, paralytic		-
Chancroid	42	54	Psittacosis [†]	10	12
Cholera	4	2	Q fever [†]	70	67
Cyclosporiasis [†]	212	75	Rabies, human	7	2
Diphtheria	-	1	Rubella	12	7
Ehrlichiosis:	-	-	Rubella, congenital syndrome		1
human granulocytic (HGE)†	400	336	SARS-associated coronavirus disease [†] **		8
human monocytic (HME) [†]	331	281	Smallpox [†] 11		NA
human, other and unspecified	35	48	Staphylococcus aureus:		-
Encephalitis/Meningitis:	-	-	Vancomycin-intermediate (VISA)† 11		NA
California serogroup viral ^{†§}	92	108	Vancomycin-resistant (VRSA)† 1	1	NA
eastern equine ^{†§}	6	14	Streptococcal toxic-shock syndrome [†]	101	155
Powassan [†] §	-	-	Tetanus	26	19
St. Louis ^{†§}	9	41	Toxic-shock syndrome	119	118
western equine ^{†§}	-	-	Trichinosis	7	6
Hansen disease (leprosy) [†]	82	93	Tularemia [†]	107	88
Hantavirus pulmonary syndrome ⁺	20	26	Yellow fever	-	-
Hemolytic uremic syndrome, postdiarrheal [†]	147	170			

-: No reported cases.

Incidence data for reporting years 2003 and 2004 are provisional and cumulative (year-to-date).

Not notifiable in all states. §

Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Infectious Diseases (ArboNet Surveillance).

¹ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update November 28, 2004.

** Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases.

†† Of 37 cases reported, 14 were indigenous, and 23 were imported from another country.

§§ Of 57 cases reported, 14 were indigenous, and 24 were imported from another country.

[¶] Not previously notifiable.

	AIC)S	Chlan	nvdia†	Coccidioi	domycosis	Cryptosp	oridiosis	Encephalitis/Meningitis West Nile [§]	
Deperting even	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.
	39 097	43 687	866 234	862 440	6.056	4 184	3 372	3 406	894	2 866
NEW ENGLAND Maine N.H. Vt **	1,318 48 44	1,546 52 38	29,523 2,118 1,749	27,754 1,999 1,599	- N	N	167 20 30	189 20 25		31 - 2
Mass. R.I. Conn.	495 131 584	709 101 630	13,324 3,404 7,908	11,077 2,939 9.091	- - N	- - N	20 60 4 27	78 16 18	-	12 5 12
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	9,011 1,406 4,804 1,360 1,441	9,869 978 5,211 1,488 2,192	106,272 22,473 32,882 14,218 36,699	108,852 21,363 34,765 15,925 36,799	N - N	N N	535 181 113 33 208	444 134 126 19 165	17 5 2 1 9	223 57 21 145
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	3,311 617 364 1,559 614 157	3,900 779 517 1,708 708 188	151,045 36,488 18,437 41,600 37,792 16,728	155,961 41,998 16,828 47,587 31,848 17,700	13 N - 13	7 N N - 7	964 225 86 97 152 404	1,005 171 105 101 149 479	64 11 8 28 12 5	150 84 15 30 14 7
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr.** Kans.	802 206 65 338 18 11 54 110	805 177 83 363 3 14 49 116	52,213 10,315 5,900 19,633 1,511 2,535 4,982 7,337	50,973 10,527 6,369 18,296 1,613 2,572 4,600 6,996	6 N 3 N - 3 N	4 N 1 3 N	419 135 90 79 12 43 29 31	586 152 122 51 14 48 26 173	85 13 26 2 6 7 18	696 48 81 39 94 151 194 89
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C.** Ga. Fla.	11,845 143 1,363 911 615 86 1,080 709 1,558 5,380	12,194 213 1,571 991 907 93 1,043 790 1,829 4,757	167,099 2,954 19,842 3,383 21,298 2,764 27,986 19,221 27,898 41,753	160,798 2,992 16,601 3,145 19,162 2,541 25,654 14,340 35,287 41,076	- N N N N	5 N 5 - N N - N	528 25 13 60 6 76 19 180 149	415 4 28 13 54 4 51 10 122 129	59 - 8 1 - 3 - 12 31	191 12 49 3 19 1 16 3 27 61
E.S. CENTRAL Ky. Tenn.** Ala. Miss.	1,833 232 722 442 437	1,974 224 829 484 437	56,679 6,470 21,453 10,963 17,793	54,474 7,906 20,380 14,117 12,071	4 N - 4	1 N N 1	121 45 29 24 23	132 24 42 56 10	60 1 13 15 31	91 11 21 25 34
W.S. CENTRAL Ark. La. Okla. Tex.**	4,332 184 865 202 3,081	5,378 188 1,038 212 3,940	103,801 7,205 21,764 9,882 64,950	107,025 7,788 20,488 10,830 67,919	2 1 1 N N	- - N N	123 17 7 20 79	125 20 5 21 79	221 12 81 14 114	611 23 101 56 431
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	1,415 6 18 313 178 550 72 260	1,466 13 25 6 352 99 635 69 267	50,403 2,371 2,555 1,082 11,986 6,128 16,799 3,690 5,792	48,379 2,511 2,366 943 12,856 7,364 12,777 3,811 5,751	3,932 N 2 N 21 3,813 37 59	2,429 N 1 10 2,374 9 35	163 34 27 4 58 13 19 6 2	136 18 27 5 37 16 6 19 8	234 2 39 31 129 6 25	871 75 92 621 74 7 2
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	5,230 373 282 4,383 56 136	6,555 490 243 5,694 19 109	149,199 17,638 8,277 114,918 3,500 4,866	148,224 16,649 7,587 114,838 3,732 5,418	2,099 N - 2,099 -	1,738 N - 1,738 -	352 40 32 278 - 2	374 58 36 279 1 -	154 - 154 -	2 - - 2 -
Guam P.R. V.I. Amer. Samoa C.N.M.I.	2 642 18 U 2	5 1,024 33 U U	560 3,628 272 U 32	591 2,690 410 U U	N U	- N - U U	N - U	- N - U U	- - U	- - - U U

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

N: Not notifiable.

 N: Not notifiable.
 U: Unavailable.
 -: No reported cases.
 C.N.M.I.: Commonwealth of Northern Mariana Islands.

