

Weekly

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# State-Specific Prevalence of Obesity Among Adults — United States, 2005

Obesity, one of the 10 leading U.S. health indicators (1), is associated with increased risk for hypertension, dyslipidemia, type 2 diabetes, coronary heart disease, stroke, and certain cancers (2). A Healthy People 2010 objective is to reduce to 15% the prevalence of obesity among adults in the United States (objective 19-2) (1). Both national-level data from the National Health and Nutrition Examination Survey (NHANES) (3) and state-level data from the Behavioral Risk Factor Surveillance System (BRFSS) (4) indicate that the prevalence of obesity among adults continued to increase during the past decade. In 2003, one study estimated that statespecific, obesity-attributable medical expenditures ranged from \$87 million in Wyoming to \$7.7 billion in California (5). To assess the prevalence of obesity among adults by state and demographic characteristics since 1995, data were analyzed from the 1995, 2000, and 2005 BRFSS surveys. The results of these analyses indicated that 23.9% of U.S. adults were obese in 2005, and the prevalence of obesity increased during 1995-2005 in all states. To reverse this trend, a sustained and effective public health response is needed, including surveillance, research, policies, and programs directed at improving environmental factors, increasing awareness, and changing behaviors to increase physical activity and decrease calorie intake.

BRFSS data are used to track the prevalence of chronic disease risk factors and monitor progress toward state-specific health objectives. BRFSS is an ongoing, state-based, randomdigit-dialed telephone survey of the noninstitutionalized, U.S. civilian population aged  $\geq 18$  years. BRFSS data files are weighted to the respondent's probability of being selected and to the age-, race-, and sex-specific populations from the annually adjusted census for each state. In 2005, response rates\* among states ranged from 34.6% to 67.4% (median: 51.1%), based on Council of American Survey and Research Organizations (CASRO) guidelines. Cooperation rates<sup>†</sup> ranged from 58.7% to 85.3% (median: 75.1%). In 1995 and 2000, median CASRO response rates were 68.4% and 48.9%, and median cooperation rates were 71.3% and 53.2%, respectively.

Self-reported weight and height were used to calculate body mass index (BMI) (weight [kg] / height [m<sup>2</sup>]). Overweight was classified as BMI  $\geq$ 25.0, obesity as BMI  $\geq$ 30.0, and extreme (class III) obesity as BMI  $\geq$ 40.0 kg/m<sup>2</sup>. To be consistent with previous analyses (4), data were excluded if a respondent's weight was  $\geq$ 500 lbs or height was  $\geq$ 7.0 ft.

In 2005, among the total U.S. adult population surveyed, 60.5% were overweight, 23.9% were obese, and 3.0% were extremely obese. Obesity prevalence was 24.2% among men and 23.5% among women and ranged from 17.7% among adults aged 18–29 years to 29.5% among adults aged 50–59 years (Table). Among racial/ethnic populations, the greatest obesity prevalence was 33.9% for non-Hispanic blacks. Overall, age-adjusted obesity rates were 15.6%, 19.8%, and 23.7% for the 1995, 2000, and 2005 surveys, respectively.

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<sup>\*</sup> The percentage of persons who completed interviews among all eligible persons, including those who were not successfully contacted.

<sup>&</sup>lt;sup>†</sup> The percentage of persons who completed interviews among all eligible persons who were contacted.

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Among states in 2005, obesity prevalences ranged from 17.4% to 30.3%, and prevalence of extreme obesity ranged from 1.8% to 5.3%. During 1995–2005, obesity prevalence increased significantly (p<0.01) in all states. During 1995–2000, the number of states with obesity prevalence <20% declined from 50 states to 28 states (Figure). In 2005, four states (Colorado, Connecticut, Hawaii, and Vermont) still had obesity prevalences <20%, but 17 states had prevalences  $\geq$ 25%, including three (Louisiana, Mississippi, and West Virginia) with prevalences  $\geq$ 30% (Figure).

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Editorial Note: The findings in this report indicate that statelevel prevalences of obesity in adults, based on self-reported weight and height, increased significantly during 1995–2005, moving states farther away from the Healthy People 2010 target of 15% prevalence of obesity. According to the surgeon general's Call to Action to Prevent and Decrease Overweight and Obesity (6), for obesity prevention and control to be successful, changes that promote recognition of obesity as a public health threat and assist persons in balancing healthful eating with regular physical activity must be made at multiple levels (i.e., individual, family, community, state, and nation) and across multiple sectors (i.e., education, government, and business). The Task Force on Community Preventive Services has identified evidence-based strategies to reduce weight and increase physical activity. For example, seven worksite interventions with both nutrition and physical activity components (e.g., nutrition education, physical activity "prescription," and behavioral skills development and training) were effective, resulting in average weight losses of 4.4-26.4 lbs during a minimum 6-month period (7). In addition, the Guide to Preventive Community Services<sup>§</sup> recommends informational, behavioral, social, environmental, and policy approaches to increase physical activity, including school-based physical education and creation of, or enhanced access to, locales for physical activity in the community.

The findings in this report are subject to at least two limitations. First, BRFSS data rely on self-reported weight and height. Study participants, especially in telephone surveys, tend to underreport their weight, overreport their height, or both, leading to underestimation of obesity prevalence (8). According to NHANES, for which measured weight and height are

<sup>&</sup>lt;sup>§</sup>Available at http://www.thecommunityguide.org/pa.

	1995	(n = 110,252)	2000	(n = 172,157)	2005	(n = 333,730)	
Characteristc	%	(99% Cl <sup>+</sup> )	%	(99% CI)	%	(99% CI)	
Total	15.3	(14.8–15.7)	19.8	(19.4–20.2)	23.9	(23.5–24.2)	
Men	15.6	(14.8–16.4)	20.2	(19.5–20.9)	24.2	(23.6–24.8)	
Women	14.9	(14.3–15.5)	19.4	(18.8–19.9)	23.5	(23.1–24.0)	
Age group (yrs)							
18–29	10.2	(9.3–11.1)	13.5	(12.7–14.4)	17.7	(16.7–18.7)	
30–39	14.3	(13.4–15.3)	20.2	(19.2–21.1)	24.4	(23.5–25.3)	
40–49	17.9	(16.7–19.0)	22.9	(21.8–23.9)	26.5	(25.6–27.3)	
50–59	21.6	(19.6-23.5)	25.6	(24.4-26.8)	29.5	(28.6-30.4)	
60–69	19.4	(18.0-20.8)	22.9	(21.6-24.2)	28.1	(27.1–29.0)	
≥70	12.2	(11.1–13.2)	15.5	(14.4–16.5)	18.3	(17.5–19.1)	
Race/Ethnicity							
Non-Hispanic white	14.5	(13.9–15.0)	18.5	(18.0–18.9)	22.6	(22.2-23.0)	
Non-Hispanic black	22.7	(21.1-24.3)	29.3	(27.8-30.8)	33.9	(32.5-35.2)	
Hispanic <sup>§</sup>	16.8	(14.5-19.0)	23.4	(21.5-25.4)	26.5	(24.9-28.1)	
Other	9.7	(7.6–11.8)	12.0	(10.3–13.8)	16.0	(14.4–17.6)	

TABLE. Percentage of adults aged ≥18 years who were obese,\* by demographic characteristcs — Behavioral Risk Factor Surveillance System, United States, 1995, 2000, and 2005

\* Persons with a body mass index (BMI) of ≥30.0; self-reported weight and height were used to calculate BMI (weight [kg] / height [m<sup>2</sup>]).

Confidence interval.

<sup>§</sup>Might be of any race.

used for an adult sample aged  $\geq 20$  years, the prevalence of obesity among U.S. adults overall was 32.2% during 2003– 2004 (3), approximately one third greater than the 23.9% prevalence reported in the 2005 BRFSS survey. Second, persons who use only cellular telephones or are without land-line telephones are not included in BRFSS surveys. Persons with no telephone might be of lower socioeconomic status (9), a factor associated with obesity (10); exclusion of these persons might result in underreporting of obesity prevalence.

Multiple CDC programs address prevention of obesity through nutrition and physical activity. Specifically, CDC's Nutrition and Physical Activity Program to Prevent Obesity and Other Chronic Diseases works collaboratively with state health departments to implement and evaluate interventions to increase physical activity and improve nutrition. The Steps to a HealthierUS program established by the U.S. Department of Health and Human Services in 2003 and overseen by CDC provides funding to 40 communities nationwide to use evidence-based strategies to prevent and reduce the burden of obesity. CDC's Coordinated School Health Program works through state education and health agencies to improve nutrition and increase physical activity in schools.

The continued increase in obesity prevalence underscores the need for additional measures to educate and motivate persons to make healthier choices and to establish social and physical environments that support those choices. To reduce obesity in the United States, an effective public health response will require a robust combination of policies, programs, and supportive environments created through the combined activities of health-care agencies, government, media, business and industry, communities, schools, families, and individuals. In addition, monitoring and evaluation systems are needed to ensure effectiveness of both new and existing interventions and to validate their widening use.

#### Acknowledgment

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FIGURE. Percentage of adults aged  $\geq$ 18 years who were obese,\* by state — Behavioral Risk Factor Surveillance System, United States, 1995, 2000, and 2005

\* Persons with a body mass index (BMI) of  $\geq$ 30.0; self-reported weight and height were used to calculate BMI (weight [kg] / height [m<sup>2</sup>]).

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# National, State, and Urban Area Vaccination Coverage Among Children Aged 19–35 Months — United States, 2005

The National Immunization Survey (NIS) provides vaccination coverage estimates among children aged 19-35 months for each of the 50 states and selected urban areas.\* Findings from the 2005 NIS<sup>†</sup> include nationwide increases in coverage with  $\geq 3$  and  $\geq 4$  doses of pneumococcal conjugate vaccine (PCV) and continued high levels of coverage for the other recommended vaccines and vaccine series. In addition, no racial/ethnic disparities in coverage estimates were observed in the 4:3:1:3:3:1<sup>§</sup> vaccine series, the recommended series for children aged 19–35 months that includes DTP/DT/DTaP; poliovirus vaccine; measles, mumps, and rubella vaccine (MMR); Haemophilus influenzae type b vaccine; hepatitis B vaccine; and varicella vaccine. An important accomplishment indicated by the 2005 NIS data is the achievement of >50% coverage for the full series of PCV (>4 doses) and >80% coverage for  $\geq 3$  doses within 5 years after being added to the U.S.-recommended childhood immunization schedule in

<sup>\*</sup> The 28 areas separately sampled for the 2005 NIS included 23 oversampled in previous years (Jefferson County, Alabama; Maricopa County, Arizona; Los Angeles County, California; District of Columbia; Duval County, Florida; Fulton and Dekalb counties, Georgia; Chicago, Illinois; Orleans Parish, Louisiana; Baltimore, Maryland; Detroit, Michigan; Newark, New Jersey; New York, New York; Cuyahoga and Franklin counties, Ohio; Philadelphia County, Pennsylvania; Davidson and Shelby counties, Tennessee; Bexar, Dallas, and El Paso counties, and Houston, Texas; King County, Washington; and Milwaukee County, Wisconsin), and five areas oversampled for the first time (Alameda and San Bernardino counties, California; Denver-Tri County, Colorado, consisting of Adams, Arapahoe, Denver, and Douglas counties; St. Louis City and County, Missouri; and Clark County, Nevada). Although Orleans Parish, Louisiana, was initially oversampled in 2005, estimates are not available because of interruptions in telephone service, movement of the population, and difficulty locating providers in the aftermath of Hurricane Katrina.

<sup>&</sup>lt;sup>†</sup> During the 2005 reporting period, NIS included children born during February 2002–July 2004.

<sup>&</sup>lt;sup>§</sup> ≥4 doses of diphtheria and tetanus toxoids and pertussis vaccines, diphtheria and tetanus toxoids vaccine, or diphtheria and tetanus toxoids vaccine and any acellular pertussis vaccine (DTP/DT/DTaP); ≥3 doses of poliovirus vaccine; ≥1 dose of MMR vaccine; ≥3 doses of *Haemophilus influenzae* type b vaccine; ≥3 doses of hepatitis B vaccine; and ≥1 dose of varicella vaccine.

<sup>&</sup>lt;sup>9</sup> Diphtheria and tetanus toxoids and pertussis vaccines, diphtheria and tetanus toxoids vaccine, or diphtheria and tetanus toxoids vaccine and any acellular pertussis vaccine.

2000. This occurred despite shortages of this vaccine during 2001–2004, which might have affected accessibility to PCV.

To collect vaccination data for age-eligible children, NIS uses a quarterly random-digit-dialed sample of telephone numbers for each survey area. NIS methodology, including the weighting of responses to represent the entire population of children aged 19–35 months, has been described previously (I). During 2005, the household survey response rate (2) was 65.1%; health-care provider vaccination records were obtained for 17,563 children (63.6%) for whom household interviews were completed.

National vaccination coverage estimates increased from 2004 to 2005 for PCV (Table 1), from 73.2% to 82.8% for  $\geq 3$  doses and from 43.4% to 53.7% for  $\geq 4$  doses. Coverage for  $\geq 1$  dose of MMR vaccine decreased from 93.0% to 91.5%. Coverage estimates for all other vaccines and vaccine series in 2005 were not significantly different (by *t* test) from 2004 estimates.

As in previous years, estimated vaccination coverage levels varied substantially among states (Table 2). Estimated coverage with the 4:3:1:3:3:1 vaccine series ranged from 90.7% (95% confidence interval [CI] =  $\pm$ 3.8) in Massachusetts to 62.9% (CI =  $\pm$ 8.1) in Vermont. Coverage also varied substantially among the 27 urban areas. The highest estimated coverage among the urban areas for the 4:3:1:3:3:1 series was 84.5% (CI =  $\pm$ 6.0) for Jefferson County, Alabama, and the lowest was 58.8% (CI =  $\pm$ 7.9) for Clark County, Nevada.

In 2005, coverage estimates for the 4:3:1:3:3:1 vaccine series did not vary significantly by race/ethnicity\*\* among children aged 19–35 months, ranging from 79.5% (CI =  $\pm$ 4.2) for children of multiple races, 77.1% (CI =  $\pm$ 6.0) for Asians, 76.3% (CI =  $\pm$ 3.0) for blacks, 76.0% (CI =  $\pm$ 1.4) for whites, and 75.6% (CI =  $\pm$ 2.6) for Hispanics. During 2002–2004, coverage for the 4:3:1:3:3:1 vaccine series was lower among black compared with white children (Figure).

\*\* For this report, persons identified as white, black, Asian, or multiple race are all non-Hispanic. Persons identified as Hispanic might be of any race.

