

Weekly

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# Vulvar Vaccinia Infection After Sexual Contact with a Military Smallpox Vaccinee — Alaska, 2006

On October 10, 2006, an otherwise healthy woman visited a public health clinic in Alaska after vaginal tears that she had first experienced 10 days before became increasingly painful. The patient reported having a new male sex partner during September 22-October 1, 2006. A viral swab specimen from a labial lesion of the woman was submitted to the Alaska State Virology Laboratory (ASVL) for viral culture. The viral isolate could not be identified initially and subsequently was sent to CDC on January 9, 2007, where the isolate was identified as a vaccine-strain vaccinia virus. After vaccinia was identified, investigators interviewed the woman more closely and learned that her new sex partner was a male U.S. military service member stationed at a local military base. Further investigation determined that the service member had been vaccinated for smallpox 3 days before beginning his relationship with the woman. This report describes the clinical evaluation of the woman and laboratory testing performed to identify the isolate. Health-care providers should be aware of the possibility of vaccinia infection in persons with clinically compatible genital lesions who have had recent contact with smallpox vaccinees.

# **Clinical Description**

At the public health clinic on October 10, the woman told health-care providers that her partner consistently wore condoms during sex; however, a condom broke during vaginal intercourse on October 1. The two had no further contact after October 1. The patient told health-care providers she did not recall seeing penile ulcers or other unusual skin lesions on her partner. She had no history of genital ulcers or sexually transmitted infections and said that her vaginal tears did not result from sexual violence or abuse. She reported testing negative for human immunodeficiency virus approximately 3 months earlier. She had no fever, itching, or dysuria.

Clinical examination revealed two shallow ulcerations, one measuring 5 mm on the upper left labia minora and the other measuring 3 mm on the lower right labia minora, mild bilateral labial erythema and induration, and vaginal discharge. No inguinal lymphadenopathy was noted, and examination findings were normal for the cervix, uterus, adnexa, and anus. Tests for gonorrhea and Chlamydia trachomatis infection were negative; serologic tests for syphilis and hepatitis B virus were not performed. A viral swab specimen from the left labial lesion was submitted to ASVL for culture for possible herpes virus infection. A primary diagnosis of sexually transmitted infection was made but was not further characterized, and no specific treatment was administered pending viral culture results. A secondary diagnosis of vulvovaginal candidiasis was made, and the patient was treated with an over-the-counter medication.

After 2 days of increased redness, swelling, and burning of the labia minora, the woman returned to the clinic on October 12. The evaluating health-care provider diagnosed cellulitis, discontinued the over-the-counter preparation, and prescribed a 7-day course of oral cephalexin (500 mg by mouth, twice a day). No specimens were collected during the second clinic visit. The patient's labial redness, induration, and pain resolved, and the ulcers healed completely by October 19.

## INSIDE

- 420 Prevalence of Actions to Control High Blood Pressure 20 States, 2005
- 423 Projected State-Specific Increases in Self-Reported Doctor-Diagnosed Arthritis and Arthritis-Attributable Activity Limitations — United States, 2005–2030
- 426 Notices to Readers

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## **Laboratory Findings**

At ASVL, viral cytopathic effect was observed in viral culture cells from the specimen collected from the woman on October 10; however, immunofluorescent antibody staining was negative for herpes simplex virus (HSV). During late October to November, the viral isolate was successfully passaged into two additional viral culture cell lines, but subsequent staining of the viral isolate also was negative for HSV and cytomegalovirus. The viral isolate was submitted on November 22 to a second reference laboratory, where it remained unidentified 1 month later.

On January 9, 2007, ASVL sent the unidentified viral isolate to CDC, where the isolate was evaluated using two pathogendiscovery strategies: a pan-herpes virus polymerase chain reaction (PCR) test and a deoxyribonuclease sequence-independent, single-primer amplification (DNase-SISPA) sequencing method,\* in which a specimen is treated with DNase, followed by nucleic acid extraction, random amplification, restriction enzyme digestion, and SISPA of the restriction fragments. Although the pan-herpes virus PCR assay was negative, the DNase-SISPA method produced unique and prominent DNA fragments in the unknown isolate but not in the control cells. The PCR product containing these fragments was cloned and sequenced. Eight of nine sequenced clones of the bands matched vaccinia virus sequences. Additional PCR testing by the CDC Poxvirus Laboratory identified the isolate as being consistent with a vaccine-strain vaccinia virus. On January 30, 2007, CDC notified ASVL of the results, which were immediately relayed to the Alaska Section of Epidemiology.

## **Epidemiologic Investigation**

After receiving notification of the laboratory result, Alaska state health officials interviewed the patient and learned that she lived alone and had never been vaccinated against smallpox. However, the patient told investigators that her recent sex partner was a U.S. service member stationed at a local military base and that he had been her only sex partner during the period from 1 month before her infection until the time her ulcers were completely healed (September 1– October 19). The patient also told investigators that her sexual contact with her recent partner had included manual stimulation in addition to vaginal intercourse. The patient did not remember seeing bandages on her partner and did not know whether he had received any recent vaccinations.