 * Incidence data for reporting years 2003 and 2004 are provisional and cumulative (year-to-date).
 *

 * Chlamydia refers to genital infections caused by *C. trachomatis.*

 § Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Infectious Diseases (ArboNet Surveillance).

 ¶ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update

 November 28, 2004.

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

MMWR

		Escher	<i>ichia coli</i> . Ente	rohemorrhagi	: (EHEC)					
			Shiga toxi	n positive,	Shiga toxii	n positive,				
	015	7:H7	serogroup	o non-0157	not sero	grouped	Giard	liasis	Gond	rrhea
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003
UNITED STATES	2,436	2,603	270	247	287	153	18,498	19,195	307,845	329,717
NEW ENGLAND	165	160	43	46	18	13	1,709	1,622	6,748	7,247
Maine	11	11	1	4	-	-	129	182	212	227
N.H. Vt	23 12	19	5	-	-	-	47 174	43 121	86	96
Mass.	71	71	10	9	18	13	757	845	3,077	2,868
R.I.	13	4	1	-	-	-	122	114	808	947
Conn.	35	37	26	30	-	-	480	317	2,431	2,987
MID. ATLANTIC	286	253	59	24	32	36	3,804	3,972	34,101	41,386
Upstate N.Y. N Y City	37	102	43	13	15	20	1,389	1,244	10 531	8,376
N.J.	53	31	4	2	5	-	416	520	5,688	7,854
Pa.	74	113	12	9	12	16	1,017	1,008	10,770	11,697
E.N. CENTRAL	443	572	40	35	31	20	2,807	3,224	64,475	69,774
Ohio	102	132	9	16	21	20	812	895	18,860	22,296
ina. III	02 72	122	- 2	2	4	-	525	931	0,804 18 440	21 482
Mich.	82	92	11	2	6	-	700	771	15,984	13,804
Wis.	125	140	18	15	-	-	770	627	4,337	5,591
W.N. CENTRAL	496	443	48	54	18	21	2,175	2,079	16,431	17,804
Minn.	112	130	21	21	1	1	834	796	3,012	3,144
Mo	99	84	- 21	20	- 8	- 1	575	273 508	8 452	8 684
N. Dak.	15	13	-	4	7	8	23	45	96	99
S. Dak.	33	29	2	4	-	-	80	84	305	220
Nebr. Kans	72 42	48	4	5	- 2	- 11	150 212	142 231	1,033 2 491	1,570 2,568
	172	163	26	50	167	46	2 765	2 800	75 522	90 155
Del.	3	11	N	N	N	40 N	45	55	894	1,115
Md.	21	18	5	3	4	1	146	117	8,284	7,874
D.C.	1	1	-	-	-	-	64	58	2,511	2,478
va. W.Va.	39	50 6	-	- 15	-	-	47	423	892 8	0,055 841
N.C.	-	-	-	-	152	36	N	Ň	14,508	14,816
S.C.	8	4	-	-	-	-	73	141	9,376	8,371
Ga. Fla	25 73	27 46	8	8 24	- 11	- 9	731 1 129	848 1 114	12,338	17,438 18,367
E S CENTRAL	101	85	3	2	9	6	350	409	24 513	27 528
Ky.	30	29	1	2	6	6	N	N	2,758	3,547
Tenn.	31	35	2	-	3	-	157	193	8,059	8,519
Ala. Miss	30	17	-	-	-	-	193	216	6,905 6 791	9,201 6 261
	96	-	4	4	10	4	205	202	40,906	44 465
Ark.	16	12	1	-	-	-	121	144	3.603	4.197
La.	4	3	-	-	2	-	53	14	10,497	11,611
Okla.	20	29	1	-	4	-	151	134	4,228	4,479
	40	55	2	4	0	4	1 50.4	1 500	22,490	24,100
MOUNTAIN	242	319	36	27	-	-	1,534	1,598	69	10,345
Idaho	50	85	16	16	-	-	181	206	88	68
Wyo.	9	5	7	1	-	-	27	23	59	45
Colo. N. Mox	50	67	2	4	-	/	512	461	2,647	2,805
Ariz.	29	38	Ń	Ň	N	N	180	243	4,060	3,564
Utah	52	70	3	-	-	-	357	359	582	403
Nev.	27	24	1	1	-	-	128	139	2,649	2,176
PACIFIC	444	509	1	5	-	-	3,029	3,190	34,159	31,023
vvasn. Oreg	149 68	118	- 1	1 4	-	-	409 438	378	2,805	2,728 987
Calif.	216	276	-	- -	-	-	2,012	2,229	28,483	25,515
Alaska	1	5	-	-	-	-	90	88	492	560
Hawaii	10	9	-	-	-	-	80	92	1,124	1,233
Guam PB	N	N	-	-	-	-	-	2	92 270	68 274
V.I.	-	- -	-	-	-	-	- 143	- 333	270 80	87
Amer. Samoa	U	U	U	U	U	U	U	U	U	U
C.N.M.I.	-	U	-	U	-	U	-	U	3	11