TABLE 1. Estimated vaccination coverage among childrer	ו aged 19–35 months, by selected vaccines and dosages –
National Immunization Survey, United States, 2001–2005	

		2001*		2002†		2003§	2	20041	2005**	
Vaccine/Dosage	%	(95% Cl <sup>++</sup> )	%	(95% CI)	%	(95% CI)	%	(95% CI)	%	(95% CI)
DTP/DT/DTaP <sup>§§</sup>										
≥3 doses	94.3	(±0.5)	94.9	(±0.6)	96.0	(±0.5)	95.9	(±0.5)	96.1	(±0.5)
≥4 doses	82.1	(±0.8)	81.6	(±0.9)	84.8	(±0.8)	85.5	(±0.8)	85.7	(±0.9)
Poliovirus	89.4	(±0.7)	90.2	(±0.7)	91.6	(±0.7)	91.6	(±0.7)	91.7	(±0.7)
Hib <sup>¶¶</sup> ≥3 doses	93.0	(±0.6)	93.1	(±0.6)	93.9	(±0.6)	93.5	(±0.6)	93.9	(±0.6)
MMR*** ≥1 dose	91.4	(±0.6)	91.6	(±0.7)	93.0	(±0.6)	93.0	(±0.6)	91.5	(±0.7)
Hepatitis B ≥3 doses	88.9	(±0.7)	89.9	(±0.7)	92.4	(±0.6)	92.4	(±0.6)	92.9	(±0.6)
Varicella ≥1 dose	76.3	(±0.8)	80.6	(±0.9)	84.8	(±0.8)	87.5	(±0.7)	87.9	(±0.8)
PCV <sup>†††</sup>		. ,		. ,		. ,		. ,		. ,
≥3 doses	_	_	40.8	(±1.1)	68.1	(±1.0)	73.2	(±1.0)	82.8	(±1.0)
≥4 doses		_	_		35.8	(±1.0)	43.4	(±1.1)	53.7	(±1.3)
Combined series						. ,		. ,		. ,
4:3:1 <sup>§§§</sup>	78.6	(±0.9)	78.5	(±1.0)	82.2	(±0.9)	83.5	(±0.9)	83.1	(±1.0)
4:3:1:3 <sup>¶¶¶</sup>	77.2	(±0.9)	77.5	(±1.0)	81.3	(±0.9)	82.5	(±0.9)	82.4	(±1.0)
4:3:1:3:3****	73.7	(±0.9)	74.8	(±1.0)	79.4	(±0.9)	80.9	(±0.9)	80.8	(±1.0)
4:3:1:3:3:1 <sup>††††</sup>	61.3	(±1.0)	65.5	(±1.1)	72.5	(±1.0)	76.0	(±1.0)	76.1	(±1.1)

\* Born during February 1998-May 2000.

<sup>†</sup> Born during February 1999-May 2001.

§ Born during February 2000–May 2002.

<sup>¶</sup> Born during February 2001–May 2003.

\*\* Born during February 2002–July 2004.

tt Confidence interval.

S§ Diphtheria and tetanus toxoids and pertussis vaccines, diphtheria and tetanus toxoids vaccine, or diphtheria and tetanus toxoids vaccine and any acellular pertussis vaccine.

Haemophilus influenzae type b (Hib) vaccine.

\*\*\* Measles, mumps, and rubella vaccine.

<sup>†††</sup> Pneumococcal conjugate vaccine.

 $\frac{888}{100} \ge 4$  doses of DTP/DT/DTaP,  $\ge 3$  doses of poliovirus vaccine, and  $\ge 1$  dose of any measles-containing vaccine.

1111 4:3:1 plus ≥3 doses of Hib vaccine.

\*\*\*\* 4:3:1:3 plus ≥3 doses of hepatitis B vaccine.

<sup>++++</sup> 4:3:1:3:3 plus ≥1 dose of varicella vaccine.

	4:3:1		4	:3:1:3	4:3	3:1:3:3	4:3:1:3:3:1
State/Area	%	(95% CI**)	%	(95% CI)	%	(95% CI)	% (95% Cl)
United States	83.1	(+1.0)	82.4	(+1.0)	80.8	(+1.0)	76.1 (+1.1)
Alabama	86.0	(+4.9)	85.1	(+5.0)	83.3	(+5.2)	81.7 (+5.5)
Jefferson County	89.3	(+5.0)	88.3	(+5.3)	85.5	( <u>+</u> 5.9)	84.5 ( <u>+</u> 6.0)
Rest of state	85.4	(+5.8)	84.6	(+5.8)	82.9	(+6.1)	81.2 (+6.4)
Alaska	80.3	(+6.3)	77.7	(+6.6)	75.4	(+6.8)	68.1 (+7.4)
Arizona	81.5	(+4.6)	81.0	(+4.7)	79.2	(+4.9)	74.9 (+5.1)
Maricopa County	81.8	(+6.2)	81.1	(+6.3)	79.8	(+6.5)	76.4 (+6.7)
Rest of state	80.8	(+6.5)	80.8	(+6.5)	78.2	(+7.0)	72.0 (+7.5)
Arkansas	70.3	(+9.0)	69.3	(+9.0)	67.8	(+9.0)	64.2 (+9.2)
California	80.5	( <u>+</u> 4.3)	79.9	$(\pm 4.3)$	77.9	$(\pm 4.4)$	74.0 (+4.8)
Alameda County	77.8	(+8.2)	76.7	(+8.2)	74.0	(+8.5)	71 1 (+8 7)
Los Angeles County	82.9	( <u>+5</u> 4)	81.7	( <u>+5</u> 6)	79.0	( <u>+</u> 5.8)	77.9 (+5.9)
San Bernardino County	72.1	( <u>+</u> 7.2)	69.3	( <u>+</u> 7.9)	67.7	( <u>+</u> 7.9)	$62.8 (\pm 8.1)$
Best of state	80.3	$(\pm 7.2)$	80.2	$(\pm 7.5)$	78.5	$(\pm 7.5)$	73.4 (±7.1)
Colorado	85.1	( <u>+</u> 0.+) (+1 3)	84.4	( <u>+</u> 0. <del>+</del> ) (+4.3)	83.4	$(\pm 0.0)$	$78.6 (\pm 5.1)$
Denver	95.6	$(\underline{+}4.5)$	94.9	( <u>+</u> 4.5)	00.4	$(\underline{+}4.4)$	$70.0 (\pm 3.1)$
Deriver Boot of state	047	$(\pm 0.4)$	04.9	$(\pm 0.5)$	00.0	$(\pm 0.0)$	$76.6 (\pm 7.5)$
	04.7	( <u>+</u> 3.0)	00.9	( <u>+</u> 5.0)	03.2	$(\pm 5.9)$	$70.4 (\pm 0.9)$
Delewere	09.4	$(\pm 4.9)$	09.4	$(\pm 4.9)$	00.1	$(\pm 5.4)$	$(1.5)$ $(\pm 0.1)$
Delaware	00.7	( <u>+</u> 0.3)	00.7	$(\pm 0.3)$	04.2	( <u>+</u> 0.0)	$(\pm 7.2)$
District of Columbia	81.4	( <u>+</u> 5.6)	78.0	( <u>+</u> 6.3)	73.5	( <u>+</u> 6.6)	72.1 (±0.0)
Florida	81.5	( <u>+</u> 5.6)	81.2	( <u>+</u> 5.6)	79.3	( <u>+</u> 5.9)	78.2 ( <u>+</u> 6.0)
Duval County	79.4	( <u>+</u> 6.3)	78.4	( <u>+</u> 6.3)	78.0	( <u>+</u> 6.3)	$76.5 (\pm 6.4)$
Rest of state	81.7	( <u>+</u> 6.0)	81.4	( <u>+</u> 6.0)	79.4	( <u>+</u> 6.3)	78.3 ( <u>+</u> 6.3)
Georgia	86.2	( <u>+</u> 4.2)	85.9	( <u>+</u> 4.2)	84.7	( <u>+</u> 4.3)	82.4 (±4.5)
Fulton and DeKalb counties	76.2	( <u>+</u> 8.7)	76.0	( <u>+</u> 8.7)	/4.5	( <u>+</u> 8.8)	(+9.1)
Rest of state	88.4	( <u>+</u> 4.7)	88.1	( <u>+</u> 4.7)	87.0	( <u>+</u> 4.9)	84.8 ( <u>+</u> 5.1)
Hawaii	81.4	( <u>+</u> 6.4)	81.1	( <u>+</u> 6.4)	80.1	( <u>+</u> 6.5)	77.5 ( <u>+</u> 6.7)
Idaho	79.3	( <u>+</u> 5.6)	79.3	( <u>+</u> 5.6)	78.1	( <u>+</u> 5.8)	68.4 ( <u>+</u> 6.5)
Illinois	84.9	( <u>+</u> 5.6)	84.8	( <u>+</u> 5.6)	83.5	( <u>+</u> 5.7)	76.7 ( <u>+</u> 6.5)
City of Chicago	79.9	( <u>+</u> 6.0)	79.4	( <u>+</u> 6.0)	75.4	( <u>+</u> 6.4)	69.7 ( <u>+</u> 7.0)
Rest of state	86.7	( <u>+</u> 7.4)	86.7	( <u>+</u> 7.4)	86.4	( <u>+</u> 7.4)	79.2 ( <u>+</u> 8.5)
Indiana	78.9	( <u>+</u> 8.0)	78.5	( <u>+</u> 8.0)	78.1	( <u>+</u> 8.1)	69.9 ( <u>+</u> 8.6)
Iowa	85.7	( <u>+</u> 5.6)	84.9	( <u>+</u> 5.7)	84.9	( <u>+</u> 5.7)	75.9 ( <u>+</u> 7.1)
Kansas	87.5	( <u>+</u> 4.6)	86.2	( <u>+</u> 4.7)	83.8	( <u>+</u> 5.0)	72.0 ( <u>+</u> 6.7)
Kentucky	84.8	( <u>+</u> 6.3)	82.9	( <u>+</u> 6.8)	79.7	( <u>+</u> 7.1)	71.1 ( <u>+</u> 8.1)
Louisiana	78.2	( <u>+</u> 4.3)	77.1	( <u>+</u> 4.4)	76.0	( <u>+</u> 4.4)	74.1 ( <u>+</u> 4.5)
Maine	88.8	( <u>+</u> 5.0)	88.0	( <u>+</u> 5.1)	83.3	( <u>+</u> 6.0)	75.8 ( <u>+</u> 6.7)
Maryland	84.3	( <u>+</u> 5.5)	84.2	( <u>+</u> 5.5)	82.3	( <u>+</u> 5.7)	78.6 ( <u>+</u> 6.1)
City of Baltimore	80.7	( <u>+</u> 6.9)	80.1	( <u>+</u> 6.9)	79.0	(±7.0)	76.5 ( <u>+</u> 7.1)
Rest of state	84.8	( <u>+</u> 6.2)	84.8	( <u>+</u> 6.2)	82.7	( <u>+</u> 6.4)	78.9 ( <u>+</u> 6.9)
Massachusetts	95.6	( <u>+</u> 2.7)	95.4	( <u>+</u> 2.7)	93.5	( <u>+</u> 3.3)	90.7 ( <u>+</u> 3.8)
Michigan	84.5	( <u>+</u> 4.7)	84.2	( <u>+</u> 4.7)	82.7	( <u>+</u> 4.8)	80.6 ( <u>+</u> 5.0)
City of Detroit	75.8	( <u>+</u> 8.4)	73.8	( <u>+</u> 8.7)	73.1	( <u>+</u> 8.7)	70.5 ( <u>+</u> 8.9)
Rest of state	85.6	( <u>+</u> 5.2)	85.4	( <u>+</u> 5.2)	83.9	( <u>+</u> 5.3)	81.8 ( <u>+</u> 5.5)
Minnesota	88.4	(+5.2)	85.5	(+5.7)	85.2	(+5.7)	78.1 ( <u>+</u> 6.4)
Mississippi	85.1	(+5.1)	84.4	(+5.2)	83.6	(+5.3)	79.1 (+5.8)
Missouri	82.2	(+4.3)	80.9	(+4.6)	79.3	(+4.7)	73.1 (+5.2)
St. Louis County/City of St. Louis	83.7	(+5.7)	83.7	(+5.7)	79.2	(+6.3)	73.6 (+6.8)
Rest of state	81.7	(+5.3)	80.1	(+5.7)	79.4	(+5.8)	73.0 (+6.3)
Montana	84 1	(+5.4)	83.1	(+5.5)	79.6	( <u>+6</u> 1)	65.4 (+6.9)
Nebraska	91.0	$(\pm 4.1)$	89.8	(+4.4)	89.1	(+4.5)	83.9 (+5.2)
Nevada	71 2	(+5.9)	71 1	(+5.9)	66 7	(+6.0)	63 2 (±6 1)
Clark County	68 5	( <u>+</u> 7.6)	68 5	( <u>+</u> 7.6)	60.7 62 1	(+7.7)	58 8 (±7 9)
Best of state	78.0	$(\pm 7.0)$	70.5	$(\pm 7.0)$	76.0	(±7.5)	$(\pm 7.3)$
New Hampshire	10.9 85 0	$(\pm 7.4)$	70.4 85 0	(±1.4) (±5.1)	10.9 20 P	$(\pm 7.5)$	$(\pm 7.5)$ 77 1 ( $\pm 6.1$ )
	00.0	(±0.1)	0.00	(±0.1)	02.0	$(\pm 0.7)$	( <u>+</u> 0.1)

TABLE 2. Estimated vaccination coverage levels with 4:3:1,\* 4:3:1:3,<sup>†</sup> 4:3:1:3:3,<sup>§</sup> and 4:3:1:3:3:1<sup>¶</sup> series among children aged 19–35 months, by state and selected urban areas — National Immunization Survey, United States, 2005

\* ≥4 doses of diphtheria and tetanus toxoids and pertussis vaccines, diphtheria and tetanus toxoids vaccine, or diphtheria and tetanus toxoids vaccine and any acellular pertussis vaccine (DTP/DT/DTaP); ≥3 doses of poliovirus vaccine; and ≥1 dose of any measles-containing vaccine.

<sup>†</sup> 4:3:1 plus  $\geq$ 3 doses of *Haemophilus influenzae* type b vaccine.

§ 4:3:1:3 plus  $\geq$ 3 doses of hepatitis B vaccine.

¶ 4:3:1:3:3 plus ≥1 dose of varicella vaccine.

\*\* Confidence interval.