The service member was deployed overseas in late October and was not available for interview. According to the preventive medicine officer at the military base where the service

<sup>\*</sup> Reyes GR, Kim JP. Sequence-independent, single-primer amplification (SISPA) of complex DNA populations. Mol Cell Probes 1991;5:473–81.

member was stationed, the service member had reported no underlying skin disorders or other contraindications to vaccination. He had received smallpox vaccination on September 19, 2006, after first receiving instruction on care of the vaccination site and proper hand hygiene. Investigators identified no additional transmission of the virus from the vaccinee and no transmission from the woman to other persons, including health-care providers who had examined her.

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Editorial Note: This case of vulvar vaccinia was transmitted by a sex partner who had recently received smallpox vaccination. Unintentional transfer of vaccinia virus can occur from a vaccination site to a second site on the vaccinee (inadvertent autoinoculation) or to a close contact (contact transmission) (1). The most frequently reported sites of vaccinia infections caused by unintentional transfer are the face, nose, mouth, lips, genitalia, anus, and eye (1). To prevent transfers, healthcare providers should educate vaccinees regarding proper hand washing after bandage changes or other contact with the vaccination site (2). This general recommendation remains the most effective way to prevent genital vaccinia infections. Persons with any new genital lesion, including lesions suspected to have been caused by vaccinia infection, should avoid sexual contact and consult a health-care provider.

Vulvar vaccinia infections often are characterized by painful labial ulcers and/or vesicles, vulvar edema and pruritus, vaginal discharge, and occasionally by vaginitis and tender bilateral inguinal lymphadenopathy (3-9). Most reports of vulvar vaccinia were published before cessation of widespread smallpox vaccination programs (7); however, in addition to the case described in this report, laboratory-confirmed cases of vulvar vaccinia after sexual contact with vaccinated military personnel have been reported in New York and Texas since the U.S. military resumed smallpox vaccination in 2002 (8,9). Similar to the case described in this report, herpes virus infection was initially suspected in the New York case, and information regarding contact with a recent smallpox vaccinee was not disclosed until after laboratory evidence of vaccinia virus had been detected.

Laboratory confirmation of orthopoxvirus infections, including vaccinia, requires test methods that are not commercially available. However, tests for orthopoxvirus infections are available at many state and local health departments via the Laboratory Response Network, and confirmatory (i.e., species-specific) testing is available at CDC. In the case described in this report, initial testing of clinical specimens for presumed herpes virus infection at ASVL was inconclusive. In the absence of critical information (i.e., patient contact with a recent smallpox vaccinee) to guide testing of the isolate, ASVL forwarded the specimen to CDC. Identification of vaccinia as the etiologic agent illustrates the power of using multiple new tools for identifying pathogens in patients with a disease of unknown etiology.

Since March 8, 2007, CDC and the U.S. Department of Defense have received reports of four instances of nongenital contact vaccinia associated with recently vaccinated service members, including two cases from Indiana and one case each from Alabama and New Mexico. Health-care providers and public health professionals should ask about any contact with recent smallpox vaccinees when evaluating patients with vesicular lesions compatible with vaccinia. Early identification of such contact can guide diagnostic tests, allow for timely contact tracing and clinical intervention, and facilitate prompt patient counseling to prevent further transmission of the virus.

#### **Acknowledgments**

The findings in this report are based, in part, on contributions by the examining health-care provider and the preventive medicine officer at the military base.

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# Prevalence of Actions to Control High Blood Pressure — 20 States, 2005

High blood pressure (HBP) increases the risk for heart disease and stroke, the first and third leading causes of death in the United States, respectively (1). The association between HBP and cardiovascular disease is independent of other risk factors (2). Nearly 30% of the U.S. adult population had HBP\* during 2001-2004, according to the National Health and Nutrition Examination Survey (NHANES), and the prevalence has increased compared with 1988-1994 NHANES data (3,4). Although HBP is easily detectable and can be controlled with treatment, the condition is not controlled (i.e., systolic blood pressure <140 mm Hg and diastolic pressure <90 mm Hg) in approximately 70% of persons (3). A Healthy People 2010 objective (objective 12-11) is to increase the proportion of adults with HBP who are taking action to help control their blood pressure (5). To assess the prevalence of selfreported HBP and actions to control HBP, CDC analyzed 2005 data from an optional module in the Behavioral Risk Factor Surveillance System (BRFSS) in the 20 states that participated. The results indicated that although nearly all adults with HBP in the 20 states were taking some action to control their blood pressure, some persons can take additional actions to control their HBP, if indicated, including dietary changes, exercise, and taking prescribed medication.

BRFSS is a state-based, random-digit-dialed telephone survey of the U.S. civilian, noninstitutionalized population aged  $\geq$ 18 years. The survey is administered in all 50 states, the District of Columbia (DC), and three U.S. territories (Guam, Puerto Rico, and the U.S. Virgin Islands). During 2005, a total of 24,447 of 101,574 respondents in 20 states responded "yes" to the following question: "Were you told on two or more different visits to a doctor or other health professional that you had high blood pressure?" Women who reported HBP only during pregnancy were not categorized as having HBP. Respondents also were asked the following five questions about actions they were currently taking to control their HBP: "Are you changing your eating habits to help lower or control your high blood pressure?" "Are you cutting down on salt to help lower or control your high blood pressure?" "Are you reducing alcohol use to help lower or control your high blood pressure?" "Are you exercising to help lower or control your high blood pressure?" "Are you currently taking medicine for your high blood pressure?" The median response rate for the 20 states was 51.0% (range: 34.6%-66.7%). Data were weighted to 2005 state population estimates. Prevalence estimates and 95% confidence intervals were calculated.