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

MMWR

				Haomonhilus	influonzao in	asivo			Henatitis			
	All	ages		naemopinius	Age <	5 vears			(viral. acu	(viral, acute), by type		
	All se	rotypes	Serot	ype b	Non-sei	rotype b	Unknow	n serotype		A		
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003		
UNITED STATES	1,814	1,898	16	25	114	107	156	215	5,609	7,465		
NEW ENGLAND Maine N.H. Vt.	162 13 19 8	155 4 13 11	1 - -	2 - 1 -	7 - 2 -	5 - -	4 - 1 1	6 1 - 1	1,021 11 26 8	358 20 18 6		
Mass. R.I. Conn.	64 6 52	79 9 39	1 - -	1 - -	1 1 3	5 - -	2 - -	3 1 -	884 23 69	209 15 90		
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	399 128 79 77 115	403 152 70 70 111	1 1 - -	3 3 - -	5 5 - -	4 4 - -	39 6 15 4 14	50 10 13 11 16	688 117 274 140 157	1,813 141 450 208 1,014		
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	296 106 54 75 21 40	307 74 51 108 26 48	2 1 - 1 -	3 - - 3 -	8 2 4 - 2	6 1 - 5 -	37 16 1 13 4 3	57 13 9 24 1 10	527 50 96 184 145 52	673 169 70 186 203 45		
W.N. CENTRAL Minn. Iowa Mo.	111 45 1 39	116 53 - 41	2 1 1	2 2 -	4 4 -	7 7 -	12 1 - 7	14 2 - 11	175 32 55 44	182 44 37 59		
N. Dak. S. Dak. Nebr. Kans.	4 - 13 9	4 1 2 15	- - -	- - -	- - -		- 2 2	- - 1	1 4 12 27	2 - 14 26		
S. ATLANTIC Del. Md. D.C.	412 - 71 -	436 - 105 2	1 - -	2 - 1 -	28 - 6 -	20 - 9 -	24 - - -	29 - 1 -	1,006 6 107 7	1,733 9 178 43		
Va. W. Va. N.C. S.C. Ga.	41 17 62 6 101	68 17 41 7 78	- - 1 -		- 1 7 -	- 3	1 3 1 - 18	9 - 2 9	137 6 106 26 315	141 15 124 41 788		
Fia. E.S. CENTRAL Ky. Tenn. Ala. Miss	68 13 38 14 3	89 7 55 25 2	- - - 1	1 - - 1 -	14 2 - -	8 3 2 1 -	1 9 1 6 2	10 1 6 3	296 144 30 80 10 24	394 268 32 196 24 16		
W.S. CENTRAL Ark. La. Okla. Tex.	82 4 15 62 1	79 6 22 47 4	1 - - 1	2 - - 2	9 - - 9 -	11 1 2 8	2 1 1 -	5 - 4 - 1	589 57 55 20 457	701 37 48 23 593		
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah	187 5 1 46 39 65 18	168 7 2 38 21 78 12	4 - - 1 - 2	6 - - - - - 6 -	31 - 1 - 10 15 2	24 - - 5 10 5	22 2 6 6 2 5	20 3 7 2 4 4	453 8 21 5 53 23 280 49	466 8 18 2 63 24 261 39		
Nev. PACIFIC Wash. Oreg. Calif. Alaska Hawali	13 97 4 45 35 4 9	10 145 11 41 58 21 14	1 3 - - - -	- 4 - 4 -	3 20 - 20 -	4 27 7 20	1 7 1 3 1 1 1	24 3 4 10 7	14 1,006 60 69 845 5 27	51 1,271 68 62 1,118 10 13		
Guam P.R. V.I. Amer. Samoa C. N.M.I	- - - U	- 1 - U	- - - -	- - - U	- - - -	- - - U	- - - U	- 1 - U	1 26 - U	2 86 - U		

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

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	H	epatitis (viral	, acute), by ty	ре								
		В	C	;	Legio	nellosis	Lister	riosis	Lyme d	isease		
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003		
UNITED STATES	6,632	7,118	866	1,092	1,917	2,139	682	676	18,523	20,738		
NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn.	367 4 41 5 217 6 94	355 1 24 4 210 18 98	16 - 8 6 - 2	14 2 12 - -	92 - 11 6 34 18 23	117 2 9 6 55 17 28	48 7 4 2 15 2 18	53 7 4 1 18 1 22	2,859 53 216 51 1,134 234 1,171	3,831 169 178 43 1,524 581 1,336		
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	1,268 92 129 747 300	769 107 193 183 286	149 19 - 130	139 26 - 113	539 112 62 100 265	622 171 71 94 286	160 51 22 28 59	136 41 24 24 47	11,968 4,156 - 3,271 4,541	13,903 5,102 220 2,887 5,694		
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	515 121 48 71 243 32	543 155 42 73 222 51	107 6 10 13 78	142 9 9 24 95 5	484 220 78 35 134 17	446 226 32 50 120 18	109 40 18 18 26 7	89 26 10 23 20 10	1,033 61 22 1 27 922	909 66 23 71 11 738		
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr.	316 49 15 189 4 - 41	345 39 14 239 2 2 32	55 18 - 36 - - 1	270 11 255 - 3	63 7 6 35 2 5 4	73 5 11 37 1 2 6	22 6 3 8 - 2 3	20 6 1 6 - - 4	848 735 45 56 1 8	474 345 53 69 - 1 2		
Kans.	18	17	-	-	4	11	-	3	3	4		
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla	1,934 42 169 19 280 39 182 90 587 526	2,022 13 130 12 227 38 160 159 662 621	198 28 26 3 17 24 12 8 17 63	156 - 9 - 15 9 13 24 13 73	400 13 82 11 53 9 40 8 37 147	538 28 132 19 109 21 41 8 34 146	119 N 19 - 20 4 26 6 15 29	146 N 27 18 7 18 5 31 38	1,541 301 809 11 179 28 123 16 13 61	1,346 209 689 13 195 27 146 15 10 42		
E.S. CENTRAL Ky. Tenn. Ala. Miss.	419 73 174 66 106	497 74 217 96 110	91 23 35 5 28	93 22 23 6 42	88 40 33 12 3	103 43 35 20 5	21 4 10 5 2	33 9 9 13 2	48 15 17 5 11	63 15 19 8 21		
W.S. CENTRAL Ark. La. Okla. Tex.	617 77 63 47 430	1,157 84 116 57 900	136 3 69 3 61	155 3 100 3 49	78 6 8 64	80 2 1 7 70	40 2 3 1 34	50 1 5 3 41	92 8 5 - 79	92 - 7 - 85		
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz.	539 2 10 9 59 15 315	567 16 8 31 78 36 261	36 2 - 2 - 7 5	53 4 1 - 14 - 7	94 3 9 7 21 4 22	79 4 7 2 12 4 11	28 1 - 12 1 -	32 2 - 9 3 10	33 - 6 4 - 1 7	14 - - - 1 3		
Nev.	58 71	51 86	5 15	- 27	24 4	12	5 8	2	14 1	2 3		
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	657 53 110 468 15 11	863 82 120 626 8 27	78 22 15 33 - 8	70 19 16 31 - 4	79 14 N 64 1	81 10 N 70 - 1	135 12 7 111 - 5	117 10 5 97 5	101 14 33 52 2 N	106 3 16 84 3 N		
Guam P.R.	6 58	10 129	-	5	2	1	-	-	Ň	N		
Amer. Samoa	U	U	U	U	U	U	U	U	U	U		

 TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003

 (52nd Week)*

	Mal	laria	Mening	ococcal	Pert	ussis	Babies	animal	Rocky Mountain spotted fever	
Deperting even	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.	Cum.
UNITED STATES	1 300	1 350	1 254	1 654	18.957	10 670	<u> </u>	6 712	1 514	968
NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn.	85 6 5 4 48 7 15	66 3 6 2 32 3 20	70 11 7 4 36 2 10	75 6 5 3 45 2 14	1,905 34 98 125 1,589 47 12	1,912 12 99 71 1,633 20 77	702 55 31 40 320 38 218	594 70 29 38 211 68 178	27 - - 21 3 2	9 - - 9 - 9 -
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	341 55 181 59 46	364 63 194 61 46	157 39 25 37 56	206 55 43 31 77	2,896 1,880 179 247 590	1,717 1,041 150 188 338	936 518 13 - 405	916 427 6 62 421	102 5 24 33 40	40 - 13 16 11
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	107 30 18 24 21 14	108 23 4 45 25 11	190 73 31 22 49 15	251 58 44 72 47 30	5,896 764 293 503 288 4,048	1,338 317 69 138 136 678	163 77 11 51 15 9	170 53 30 24 49 14	24 12 6 2 4	22 10 1 5 6
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr. Kans.	66 25 4 20 3 1 4 9	53 24 6 7 1 3 - 12	83 23 18 20 2 2 4 14	126 26 27 49 1 1 8 14	2,490 497 308 553 754 73 75 230	550 146 156 174 7 7 16 44	561 90 104 59 69 90 53 96	631 41 103 43 56 132 98 158	134 4 1 106 - 4 19	65 2 51 - 5 4 1
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fia.	334 6 78 13 53 2 23 10 54 95	341 2 74 15 59 4 25 4 66 92	215 3 11 4 20 6 36 12 16 107	271 9 27 5 8 6 36 22 34 104	752 5 139 9 261 24 101 57 23 133	825 9 90 219 27 137 194 35 111	1,897 9 323 - 464 69 581 151 298 2	2,636 64 351 542 81 767 245 398 188	780 6 79 - 38 5 535 24 67 26	592 1 105 1 34 5 322 43 64 17
E.S. CENTRAL Ky. Tenn. Ala. Miss.	29 5 7 12 5	30 9 7 7 7	61 12 15 17 17	95 21 30 21 23	284 87 135 45 17	163 48 81 19 15	136 23 36 66 11	210 39 103 64 4	174 2 88 48 36	128 3 71 21 33
W.S. CENTRAL Ark. La. Okla. Tex.	112 8 5 7 92	134 4 5 4 121	124 20 36 10 58	186 18 43 22 103	972 78 16 33 845	752 45 11 92 604	1,059 49 - 104 906	1,145 25 5 199 916	240 154 5 71 10	101 44 1 42 14
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	51 1 16 4 13 9 6	45 - 23 3 8 6 2	63 3 7 3 15 9 12 7 7	98 6 9 27 12 29 5 8	1,902 74 37 1,072 146 240 250 48	1,000 5 82 130 366 75 183 124 35	217 26 8 7 43 5 115 10 3	178 21 15 6 38 5 74 14 5	28 3 4 5 1 2 4 9	10 1 2 3 1 - 1
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	175 20 18 132 2 3	209 30 11 161 1 6	291 32 58 189 3 9	346 42 61 223 7 13	1,860 765 535 521 12 27	2,413 748 438 1,149 66 12	180 - 6 166 8 -	232 - 7 216 9	5 3 2 -	1 - - 1 -
Guam P.R. V.I. Amer. Samoa C.N.M.I.	- - - -	1 2 - U U	1 11 - U	12 - U U	7 - U	1 4 - U U	61 - - -	70 - U	N U	- N - U U

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

, , , , , , , , , , , , , , , , , , ,							Stre	ptococcus pne	umoniae, inv	asive
	Salmon	ellosis	Shige	llosis	Streptococo invasive,	al disease, group A	Drug re all a	sistant, iges	Age <	5 years
Reporting area	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003	Cum. 2004	Cum. 2003
UNITED STATES	40,252	42,731	12,735	22,846	4,461	5,604	2,119	2,043	734	761
NEW ENGLAND Maine N.H.	2,024 90 138	2,081 139 142	286 9 10	344 7 9	178 11 19	462 29 34	77 2	105 - -	75 3 N	9 - N
Mass. R.I. Conn.	1,142 136 453	1,214 125 388	175 20 68	8 233 20 67	118 21 -	19 205 16 159	14 42 19	9 N 10 86	59 10 U	5 N 4 U
MID. ATLANTIC Upstate N.Y. N.Y. City N.J.	5,412 1,233 1,203 968	4,944 1,249 1,301 857	1,133 408 391 231	2,382 628 416 360	712 230 104 156	943 357 146 174	141 58 U	148 85 U	127 89 U 7	118 86 U 4
Pa.	2,008	1,537	103	978	222	266	83	63	31	28
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	4,846 1,208 637 1,357 812 832	5,521 1,318 542 1,936 795 930	1,134 171 225 330 234 174	1,845 299 177 1,001 234 134	830 221 101 170 282 56	1,272 284 119 343 353 173	503 353 150 - N N	440 285 155 - N N	180 80 46 14 N 40	321 98 30 133 N 60
W.N. CENTRAL Minn.	2,459 633	2,454 562	463 66	783 102	294 141	334 159	28	20	105 70	80 55
Mo. N. Dak. S. Dak.	429 641 42 137	872 42 128	186 3 13	354 10 17	60 15 21	77 17 25	23 - 5	16 3 1	14 4 -	3 9
Nebr. Kans	185 392	166 290	47 82	88 121	16 41	27 29	- N	- N	7 10	5 8
S. ATLANTIC Del. Md. D.C.	11,109 101 809 62	11,205 102 845 52	2,762 9 151 40	6,742 164 577 73	851 3 185 10	944 7 226 10	1,018 4 - 8	1,087 1 27 1	64 N 48 3	18 N - 7
Va. W.Va. N.C. S.C. Ga. Fla	1,159 225 1,648 956 1,869 4,280	1,187 134 1,408 812 2,042 4 623	166 9 476 326 620 965	453 1 985 517 1,160 2 812	70 25 125 39 169 225	111 36 103 39 189 223	N 106 N 71 248 581	N 82 N 142 244 590	N 13 U N N	N 11 U N N
E.S. CENTRAL Ky. Tenn. Ala. Miss.	2,480 353 523 760 844	2,941 397 759 792 993	773 75 327 323 48	1,042 129 396 342 175	191 59 132	208 48 160	124 30 93 -	148 24 124	6 N N N 6	N N N
W.S. CENTRAL Ark. La. Okla. Tex.	4,079 575 815 404 2,285	5,972 796 872 468 3,836	3,413 81 278 526 2,528	5,770 104 443 838 4,385	292 17 3 66 206	300 6 2 90 202	72 10 62 N N	80 22 58 N N	133 8 26 47 52	144 8 29 67 40
MOUNTAIN Mont. Idaho	2,366 184 145	2,272 112 180	843 4 13	1,293 2 36	535 - 9	517 1 19	50 - N	11 - N	42 - N	71 - N
Wyo. Colo. N. Mex. Ariz. Utah	54 536 271 757 239	77 497 294 711 224	6 158 122 425 50	8 329 272 530 50	10 138 83 247 44	2 144 122 193 34	12 5 N 31	10 - - N 1	39 - N 3	53 12 N 6
Nev. PACIFIC Wash	180 5,477 581	177 5,341 596	65 1,928 115	66 2,645 169	4 578 59	2 624 74	106	4	- 2 N	- - N
Oreg. Calif. Alaska Hawaii	404 4,057 64 371	424 4,000 96 225	81 1,679 6 47	211 2,208 11 46	N 383 - 136	N 416 - 134	N N - 106	N N - 4	N N N 2	N N N
Guam P.R.	26 309	44 730	33 11	41 27	N	N	N	N	N	N
Amer. Samoa C.N.M.I.	U 3	U U	U	U U	U	U U	U	U U	U	U U