	4	:3:1	4	:3:1:3	4	:3:1:3:3	4:3:1:3:3:1
State/Area	%	(95% CI**)	%	(95% CI)	%	(95% CI)	% (95% Cl)
New Jersey	79.3	( <u>+</u> 5.8)	78.5	( <u>+</u> 5.9)	78.2	( <u>+</u> 5.9)	72.4 ( <u>+</u> 6.4)
City of Newark	78.2	( <u>+</u> 6.2)	77.3	( <u>+</u> 6.3)	75.0	( <u>+</u> 6.6)	67.4 ( <u>+</u> 7.1)
Rest of state	79.4	( <u>+</u> 6.1)	78.6	( <u>+</u> 6.1)	78.4	( <u>+</u> 6.1)	72.6 ( <u>+</u> 6.7)
New Mexico	81.5	( <u>+</u> 6.3)	79.6	(+6.5)	78.4	(+6.7)	74.6 (±7.0)
New York	85.0	( <u>+</u> 4.0)	83.7	( <u>+</u> 4.1)	81.6	( <u>+</u> 4.3)	74.4 ( <u>+</u> 4.7)
City of New York	83.2	( <u>+</u> 6.4)	81.0	( <u>+</u> 6.7)	78.1	( <u>+</u> 7.0)	70.5 ( <u>+</u> 7.4)
Rest of state	86.7	( <u>+</u> 4.8)	86.2	( <u>+</u> 4.9)	84.8	( <u>+</u> 5.0)	78.1 ( <u>+</u> 5.9)
North Carolina	89.1	( <u>+</u> 4.8)	89.1	( <u>+</u> 4.8)	85.2	( <u>+</u> 5.4)	81.6 ( <u>+</u> 5.8)
North Dakota	86.6	( <u>+</u> 4.5)	86.3	( <u>+</u> 4.5)	85.0	( <u>+</u> 4.7)	78.7 ( <u>+</u> 5.4)
Ohio	85.4	( <u>+</u> 4.4)	85.0	( <u>+</u> 4.4)	84.1	( <u>+</u> 4.5)	77.7 ( <u>+</u> 5.1)
Cuyahoga County	88.0	( <u>+</u> 4.6)	86.6	( <u>+</u> 4.9)	84.8	( <u>+</u> 5.3)	77.4 ( <u>+</u> 6.3)
Franklin County	87.0	( <u>+</u> 6.1)	86.7	( <u>+</u> 6.1)	85.9	( <u>+</u> 6.2)	80.5 ( <u>+</u> 7.1)
Rest of state	84.8	( <u>+</u> 5.6)	84.5	( <u>+</u> 5.6)	83.8	( <u>+</u> 5.7)	77.3 ( <u>+</u> 6.4)
Oklahoma	77.3	( <u>+</u> 5.9)	76.9	( <u>+</u> 5.9)	75.7	( <u>+</u> 6.0)	72.3 ( <u>+</u> 6.2)
Oregon	76.1	( <u>+</u> 6.7)	75.3	( <u>+</u> 6.7)	72.9	( <u>+</u> 7.1)	65.3 ( <u>+</u> 7.4)
Pennsylvania	84.5	( <u>+</u> 5.2)	83.4	( <u>+</u> 5.2)	83.2	( <u>+</u> 5.2)	77.3 ( <u>+</u> 5.8)
Philadelphia County	85.0	( <u>+</u> 5.6)	79.9	( <u>+</u> 6.5)	78.7	( <u>+</u> 6.5)	77.0 ( <u>+</u> 6.6)
Rest of state	84.4	( <u>+</u> 6.0)	84.1	( <u>+</u> 6.1)	84.1	( <u>+</u> 6.1)	77.3 ( <u>+</u> 6.7)
Rhode Island	85.7	( <u>+</u> 4.6)	84.3	( <u>+</u> 4.8)	83.1	( <u>+</u> 4.9)	80.1 ( <u>+</u> 5.3)
South Carolina	79.2	( <u>+</u> 6.6)	78.5	( <u>+</u> 6.6)	78.5	( <u>+</u> 6.6)	75.6 ( <u>+</u> 6.8)
South Dakota	88.4	( <u>+</u> 4.5)	88.1	( <u>+</u> 4.5)	86.9	( <u>+</u> 4.7)	79.5 ( <u>+</u> 5.8)
Tennessee	84.4	( <u>+</u> 4.0)	83.8	( <u>+</u> 4.1)	82.9	( <u>+</u> 4.2)	80.0 ( <u>+</u> 4.5)
Davidson County	86.6	( <u>+</u> 6.1)	86.6	( <u>+</u> 6.1)	86.6	( <u>+</u> 6.1)	81.3 ( <u>+</u> 6.9)
Shelby County	76.4	( <u>+</u> 7.6)	76.2	( <u>+</u> 7.6)	75.8	( <u>+</u> 7.6)	74.1 ( <u>+</u> 7.6)
Rest of state	86.1	( <u>+</u> 5.2)	85.3	( <u>+</u> 5.4)	84.1	( <u>+</u> 5.6)	81.4 ( <u>+</u> 6.0)
Texas	81.5	( <u>+</u> 3.7)	80.8	( <u>+</u> 3.7)	78.4	( <u>+</u> 3.9)	76.8 ( <u>+</u> 4.0)
Bexar County	78.7	( <u>+</u> 7.2)	77.4	( <u>+</u> 7.3)	74.6	( <u>+</u> 7.5)	71.3 ( <u>+</u> 7.7)
City of Houston	80.6	( <u>+</u> 5.9)	80.3	( <u>+</u> 5.9)	78.1	( <u>+</u> 6.1)	76.6 ( <u>+</u> 6.1)
Dallas County	78.7	( <u>+</u> 7.2)	77.3	( <u>+</u> 7.4)	74.2	( <u>+</u> 7.8)	72.8 ( <u>+</u> 7.9)
El Paso County	76.2	( <u>+</u> 6.0)	76.2	( <u>+</u> 6.0)	71.1	( <u>+</u> 6.4)	69.2 ( <u>+</u> 6.4)
Rest of state	82.7	( <u>+</u> 5.2)	82.1	( <u>+</u> 5.3)	80.0	( <u>+</u> 5.7)	78.5 ( <u>+</u> 5.8)
Utah	75.7	( <u>+</u> 8.4)	75.7	( <u>+</u> 8.4)	74.1	( <u>+</u> 8.5)	68.1 ( <u>+</u> 8.8)
Vermont	83.4	( <u>+</u> 6.2)	83.4	( <u>+</u> 6.2)	81.5	( <u>+</u> 6.4)	62.9 ( <u>+</u> 8.1)
Virginia	86.0	( <u>+</u> 5.8)	85.8	( <u>+</u> 5.8)	85.8	( <u>+</u> 5.8)	81.7 ( <u>+</u> 6.1)
Washington	81.2	( <u>+</u> 5.0)	81.2	( <u>+</u> 5.0)	77.8	( <u>+</u> 5.2)	66.3 ( <u>+</u> 5.9)
King County	84.0	( <u>+</u> 7.2)	84.0	( <u>+</u> 7.2)	76.8	( <u>+</u> 7.8)	68.7 ( <u>+</u> 8.3)
Rest of state	80.1	( <u>+</u> 6.4)	80.1	( <u>+</u> 6.4)	78.2	( <u>+</u> 6.5)	65.4 ( <u>+</u> 7.5)
West Virginia	78.8	( <u>+</u> 6.6)	78.2	( <u>+</u> 6.7)	74.9	( <u>+</u> 7.1)	67.5 ( <u>+</u> 7.8)
Wisconsin	85.6	( <u>+</u> 4.4)	85.0	( <u>+</u> 4.5)	82.2	( <u>+</u> 5.1)	77.1 ( <u>+</u> 5.5)
Milwaukee County	80.6	( <u>+</u> 8.6)	79.7	( <u>+</u> 8.6)	79.1	( <u>+</u> 8.6)	73.6 ( <u>+</u> 9.0)
Rest of state	86.9	( <u>+</u> 5.1)	86.4	( <u>+</u> 5.2)	83.0	( <u>+</u> 6.0)	78.1 ( <u>+</u> 6.6)
Wyoming	80.7	( <u>+</u> 5.9)	80.5	( <u>+</u> 5.9)	78.6	( <u>+</u> 6.1)	66.9 ( <u>+</u> 7.2)

TABLE 2. (*Continued*) Estimated vaccination coverage levels with 4:3:1,\* 4:3:1:3,<sup>†</sup> 4:3:1:3:3,<sup>§</sup> and 4:3:1:3:3:1<sup>¶</sup> series among children aged 19–35 months, by state and selected urban areas — National Immunization Survey, United States, 2005

In 2005, estimated coverage varied significantly by race/ ethnicity for three individual vaccines: DTP/DT/DTaP; varicella vaccine; and PCV. For  $\geq 4$  doses of DTP/DT/DTaP; coverage was significantly lower for black (84.0% [CI =  $\pm 2.5$ ]) and Hispanic (83.6% [CI =  $\pm 2.3$ ]) children compared with white children (87.1% [CI =  $\pm 1.1$ ]). For  $\geq 1$  dose of varicella vaccine, coverage was significantly higher for black ([90.6% [CI =  $\pm 1.8$ ]) and Hispanic (89.2% [CI =  $\pm 1.7$ ]) children compared with white children (86.1% [CI =  $\pm 1.2$ ]). For  $\geq 3$  doses of PCV, coverage was significantly lower for black (79.6% [CI =  $\pm 3.1$ ]) compared with white children (83.2% [CI =  $\pm 1.3$ ]). For  $\geq 4$  doses of PCV, coverage was significantly lower among black (46.2% [CI =  $\pm 3.8$ ]) and Hispanic

children (50.5% [CI =  $\pm 2.8$ ]) compared with white children (57.3% [CI =  $\pm 1.6$ ]).

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**Editorial Note:** The findings in this report indicate that among U.S. children aged 19–35 months, coverage with the recommended vaccines in 2005 remained at or near all-time–high levels, with substantial increases in PCV coverage. The 2005 NIS survey cohort included children born during February 2002–July 2004; all of these children might have been affected by the shortages of PCV during February–September 2004, when recommendations to defer the 4th dose

FIGURE. Estimated vaccination coverage with the 4:3:1:3:3:1 vaccine series\* among children aged 19–35 months, by race/ethnicity and year — National Immunization Survey, United States, 2002–2005



\*≥4 doses of diphtheria and tetanus toxoids and pertussis vaccines, diphtheria and tetanus toxoids vaccine, or diphtheria and tetanus toxoids vaccine and any acellular pertussis vaccine (DTP/DT/DTaP); ≥3 doses of poliovirus vaccine; ≥1 dose of measles, mumps, and rubella vaccine; ≥3 doses of *Haemophilus influenzae* type b vaccine; ≥3 doses of hepatitis B vaccine; and ≥1 dose of varicella vaccine.

or the 3rd and 4th doses were in effect (3,4). Despite these shortages, coverage with the full series ( $\geq 4$  doses) exceeded 50% and coverage with  $\geq 3$  doses of PCV exceeded 80% in this survey cohort. Surveillance data from 1998–2003 have indicated substantial reductions in the incidence of vaccinetype and overall invasive pneumococcal disease in children and adults, attributable to routine use of PCV in young children (5). Although 4 doses of PCV are recommended for maximum protection against invasive pneumococcal disease (6), the vaccine might provide protection with 3 doses through decreased transmission of pneumococci organisms among children (5). Continued measures to increase PCV coverage with all recommended doses are needed, particularly for black and Hispanic children.

The 2005 data reflect the first year that the 4:3:1:3:3:1 vaccine series was used to evaluate progress toward one of the *Healthy People 2010* objectives, which aims to achieve >80% coverage with the 4:3:1:3:3:1 series among children aged 19– 35 months (objective-14.24a) (7). Although the 80% target was met in 2004 for 4:3:1:3:3 coverage (excludes varicella vaccine), vaccination coverage for the 4:3:1:3:3:1 series in 2005 remained stable at 76.1%, compared with 76.0% in 2004.

In the 2005 NIS survey cohort, coverage levels for the 4:3:1:3:3:1 series were similar among racial/ethnic groups, which represents an improvement over recent years; an evaluation of NIS data from 1996 to 2002 revealed increasing or stable racial/ethnic disparities in the 4:3:1:3:3 vaccination series coverage levels for black and Hispanic children compared with white children (8). Continued monitoring is needed to determine whether the narrowing gaps in coverage among racial/ethnic groups persist. Monitoring the disparities in

administration of DTP/DT/DTaP, varicella vaccine, and PCV will be important, particularly for PCV, which protects against a disease with higher incidence among black children.

The only statistically significant decrease in coverage from 2004 to 2005 was for  $\geq 1$  dose of MMR. However, this decrease was modest, and national MMR coverage has remained consistent, ranging from 91% to 93% since 2001. The recent outbreak of mumps in the United States underscores the importance of timely administration of the first dose of MMR and the need for administration of the second dose at ages 4–6 years. Coverage in this age group is assessed by state health departments in their evaluation of school entry immunization requirements (9).

The findings in this report are subject to at least three limitations. First, NIS is a telephone survey; although NIS results are weighted to make them representative of all children aged 19–35 months (e.g., accounting for nonresponse and households without telephones), some bias might remain after these statistical adjustments. Second, NIS uses provider-verified vaccination histories and assumes that coverage among children whose providers did not respond is similar to coverage among children whose providers did respond; thus, incomplete reporting might have resulted in underestimates of coverage. Finally, although national estimates are precise (1), annual estimates and trends for states and urban areas should be interpreted with caution because of wider confidence intervals.

High vaccination coverage levels should be achieved and maintained to reduce the impact of vaccine-preventable diseases. Routine childhood vaccination with the vaccines included in the 4:3:1:3:3:1 series results in net societal savings of an estimated \$43 billion per annual birth cohort (10). Coverage varied substantially by state, ranging from 63% to 91% for the 4:3:1:3:3:1 vaccine series, and by race/ethnicity for DT/DTP/DTaP, varicella vaccine, and PCV, indicating that further progress in increasing coverage is needed in many areas. NIS data will continue to be used to monitor vaccination status among preschool-aged children for recommended vaccines. Future NIS data will be used to assess routine rotavirus and hepatitis A vaccination of preschool-aged children, recommended in 2006, and use of a measles-mumpsrubella-varicella (MMRV) vaccine licensed in 2005.

In addition to the recently recommended vaccines for preschool-aged children, three vaccines have been recommended recently for children aged 11–12 years: meningococcal conjugate vaccine (MCV4); tetanus, diphtheria, and acellular pertussis (Tdap) vaccine instead of tetanus and diphtheria toxoids vaccine (Td); and human papillomavirus vaccine (HPV). The NIS will be expanded during the fourth quarter of 2006 to assess coverage for recommended vaccines received among children aged 13–17 years. This enhancement underscores the importance of survey systems such as the NIS in monitoring new vaccine implementation, which can provide valuable information for improving overall vaccination coverage.

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# Public Health Response to Varicella Outbreaks — United States, 2003–2004

Since introduction of varicella vaccine in 1995, incidence of varicella has decreased as vaccination coverage has increased (1,2). Nevertheless, varicella outbreaks continue to occur, even among populations with high vaccination coverage (3-5). Although varicella typically is mild, the outbreaks can last for several months and be challenging and costly for health departments to control. In 2005, CDC conducted a national survey to determine the distribution and extent of reported varicella outbreaks during 2003–2004 and the public health response. This report summarizes the results of that survey, which indicated that varicella outbreaks are still common and that health jurisdictions are responding to these outbreaks, although they have varying definitions and guidelines for varicella-outbreak management. During April–May 2005, a voluntary, Internet-based survey was sent by e-mail to 59 CDC immunization program grantees:\* 50 states and the District of Columbia (DC), five cities (Chicago, Illinois; Houston, Texas; New York City, New York; Philadelphia, Pennsylvania; and San Antonio, Texas), and three U.S. territories (Guam, Puerto Rico, and the U.S. Virgin Islands). These health jurisdictions were asked questions about varicella outbreaks identified during 2003–2004, including local definitions of outbreaks, existence of outbreak management guidelines, and outbreak response strategies used.