The age-adjusted prevalence of self-reported HBP was 19.4% (Table 1) for the 20 states combined. Self-reported HBP increased by age group, and the age-adjusted prevalence was highest among non-Hispanic blacks (27.2%). Among the 20 states, self-reported HBP tended to be highest in southern states, with Mississippi (25.5%), West Virginia (23.5%), Alabama (23.2%), Louisiana (22.1%), and Arkansas (21.9%) having the highest age-adjusted prevalence.

TABLE 1. Number and percentage of respondents told on two
or more visits to a health professional that they have high
blood pressure (HBP), by selected characteristics - Behav-
ioral Risk Factor Surveillance System, 20 states, 2005

		% of	
		respondents	
Oh anna a taoria tia	Total no. of	reporting HBP	
Characteristic	respondents	diagnosis*	95% CI
Age group (yrs)	5 000	0.4	47.04
18-24	5,023	2.4	1.7-3.1
25-44	31,723	8.3	7.8-8.7
40-04	39,003	21.1	27.0-28.4
C0≤	25,225	44.2	43.2–45.1
Sex	00 177	10 F	10.0.00.1
Wemen	38,177	19.5	19.0-20.1
women Deve (Etherielter	63,397	19.2	18.7-19.6
Race/Ethnicity	00 505	10.0	10.0.10.0
White, non-Hispanic	80,535	18.0	18.3-19.0
Black, non-Hispanic	8,861	27.2	26.0-28.3
Hispanic <sup>3</sup>	6,432	18.0	10.5-19.0
Asian Nativo Howaiian/	2,207	14.7	12.3-17.1
	406	10.7	70 175
	490	12.7	7.9-17.5
American mulan/	1 209	25.2	20 / 20 1
Alaska Nalive	1,290	25.2	20.4-30.1
State	004	10.5	12.0-13.3
Alabama	2 005	00.0	010 017
Alabama	3,095	23.2	21.0-24.7
Arizona	4,505	21.0	20.8-23.1
Connoctiout	5,140	21.9	20.0-23.1
Elorida	7 953	10.0	17.0-17.7
Georgia	5 897	21.2	20.0-22.4
Hawaii	3 127	15.7	14 1-17 4
Kansas	4 241	18.3	17 1–19 4
Kentucky	6,391	20.9	19 7-22 1
Louisiana	2,869	22.1	20.5-23.6
Maryland	4,234	20.0	18.7-21.3
Minnesota	2.810	17.0	15.7–18.3
Mississippi	4.294	25.5	24.2-26.9
Montana	4.846	16.3	15.1–17.4
Nebraska	4.037	19.1	17.8-20.5
New Jersev	13.039	17.9	17.1–18.6
New York	7,508	19.4	18.4–20.4
North Dakota	3,899	17.2	16.1–18.3
Utah	5,056	16.0	15.0-17.1
West Virginia	3,503	23.5	22.1–24.9
Total	101.574	19.4	19.1-19.8

\* Weighted percentages, except for age groups, are age standardized to \_ the 2000 U.S. standard population.

Confidence interval.

§ Might be of any race.

<sup>\*</sup>HBP in NHANES was defined as systolic blood pressure of ≥140 mm Hg, diastolic blood pressure of ≥90 mm Hg, or taking antihypertensive medication.

Approximately 98.1% of adults with self-reported HBP reported taking at least one action to lower or control their blood pressure, and a majority of respondents reported taking each of the five actions: 70.9% changed their eating habits, 79.5% decreased use of salt or did not use salt, 79.2%

reduced consumption of alcohol or did not drink alcohol, 68.6% exercised, and 73.4% took antihypertensive medication (Table 2). Women were more likely than men to report changing eating habits and reducing consumption of alcohol or not drinking alcohol. Reducing use of salt or not using salt

TABLE 2. Number and percentage of respondents taking selected actions\* to control high blood pressure (HBP) among adults told on two or more visits to a health professional that they have HBP, by selected characteristics — Behavioral Risk Factor Surveillance System, 20 states, 2005