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

$\begin bord bord bord bord bord bord bord bord$	(52110 Week)					1				1			
$\begin{tabular}{ c c c c c c c c c c c c c c c c c c c$			Syph	ilis		4				Varicella			
Begonding area 3004 2003 2004 2004		Primary	& secondary	Cong	enital	Tuber	rculosis	Typho	id fever	(Chicker	npox)		
UNITED STATES 7,362 7,04 312 434 11,178 12,641 283 382 18,778 7.7681 MAIL 4 19 3 - 18 13 - 4 311 381 Mas 1 19 3 - 18 13 - 4 411 001 Mas 12 130 - - 23 236 15 15 411 001 MILED KINES 222 29 - - 233 246 15 2 - 16 MILED KINES 34 28 1 1 75 111 7 - 1.57 - 1.57 1.55 1.5 - 1.55 1.5 - 1.55 1.5 - 1.55 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5 1.5	Reporting area	2004	2003	2004	2003	2004	2003	2004	2003	2004	2003		
NEW ENCLAND 175 215 4 1 4 4 1 5 5 5 5 5 5 5 5 5 5 5 5 5 5	UNITED STATES	7,352	7,004	312	434	11,178	12,541	283	352	18,718	17,698		
Mane 2 8 - - - 21 - - 311 7811 7811 7811 7811 7811 7811 7811 7811 7811 7811 7811 7811 77 - 1531 7811 77 - 1531 781 7811 77 7 - 1571 7811 77 7 - 1571 781 <	NEW ENGLAND	175	215	6	1	408	435	23	28	722	3,411		
NH. 4 19 3 . 18 9 . 4 17 07 RI, 122 29 2 . 38 45 1 2 .	Maine	2	8	-	-	-	21	-	-	311	781		
Mass. 112 130 - - 273 236 15 15 14 Cann. 34 28 1 1 75 111 7 7 - 1,57 Cann. 34 28 1 1 75 111 7 7 - 1,57 N. C.W. 807 2.05 5 24 1003 111 28 12 - - - 1,42 N. C.W. 407 168 20 23 440 442 16 21 - - - - - - 20 17 33 6.680 6.397 - - 140 566 - 1 10 22 1 10 423 4.123 1.397 1.30 1.397 1.30 1.397 1.30 1.397 1.30 1.397 1.30 1.397 1.30 1.397 1.30 1.397 1.30	N.H. Vt	4	19 1	3	-	18 4	13	-	4	- 411	- 907		
Al. 22 29 2	Mass.	112	130	-	-	273	236	15	15	-	147		
Control Ga Ga H	R.I.	22	29	2	- 1	38 75	45	1	2	-	5 1 571		
Upania N. N. Coly 60 50 1 20 2.279 2.885 8 12 8 12 N. L. 147 168 20 23 440 452 16 21 - - Pa 123 158 1 - 344 333 15 10 91 42 Pa 123 158 1 - 344 333 15 10 91 42 Pa 32 198 1 13 1202 17 33 6,580 6,397 Oho 239 198 32 4 240 22 9 10 4.239 4.13 Wich. 137 16 - 1 147 168 2 - - 4 3 - - 4 3 - - 4 3 - - 4 3 - - 4 3 -		076	001	1	74	2.067	2 1 9 1	62	80	01	1,571		
N X Chy N. J. 147 168 20 15 11 1.033 1.111 2.3 37 K. CENTRAL 27 188 1	Upstate N.Y.	99	50	5	20	2,007	2,101	8	12	-	42		
N.L. 14/ 188 20 23 440 432 16 21 - 10 - 10 -	N.Y. City	607	525	15	31	1,003	1,111	23	37	-	-		
EN CENTRAL 971 883 61 75 1.203 1.202 17 33 6.580 6.377 nd. 99 50 10 16 127 134 - 4 159 1.267 nd. 39 50 10 16 127 134 - 4 159 1.267 nd. 177 2.2 1.267 nd. 177 249 32 34 240 224 9 10 4.239 4.126 nd. 176 249 32 34 240 224 9 10 4.239 4.126 nd. 176 249 4.29 32 34 240 224 9 10 4.239 4.126 nd. 176 249 4.29 17 2 6 30 nd. 224 10 224 10 10 4.239 4.126 nd. 176 249 4.29 17 12 6 30 nd. 224 10 10 4.239 4.126 nd. 176 249 4.29 17 12 6 30 nd. 224 10 12 6 30 nd. 224 10 10 4.239 4.126 10 10 10 10 10 10 10 10 10 10 10 10 10	N.J. Pa.	147	168	20	- 23	440 345	452 333	16 15	21 10	- 91	42		
Ohio 229 196 1 3 208 209 5 2 1,572 1,267 III. 374 372 18 21 541 569 5 1 1 74 139 - III. 374 372 18 21 541 569 5 1 4.24 4.24 Wils. 33 149 5 6 446 467 12 6 930 1 4.24 4.42 Wils. 33 149 5 6 4.46 10 2 1 5 1 Mod. 85 58 2 4 116 10 2 1 5 1 Statk. 23 23 2 1 59 75 2 1 43 1 2 1 5 1 5 2 1 1 1 1 1 1 1 1 1	E.N. CENTRAL	871	883	61	75	1.203	1.202	17	33	6.580	6.397		