Fifty-five (93%) of 59 jurisdictions responded to the survey; Alaska, New Mexico, Utah, and the U.S. Virgin Islands did not participate. In 2003, 43 (78%) of the 55 jurisdictions were notified of at least one varicella outbreak, and 10 (18%) were notified of six or more; in 2004, 45 (82%) were notified of at least one varicella outbreak, and 13 (24%) were notified of six or more. Additional information regarding 190 outbreaks that occurred in 2004 was obtained from 24 jurisdictions. Of the outbreaks reported to these jurisdictions, 67% occurred in elementary schools, and 43% included patients with a median age of 5–9 years; 64% had  $\leq$ 10 cases, 26% had 11–40 cases, and 10% had 41–50 cases.

When asked whether their health jurisdiction had a formal program definition for varicella outbreaks, approximately 70% of the 55 responding jurisdictions indicated that they did, and the definitions varied (Figure 1). Forty-four percent of jurisdictions reported that they had guidelines for managing varicella outbreaks. When asked whether their health jurisdiction responds to an outbreak if notified,<sup>†</sup> 47 of the 55 jurisdictions reported that they did. Thirty (55%) of these jurisdictions stated that their outbreak response involved both local and state health departments, 10 (18%) said that it involved the state health department only, and seven (13%) said that it involved the local health department only; eight jurisdictions did not respond. Among the 47 jurisdictions that respond to outbreaks, the most commonly reported criteria used to determine whether to respond were the population affected (57%), the outbreak setting (68%), and the size of the outbreak (68%); the age of patients was a less frequently used criterion (40%) (Figure 2). Approximately 35% of jurisdictions identified at least one other criterion.

<sup>\*</sup>Health jurisdictions that receive federal grants to assist with vaccination programs.

<sup>&</sup>lt;sup>†</sup>Jurisdictions were asked, "Does your health department at times respond to varicella outbreaks? (*Note:* By 'respond,' at minimum, recording reported outbreaks in a log book including total number of cases, with or without additional variables.)" Possible replies were "Yes, state and local health departments respond; yes, only state health department responds; yes, only local health department responds; or no, there is no response."





\* Jurisdictions (N = 55) that responded to the survey. *States*: Alabama, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississippi, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Ohio, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, Washington, West Virginia, Wisconsin, and Wyoming. *Cities and other areas*: Chicago, Illinois; Houston, Texas; District of Columbia; Guam; and Puerto Rico. California and District of Columbia listed two outbreak definitions.

Among the jurisdictions that respond to outbreaks, frequently used response strategies included verifying vaccination history, excluding patients from the outbreak setting, and documenting relevant outbreak information, such as age of patients. Vaccinating or excluding susceptible contacts from the outbreak setting and conducting laboratory testing to assess susceptibility were not frequently used strategies (Table).

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**Editorial Note:** The results of this survey indicate that varicella outbreaks are still common despite increasing vaccination coverage. During 2004, 45 jurisdictions were notified of varicella outbreaks, and 18 reported them to CDC. More comprehensive information about occurring outbreaks would be useful for monitoring the effects of the vaccination program and evaluating vaccination policies.

Approximately two thirds of jurisdictions have formal, but varying, definitions for a varicella outbreak, and almost half of jurisdictions have existing varicella-outbreak management guidelines. Creating a standard definition for varicella outbreaks would be useful for monitoring the outbreak trends among jurisdictions, and establishing outbreak management guidelines might facilitate a more uniform response, especially at the local level, and ensure that critical procedures are not overlooked. CDC is working with state and local health departments to develop a standard definition and national FIGURE 2. Percentage of jurisdictions\* that respond to varicella outbreaks, by criteria for responding — United States, 2003–2004



\* Jurisdictions (n = 47) that respond to varicella outbreaks if notified. States: Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, West Virginia, and Wisconsin. *Cities and other areas*: Chicago, Illinois; Houston, Texas; New York City, New York; Philadelphia, Pennsylvania; District of Columbia; and Puerto Rico.

<sup>†</sup> Includes local interest; for training purposes; whether a request was received from particular setting, such as a school or local agency; whether pregnant contacts are involved; whether a death is involved; whether the outbreak involves rash illness; or whether breakthrough cases are involved. Some jurisdictions respond to all outbreaks.

guidelines for management of varicella outbreaks to be published in a future *MMWR*.

Forty-seven of the jurisdictions indicate that they respond to varicella outbreaks if notified, although response strategies vary. A standard response for all varicella outbreaks should include a letter from the local health department or outbreak setting to inform the affected population of the outbreak. In addition, persons without evidence of immunity<sup>§</sup> (6) should be vaccinated either by their primary-care physician or at a vaccination clinic in outbreak settings. Vaccination of susceptible populations who might have been exposed during an outbreak or who have been exposed to infection is important to prevent illness and decrease disease severity.

In June 2005, the Advisory Committee on Immunization Practices (ACIP) provisionally recommended a second dose of varicella vaccine in outbreak settings for persons who have had only 1 dose of varicella vaccine and no disease history (provided that an appropriate interval has elapsed since the first dose) (6). On the basis of a 10-year follow-up prelicensure study of the vaccine, a 2-dose vaccination regimen has been determined more effective than a 1-dose regimen (7).

In a 2006 position statement, the Council of State and Territorial Epidemiologists (CSTE) supported a routine 2-dose

<sup>§</sup>Definition is available at http://www.cdc.gov/nip/vaccine/varicella/ varicella\_acip\_recs\_prov\_june\_2006.pdf.

TABLE. I elcentage of julisdictions that respond to valicella o	that respond to variocita outsreaks, sy strategy used — Onited States, 2000–200										
	Alw	lays	Sometimes_	Never							
Strategy	No.	(%)	No. (%)	No.	(%						
Sending letters to parents during school or day-care center outbreaks	21	(45)	19 (40)	7	(15						

ABLE. Percentage of jurisdiction	s* that respond to varicell	a outbreaks, by strategy used –	- United States, 2003-2004
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Strategy	No.	(%)	No.	(%)	No.	(%)
Sending letters to parents during school or day-care center outbreaks	21	(45)	19	(40)	7	(15)
Notifying health-care providers and affected population						
of outbreak	7	(15)	30	(64)	10	(21)
Vaccinating susceptible contacts	13	(28)	22	(47)	12	(26)
Excluding patients from outbreak setting	31	(66)	6	(13)	10	(21)
Excluding unvaccinated contacts from outbreak setting	7	(15)	13	(28)	27	(57)
Screening for varicella susceptibility (e.g., obtaining disease and						```
vaccination history information) among uninfected persons	14	(30)	20	(43)	13	(28)
Verifying vaccination information for patients	19	(40)	19	(40)	9	(19)
Verifying vaccination information for uninfected persons	10	(21)	18	(38)	19	(40)
Conducting laboratory testing to assess susceptibility among						· · /
uninfected persons	0	(0)	21	(45)	26	(55)
Conducting laboratory testing to confirm diagnosis	4	(9)	25	(53)	18	(38)
Investigating outbreak						. ,
Recording information provided by reporters	36	(77)	9	(19)	2	(4)
Performing varicella case-finding activities	24	(51)	15	(32)	8	(17)
Gathering age of patients	33	(70)	11	(23)	3	(6)
Collecting information on clinical symptoms of patients	26	(55)	15	(32)	6	(13)

\* Jurisdictions (n = 47) that respond to outbreaks if notified. States: Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Florida, Georgia, Hawaii, Idaho, Illinois, Indiana, Iowa, Kansas, Louisiana, Maine, Maryland, Massachusetts, Michigan, Minnesota, Missouri, Montana, Nebraska, Nevada, New Hampshire, New Jersey, New York, North Carolina, North Dakota, Oklahoma, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Vermont, Virginia, West Virginia, and Wisconsin. Cities and other areas: Chicago, Illinois; Houston, Texas; New York City, New York; Philadelphia, Pennsylvania; District of Columbia; and Puerto Rico.

varicella vaccination policy to improve varicella control and outbreak prevention. In June 2006, ACIP approved a routine 2-dose varicella vaccination policy for children (first dose at 12-15 months, second dose at 4-6 years) and catch-up vaccinations for children, adolescents, and adults who had previously received only 1 dose. Establishing a routine 2-dose vaccination regimen might make the 2-dose outbreak response for susceptible populations more feasible to implement.

In 2002, CSTE also recommended that states should establish individual case-based varicella surveillance by 2005 (8). Case-based reporting should improve detection of varicella outbreaks, the quality of the data reported from outbreaks, and the evaluation of outbreak-control measures.

The findings in this report are subject to at least two limitations. First, the data are taken from reports from jurisdictions and are subject to reporting biases such as recall bias. Second, varying outbreak definitions and reporting methods might have led to underestimation of the extent and distribution of varicella outbreaks.

As national outbreak guidelines are being created, jurisdictions are encouraged to contact CDC for assistance with investigating and responding to varicella outbreaks. Guidance on outbreak management and investigation also can be found in CDC's Manual for the Surveillance of Vaccine-Preventable Diseases (9).

#### **Acknowledgments**

The data in this report are based, in part, on information supplied by health departments of states, cities, and U.S. territories.

The survey was conducted with assistance from the Immunization Svcs Div, National Center for Immunization and Respiratory Diseases (proposed), CDC

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# West Nile Virus Activity — United States, January 1–September 12, 2006

This report summarizes West Nile virus (WNV) surveillance data reported to CDC through ArboNET as of 3 a.m. Mountain Daylight Time, September 12, 2006. A total of 36 states and the District of Columbia had reported 1,634 cases of human WNV illness to CDC (Figure, Table). A total of 921 (57%) cases for which such data were available occurred in males; median age of patients was 51 years (range: 3 months– 95 years). Dates of illness onset ranged from January 6 to September 10; a total of 52 cases were fatal.

A total of 159 presumptive West Nile viremic blood donors (PVDs) have been reported to ArboNET during 2006. Of these, 33 were reported from Nebraska; 25 from Texas; 12 from California; 11 from Utah; nine from Wisconsin; eight each were reported from Idaho and Iowa; seven each from Louisiana and South Dakota; six from North Dakota; five each from Minnesota and Mississippi; four from Missouri; three each from Kansas, Kentucky, and Oklahoma; two each from Colorado and Nevada; and one each from Arizona, Illinois, Montana, New York, Oregon, and Wyoming. Of the 159 PVDs, one person aged 73 years subsequently had neuroinvasive illness, and 36 persons (median age: 46 years [range: 18–67 years]) subsequently had West Nile fever.

In addition, 2,138 dead corvids and 503 other dead birds with WNV infection have been reported in 39 states and New York City during 2006. WNV infections have been reported in horses in 27 states, in one squirrel in Kansas, and in one unidentified animal species in Wyoming. WNV seroconversions have been reported in 495 sentinel chicken

FIGURE. Areas reporting West Nile virus (WNV) activity — United States, 2006\*



\* As of September 12, 2006.

TABLE. Number of human cases of West Nile virus (WNV) illness, by state — United States, 2006\*

State	Neuroinvasive disease <sup>†</sup>	West Nile fever§	Other clinical/ unspecified <sup>1</sup>	Total reported to CDC**	Deaths
Alabama	4	0	0	4	0
Arizona	7	4	2	13	Õ
Arkansas	7	2	0	9	Õ
California	42	108	9	159	2
Colorado	18	57	0	75	1
Connecticut	.0	2	Õ	7	1
District of Co	lumbia 0	1	Õ	1	0
Florida	2	0	0	2	Õ
Georgia	2	2	1	5	1
Idaho	62	257	6	325	5
Illinois	53	30	11	94	4
Indiana	1	0	0	1	0
Iowa	12	7	0	19	0
Kansas	13	9	0	22	3
Louisiana	38	26	0	64	0
Marvland	0	0	1	1	0
Michigan	10	Ō	4	14	0
Minnesota	22	30	0	52	3
Mississippi	34	36	0	70	3
Missouri	18	5	1	24	2
Montana	3	7	0	10	0
Nebraska	15	41	0	56	1
Nevada	30	60	9	99	1
New Jersey	1	1	1	3	0
New Mexico	1	2	0	3	0
New York	5	2	1	8	0
North Dakota	a 13	88	0	101	1
Ohio	8	3	0	11	0
Oklahoma	15	6	1	22	5
Oregon	2	19	1	22	0
Pennsylvania	a 5	1	0	6	1
South Dakota	a 30	56	0	86	1
Texas	106	23	0	129	13
Utah	34	47	0	81	3
West Virginia	a 1	0	0	1	0
Wisconsin	3	3	0	6	0
Wyoming	8	17	4	29	1
Total	630	952	52	1,634	52

\* As of September 12, 2006.

<sup>†</sup> Cases with neurologic manifestations (i.e., West Nile meningitis, West Nile encephalitis, and West Nile myelitis).

§ Cases with no evidence of neuroinvasion.

<sup>¶</sup> Illnesses for which sufficient clinical information was not provided.

\*\* Total number of human cases of WNV illness reported to ArboNET by state and local health departments.

flocks in 10 states (Arizona, Arkansas, California, Florida, Iowa, North Carolina, North Dakota, Pennsylvania, Utah, and Virginia). Five seropositive sentinel horses were reported in Montana. A total of 7,492 WNV-positive mosquito pools have been reported from 36 states, the District of Columbia, and New York City.

Additional information about national WNV activity is available from CDC at http://www.cdc.gov/ncidod/dvbid/ westnile/index.htm and at http://westnilemaps.usgs.gov.

## Notice to Readers

## Epidemiology in Action Course — October 23–November 3, 2006

The Rollins School of Public Health's Hubert Department of Global Health and CDC's Office of Workforce and Career Development will cosponsor a course, Epidemiology in Action, October 23–November 3, 2006, at the Emory University campus in Atlanta, Georgia. The course is designed for state and local public health workers.

The course emphasizes the practical application of epidemiology to public health problems and will consist of lectures, workshops, classroom exercises (including actual epidemiologic problems), and roundtable discussions. Topics include descriptive epidemiology and biostatistics, analytic epidemiology, epidemic investigations, public health surveillance, surveys and sampling, Epi Info (Windows version) training, and discussions of selected prevalent diseases. Tuition is charged.

Additional information and applications are available from Emory University, Hubert Department of Global Health (attention: Pia), 1518 Clifton Road NE, Room 746, Atlanta, GA 30322; by telephone, 404-727-3485; fax, 404-727-4590; online at http://www.sph.emory.edu/epicourses; or by e-mail, pvaleri@sph.emory.edu.

## Notice to Readers

# Preventive Medicine Residency Application Deadline — October 11, 2006

The Preventive Medicine Residency (PMR) is accepting applications from physicians with public health and applied epidemiologic practice experience who seek to become preventive medicine/population health specialists and public health leaders. The PMR prepares physicians for leadership roles in public health at federal, state, and local levels through instruction and supervised practical experiences focused on translating epidemiology to public health practice, management, and policy and program development. Residents spend the practicum year at CDC or in a state or local health department.

PMR alumni occupy many leadership positions at CDC, at state and local health departments, and in academia and private-sector agencies. Completion of the PMR, which is accredited by the Accreditation Council for Graduate Medical Education for 12 months of practicum training, qualifies graduates to apply for certification by the American Board of Preventive Medicine in Public Health and General Preventive Medicine.