					Act	ion taker	n to control H	BP			
	Total no. of	Cł eati	nanging ng habits	Redu or no	cing use of t using salt	Re use drinki	ducing of or not ng alcohol	E	ercising	Ta antihyp med	aking pertensive lication
Characteristic	respondents <sup>†</sup>	%§	95% CI <sup>¶</sup>	%	95% CI	%	95% CI	%	95% CI	%	95% CI
Age group (vrs)											
18–24	129	47.2	32.3-62.1	68.2	52.4-84.0	77.2	66.8-87.6	65.9	50.1-81.8	35.3	20.4-50.1
25–44	2,694	75.7	73.3–78.2	78.9	76.1-81.6	79.9	77.6-82.1	70.9	68.4–73.4	64.6	61.7–67.6
45–64	10,889	76.7	75.5–78.0	82.1	80.8-83.4	79.6	78.4-80.9	68.6	67.2–70.0	88.7	87.8-89.6
>65	10,735	67.1	65.7–68.5	85.0	83.8-86.1	78.6	77.3–79.8	65.2	63.8–66.6	96.2	95.6-96.8
Sex	,										
Men	9.077	66.7	63.8-69.6	77.0	73.6-80.3	75.5	73.2-77.8	68.8	65.4-72.2	71.1	67.7-74.5
Women	15.370	76.4	74.2-78.6	82.0	79.3-84.7	82.5	80.2-84.8	69.0	66.6-71.5	76.3	73.8-78.8
Race/Ethnicity	-,										
White, non-Hispanic	19.705	69.5	66.8-72.1	79.0	76.7-81.2	76.6	74.6-78.6	69.4	67.2-71.5	75.9	73.1–78.7
Black, non-Hispanic	2,769	77.5	72.7-82.3	90.0	86.5-93.5	86.9	83.2-90.5	67.5	62.2-72.7	75.2	71.2–79.2
Hispanic**	1.045	70.7	63.5-77.9	73.9	66.8-80.9	84.3	79.0-89.5	66.8	60.1-73.5	62.5	57.1-67.8
Asian	374	73.1	61.2-85.0	80.9	69.1–92.8	79.3	69.0-89.6	72.0	60.9-83.0	77.4	65.4-89.4
Native Hawaiian/	89	65.9	47.3-84.5	78.5	57.0-100.0	74.5	63.6-85.5	77.1	62.6-91.5	63.1	52.5-73.8
Pacific Islander											
American Indian/	303	63.8	53.5-74.0	76.8	69.6-83.9	79.6	71.5-87.7	76.0	66.8-85.1	61.3	49.2–73.4
Alaska Native											
Other	162	75.3	57.1–93.6	71.5	52.9-90.0	82.5	70.2–94.8	74.8	62.1-87.5	75.0	57.1-92.9
State											
Alabama	912	76.1	71.9-80.3		_	88.3	85.5-91.0	66.7	62.3-71.1	81.4	72.8-90.1
Arizona	993	70.2	62.1–78.3	73.7	69.1–78.2	77.0	68.6-85.4	73.0	64.7-81.4	68.2	59.2-77.1
Arkansas	1,407	64.4	57.7-71.0	75.8	69.4-82.1	83.0	77.2-88.9	72.1	66.1-78.0	72.3	65.8-78.8
Connecticut	1.065	76.1	71.3-80.8	82.2	77.6-86.7	70.3	64.4-76.1	74.0	69.0-79.0	69.9	65.1-74.7
Florida	2,026	73.5	66.1-80.8	83.2	79.3-87.0	81.3	77.8-84.7	74.6	71.2-77.9	73.7	65.7-81.7
Georgia	1,568	70.6	65.6–75.7		_	79.1	73.1–85.0	65.8	59.6-71.9	74.0	69.4–78.6
Hawaii	558	74.5	65.6-83.4	83.8	77.8-89.8	71.6	63.1-80.1	63.2	53.8–72.6	76.5	66.6-86.4
Kansas	1,000	68.6	61.1–76.0	75.8	67.0-84.5	83.4	76.4–90.5	79.9	76.5-83.2	76.0	67.1–84.8
Kentucky	1,771	74.4	69.1–79.8	81.4	76.3-86.5	80.3	75.6-84.9	59.9	54.7-65.1	78.3	73.4-83.2
Louisiana	739	75.9	69.9-81.9	81.4	75.9–87.0	85.0	80.2-89.7	69.7	63.6–75.8	85.8	80.4-91.2
Maryland	989	75.3	68.4-82.2	81.1	76.5-85.8	78.5	73.8-83.1	70.8	63.7–77.8	76.7	69.6-83.8
Minnesota	603	63.9	58.9–68.8	69.5	64.4–74.5	61.4	56.0-66.7	60.8	55.3-66.2	78.9	73.2-84.5
Mississippi	1,338	80.5	77.6-83.4		_	75.5	69.4-81.6	69.5	66.1-72.9	81.0	74.5-87.6
Montana	1,002	59.7	53.5-65.8	73.1	64.8-81.5	69.5	60.8-78.2	76.7	71.6-81.7	58.1	52.9-63.3
Nebraska	1,012	65.2	56.7-73.7	82.8	78.5-87.0	75.6	67.8-83.3	66.5	58.0-75.1	72.7	64.1-81.2
New Jersey	2,978	69.3	64.4–74.2	80.9	76.2-85.6	75.4	70.5-80.2	70.0	65.7–74.2	71.7	67.5–75.8
New York	1,677	66.8	60.4-73.2	77.5	70.5-84.6	79.2	75.0-83.3	65.8	60.2-71.4	66.2	60.9–71.5
North Dakota	851	65.5	57.9–73.0	76.9	71.2-82.5	74.3	66.7-81.9	75.4	69.7–81.0	74.3	68.5-80.2
Utah	915	69.1	63.0–75.3	73.7	68.4–78.9	85.1	80.0-90.2	75.5	69.9–81.1	68.9	62.8–74.9
West Virginia	1,043	68.2	60.0-76.4	75.4	67.7–83.2	84.5	77.2–91.9	57.6	49.3–65.9	70.9	67.1–74.7
Total	24,447	70.9	68.7–73.1	79.5	77.1–81.9	79.2	77.6-80.9	68.6	66.3-70.9	73.4	71.2–75.7

\* Respondents were asked the following five questions: "Are you changing your eating habits to help lower or control your high blood pressure?" "Are you cutting down on salt to help lower or control your high blood pressure?" "Are you reducing alcohol use to help lower or control your high blood pressure?" "Are you currently taking medicine for your high blood pressure?"