Ind. 59 50 10 16 127 134 - 4 139 - Wis. 33 16 - 1 87 64 9 10 42.28 1,004 Wis. 33 16 - 1 87 64 9 10 42.28 1,004 Wis. 24 46 1 - 44 467 12 6 100 82 Mon. 85 58 2 4 116 110 2 1 5 1 Noak - 2 - - 48 207 - 43 - - 82 82 7 - 43 - - 82 82 - - - 82 7 - - 43 - - - 83 1 - - - 6 33 - - - - - - - - - - - - - - - -<	Ohio	229	196	1	3	208	209	5	2	1,572	1,267		
With. 176 249 24 240 224 9 10 4.225 4.226 4.226 Wis 33 16 - 1 87 66 3 - 66 3 - 628 1.004 Win Correl 131 196 4 2 1 5 1 Noa 5 58 2 4 116 10 2 1 5 1 N.Dak. - 2 - - 4 4 - - 82 81 S.Dak. - 2 - - 4 4 - - 82 81 - - - 43 - - - 2.35 2.251 2.251 2.357 - - 2.426 - - 1.26 31 - - 2.426 1 - - 2.35 2.41 - - -	Ind.	59 374	50 372	10 18	16 21	127 541	134	-	4	139	-		
Wis. 33 16 - 1 87 66 3 - 628 1.004 Win.CENTRAL 143 149 5 6 446 467 12 6 130 82 2 N N Mon. 25 12 - - 44 101 10 2 1 5 1 N N Mon. 85 58 2 - - 44 44 - - 82 81 1	Mich.	176	249	32	34	240	224	9	10	4,239	4,126		
W.N.CENTRAL 143 149 5 6 446 467 12 6 130 B2 lowa 5 12 - 42 33 - 2 N N lowa 5 12 - 42 33 - 2 N N Monte 5 58 2 - 181 140 - - 43 - - 43 - - - 43 - - 43 - - - 43 - <td< td=""><td>Wis.</td><td>33</td><td>16</td><td>-</td><td>1</td><td>87</td><td>66</td><td>3</td><td>-</td><td>628</td><td>1,004</td></td<>	Wis.	33	16	-	1	87	66	3	-	628	1,004		
mmin 2 10 10 12 13 2 2 N Mo 85 58 2 4 16 110 2 1 5 1 N. Dak. - 2 - - 8 20 - - 82 Nebr. 6 6 - 1 36 27 2 1 - - S,ATLANTC 1,951 1,840 53 82 2,512 2,748 45 59 2,251 2,357 Del. 9 6 1 - 71 2 1 - 16 626 622 31 Va. 363 312 9 12 2150 261 12 11 - 1 1 130 16 626 682 13 416 526 5 8 16 244 64 1 1 1 1 120 15 <t< td=""><td>W.N. CENTRAL</td><td>143</td><td>149</td><td>5</td><td>6</td><td>446</td><td>467</td><td>12</td><td>6</td><td>130</td><td>82</td></t<>	W.N. CENTRAL	143	149	5	6	446	467	12	6	130	82		
Mo. 85 58 2 4 116 10 2 1 5 1 S.Dak. - 2 - - 8 20 - - 43 - - 5 8 20 - - 43 -	lowa	5	12	-	-	42	33	-	2	N	N		
N.DBK. - 2 - - 4 4 - - 62 61 Wabr. 6 6 6 - 1 36 27 2 - 43 - Kans. 23 23 23 2 1 59 75 - <th< td=""><td>Mo.</td><td>85</td><td>58</td><td>2</td><td>4</td><td>116</td><td>110</td><td>2</td><td>1</td><td>5</td><td>1</td></th<>	Mo.	85	58	2	4	116	110	2	1	5	1		
Nebr. 6 6 . 1 36 27 2 1 SATLANTIC 1,951 1,840 53 82 2,512 2,748 45 59 2,251 2,357 SATLANTIC 1,951 1,840 53 82 2,512 2,748 455 59 2,251 2,357 Mu 98 3 1 2 1 2 1 2 1 2 1 5 29 Va. 12 2 - 24 21 1 1 26 66 682 VA. 2 2 - - 24 21 1 1276 1330 N.C. 186 148 13 19 334 374 8 9 N N S.C. 113 94 8 1 165 1330 131 123 128 31 1 1 1	N. Dak. S. Dak	-	2	-	-	4	4 20	-	-	82 43	81		
Kans.2323215975Del.9511,84053822,5122,74845592,2572,387Del.93312772811-152,337D.C.362481-712,66682W.Va.2224211,2761,330N.C.11394814167169318284Ga.36150821341652658Fla.71164316239561,0461015Ky.353111233582233110Ala.16511387153238-4Miss.50362233110	Nebr.	6	6	-	1	36	27	2	1	-	-		