Applications are being accepted for the class that begins in mid-June 2007. Application materials must be postmarked by October 11, 2006. Additional information regarding the residency, eligibility criteria, and application process is available at http://www.cdc.gov/epo/dapht/pmr/pmr.htm or by telephone, 404-498-6140.

## Errata: Vol. 55, No. RR-11

In the *MMWR Recommendations and Reports*, "Sexually Transmitted Diseases Treatment Guidelines, 2006," the following errors occurred:

On page 42, in the section "Chlamydial Infections Among Children" under "Diagnostic Considerations," the second recommended regimen should read: Recommended Regimen for Children Who Weigh ≥45 kg but Who Are Aged **<8** Years.

On page 48, in the section "Gonococcal Infections Among Children" under "Diagnostic Considerations," the first recommended regimen should read: Recommended Regimens for Children Who Weigh >45 kg.

On page 59, under "Recommended Regimen A," the daily dosage for Ofloxacin was incorrect. It should read: Ofloxacin 400 mg orally **twice** daily for 14 days\*.

#### **QuickStats** FROM THE NATIONAL CENTER FOR HEALTH STATISTICS Percentage of Parents\* Who Were Married or Cohabiting<sup>†</sup> at Birth of First Child, by Race/Ethnicity and Sex — United States, 2002 Survey 100 Married 90 Cohabiting 80 77 74 Neither 70 62 Percentage 60 54 52 50 39 40 37 30 23 20 16 15 12<u>1</u>0 9 10 0 Male Female Male Female Male Female Hispanic<sup>§</sup> Black, non-Hispanic White, non-Hispanic Sex and race

\* Based on independent samples of males and females aged 15–44 years. † Living together.

§ Might be of any race.

According to 2002 survey data, among non-Hispanic whites, the birth of the first child occurred during marriage for 77% of males and 74% of females. Among Hispanics, the birth of the first child occurred during marriage for 52% of males and 54% of females, and, among non-Hispanic blacks, it occurred during marriage for 37% of males and 23% of females.

**SOURCE:** Martinez GM, Chandra A, Abma JC, Jones J, Mosher WD. Fertility, contraception, and fatherhood: data on men and women from cycle 6 (2002) of the National Survey of Family Growth. Vital Health Stat 2006;23(26). Available at http://www.cdc.gov/nchs/nsfg.htm.

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending September 9, 2006 (36th Week)\*

	Current	Cum	5-year weekly	Total of	cases rep	ported fo	r previou	is years	
Disease	week	2006	averaget	2005	2004	2003	2002	2001	States reporting cases during current week (No.)
Anthrax	_	1	0	_	_	_	2	23	
Botulism:			0				-	20	
foodborne	_	3	1	19	16	20	28	39	
infant	_	81	2	90	87	76	69	97	
other (wound & unspecified)	_	40	1	33	30	33	21	19	
Brucellosis	_	67	2	122	114	104	125	136	
Chancroid	_	20	1	17	30	54	67	38	
Cholera		5	0	8	5	2	2	3	
Cvclosporiasis§	1	87	3	734	171	75	156	147	FL (1)
Diphtheria			0			1	100	2	
Domestic arboviral diseases <sup>§</sup> <sup>1</sup>			0			'	1	2	
California serogroup		12	8	78	112	108	16/	128	
eastern equine		12	1	21	6	1/	10	120	
Powaccan			'	- 1	1	14	10	N	
St Louis	_	2		10	10	 /1	20	70	
western equine				10	12	41	20	13	
Epriphicacies:									
human granuloovtio	0	226	10	700	527	262	511	261	NV (2)
human monocytic	5	230	10	500	220	201	216	1/2	NV (2) MI (1) AD (1)
human (other & unepositied)	0	104	10	100	500	321	210	142	AP(1) OK(1)
Haamanhilua influenzee **	2	104	2	122	59	44	23	0	An (1), OK (1)
invasivo dispaso (ago <5 vrs);									
acrotuno b		F	0	0	10	20	24		
serolype b	_	5	0	105	19	117	144		
		1/6	2	217	177	207	152	_	
	2	140	- 1	217	105	227	100	70	WA(I),AZ(I)
Hantavirua pulmanaru avedromo <sup>§</sup>	_	44	1	00	105	90	90	79	
Hamalutia uramia aundroma, postdiarrhaal		107	0	29	24	170	016	202	
Hendiyiic dieniic syndrome, postdiarmeals	4	127 500	22	221	200	1 1 0 0	1 0 2 5	202	MD(1), NC(1), IN(1), CA(1)
HIV infection podiatria (and 12 yra) <sup>§</sup> <sup>tt</sup>	2	522	33	200	/13	1,102	1,835	3,970	
Influenze eccepticated pediatric mortality § §§ ¶	_	52 41	4	380	430	504 N	420 N	543 N	
	17	41	10	49	750	606	IN CCE	610	
LISTEHIOSIS	17	411	19	092	755	090	005	013	ME(1), EI(2), AI(1), OE(4), CO(1), MD(1), MC(1), EI(2), AI(1), OK(1), CO(1), CA(2)
Measles	2***	43	1	66	37	56	44	116	FL(2)
Meningococcal disease ttt invasive:	2	40		00	07	50		110	
$\Delta \subset V \& W_{-135}$	1	153	З	297	_	_	_	_	FL (1)
serogroup B	2	103	1	157	_	_	_	_	FL (2)
other serogroup	_	13	0	27	_	_	_	_	(-)
Mumps	10	5 603	4	314	258	231	270	266	PA (1) KS (4) AL (1) LIT (1) OB (2) CA (1)
Plaque		7	0	8	.3	1	2/0	200	
Poliomvelitis paralytic	_		_	1	_		_	_	
Psittacosis§	_	15	0	19	12	12	18	25	
Q fever <sup>§</sup>	2	101	2	139	70	71	61	26	NC (1), TN (1)
Rabies, human	_	1	0	2	7	2	3	1	
Rubella	1	6	0	11	10	7	18	23	FL (1)
Rubella, congenital syndrome	_	1	_	1	_	1	1	3	. = (.)
SARS-CoV <sup>§,§§</sup>	_	_	_	_	_	8	Ν	Ň	
Smallpox§	_	_	_	_	_	_	_	_	
Streptococcal toxic-shock syndrome§	_	74	1	129	132	161	118	77	
Streptococcus pneumoniae.§									
invasive disease (age <5 vrs)	8	745	7	1.257	1.162	845	513	498	RI (3), NY (1), OH (1), IN (1), MD (1), OK (1)
Syphilis, congenital (age <1 yr)	_	174	8	361	353	413	412	441	(-n)  (n) = (n)  (n)  (n) = (n)
Tetanus	1	16	0	27	34	20	25	37	MI (1)
Toxic-shock syndrome (other than streptococca	u)§ 1	65	2	96	95	133	109	127	NE (1)
Trichinellosis		10	0	19	5	6	14	22	
Tularemia <sup>§</sup>	1	57	4	154	134	129	90	129	AR (1)
Typhoid fever	2	183	10	324	322	356	321	368	OH (1), FL (1)
Vancomycin-intermediate Staphylococcus aure	us§ —	2	0	2	_	N	N	N	
Vancomycin-resistant Staphylococcus aureus§	_	_		3	1	N	N	N	
Yellow fever	_	_	_	_	_	_	1	_	

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

\* Incidence data for reporting years 2005 and 2006 are provisional, whereas data for 2001, 2002, 2003, and 2004 are finalized.

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

§ Not notifiable in all states.

Includes both neuroinvasive and non-neuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (proposed) (ArboNET Surveillance).

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

<sup>+†</sup> Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention (proposed)). Implementation of HIV reporting influences the number of cases reported. Data for HIV/AIDS are available in Table IV quarterly.

§§ Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases (proposed).

11 A total of 46 cases were reported since the beginning of the 2005-06 flu season (October 2, 2005 [week 40]).

\*\*\* Of the two measles cases were reported for the current week, one was indigenous and one was imported from another country.

ttt Data for meningococcal disease (all serogroups and unknown serogroups) are available in Table II.

Chlamydia <sup>†</sup>						Coccidioidomycosis						Cryptosporidiosis				
			Prev	vious		Previous										
Reporting area	Current	<u>52 v</u> Med	veeks Max	Cum 2006	Cum 2005	Current	52 w	eeks Max	Cum 2006	Cum 2005	Current	52 v Med	Max	Cum 2006	Cum 2005	
United States	8.008	18.748	35.170	644.074	661.251	57	149	1.643	5.839	2.861	112	67	594	2.582	4.029	
New England Connecticut Maine <sup>§</sup> Massachusetts New Hampshire Rhode Island Vermont <sup>§</sup>	429 29 34 323 22  21	631 169 43 293 36 62 18	1,550 1,214 74 448 64 95 43	21,993 6,165 1,528 10,132 1,276 2,131 761	22,284 6,750 1,509 9,771 1,277 2,303 674	   N       N	0 0 0 0 0 0 0 0	0 0 0 0 0 0 0 0	N N 	N  N	5 — — 2 3	4 0 2 1 0 0	35 21 3 15 4 6 5	194 21 22 88 24 7 32	209 38 20 97 22 5 27	
<b>Mid. Atlantic</b> New Jersey New York (Upstate) New York City Pennsylvania	942 135 344  463	2,345 363 502 710 746	3,696 500 1,727 1,584 1,075	79,747 12,280 16,184 24,360 26,923	80,552 13,349 15,928 25,832 25,443	N N N N	0 0 0 0	0 0 0 0	N N N N	N N N N N	11 	10 0 3 1 5	444 5 441 10 21	328 9 105 44 170	1,548 41 1,258 92 157	
<b>E.N. Central</b> Illinois Indiana Michigan Ohio Wisconsin	1,291 546 260 322 80 83	3,110 960 399 614 704 398	12,578 1,686 552 9,888 1,446 531	106,581 34,749 13,607 22,027 23,041 13,157	110,180 34,585 13,689 18,090 29,966 13,850	       	1 0 0 0 0	3 0 3 1 0	32 — 8 4 N	8           	15   	16 2 1 2 5 5	162 13 13 7 109 38	642 72 42 80 228 220	858 109 38 73 305 333	
W.N. Central lowa Kansas Minnesota Missouri Nebraska <sup>§</sup> North Dakota South Dakota	631 51 157 301 58 11 53	1,142 154 157 230 439 95 32 51	1,457 225 269 344 567 176 58 117	39,941 5,555 5,324 7,044 15,508 3,609 1,075 1,826	40,736 4,889 5,060 8,555 15,627 3,568 1,116 1,921	N     N N N N	0 0 0 0 0 0 0 0	12 0 12 0 1 0 0	N N     N N N N N N N N N N N N N N N	4 N 3 1 N N	19 3 1 11 	11 1 2 2 1 0 1	52 20 8 22 9 16 4 6	447 103 50 126 64 56 7 41	439 97 29 82 195 14  22	
S. Atlantic Delaware District of Columbia Florida Georgia Maryland <sup>§</sup> North Carolina South Carolina <sup>§</sup> Virginia <sup>§</sup> West Virginia	1,534 41 9 520 27 266 178 140 353	3,393 70 54 925 635 341 562 290 425 58	4,925 92 103 1,106 2,142 486 1,772 1,306 840 226	122,721 2,433 1,672 33,035 19,868 12,121 22,960 12,236 16,201 2,195	123,237 2,259 2,611 29,931 21,731 12,726 22,985 12,738 16,738 1,818	N   N   N N N N N N N N N N N N N N N	0 0 0 0 0 0 0 0 0 0	1 0 0 1 0 0 0 0 0	3 N N 3 N N N N	1 N N 1 N N N N	30 	14 0 6 3 0 1 1 1	54 3 28 9 4 10 12 8 3	523 7 11 248 116 11 55 43 28 4	386 3 7 165 88 19 44 15 35 10	
E.S. Central Alabama <sup>§</sup> Kentucky Mississippi Tennessee <sup>§</sup>	653 50 29 228 346	1,414 382 155 384 494	1,943 756 402 801 602	50,788 14,066 6,137 13,230 17,355	48,121 10,594 6,446 14,991 16,090	N N N	0 0 0 0	0 0 0 0	N N N	N   N   N	3 2 1	3 0 1 0 1	29 6 25 1 5	99 37 27 8 27	117 17 71  29	
<b>W.S. Central</b> Arkansas Louisiana Oklahoma Texas <sup>§</sup>	904 134 5 177 588	2,125 162 254 226 1,396	3,605 240 761 2,159 1,777	73,541 5,345 9,642 7,979 50,575	77,855 5,887 12,910 7,797 51,261	  N	0 0 0 0	1 0 1 0	  N	          	1  1 	3 0 1 1	24 2 14 2 19	96 14 8 25 49	131 3 49 33 46	
Mountain Arizona Colorado Idaho <sup>§</sup> Montana Nevada <sup>§</sup> New Mexico <sup>§</sup> Utah Wyoming	321 104 53 — 15 125 — 24	1,045 373 169 51 44 77 168 93 27	1,839 642 482 159 195 432 339 136 55	34,004 12,377 4,130 1,960 1,712 2,955 6,629 3,300 941	43,770 14,986 10,462 1,790 1,569 5,060 6,072 3,067 764	34 34 N N 	116 113 0 0 1 0 1 0	452 448 0 0 4 2 3 2	4,118 4,051 N N 21 9 35 2	1,849 1,777 N N 46 13 10 3	27 2 7 4 8 — 2 4	2 0 1 0 0 0 0 0	34 2 26 1 3 3 11	202 17 33 16 82 3 12 10 29	101 9 32 13 14 11 9 11 2	
<b>Pacific</b> Alaska California Hawaii Oregon <sup>§</sup> Washington	1,303 54 842  178 229	3,273 85 2,559 103 174 350	5,079 152 4,231 135 315 604	114,758 2,897 90,318 3,337 6,083 12,123	114,516 2,866 89,024 3,770 6,043 12,813	23 — 23 N N N	41 0 41 0 0	1,179 0 1,179 0 0 0	1,686  1,686  N  N	999  999 N N N	1  - 1	2 0 0 1 0	52 2 14 1 6 38	51  	240 1 138 1 57 43	
American Samoa C.N.M.I. Guam Puerto Rico U.S. Virgin Islands	U U 	0 0 18 77 5	46 0 37 161 16	U U 2,945 178	U 569 2,892 189	U U N	0 0 0 0	0 0 0 0	U U N	U U N	U U N	0 0 0 0	0 0 0 0	U U N	U U N	

Med: Median.

Max: Maximum.

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

**MMWR** 

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-or \* Incidence data for reporting years 2005 and 2006 are provisional. \* Chlamydia refers to genital infections caused by *Chlamydia trachomatis*. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS). Cum: Cumulative year-to-date counts.