<sup>†</sup> The number of respondents in the salt-use column is lower because of missing values for three states.

§ Weighted percentages, except for age groups, are age standardized to the 2000 U.S. standard population.

<sup>¶</sup> Confidence interval.

\*\* Might be of any race.

<sup>††</sup> Data not comparable for this question because of different response categories.

and taking antihypertensive medicine increased with age. A higher proportion of non-Hispanic blacks (90.0%) compared with other racial/ethnic groups reported reducing use of salt or not using salt.

The proportion of respondents with self-reported HBP who took each action varied by state. The percentage of adults who reported changing eating habits ranged from 59.7% (Montana) to 80.5% (Mississippi); the percentage who reduced use of salt or did not use salt ranged from 69.5% (Minnesota) to 83.8% (Hawaii); the percentage who reduced alcohol consumption or did not drink alcohol ranged from 61.4% (Minnesota) to 88.3% (Alabama); the percentage who exercised ranged from 57.6% (West Virginia) to 79.9% (Kansas); and the percentage who took antihypertensive medication ranged from 58.1% (Montana) to 85.8% (Louisiana).

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**Editorial Note:** Controlling HBP can reduce disability and death from heart disease, stroke, and other cardiovascular diseases. Recommendations to control HBP include both lifestyle changes and antihypertensive medication (2). The findings in this report indicate that, although nearly all adults with self-reported HBP take at least some health action to control their HBP, some persons can take additional actions if indicated. For example, although nearly 70% of respondents report exercising to control their HBP, 30% do not exercise to control HBP.

The findings in this report are subject to at least four limitations. First, data were based on self-reports and therefore were subject to recall bias and social desirability bias (i.e., providing a socially acceptable answer rather than the most accurate answer). Second, the degree and effects from the actions taken to reduce HBP were not assessed; for example, although exercising to control HBP was assessed, the frequency was not. Third, the combined results for these 20 states are not generalizable to the entire United States. Finally, the median response rate for the 20 states was only 51.0%; however, the reliability and validity of BRFSS measures have been demonstrated (6,7).

The CDC State Heart Disease and Stroke Prevention Program funds health departments in 32 states and DC to support heart-disease prevention activities through education, strategies to change physical and social environments to decrease risk for heart disease, and elimination of racial/ ethnic disparities in heart-disease risk. In addition, CDC funds 15 WISEWOMAN (http://www.cdc.gov/wisewoman) projects in 14 states to provide low-income and underinsured or uninsured women aged 40–64 years with services to prevent cardiovascular disease; approximately 12,000 women have received services through WISEWOMAN in the past 4 years. WISEWOMAN projects operate on the local level in states and tribal organizations and provide preventive services, including blood-pressure screening and cholesterol testing, and lifestyle intervention programs to help women develop a healthier diet, increase physical activity, and quit using tobacco. These actions, combined with activities of clinicians and public health partners coordinated through A Public Health Action Plan to Prevent Heart Disease and Stroke (http://www.cdc.gov/ dhdsp/library/action\_plan/index.htm), should increase identification, treatment, and control of HBP and clarify the actions needed to control HBP.

A comprehensive approach to lifestyle modification that targets diet, salt intake, alcohol intake, and exercise can help to control HBP (8). The Dietary Approaches to Stop Hypertension diet, which is low in saturated and total fat and emphasizes fruits, vegetables, and low-fat dairy products, has assisted with reducing blood pressure (9). HBP control requires maintaining lifestyle changes and taking prescribed medications. Self-management can increase overall HBP control (10), and improvements in counseling from health-care providers, patient education, and clinician-patient partnerships could further encourage adults with HBP to take action (2).

#### Acknowledgment

The findings in this report are based, in part, on data provided by BRFSS state coordinators.

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Vol. 56 / No. 17

**MMWR** 

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# Projected State-Specific Increases in Self-Reported Doctor-Diagnosed Arthritis and Arthritis-Attributable Activity Limitations — United States, 2005–2030

Arthritis and other rheumatic conditions (e.g., gout, lupus, and fibromyalgia) affect approximately 46 million adults in the United States, resulting in substantial disability and costs of \$128 billion annually (1–3). Because U.S. adults are living longer and the number of persons in older age groups is growing, the number of U.S. adults living with chronic conditions such as arthritis likely will increase. The number of U.S. adults with doctor-diagnosed arthritis has been projected to reach nearly 67 million adults by the year 2030, including 25 million adults who are expected to have arthritis-attributable activity limitations (4). This report supplements those estimates by projecting the number of adults aged  $\geq 18$  years in each state who will have doctor-diagnosed arthritis and arthritis-attributable activity limitations in 2030.\* The results indicate that, among 48 states, the median projected increase in doctor-diagnosed arthritis from 2005 to 2030 will be 16%; a total of 14 states are projected to have increases of 30% to 87%. Greater use of existing evidence-based interventions and development of new interventions aimed at decreasing pain, improving function, and delaying disability associated with arthritis are needed to reduce the impact of these projected increases, particularly in those states that will be most heavily affected.