S.ATLANTIC 1,951 1,840 53 82 2,512 2,748 45 59 2,251 2,357 Del. 9 6 1 - 17 23 5 29 Md. 363 312 9 12 250 261 12 11 - 1 1 - 1 D.C. 92 48 1 - 71 26 31 Va. 114 79 3 1 277 328 10 16 626 682 WA. 2 4 21 - 12 116 18 19 N.C. 186 144 13 19 334 271 8 - 1276 1,330 N.C. 196 144 13 19 334 271 8 - 1276 1,330 N.C. 196 144 13 19 334 271 8 - 1276 1,330 N.C. 196 158 2 13 416 56 5 8 318 284 19 N.N. N.C. 196 158 2 13 416 56 5 8 318 284 19 - 1276 1,330 N.C. 196 158 2 13 416 56 5 8 318 284 19 - 1276 1,330 N.C. 196 158 24 21 - 127 18 31 - 276 1,330 N.C. 196 158 24 21 - 128 31 - 276 1,330 N.C. 196 158 2 13 416 56 5 8 - 318 284 19 - 276 1,330 N.C. 196 158 24 21 - 230 664 7 8 16 N.C. 196 158 24 27 30 6,354 4,667	Kans.	23	23	2	1	59	75	-	-	-	-		
Main 363 312 9 12 250 261 12 11 - 1 Va. 114 79 3 1 277 328 10 16 626 682 W.A. 2 2 - - 274 328 10 16 626 682 N.C. 186 148 13 19 334 374 8 9 N N S.C. 113 94 8 14 167 199 - 318 284 Ga. 361 508 2 13 416 526 5 8 - - Fla. 711 643 16 23 966 10 15 -	S. ATLANTIC	1,951	1,840	53 1	82	2,512 17	2,748	45	59	2,251	2,357		
D.C. 92 48 1 - 79 3 1 277 328 10 16 662 682 W Va. 2 2 24 21 - 1 1276 1.330 W.Va. 2 2 2 - 2 - 24 21 - 24 21 - 1276 1.330 S.C. 113 94 8 14 167 169 - 318 284 Ga. 361 508 2 13 416 526 5 8 - 318 284 Ga. 711 643 16 23 956 1.046 10 15 - 25 E.S.CENTRAL 385 317 19 12 539 694 7 8 - 25 Fla. 711 643 16 23 956 1.046 10 15 - 25 E.S.CENTRAL 385 317 19 12 539 694 7 8 - 25 W.V. 47 33 1 1 123 128 3 1 - 25 W.S.CENTRAL 1156 936 51 80 2.188 4 3 - 25 MISS. 50 36 2 2 3 310 - 25 MISS. 50 36 2 1 3 152 1.25 MISS. 50 36 2 1 3 1.55 MISS. 50 36 2 1 4 1 - 1 MISS. 50 36 2 1 4 1.55 MISS. 50 36 2 1 4 1.55 MISS. 50 36 2 1 5 MISS. 50 36 2 1 5 MISS. 50 36 2 2 1 3 MISS. 50 36 2 2 2 4 MISS. 50 36 4 MISS. 50	Md.	363	312	9	12	250	261	12	11	-	1		
Wa.1173121212111	D.C.	92	48	1	-	71	-	- 10	-	26	31		
N.C. 186 148 13 19 334 374 8 9 N N Ga. 361 508 2 13 416 526 5 8 - - Fla. 711 643 16 23 956 1,046 10 15 - - Ky. 47 33 1 1 123 128 3 1 - - - Ky. 47 33 1 1 123 128 3 1 -	wa. W. Va.	2	2	-	-	24	21	-	-	1,276	1,330		
S.L. 113 94 8 14 10' 169 - - - 318 224 Ga. 361 508 2 13 416 526 5 8 - - Fla. 711 643 16 23 956 1,046 10 15 - - E.S.CENTRAL 385 317 19 12 539 694 7 8 -	N.C.	186	148	13	19	334	374	8	9	N	N		
$ \begin{array}{cccccccccccccccccccccccccccccccccccc$	5.0. Ga.	361	94 508	8	14	416	526	- 5	- 8	318	284		
E.S.CENTRAL385317191253969478Ky.47331112312831Ala.1651138223310Miss.50362233110W.S.CENTRAL1,15693651801,0551,82427306,3544,667Ark.3951-3111Cha.2486421152155111Cha.24642115215511 <t< td=""><td>Fla.</td><td>711</td><td>643</td><td>16</td><td>23</td><td>956</td><td>1,046</td><td>10</td><td>15</td><td>-</td><td>-</td></t<>	Fla.	711	643	16	23	956	1,046	10	15	-	-		
Ky.473311112312831Ala.165113822321843Ala.16511387153238-4Miss.50362233110WS. CENTRAL1,15693651801,0551,82427306,3544,667Ark.3951-3118110La.268178-15116Okla.24642115215511Tex.82564349757851,55926296,3034,651MOUNTAIN3403344535515527882,590742Mont.31Kyo.354-1Colo.403813111106341,958Colo.4038113111106341,958<	E.S. CENTRAL	385	317	19	12	539	694	7	8	-	-		
$\begin{array}{c c c c c c c c c c c c c c c c c c c $	Ky. Tenn	47	33 135	1	1	123	128	3	1	-	-		
Miss. 50 36 2 2 33 110 -	Ala.	165	113	8	7	153	238	-	4	-	-		
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ALL3931-311010<	W.S. CENTRAL	1,156	936	51	80	1,055	1,824	27	30	6,354	4,667		
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TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2005, and December 27, 2003 (52nd Week)*