			Giardiasi	s		_	G	onorrhe	a		Haemophilus influenzae, invasive All ages, all serotypes					
		Prev	vious				Prev	vious	-			Prev	/ious	71		
Reporting area	Current week	52 w Med	eeks Max	Cum 2006	Cum 2005	Current week	<u>52 w</u> Med	veeks Max	Cum 2006	Cum 2005	Current week	52 w Med	veeks Max	Cum 2006	Cum 2005	
United States	224	317	1,029	10,429	12,441	3,361	6,488	14,136	221,092	225,307	17	38	142	1,418	1,619	
New England	17	25	75	848	1,119	55	106	288	3,738	4,119	2	3	19	123	124	
Connecticut Mainot		0	37	184	242	8	40	241	1,444	1,806	1	0	9	37	38	
Massachusetts	2	10	29	357	501	34	47	86	1,691	1,759	1	1	7	52	61	
New Hampshire	_	0	9	22	43	4	4	9	140	113	—	0	2	6	6	
Rhode Island Vermont <sup>†</sup>	5 6	0 3	25 9	72 107	70 119	8	8	19	331 46	309	_	0	2	4 8	4	
Mid. Atlantic	40	53	254	1,805	2,228	313	597	1,014	20,211	22,911	2	7	30	279	305	
New Jersey		7	17	206	301	62	103	150	3,204	3,911	—	2	4	45	59	
New York (Opsiale)	30	24 10	32	334	602	125	123	455 357	4,203	4,445 6.969	_	2 1	4	96 30	86 57	
Pennsylvania	10	15	29	491	579	126	217	393	7,587	7,586	2	3	8	108	103	
E.N. Central	27	48	110	1,539	2,229	722	1,272	7,047	43,363	44,270	1	5	14	197	286	
Indiana	N	9	25 0	2/1 N	533 N	206 162	163	237	6.073	5.533	1	1	6 7	47 52	95 52	
Michigan	4	13	24	420	548	293	242	5,880	9,016	7,114	_	Ó	3	17	17	
Ohio Wisconsin	23	16 10	32 40	528 320	496 652	30 31	348 127	661 172	10,581	14,150 3 930	_	1	6 4	58 23	90 32	
W.N. Central	8	30	260	1,227	1,352	250	361	436	12,640	12,919	2	2	15	93	81	
lowa	_	5	12	180	188	15	33	46	1,152	1,097	_	0	1	1	_	
Kansas Minnesota	4	4	238	477	134 559	57	47 62	124	1,480	2,380	2	0	3	49	9 36	
Missouri	_	9	32	299	298	140	190	251	6,934	6,498	_	Õ	6	21	25	
Nebraska† North Dakota	2	2	8	73	84	32	22	56	936	813	—	0	2	5	10	
South Dakota	_	1	7	48	81	3	6	13	261	254	_	0	0	4	_	
S. Atlantic	39	49	95	1,580	1,832	942	1,487	2,334	53,956	53,108	7	10	26	381	388	
Delaware	—	1	4	26	40	16	26	44	1,002	563	—	0	1	1		
Florida	29	18	39	705	637	268	433	549	15,715	13,610	3	3	9	126	94	
Georgia	6	10	26	304	489	14	300	1,014	9,296	10,005	1	2	12	73	83	
Maryland⊺ North Carolina	4 N	4	11	138 N	136 N	79 345	128 283	186 766	4,544	4,725	2	1	5	48 44	52 63	
South Carolina <sup>†</sup>	_	ĩ	7	62	83	73	128	748	5,528	5,702	_	ĩ	3	25	24	
Virginia <sup>†</sup>	_	8	50	281	382	126	132	288	4,413	5,811	1	1	8	46	43	
vvest virginia	10	0	26	202	30		570	42	020	4/3		0	4	15	22	
Alabama <sup>†</sup>	8	8 4	36 25	292 146	285 126	200 31	181	310	20,545	6.125	_	2	5	17	00 17	
Kentucky	N	0	0	N	N	19	55	132	2,191	2,139	_	0	1	3	10	
Mississippi Tennessee <sup>†</sup>	2	0	0 12	146	159	90 126	145	435	5,143	4,805 5 788	1	0	1	3 50	61	
WS Central	10	6	31	173	205	434	856	1 430	31 689	31 759	_	1	15	45	92	
Arkansas	5	2	6	77	59	87	78	186	2,735	3,088	_	ò	2	7	7	
Louisiana	_	0	4	12	38	3	158	354	5,907	7,141	_	0	2	2	32	
Oklanoma Texast	5 N	2	24	84 N	108 N	270	80 548	764	20,029	3,150	_	0	14	34	49	
Mountain	41	26	54	960	973	86	217	552	7,334	9,435	1	4	8	145	162	
Arizona	5	3	36	99	97	27	86	201	3,013	3,407	1	1	7	71	82	
Colorado Idaho†	14 1	8	33	289 114	342 96	20	40	90 10	1,247	2,213	_	1	4	37	35	
Montana	2	2	11	65	47	_	3	20	138	100	_	ŏ	Ö	_		
Nevada†	—	1	6	38	72	37	24	194	985	2,021	—	0	1	10	13	
Utah	17	7	19	293	248	_	29 17	24	556	466	_	0	4	10	7	
Wyoming	2	1	3	23	17	2	2	6	84	49	—	0	2	2	4	
Pacific	32	59	202	2,005	2,218	293	807	960	27,616	27,929	1	2	20	82	93	
California	25	43	105	1.453	1.577	203	653	23 827	22.768	23.250	_	0	9	8 19	43	
Hawaii	_	1	3	35	46	_	18	29	600	711	—	Ō	1	13	8	
Oregon <sup>™</sup> Washington	_4	7	16	268	294 227	31	28 74	58 142	929 2 922	1,062	1	1	6 1	40	36	
American Samoa		0	90 0	207	11	11	/+ 0	142	2,352	2,307		0	4 0	2 		
C.N.M.I.	U	0	0	U	U	U	0	2	U	U	U	0	0	U	U	
Guam Buarta Bias	_	0	0	45	11	_	1	15	100	71	—	0	2	_	6	
U.S. Virgin Islands	9	2	20 0	45	1/2	_	5 0	5	30	200 45	_	0	0	_	3	

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-\* Incidence data for reporting years 2005 and 2006 are provisional. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS). Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

(,																	
	A B										Legionellosis						
	Current	52 v	veeks	Cum	Cum	Current	52 w	eeks	Cum	Cum	Current	52 w	/eeks	Cum	Cum		
Reporting area	week	Med	Max	2006	2005	week	Med	Max	2006	2005	week	Med	Max	2006	2005		
United States	20	72	245	2,202	2,748	22	83	597	2,642	3,593	29	42	127	1,348	1,314		
New England	1	4	20	136	326	—	1	9	46	99	_	2	12	68	86		
Connecticut Maine <sup>†</sup>	1	1	3	30 6	37	_	0	3	13	34 10	_	0	8	19	22 4		
Massachusetts	_	2	13	51	202	_	Ő	5	14	32	_	1	6	27	38		
New Hampshire	_	0	16	34	70	_	0	2	11	19	_	0	1	1	6		
Vermont <sup>†</sup>	_	0	2	7	5	_	0	1		3	_	0	3	3	4		
Mid. Atlantic	4	7	24	215	452	1	8	55	267	472	12	13	42	450	443		
New Jersey		2	9 14	54	93	—	2	10	73	180		1	10	60	77		
New York City	-	2	10	61	216	_	1	43	40	98		1	29	25	73		
Pennsylvania	—	1	5	40	77	1	3	9	107	158	3	5	17	184	182		
E.N. Central	1	6	13	176	247	5	7	24	247	401	5	8	25	280	254		
Indiana	1	0	5	40 20	90 12	4	0	6 17	39	28	_	0	4	21	41		
Michigan	_	1	8	59	78	_	3	7	95	127	_	2	6	71	74		
Ohio Wisconsin	_	1	4	41 16	36 31	1	2	10 4	89 6	98 33	5	4	19 5	149 19	102		
WN Central	_	2	30	88	64	2	4	22	107	183	_	1	14	47	57		
lowa	_	Ō	2	8	18	_	Ö	3	10	19	_	Ö	3	8	4		
Kansas Minnaasta	_	0	5	23	12		0	2	8	22	_	0	2	4	2		
Missouri	_	1	29	9 29	25		2	7	64	20 97	_	0	3	15	21		
Nebraska <sup>†</sup>	—	0	3	12	6	—	0	1	9	20	—	0	2	5	2		
South Dakota	_	0	2	7	_	_	0	1	_	5	_	0	6	4	10		
S. Atlantic	5	11	34	361	472	9	23	66	797	988	9	8	19	276	273		
Delaware	—	0	2	10	5	—	1	4	32	22	—	0	2	8	13		
District of Columbia	2	0	2 18	5 141	2 183	6	0	2 19	5 287	10 339	4	0	5 9	14 115	8 72		
Georgia	1	1	7	50	95	1	3	7	117	155	1	Õ	4	12	22		
Maryland <sup>†</sup>	2	1	6 20	43	46 57	1	3	10	116	107	1	1	5	50 26	82		
South Carolina <sup>†</sup>	_	0	3	13	27	1	2	7	52	111		Ö	1	20	11		
Virginia <sup>†</sup>	_	1	11	34	54	_	1	18	39	105	—	1	7	42	32		
	_	0	15	4	100	_	0	10	43	27	_	1	0	7	12		
Alabama <sup>†</sup>	_	2	9	10	26	2 1	ю 1	7	223 70	258 59	_	0	9 2	55 7	10		
Kentucky	_	0	5	28	19	1	1	5	49	49	_	0	4	17	17		
Mississippi Tennessee <sup>†</sup>	_	0	1	5 45	15 130	_	0	3	10 94	41 109	_	0	1 7	1 30	3 26		
W.S. Central	_	5	77	120	302	_	14	315	441	391	_	1	. 32	38	26		
Arkansas	_	0	9	32	11	_	1	4	31	48	—	Ó	3	3	5		
Louisiana Oklahoma	_	0	3	2	51 4	_	0	3 17	11 26	58 31	_	0	2	4	1		
Texas <sup>†</sup>	_	4	73	82	236	_	11	295	373	254	_	õ	26	30	17		
Mountain	5	5	18	182	212	1	5	39	142	372	2	2	7	68	70		
Arizona	3	2	16	104	107	—	2	23	55	236	1	1	3	25	15		
Idaho†	1	0	2	9	18	_	0	2	10	9	_	0	2	7	3		
Montana	_	0	3	9	7	_	0	7		3	—	0	1	5	5		
New Mexico <sup>†</sup>	_	0	2	12	18	_	0	4	14	40 14	_	0	2	3	2		
Utah	_	0	2	11	17	1	0	5	24	29	1	0	1	17	10		
Wyoming	_	0	1	3	1	_	0	1	_	2		0	0	_	4		
Pacific Alaska	4	21 0	163 1	836	483 3	2	9 0	61 1	372 3	429 7	1	2 0	9 1	66	49		
California	4	18	162	759	401	2	7	41	288	286	1	2	9	66	47		
Hawaii Oregon <sup>†</sup>	_	0	2	8 26	20	_	0	1	4	6 70	N	0	1		2 N		
Washington	_	1	13	33	31	_	0	18	31	51		Ő	Ő				
American Samoa	U	0	0	U	1	U	0	0	U	_	U	0	0	U	U		
C.N.M.I.	U	0	0	U	U	U	0	0	U	U 10	U	0	0	U	U		
Puerto Rico	1	0	3	19	ے 55	1	1	8	24	34	_	0	1	1	_		
U.S. Virgin Islands	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_		

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-\* Incidence data for reporting years 2005 and 2006 are provisional. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS). Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

(36th Week)*	36th Week)* Lvme disease								Malaria						
		Pre	evious					Prev	/ious						
	Current	52 w	veeks	Cum	Cum		Current	52 w	reeks	Cum	Cum				
Reporting area	week	Med	Max	2006	2005		week	Med	Max	2006	2005				
United States	132	248	2,153	10,918	15,907		13	24	125	827	975				
New England	34	37	780	1,903	2,806		2	1	11	42	50				
Connecticut Maine <sup>†</sup>	20	9	753	1,356	200		_	0	5	3	4				
Massachusetts	_	2	48	33	1,997		1	Ő	3	19	27				
New Hampshire	4	5	50	362	158		—	0	3	8	5				
Rhode Island	_	0	5		25		—	0	8	_	2				
Vermont	1	1	8	54	35		_	0	1	1	1				
Mid. Atlantic	89	155	1,176	6,311	9,250		4	5	13	150	266				
New Jersey New York (Linstate)	75	24 78	1 1 1 5 0	2 722	2,964		2	1	11	28 25	07 31				
New York City		1	15	13	310		1	2	8	70	142				
Pennsylvania	14	40	213	2,281	3,435		1	1	3	27	26				
E.N. Central	_	11	102	895	1,512		1	2	7	81	109				
Illinois	—	0	2		116		—	1	4	30	62				
Indiana Michigon	—	0	3	15	23		-	0	3	8	3				
Ohio	_	1	6	34	41		_	0	2	21	16				
Wisconsin	_	10	97	812	1,293		_	Õ	3	7	10				
W.N. Central	_	8	91	319	514		_	0	32	31	36				
lowa	_	1	8	68	80		_	Ō	1	1	6				
Kansas	—	0	2	3	3		_	0	2	5	4				
Minnesota	—	6	88	231	417			0	30	14	11				
Nebraska†	_	0	2	о 8	1		_	0	2	4	14				
North Dakota	_	Õ	3	_	_		_	Õ	1	1	_				
South Dakota	—	0	1	1	2		—	0	1	1	_				
S. Atlantic	4	30	102	1,224	1,654		3	7	15	235	212				
Delaware	1	8	27	360	532		—	0	1	5	3				
District of Columbia		0	/	33	8			0	2	3	8 25				
Georgia	_	0	1	23	25		_	1	6	43 64	41				
Maryland <sup>†</sup>	2	16	59	597	868		1	1	5	51	76				
North Carolina	—	0	5	21	40		—	0	8	19	22				
South Carolina <sup>†</sup>	—	0	3	170	14			0	2	/	10				
West Virginia	_	0	44	7	7		_	0	2	2	1				
E S Central	1	0	4	16	24		_	0	3	19	20				
Alabama†		õ	1	5			_	õ	2	8	4				
Kentucky	_	0	2	4	3		_	0	2	3	5				
Mississippi	-	0	0				_	0	1	3					
Termessee	1	0	2	,	21		_	0	2		11				
W.S. Central	_	0	3	10	62		_	2	31	51	88				
Louisiana	_	0	Ó	_	3		_	Ő	i	1	2				
Oklahoma	_	0	0	_	_		_	0	6	7	3				
Texas <sup>†</sup>	—	0	3	10	55		_	1	29	42	78				
Mountain	_	0	4	16	15		_	1	9	48	37				
Arizona	—	0	4	4	3		—	0	9	17	6				
Lolorado Idaho†	_	0	1	2	2		_	0	2	9	20				
Montana	_	Õ	Ó	_	_		_	Õ	1	2	_				
Nevadat	—	0	1	1	3		—	0	1	1	2				
New Mexico <sup>†</sup>	—	0	1	1	2		_	0	1	3	3				
Wyoming	_	0	0		2		_	0	2	15	1				
Pacific	4	4	20	224	70		2	4	12	170	157				
Alaska	4	4	22	224	4		<u>ی</u>	4	4	21	157				
California	4	4	21	212	42		3	4	10	118	117				
Hawaii	N	0	0	Ν	N		—	0	2	4	14				
Uregon <sup>™</sup> Washington	_	0	2	7 2	17		_	0	1	8 10	9 11				
American O		0	5					0	5	19					
American Samoa C N M I	U	0	0	U 11	U		U	0	0	U	U				
Guam	_	Ő	0	_	_		_	0	0	_	_				
Puerto Rico	N	Ō	Ō	Ν	Ν		—	0	1	—	3				
U.S. Virgin Islands	_	0	0	_	_		_	0	0	_	_				

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-or \* Incidence data for reporting years 2005 and 2006 are provisional. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS). Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

September 15, 2006

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands.