To estimate the number of adults who will have doctordiagnosed arthritis and arthritis-attributable activity limitations in 2030, CDC applied state arthritis prevalence proportion estimates from the 2005 Behavioral Risk Factor Surveillance System (BRFSS) survey to U.S. Census-projected state population data for the year 2030. BRFSS is a statebased, random-digit-dialed telephone survey of the U.S. civilian, noninstitutionalized population aged  $\geq 18$  years. BRFSS is administered in all 50 states, the District of Columbia, and three U.S. territories (Guam, Puerto Rico, and the U.S. Virgin Islands). In 2005, the median response rate (i.e., the percentage of persons who completed interviews among all eligible persons, including those who were not successfully contacted) among states was 51.1% (range: 34.6% [New Jersey] to 67.4% [Alaska]). The median cooperation rate (i.e., the percentage of persons who completed interviews among all eligible persons contacted) was 75.1% (range: 58.7% [California] to 85.3% [Minnesota]). Self-reported doctor-diagnosed arthritis was defined as a "yes" response to the question, "Have you ever been told by a doctor or other health-care professional that you have some form of arthritis, rheumatoid arthritis, gout, lupus, or fibromyalgia?" Arthritis-attributable activity limitations were defined as a "yes" response by a respondent with doctor-diagnosed arthritis to the question, "Are you now limited in any way in any of your usual activities because of your arthritis or joint symptoms?" Projected state totals for doctor-diagnosed arthritis were calculated by applying prevalence proportion estimates for six sex-specific and age-specific (18–44 years, 45–64 years, and  $\geq$ 65 years) groups from the 2005 BRFSS survey to corresponding U.S. Census-projected state populations for the year 2030 (6) and then adding the six results. The same method was used to calculate projected state totals for arthritis-attributable activity limitations. Projections were not calculated for the three U.S. territories because U.S. Census-projected territory populations for the year 2030 were not available.

From 2005 to 2030, the number of adults with doctordiagnosed arthritis is projected to increase by a median of 16%<sup>†</sup> in 48 states (range: 2% [Iowa] to 87% [Arizona]); in 14 states, the projected increase ranges from 30% to 87% (Table). The median projected increase in the absolute number of persons with doctor-diagnosed arthritis in these same states is 126,000 (range: 8,000 [South Dakota] to 2,539,000 [Florida]); the comparable median increase in those with arthritis-attributable activity limitations is 46,000 (range: 3,000 [South Dakota] to 991,000 [Florida]) (Table). Primarily because of expected population declines, two states (North Dakota and West Virginia) and the District of Columbia are projected to have decreases in the numbers of adults with doctor-diagnosed arthritis and arthritis-attributable activity limitations.

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<sup>\*</sup> This report uses the most current surveillance case definition of arthritis, which excludes adults who report only chronic joint symptoms because only a small percentage of these persons have arthritis (5).

<sup>&</sup>lt;sup>†</sup>The number of adults with arthritis-attributable activity limitations is projected (to increase similarly (within 1%).

424 MMWR	May 4, 2007
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#### TABLE. State-specific 2005 estimates and 2030 projections\* of the numbers of adults with doctor-diagnosed arthritis and arthritisattributable activity limitations — Behavioral Risk Factor Surveillance System (BRFSS) and U.S. Census

	do	No. of a octor-diag	adults with nosed arthritis	arthritis-a	No. of a attributab	dults with le activity limitations	% change in ons doctor-diagnosed arthritis <sup>†</sup>		
State/Area	2005 (1,000s)	2030 (1,000s)	Increase (decrease) (1,000s)	2005 (1,000s)	2030 (1,000s)	Increase (decrease) (1,000s)	Increase (decrease) 2030 versus 2005 (%)		
Alabama	1,124	1,238	114	468	515	47	10		
Alaska	111	143	32	44	57	13	29		
Arizona	1,131	2,115	984	407	762	355	87		
Arkansas	641	754	113	244	287	43	18		
California	5,927	7,894	1,967	2,179	2,903	724	33		
Colorado	807	1.008	201	274	342	68	25		
Connecticut	680	731	51	208	223	15	8		
Delaware	187	233	46	62	77	15	25		
District of Columbia	97	75	(22)	34	26	(8)	(23)		
Florida	3,739	6,279	2,540	1,460	2,452	992	68		
Georgia	1.694	2.289	595	676	914	238	35		
Hawaii	214	252	38	67	79	12	18		
Idaho	262	378	116	106	153	47	44		
Illinois	2.358	2.533	175	767	824	57	7		
Indiana	1.363	1.497	134	475	521	46	10		
lowa	617	628	11	205	209	4	2		
Kansas	551	600	49	184	201	17	9		
Kentucky	910	1.016	106	395	441	46	12		
Louisiana	894	975	81	372	406	34	9		
Maine	316	352	36	113	126	13	12		
Maryland	1 159	1 459	300	375	472	97	26		
Massachusetts	1 298	1 421	123	454	497	43	10		
Michigan	2,357	2 544	187	842	909	67	8		
Minnesota	928	1 224	296	331	437	106	32		
Mississinni	688	764	76	296	328	32	11		
Missouri	1 395	1 584	189	556	631	75	14		
Montana	189	220	31	71	83	12	16		
Nebraska	340	357	17	118	124	6	5		
Nevada	441	805	364	164	298	134	82		
New Hampshire	271	347	76	87	111	24	28		
New Jersev	1.621	1.861	240	531	610	79	15		
New Mexico	345	401	- 10	133	155	22	16		
New York	3 824	3 955	131	1 348	1 394	46	3		
North Carolina	1 788	2 497	709	688	960	272	40		
North Dakota	126	124	(2)	41	41	0	(2)		
Ohio	2 606	2 682	( <u>-</u> ) 76	857	882	25	3		
Oklahoma	797	889	92	347	387	40	12		
Oregon	743	1.003	260	308	416	108	35		
Pennsylvania	3 038	3 177	139	987	1 032	45	5		
Bhode Island	234	254	20	70	76	6	8		
South Carolina	986	1.233	247	371	465	94	25		
South Dakota	161	169	8	61	63	2			
Tennessee	1 341	1 660	319	610	755	145	24		
Texas	3 670	5 425	1 755	1 350	1 995	645	48		
Litah	374	551	177	145	213	68	40		
Vermont	134	157	23	47	55	8	17		
Virginia	1 580	2 071	491	578	758	180	31		
Washington	1 235	1,745	510	504	713	209	41		
West Virginia	498	487	(11)	247	241	(6)	(2)		
Wisconsin	1 169	1 326	157	409	464	55	13		
Wyoming	106	116	10	37	40	3	9		
Median increase§			126			16	16		