TABLE III. Deaths in 122 U.S. cities,* week ending January 1, 2005 (52nd Week)

		All o	causes, b	y age (ye	ears)				All causes, by age (years)						
Reporting Area	All Ages	<u>≥</u> 65	45–64	25–44	1–24	<1	P&l⁺ Total	Reporting Area	All Ages	<u>≥</u> 65	45–64	25–44	1–24	<1	P&l⁺ Total
NEW ENGLAND	385	276	75	27	3	4	38	S. ATLANTIC	1,058	695	234	80	24	25	48
Boston, Mass.	U	U	U	U	U	U	U	Atlanta, Ga.	170	109	40	19	-	2	11
Bridgeport, Conn.	34	29	4	1	-	-	2	Baltimore, Md.	159	98	44	15	1	1	7
Cambridge, Mass.	29	22	6	-	-	1	3	Charlotte, N.C.	92	72	12	4	1	3	5
Fall River, Mass.	25	17	5	3	-	-	2	Jacksonville, Fla.	139	88	38	7	4	2	2
Hartford, Conn.	56	37	16	3	-	-	6	Miami, Fla.	60	39	12	5	4	-	1
Lowell, Mass.	19	12	1	1	-	-	I	Norfolk, va.	32	20	4	4	1	3	-
Lymin, Mass. New Redford Mass	26	20	1	1	-	- 1	-	Savannah Ga	49	57	20	2	2	3	4
New Haven Conn	63	46	q	8	_		11	St Petersburg Fla	26	22	20	1	1	-	2
Providence, R.I.	Ŭ	Ŭ	ŭ	ŭ	U	U	Ü	Tampa, Fla.	131	88	25	10	5	3	12
Somerville, Mass.	2	-	1	1	-	-	-	Washington, D.C.	100	62	22	6	4	6	4
Springfield, Mass.	37	22	7	4	3	1	1	Wilmington, Del.	12	5	6	-	-	1	-
Waterbury, Conn.	32	25	6	1	-	-	4		604	405	100	47	10	10	40
Worcester, Mass.	52	38	10	3	-	1	4	E.S. CENTRAL Birmingham Ala	152	420	139	47	10	13	42
	1 912	1 353	387	120	27	24	130	Chattanooga Tenn	66	58	7	1	-	-	5
Albany NY	40	28	8	2	1	1	3	Knoxville Tenn	69	47	18	4	-	-	1
Allentown, Pa.	22	20	2	-	-	-	2	Lexington, Ky.	62	33	18	6	3	2	6
Buffalo, N.Y.	121	83	27	5	4	2	11	Memphis, Tenn.	38	22	14	2	-	_	1
Camden, N.J.	31	19	6	4	1	1	3	Mobile, Ala.	56	43	7	4	-	2	3
Elizabeth, N.J.	23	20	3	-	-	-	5	Montgomery, Ala.	58	37	14	4	2	1	5
Erie, Pa.	43	34	5	3	1	-	4	Nashville, Tenn.	133	77	34	13	4	5	7
Jersey City, N.J.	17	8	8	1	-	-	-	W S CENTRAL	1 283	818	320	82	33	29	74
New York City, N.Y.	784	565	150	51	9	9	42	Austin. Tex.	70	45	12	11	1	1	5
Newark, N.J.	45	21	17	6	1	-	2	Baton Rouge, La.	61	44	13	2	1	1	3
Paterson, N.J.	20	12	3	3	1	5	01	Corpus Christi, Tex.	U	U	U	U	U	U	U
Pittsburgh Pa §	32	209	5	2	1		21	Dallas, Tex.	176	97	55	13	8	3	12
Reading Pa	21	17	3	1		-	3	El Paso, Tex.	59	42	14	2	-	1	4
Rochester, N.Y.	141	107	28	4	-	2	14	Ft. Worth, Tex.	95	63	22	5	2	3	5
Schenectady, N.Y.	28	23	4	1	-	-	1	Houston, lex.	346	206	96	20	14	9	12
Scranton, Pa.	28	26	2	-	-	-	1	Little Rock, Ark.	/3	41	25	4	1	2	4
Syracuse, N.Y.	96	81	10	2	-	3	9	San Antonio Tex	200	138	43	11	1	7	14
Trenton, N.J.	22	17	4	1	-	-	-	Shreveport La	34	25	43	3	2	<u>'</u> _	2
Utica, N.Y.	21	16	4	1	-	-	3	Tulsa, Okla.	116	83	23	7	1	2	13
YONKERS, N.Y.	30	23	6	1	-	-	3	MOUNTAIN	070	609	167	EO	20	20	64
E.N. CENTRAL	1,820	1,250	384	113	37	35	127		112	80	25	4	20	20	12
Akron, Ohio	51	35	13	1	1	1	10	Boise Idaho	35	21	4	3	5	2	2
Canton, Ohio	39	34	5	-	-	-	4	Colo. Springs, Colo.	47	40	5	2	-	_	3
Chicago, III.	302	181	76	30	11	3	9	Denver, Colo.	65	35	14	9	2	5	5
Cloveland Ohio	174	125	25	3	-	3	12	Las Vegas, Nev.	249	170	57	15	4	3	14
Columbus Ohio	197	145	33	10	6	3	15	Ogden, Utah	30	21	6	2	-	1	2
Davton, Ohio	94	66	19	6	3	-	7	Phoenix, Ariz.	64	41	12	7	3	1	6
Detroit, Mich.	162	86	45	18	8	5	10	Pueblo, Colo.	34	26	5	1	1	1	1
Evansville, Ind.	31	24	4	3	-	-	3	Salt Lake City, Utan	120	86	19	9	2	4	10
Fort Wayne, Ind.	68	54	12	1	-	1	5	Tucson, Anz.	117	00	20	0	3	-	9
Gary, Ind.	6	3	1	2	-	-	-	PACIFIC	1,159	801	239	76	17	24	87
Grand Rapids, Mich.	51	38	9	-	1	3	3	Berkeley, Calif.	U	U	U	U	U	U	U
Indianapolis, Ind.	151	95	38	14	-	4	6	Fresho, Calif.	U	U	U 1	U	U	U	U
Lansing, Mich.	30	25	25	2	2	2	3	Hopolulu Howaii	9	8 45	0	-	- 1	-	2
Peoria III	72	56	13	4	-	-	8	Long Beach, Calif	92	43 57	21	2 8	1	5	2
Bockford III	64	48	14	1	1	-	8	Los Angeles Calif	246	173	45	20	6	2	26
South Bend, Ind.	46	39	2	4	-	1	3	Pasadena, Calif.	17	8	6	2	-	1	-
Toledo, Ohio	79	55	18	4	-	2	5	Portland, Oreg.	84	49	23	7	2	1	4
Youngstown, Ohio	43	35	7	-	-	1	1	Sacramento, Calif.	U	U	U	U	U	U	U
WN CENTRAL	481	323	100	23	21	13	41	San Diego, Calif.	132	94	22	12	1	3	10
Des Moines, Iowa	30	22	6	2	-	-	3	San Francisco, Calif.	99	68	25	3	-	3	14
Duluth, Minn.	20	17	3	-	-	-	-	San Jose, Calif.	127	85	32	4	4	2	6
Kansas City, Kans.	27	15	9	2	1	-	1	Santa Uruz, Calif.	35	29	4	10	-	-	6
Kansas City, Mo.	65	39	13	3	6	4	7	Spokane Wash	90 57	0C /1	17	01	- 0	Э	-
Lincoln, Nebr.	47	31	11	2	3	-	3	Tacoma Wash	118	4 I 86	9 26	<u>ک</u>	-	2	5
Minneapolis, Minn.	43	27	10	1	4	1	6		110	00	20	4	-	2	5
Omaha, Nebr.	60	46	13	1	-	-	4	TOTAL	9,605¶	6,549	2,045	626	192	187	651
St. LOUIS, MO.	42	25	9	2	2	3	2								
Wichita Kans	44 103	34 67	0 20	∠ 8	- 5	∠ ?	4								
	100	07	20	0	0	0									

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

¹ Total includes unknown ages.

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