U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Incidence data for reporting years 2005 and 2006 are provisional.

<sup>+</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

(Sotti Week)"	)^Rabies, animal						ky Mour	ntain spo	tted feve	Salmonellosis					
		Prev	vious	_		_	Prev	ious	_		_	Pre	vious		
Reporting area	Current	<u>52 w</u>	eeks Max	Cum 2006	Cum 2005	Current	52 w	eeks Max	Cum 2006	Cum 2005	Current	52 v	Max	Cum 2006	Cum 2005
United States	79	111	166	4,021	4,304	22	36	246	1,268	1,149	688	809	2,291	25,422	28,397
<b>New England</b> Connecticut Maine <sup>†</sup> Massachusetts	24 11 2 4	12 3 1 4	25 14 5 17	465 135 69 178	528 138 47 272	N	0 0 0	2 0 0 2	2  N 1	5  N 3	15 — 	34 0 2 19	324 316 10 53	1,409 316 80 782	1,576 328 126 838
New Hampshire Rhode Island Vermont <sup>†</sup>	3 4	0 0 1	5 4 4	36 1 46	11 16 44		0 0 0	1 2 0	1	1	2 5	2 0 1	24 17 4	133 57 41	136 73 75
<b>Mid. Atlantic</b> New Jersey New York (Upstate) New York City Pennsylvania	11 N 11 —	20 0 11 0 9	50 0 20 3 35	795 N 380  415	678 N 375 20 283		1 0 0 1	6 2 1 1 3	34 7 2 3 22	69 21 1 6 41	52 — 33 — 19	82 14 22 16 28	272 39 233 44 65	2,914 576 784 492 1,062	3,550 712 821 822 1,195
<b>E.N. Central</b> Illinois Indiana Michigan Ohio Wisconsin	1 1  N	2 0 1 0 0	17 7 2 5 9 0	126 37 10 39 40 N	149 38 10 31 70 N	  	0 0 0 0 0	4 1 1 4 1	24 1 5 2 15 1	36 11 5 18 2	43 — 10 5 28 —	101 26 14 17 23 15	189 46 67 32 56 28	3,419 833 568 628 852 538	4,075 1,390 393 668 924 700
W.N. Central Iowa Kansas Minnesota Missouri Nebraska <sup>†</sup> North Dakota South Dakota	2 1 1 1	5 0 1 1 0 0 0	20 7 5 6 4 0 7 4	215 47 58 35 38 — 16 21	257 64 55 58  25 55	1   1 	2 0 0 1 0 0 0	13 2 1 10 5 1 0	125 4 1 99 19 —	125 5 2 103 5 5	37 6 24 5 2	43 7 10 13 3 0 2	107 19 15 60 35 12 46 6	1,670 290 246 467 441 127 19 80	1,761 287 259 392 538 140 22 123
S. Atlantic Delaware District of Columbia Florida Georgia Maryland <sup>†</sup> North Carolina South Carolina <sup>†</sup> Virginia <sup>†</sup> West Virginia	28 — — 13 4 8 3	36 0 0 3 8 8 3 10	118 0 99 14 22 10 27 13	1,433 — 121 99 254 353 112 420 74	1,569  201 199 268 357 162 342 40	11 — — 2 8 1 —	18 0 0 1 15 1 2 0	94 3 1 3 4 87 6 13 2	763 17 14 17 40 578 22 71 3	596 5 12 79 55 329 47 62 5	301 1 117 27 15 130 10 1 	205 2 1 95 27 12 32 18 20 3	514 9 7 230 87 30 114 73 62 19	6,676 91 39 2,909 946 458 981 535 639 78	7,544 82 39 2,792 1,218 560 1,005 979 762 107
<b>E.S. Central</b> Alabama <sup>†</sup> Kentucky Mississippi Tennessee <sup>†</sup>	3 2 1 	4 1 0 2	16 7 5 2 9	175 57 18 4 96	107 58 8 4 37	1 1 —	5 1 0 3	21 6 1 2 17	192 47 1 2 142	216 59 2 11 144	55 34 7 — 14	49 13 8 12 14	137 65 21 62 31	1,685 552 286 363 484	1,951 462 329 586 574
<b>W.S. Central</b> Arkansas Louisiana Oklahoma Texas†	 	14 0 1 13	34 4 0 9 29	546 24 — 51 471	662 26 — 61 575	8 8 	1 0 0 0	161 32 0 154 3	88 42  35 11	75 44 6 7 18	39 18  17 4	80 14 6 7 46	922 43 38 48 839	2,270 544 180 304 1,242	2,681 489 616 275 1,301
Mountain Arizona Colorado Idaho <sup>†</sup> Montana Nevada <sup>†</sup> New Mexico <sup>†</sup> Utah Wyoming	3 3     	3 2 0 0 0 0 0 0 0	16 11 12 2 1 2 1 2	123 95 — 11 7 6 4	200 126 16 12 12 12 8 12 12	1    1	0 0 0 0 0 0 0 0	6 6 1 3 2 0 2 2 1	33 6 2 8 2 5 6 4	25 12 4 3 1 - 3 -	36 15 10 5 3 — 3 — 3	50 15 12 3 2 4 5 1	84 67 30 9 16 17 12 15 5	1,634 531 414 124 97 71 155 207 35	1,639 440 421 110 64 126 188 227 63
<b>Pacific</b> Alaska California Hawaii Oregon <sup>†</sup> Washington	7 4 3 U	4 0 3 0 0 0	10 4 10 0 4 0	143 14 115 — 14 U	154 1 149  4 U	  N	0 0 0 0 0	1 0 1 0 1 0	7 	2   N	110 2 106 2 	109 1 86 4 7 8	426 7 292 15 16 124	3,745 54 2,963 145 280 303	3,620 39 2,715 211 298 357
American Samoa C.N.M.I. Guam Puerto Rico U.S. Virgin Islands	U U 2	0 0 1 0	0 0 6 0	U U 65	U U 51		0 0 0 0	0 0 0 0	U U N	U U N	U U 6	0 0 1 5 0	2 0 3 35 0	U U 134	4 U 30 442

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005

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

\* Incidence data for reporting years 2005 and 2006 are provisional. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

(	Shiga	a toxin-pi	roducing	E. coli (S1	EC)†		Streptococcal disease, invasive, group A								
	Current	Prev 52 w	Previous 52 weeks Cum		Cum	Current	Prev 52 w	ious eeks	Cum	Cum	Current	Prev 52 w	ious eeks	Cum	Cum
Reporting area	week	Med	Max	2006	2005	week	Med	Max	2006	2005	week	Med	Max	2006	2005
United States	81	55	297	1,769	1,926	163	227	1,013	7,039	9,604	38	87	283	3,611	3,390
<b>New England</b> Connecticut Maine <sup>§</sup>	2	3 0 0	50 49 8	190 49 23	149 37 27	2	4 0 0	51 45 2	194 45 3	226 38 12	2 U	5 0 0	15 3 2	170 U 15	212 80 12
Massachusetts New Hampshire	1	2 0	9 3	82 19	56 13	2	3 0	11 4	128 7	140 8	1	3 0	6 9	101 39	89 14
Rhode Island Vermont <sup>§</sup>	1	0 0	2 2	5 2	3 13	_	0 0	6 1	8 3	12 16	1	0 0	3 2	5 10	8 9
<b>Mid. Atlantic</b> New Jersey	15	5 0	107 7	132 3	223 47	4	15 4	72 24	510 189	898 241	6	15 3	43 8	671 122	695 146
New York (Upstate)	—	0	103	12	79	2	5	60	168	193	1	4	32	239	197
Pennsylvania	_	0	4 5	5	87	2	4	48	96 57	156	5	6	13	237	215
E.N. Central Illinois	31	11 1	38 7	391 58	394 108	5	20 7	41 25	625 217	789 256	1	14 4	43 11	648 144	720 236
Indiana		1	6	48	40	1	2	18	88	107	—	2	11	90	82
Ohio	4 19	3	6 14	59 112	65 87	4	3	10	109	76	1	3	12	174	156
Wisconsin	8	2	28	114	94	_	3	9	100	176	_	1	4	42	75
<b>W.N. Central</b> Iowa	9	8 2	35 8	255 87	305 66	16	34 2	77 10	1,014 63	1,031 62	1 N	5 0	57 0	250 N	212 N
Kansas Minnesota		03	3 19	144	31 76	2	4	20	90 86	138	_	1	5 52	46 121	33
Missouri	_	2	13	110	71		12	69	474	669		1	5	47	54
Nebraska§ North Dakota	3	1	5 15	36	36	2	2	14 18	80 61	69	1	0	4	22	18
South Dakota	_	0	5	19	22	_	4	17	160	30	_	0	3	6	19
S. Atlantic	9	7	39	278	263	43	53	122	1,756	1,388	17	22	43	857	672
District of Columbia	_	0	2 1		<u> </u>	_	0	2	10	8	_	0	2	8 9	5
Florida	2	2	29	62	66	33	26	66	863	676	8	6	16	212	171
Georgia Marvland§	2 5	1	6 5	59 46	33 50	/ 3	16 2	38 10	571 86	338 57	6 2	4	11 12	167 160	143 130
North Carolina	3	1	10	68	38	_	1	22	109	133	_	1	26	126	96
South Carolina <sup>®</sup>	_	0	2	6	61	_	1	9	64 44	72 94	_	1	6 11	50 102	29 69
West Virginia	—	Ő	2	—	2	—	0	2	2	_	1	ō	6	23	22
E.S. Central Alabama <sup>§</sup>	6	2 0	14 5	131 19	114 23	8 4	13 3	31 14	410 126	941 182	1 N	3 0	11 0	155 N	134 N
Kentucky	4	1	8	49	42	2	5	12	160	223	_	0	5	33	26
Mississippi Tennessee <sup>§</sup>	_	0 0	1 4	24	5 44	2	1 3	6 11	37 87	66 470	1	0 3	0 9	122	108
W.S. Central	1	1	52	21	67	12	27	596	660	2,450	6	7	58	284	234
Arkansas Louisiana	_	0	2	10	9 18	3	1	7	66 32	45	_	0	5	23	14
Oklahoma	1	0	8	11	17	9	3	286	87	486	2	2	14	77	86
Texas <sup>§</sup>		1	44	51	23		23	308	475	1,809	4	4	43	182	129
Arizona	э З	5 1	8	63	201	29 21	12	47 29	392	266	4 1	6	78 57	500 267	438
Colorado	1	1	6	48	52	7	3	18	102	80	3	3	8	108	139
Montana	3	0	1	44	26 13	_	0	4	14	5	_	0	2		
Nevada§	_	0	3	9	15	_	1	8	30	41	_	0	6	_	2
New Mexico <sup>s</sup> Utah	12	0	2 10	4 78	19 49	1	2	10 4	79 45	79 32	_	1	7	58 57	66 45
Wyoming	_	0	3	13	7	_	Ö	1	3	2	_	Ó	1	3	3
Pacific Alaska	3	7	55 1	207	210	44	39	148	1,200	1,366	_	2	9	76	73
California	3	4	18	134	86	41	32	104	984	1,152	_	0	0	_	_
Hawaii		0	2	11	9		1	4	30	26		2	9	76	73
Washington		2	47 32	64 62	59 47	- J	2	43	97 81	98 79	N	0	0	N	N N
American Samoa	U	0	0	U	U	U	0	2	U	5	U	0	0	U	U
C.N.M.I. Guam	U	0	0	<u> </u>	U	U	0	0	<u> </u>	U 12	<u> </u>	0	0	U	U
Puerto Rico	_	õ	Ő	_	2	_	ŏ	2	10	4	N	õ	ŏ	Ν	N
U.S. Virgin Islands	_	0	0	_	_	_	0	0	_	_	_	0	0		

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: No

Max: Maximum.

Med: Median.

U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. \* Incidence data for reporting years 2005 and 2006 are provisional. \* Includes *E. coli* O157:H7; Shiga toxin positive, serogroup non-0157; and Shiga toxin positive, not serogrouped. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