\* Projected state totals were calculated by applying proportions for six sex-specific age groups (i.e., 18–44 years, 45–64 years, and ≥65 years) from the 2005 BRFSS survey to corresponding U.S. Census–projected state populations for the year 2030 and then adding the age groups together.

The number of adults with arthritis-attributable activity limitations is projected to increase similarly (within 1%).

<sup>§</sup>Median increases were calculated using data only from the 48 states that projected increases in prevalences of doctor-diagnosed arthritis and arthritisattributable activity limitations. Vol. 56 / No. 17

#### **MMWR**

**Editorial Note:** The findings in this report confirm previous findings that arthritis and other rheumatic conditions will be increasing in nearly all U.S. states in the years ahead. On the basis of U.S. Census–projected increases in state populations overall and their older age distributions, 48 states are expected to have an increase in the number of adults reporting doctor-diagnosed arthritis and arthritis-attributable activity limitations by the year 2030, including 14 states with increases of >30%. States can use these projections to plan programs and resource allocations that will be needed to address the needs of their growing populations with arthritis.

The findings in this report are subject to at least five limitations. First, doctor-diagnosed arthritis is self-reported and not confirmed by a health-care provider; however, such self-reports have been validated previously for surveillance purposes (5). Second, BRFSS is a telephone survey that excludes certain populations (e.g., military personnel residing on bases, institutionalized populations, and persons without landline telephones). Third, the median response rate for BRFSS is low; however, BRFSS data have consistently been determined to provide valid and reliable estimates when compared with national household surveys in the United States (7). Fourth, projections in this report assume consistent age/sex prevalence proportions of doctor-diagnosed arthritis and arthritis-attributable activity limitations to the year 2030; these projections do not take into account emerging health risks (e.g., obesity) that might increase the proportions of doctor-diagnosed arthritis or emerging interventions (e.g., earlier diagnosis of and continued improvements in medications for rheumatoid arthritis) that might decrease the proportions of arthritis-attributable activity limitations. Finally, less than 2% (five of 306) of the sex- and agespecific cells used to calculate the projected prevalence of arthritis-attributable activity limitation in each state had fewer than 50 respondents before weighting and, therefore, might not be reliable estimates. However, any effect on the final state projection likely was overshadowed when the data in these five cells were summed with the other 301 cells.

CDC's Arthritis Program funds 36 state health departments, who collaborate with local chapters of the Arthritis Foundation to expand the reach of evidence-based public health interventions for arthritis. These include physical activity programs (Arthritis Foundation Exercise Program, Arthritis Foundation Aquatics Program, and Enhance Fitness) and self-management education programs (Arthritis Foundation Self-Help Program and Chronic Disease Self-Management Program), both of which are delivered by trained instructors in community settings. These interventions decrease the impact of arthritis by reducing pain and health-care utilization and by improving the ability to function and mental health of persons with arthritis (8). In addition, the CDC Arthritis Program also has developed two communication campaigns to promote physical activity among persons with arthritis.<sup>§</sup> *Healthy People 2010* midcourse review objectives<sup>¶</sup> for arthritis include increasing the proportion of adults with doctor-diagnosed arthritis who have had effective, evidence-based arthritis education as an integral part of the management of their condition (objective 2-8). Only 11% of adults with arthritis have taken a class to help manage their arthritis (9).

In addition to expanding the reach of arthritis education and other existing interventions, new interventions that specifically target persons with arthritis at highest risk for disability (e.g., persons who are overweight, obese, or physically inactive) also should be developed, evaluated, and disseminated. CDC is funding a project to develop a new arthritis-specific exercise program that emphasizes jointprotection strategies and components designed to improve physical function. The impact of the projected increases in doctor-diagnosed arthritis and arthritis-attributable activity limitations can be reduced by greater participation in such programs and other healthful activities.

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<sup>&</sup>lt;sup>§</sup>Available at http://www.cdc.gov/arthritis/campaigns.