	Strepto	<i>coccus pr</i> Drua r	eumonia esistant.	e, invasive all ages	disease	Svol	seconda		Varice	ella (chic	kenpox)				
		Prev	Previous				Previo	ous	oooonaa	.,		Prev	vious	itempex)	
Reporting area	Current week	52 we	eeks Max	Cum 2006	Cum 2005	Current week	52 we Med	eks Max	Cum 2006	Cum 2005	Current week	52 w Med	veeks Max	Cum 2006	Cum 2005
United States	23	51	334	1,807	1,887	86	170	334	5,930	5,764	160	801	3,204	29,206	19,411
New England	1	1	24	28	167	3	4	17	147	141	2	44	144	1,093	3,743
Connecticut	U	0	7	U	69	1	0	11	30	30	U	õ	58	U	1,074
Maine⁺ Massachusetts	_	0	2	8	N 75	1	0	2	/ 89	1 88	_	5	20 54	151 94	1 702
New Hampshire	_	Õ	Ő	_	_	1	ō	2	12	11	_	6	47	347	209
Rhode Island	1	0	11	10	14	_	0	6	7	10	_	0	0		
vermont	_	0	2	10	9	_	0	1	2		2	12	50	501	537
Mid. Atlantic	1 N	3	15	118 N	164 N	/	21	35	732	723 97	21	105	183	3,353	3,277
New York (Upstate)	1	1	10	43	64	2	2	14	98	53	_	Ő	ŏ	_	_
New York City	U	0	0	U	U	_	10	23	340	444		0	0		0.077
Pennsylvania	_	2	9	75	100	2	5	9	179	129	21	105	183	3,353	3,277
E.N. Central	9	11	41 3	429	475	8	1/	38	620 292	623 349	34	237	586	10,715	4,066
Indiana	1	2	21	115	147	1	1	4	59	46	_	ò	475	475	251
Michigan	_	0	4	17	30	4	2	19	85	56	6	102	174	3,087	2,432
Onio Wisconsin	8 N	6	32	282 N	275 N	1	4	8 4	144 40	149	28	82 12	420 52	6,526 589	992 320
W N Central	_	1	191	33	31	3	5	10	180	178	10	22	84	1 043	300
lowa	N	0	0	N	N	_	ŏ	3	11	6	N	0	0	1,040 N	N
Kansas	N	0	0	Ν	N	—	0	2	16	15	2	0	8	17	—
Minnesota Missouri	_	0	191	32	25	2	1	3	21 121	52 100	_	17	0 82	945	208
Nebraska†	_	0	0		2		Ő	1	3	4	_	0	0		200
North Dakota	—	0	1	-	1	-	0	1		-	8	0	25	44	13
		0	50	1	3	1	0	3	0	1	_	1	12	0.400	19
S. Atlantic Delaware	10	26	53	967	780 1	23	42	186	1,385	1,369	6	90	860	3,102	1,463
District of Columbia	_	Õ	3	21	13	_	2	9	79	69	_	Ó	5	25	24
Florida	6	13	36	531	422	13	15	29	515	476	_	0	0	_	—
Georgia Marvland <sup>†</sup>	4	0	29 0	322	249	2	5	147	205 199	273	_	0	0	_	_
North Carolina	Ν	0	0	Ν	Ν	7	5	17	211	188		Ō	0		
South Carolina <sup>†</sup>		0	0		N		1	7	47	43	2	16	52	759	384
West Virginia		1	14	93	95	_	0	1	3	2	4	26	70	1,055	719
E.S. Central	2	3	13	143	131	10	13	24	477	315	1	0	70	89	36
Alabama <sup>†</sup>	N	Ō	0	N	N	7	4	18	211	105	1	Ō	70	88	36
Kentucky	1	0	5	28	24		1	8	48	31	N	0	0	N	N
Tennessee <sup>†</sup>	1	3	13	115	106	3	5	13	176	142	N	0	0	N	N
W.S. Central	_	0	4	14	99	26	26	44	1 047	859	67	181	1 757	7 922	4 667
Arkansas	_	Ō	3	11	12	4	1	6	52	32	2	7	110	587	
Louisiana		0	4	3	87 N	3	4	17	154	192	_	0	8	43	108
Texas <sup>†</sup>	N	0	0	N	N	15	21	39	790	607	65	165	1,647	7,292	4,559
Mountain	_	2	27	75	40	2	7	24	286	298	19	52	138	1.889	1.859
Arizona	Ν	0	0	N	N	2	4	16	131	107	_	0	0		
Colorado	N	0	0	N	N		1	3	30	33	16	33	76	996	1,263
Montana		0	1			_	0	1	2	20	_	0	0	_	_
Nevada <sup>†</sup>	_	0	27	4	2	_	1	12	71	87	_	0	2	4	
New Mexico <sup>†</sup>	_	0	1	1	17	_	1	5	45	39	- 3	3	34	297 560	164
Wyoming	_	1	3	37	21	_	ŏ	0				0	8	32	49
Pacific	_	0	0	_	_	4	31	49	1,056	1,258	_	0	0	_	_
Alaska		0	0				0	4	6	6	_	0	0	_	_
California Hawaii	N	0	0	N	N	2	28	39	893 12	1,127 g	N	0	0	N	N
Oregon <sup>†</sup>	N	0	0	N	N	_	0	6	13	21	N	0	0	N	N
Washington	Ν	0	0	Ν	Ν	2	2	11	132	96	Ν	0	0	Ν	N
American Samoa	—	0	0	—	—	U	0	0	U	U	U	0	0	U	U
C.N.M.I. Guam	—	0	0	—	_	U	0	0	U	U	U	0	0	U	U
Puerto Rico	N	0	0	N	N	_	3	10	86	152	5	3 7	47	236	515
U.S. Virgin Islands	_	Ō	Ō	_	_	_	Ō	0			_	0	0		_

Med: Median.

Max: Maximum.

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

Cum: Cumulative year-to-date counts.

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-\* Incidence data for reporting years 2005 and 2006 are provisional. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

<u>(oour moon)</u>	West Nile virus disease <sup>†</sup>											
			Neuroinvas	ive								
		Prev	vious				_	Prev	vious	-		
Poporting area	Current	<u>52 w</u>	veeks	Cum	Cum		Current	<u>52 w</u>	eeks Mox	Cum	Cum	
	week	Ivieu	115	2000	2005		week	wied	NIAX 000	2000	1.046	
New Frieland	—	1	115	440	971		_	0	229	765	1,340	
Connecticut	_	0	3	4	2		_	0	2	2	_	
Maine <sup>§</sup>	_	Õ	ō	_	_		_	Õ	0 0	_	_	
Massachusetts	—	0	3	_	4		_	0	1	_	_	
Rhode Island	_	0	0	_	1		_	0	0	_	_	
Vermont§	_	Õ	Õ	_	_		_	Õ	Õ	_	_	
Mid. Atlantic	_	0	8	5	31		_	0	3	2	17	
New Jersey	—	0	1	—	1		—	0	2	1	_	
New York (Upstate) New York City	_	0	4	1	11		_	0	1	_	4	
Pennsylvania	_	õ	3	4	13		_	ŏ	1	1	10	
E.N. Central	_	0	28	39	199		_	0	15	9	102	
Illinois	_	0	12	31	108		_	0	9	7	81	
Indiana Michigan	_	0	2	1	7 30		_	0	1	_	1	
Ohio	_	0	5	2	40		_	0	2	1	11	
Wisconsin	—	0	3	2	5		—	0	2	1	3	
W.N. Central	—	0	22	92	125		_	0	48	192	400	
lowa	—	0	3	5	7		—	0	4	4	13	
Minnesota	_	0	5	17	16		_	0	27	25	18	
Missouri	_	0	5	12	10		_	0	3	3	11	
Nebraska <sup>§</sup> North Dakota	_	0	6 4	14	40		_	0	13	41 67	110	
South Dakota	_	0	7	22	33		_	0	17	46	180	
S. Atlantic	_	0	6	5	22		_	0	3	_	16	
Delaware	—	Õ	Õ	_	1		_	Õ	Õ	_	_	
District of Columbia	—	0	1		1		_	0	1	—		
Georgia	_	0	2	2	3		_	0	3	_	2	
Maryland <sup>§</sup>	_	0	1	_	4		_	0	0	_	1	
North Carolina	—	0	0	_	2		_	0	1	_	2	
Virginia <sup>§</sup>	_	0	Ó	_	_		_	0	1	_	_	
West Virginia	—	0	1	1	—		Ν	0	0	Ν	Ν	
E.S. Central	_	0	10	21	45		_	0	5	11	24	
Alabama <sup>s</sup>	_	0	1	_	4		_	0	2	_	2	
Mississippi	_	ŏ	9	21	26		_	ŏ	5	11	21	
Tennessee§	—	0	3	—	12		—	0	1	—	1	
W.S. Central	_	0	32	133	190		_	0	14	33	121	
Arkansas	—	0	3	7	8		_	0	2	2	12	
Oklahoma	_	0	6	12	3		_	0	3	1	43	
Texas§	—	0	19	85	90		_	0	5	16	60	
Mountain	_	0	30	114	87		_	0	142	423	183	
Arizona	_	0	8	7 18	19 15		_	0	8 18	4 57	31 70	
Idaho§	_	0	7	26	3		_	0	100	260	9	
Montana	—	0	2	3	8		—	0	3	7	16	
Nevada <sup>s</sup> New Mexico <sup>§</sup>	_	0	9	27	8 14		_	0	10	49 1	14 13	
Utah	_	õ	7	29	19		_	õ	12	33	26	
Wyoming	—	0	2	3	1		_	0	5	12	4	
Pacific	_	0	17	35	265		_	0	35	113	483	
Alaska California		0	0 17		264		_	0	0 30	<u></u>		
Hawaii	_	0	0		204		_	0	0	<del>3</del> 4	+//	
Oregon <sup>§</sup>	_	0	1	2	1		_	0	9	19	6	
Washington	—	0	0	_	_		_	0	0	_	_	
American Samoa	U	0	0	U	U		U	0	0	U	U	
Guam		0	0	<u> </u>				0	0			
Puerto Rico	—	Õ	Õ	_	_		_	õ	Õ	_	_	
U.S. Virgin Islands	_	0	0	_	_		_	0	0	_	—	

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending September 9, 2006, and September 10, 2005 (36th Week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: No

N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median.

 <sup>1</sup> Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (proposed) (ArboNET § Surveillance). § Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Max: Maximum.

#### TABLE III. Deaths in 122 U.S. cities,\* week ending September 9, 2006 (36th Week)

		All o	causes, b	y age (ye	ears)				causes, b	es, 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	479	325	101	33	14	6	31	S. Atlantic	1,057	633	263	104	28	29	56
Boston, MA	119	71	32	9	6	1	6	Atlanta, GA	136	66	40	24	3	3	4
Bridgeport, CT	26	14	5	3	3	1	3	Baltimore, MD	112	67	27	12	2	4	10
Cambridge, MA	15	12	2		1	_	2	Charlotte, NC	97	52	30	10	3	2	4
Fall River, MA	26	19	6	1	_	_	3	Jacksonville, FL	127	76	30	12	8	1	8
Hartford, CI	43	25	12	4	2		4		73	48	1/	6	1	1	4
Lowell, MA	30	21	0	3	-	_	1	Norrolk, VA	50	38	10	3	1	3	2
New Bedford MA	20	18	2	1		1	2	Savannah GA	52	28	15	2	2	2	4
New Haven CT	30	21	7	1	_	1	3	St Petersburg El	/1	20	6	2		3	1
Providence BI	49	41	6	2	_		2	Tampa Fl	186	124	38	14	5	5	11
Somerville, MA	4	3	1	_	_	_	_	Washington, D.C.	117	63	35	16	1	2	3
Springfield, MA	29	16	7	3	1	2	1	Wilmington, DE	9	8	1	_	_	_	1
Waterbury, CT	34	25	5	4	_	_	1		500	0.05	400	40		10	
Worcester, MA	41	29	10	2	_	_	2	E.S. Central	589	385	138	43	11	12	39
Mid Atlantia	1 000	1 202	444	140	40	20	06	Birmingnam, AL	99 51	71	19	3	I	5	5
	1,990	1,323	444	140	42	39	30	Knowillo TN	76	54	20	5		2	5
Allentown PA	19	14	5	_	_	_	2		20	27	10	2	_	_	3
Buffalo NY	72	43	19	4	3	3	2	Memphis TN	100	69	21	4	5	1	9
Camden, NJ	39	20	13	2	1	3	2	Mobile Al	70	49	14	4	2	1	3
Elizabeth, NJ	12	7	4	1		_	_	Montgomery, AL	36	22	11	3	_		2
Erie. PA	42	32	5	2	_	3	6	Nashville. TN	118	63	29	21	3	2	9
Jersey City, NJ	U	U	U	U	U	U	U	W.C. Oswinsk	1 1 0 0	070	070	00	00	0.1	0.4
New York City, NY	917	637	201	52	14	11	35	W.S. Central	1,109	679	2/8	92	29	31	34
Newark, NJ	21	8	5	6	1	1	1	Austin, IX Boton Bourgo I A	/3	45	19	5	2	2	2
Paterson, NJ	14	9	3	2	_	_	—	Corpus Christi TX	11	9	11		1		
Philadelphia, PA	442	249	114	49	18	12	18		150	20	22	10	_	4	5
Pittsburgh, PA§	23	13	9	—	—	1	1	El Paso TX	63	34	22	10	2	1	1
Reading, PA	33	24	4	3	2	—	4	Fort Worth TX	94	61	25	4	1	3	
Rochester, NY	120	91	20	4	1	4	8	Houston TX	298	182	78	27	7	4	9
Schenectady, NY	21	17	3	1	_	_	1	Little Bock, AB	52	29	13	2	3	5	2
Scranton, PA	32	27	4	1	_		1	New Orleans, LA <sup>1</sup>	U	U	Ŭ	Ū	Ū	Ū	Ū
Syracuse, NY	93	70	16	5	1	1	8	San Antonio, TX	183	122	37	16	4	4	5
Irenton, NJ	21	10	8	3	-	_	1	Shreveport, LA	30	22	7	_	_	1	2
Vonkors NV	10	10	2	~	1	_	2 1	Tulsa, OK	109	61	32	12	1	3	3
	10	15	5	2				Mountain	747	466	170	56	28	23	39
E.N. Central	1,649	1,084	367	119	43	35	94	Albuquerque NM	123	81	30	8	2	2	6
Akron, OH	36	23	11	2	_	_	1	Boise. ID	44	34	6	1	2	1	1
Canton, OH	37	26	6	3	2		3	Colorado Springs, CO	47	33	8	2	4		1
Chicago, IL	282	165	11	25	11	3	19	Denver, CO	51	28	13	4	1	5	_
	171	49	24	10	5	3	9	Las Vegas, NV	247	148	70	19	7	3	18
	133	01	30	7		5	6	Ogden, UT	U	U	U	U	U	U	U
Davton OH	98	70	18	9	1	_	4	Phoenix, AZ	96	52	17	11	5	7	5
Detroit, MI	149	77	44	13	11	4	9	Pueblo, CO	29	20	7	2	_		2
Evansville, IN	41	33	6	_	2	_	3	Salt Like City, UI	110	70	19	9		5	6
Fort Wayne, IN	49	35	10	1	_	3	_	Tucson, AZ	U	U	U	U	U	U	U
Gary, IN	12	11	—	—	—	1	—	Pacific	1,420	962	305	90	36	26	117
Grand Rapids, MI	36	27	6	2	_	1	5	Berkeley, CA	14	10	2	1	_	1	2
Indianapolis, IN	174	106	38	19	4	7	6	Fresno, CA	145	90	30	11	11	3	7
Lansing, MI	33	27	5	1	_	—	—	Glendale, CA	13	8	3	2	_	_	2
Milwaukee, WI	80	53	21	5		1	9	Honolulu, HI	52	31	15	5	_	1	—
Peoria, IL	40	29	9		2	_	4	Long Beach, CA	50	22	18	5	2	3	5
Rockford, IL	52	36	10	6	_	_	_	Los Angeles, CA	245	170	51	10	9	5	34
South Bend, IN	40	25	10	2	_	3	2	Pasadena, CA	28	22	3	2	1	_	2
Toledo, OH	/2	52	11	/	1	1	6	Portland, OR	100	64	26	6	1	3	4
Youngstown, OH	40	31	/	_	1	I	2	Sacramento, CA	186	126	35	16	4	5	15
W.N. Central	605	412	119	42	12	17	36	San Diego, CA	67	03	20 10	0	3	1	10
Des Moines, IA	107	81	19	2	1	2	4	San Jose CA	154	41	10	5	2	1	10
Duluth, MN	28	18	8	1	_	1	2	Santa Cruz CA	20	120	20	5	_	_	13
Kansas City, KS	26	14	6	5	1	—	1	Seattle WA	22 Q1	58	10		2	2	∠ ⊿
Kansas City, MO	78	49	16	8	2	3	5	Spokane WA	52	42	0	1			+ 2
Lincoln, NE	50	38	11	_		1	7	Tacoma, WA	79	53	19	6	1		4
Minneapolis, MN	48	26	13	5	1	3	3		10	00					
Omaha, NE	76	60	11	3	1	1	4	Total	9,645**	6,269	2,185	719	243	218	542
St. Louis, MO	99	58	19	12	3	6	6								
St. Paul, MN	41	31	5	3	2	_	3								
wichita, KS	52	37	11	3	1		1								

U: Unavailable.

J: Unavailable. —:No reported cases. \* Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of ≥100,000. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included. <sup>†</sup> Pneumonia and influenza.

<sup>1</sup>Because of changes in reporting methods in this Pennsylvania city, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks. <sup>1</sup>Because of Hurricane Katrina, weekly reporting of deaths has been temporarily disrupted. \*\* Total includes unknown ages.



# FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals September 9, 2006, with historical data

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

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