<sup>&</sup>lt;sup>¶</sup>Available at http://www.healthypeople.gov/data/midcourse/pdf/fa02.pdf.

## Notice to Readers

# National Arthritis Month — May 2007

May is National Arthritis Month. Arthritis affects approximately 46 million persons of both sexes and all ages and races, and is the most common physical cause of disability in the United States. The national prevalence of arthritis and arthritisattributable activity limitations are both projected to increase substantially as the population ages.

This year's theme is Walk for Wellness, which is intended to remind those with arthritis that walking, a simple and readily available form of physical activity, is an effective but underused intervention for managing arthritis. Walking is a low-impact exercise appropriate for most persons with mild or moderate arthritis. Persons with arthritis also can reduce the impact of the disease by maintaining a healthy weight and pursuing education regarding arthritis self-management. To help those with arthritis better manage their disease, the Arthritis Foundation offers community-based exercise classes (through the Arthritis Foundation Exercise Program and the Arthritis Foundation Aquatics Program) and self-management education classes (through the Arthritis Foundation Self-Help Program), both of which have reduced pain and improved function and mental health among persons with arthritis.

The CDC Arthritis Program helps fund 36 state arthritis programs designed to increase the quality of life among persons affected by arthritis by implementing recommendations in the National Arthritis Action Plan: A Public Health Strategy. The program also promotes progress toward reaching the arthritis-related *Healthy People 2010* objectives. Additional information regarding public health and arthritis is available at http://www.cdc.gov/arthritis. Additional information regarding local arthritis programs and services is available from the Arthritis Foundation at http://www.arthritis.org or by telephone at 800-568-4045.

## Notice to Readers

# National High Blood Pressure Education Month, May 2007, and World Hypertension Day, May 17

May is National High Blood Pressure Education Month in the United States, and May 17 is World Hypertension Day. Approximately 72 million persons in the United States aged  $\geq$ 20 years have high blood pressure (i.e., systolic blood pressure  $\geq$ 140 mm Hg or diastolic pressure  $\geq$ 90 mm Hg, are taking antihypertensive medication, or have been told on two or more visits to a physician or other health professional that they have high blood pressure) (1). High blood pressure increases the risk for heart disease and stroke, the first and third leading causes of death, respectively, in the United States.

Lowering high blood pressure, which can prevent deaths and reduce adverse effects from heart disease and stroke, can be achieved through lifestyle modifications alone or in combination with drug therapy (2). Lifestyle changes include reducing body weight, adopting a diet high in fruits and vegetables but low in fat, reducing dietary sodium, increasing physical activity, and moderating alcohol consumption. In addition, stopping smoking improves overall cardiovascular health. The most recent recommendations for the detection and treatment of high blood pressure are available from the Joint National Committee on Prevention, Detection, Evaluation, and Treatment of High Blood Pressure (2). Additional information on prevention and treatment of high blood pressure is available from the American Heart Association at http://www.americanheart.org or from CDC at http://www. cdc.gov/bloodpressure.

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## Notice to Readers

## Healthy Vision Month — May 2007

May is Healthy Vision Month, a national eye health observance promoting the 10 vision objectives in *Healthy People 2010* (1). This year's theme is Keep Vision in Your Future, and the focus is on reducing visual impairment from glaucoma.

The CDC Vision Health Initiative and stakeholders have produced the report, *Improving the Nation's Vision Health: A Coordinated Public Health Approach*, which is aimed at preventing vision loss and blindness, promoting eye health, and improving quality of life for all persons throughout all life stages. The report is available at http://www.cdc.gov/diabetes/ projects/vision.htm.

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## Notice to Readers

# National Drinking Water Week — May 6–12, 2007

Safe drinking water is vital to public health. Each year, the American Water Works Association and an alliance of organizations, including the U.S. Environmental Protection Agency (EPA), sponsor National Drinking Water Awareness Week to highlight the importance of tap water and the need to reinvest in water infrastructure. The theme for 2007 is Only Tap Water Delivers (*1*).

Worldwide, approximately 1.1 billion persons lack access to an improved potable water source,\* and an estimated 3 million persons in developing regions of the world die each year from infectious diseases related to unsafe water and inadequate sanitation (2). In contrast, the United States has one of the safest water supplies in the world. In 2005, more than 52,000 community water systems supplied approximately 93% of the U.S. population with tap water (3, 4), and more than 92% of public water systems were in full compliance with health-based drinking water standards (3). Nonetheless, an estimated 4 million to 33 million cases of gastrointestinal illness associated with public drinking water systems occur annually in the United States (5,6). These estimates do not include illnesses that occur in the estimated 45 million persons served by small or individual water systems (4,7) or illnesses that are not gastrointestinal.

The occurrence of drinking-water–associated disease highlights the importance of maintaining and improving the nation's water infrastructure. EPA promotes practices to change how the nation views, values, manages, and invests in its water infrastructure so that water systems are sustainable and will be available to serve future generations. EPA is working with the water industry to identify best practices to help water utilities address aging infrastructure, efficient water use, and watershed protection (8). CDC activities related to National Drinking Water Week include reducing the adverse health effects from contaminated drinking water and recreational water, improving access to safe water internationally, strengthening waterborne disease outbreak surveillance and investigations, supporting waterrelated programs at local and state health departments, and addressing terrorism concerns related to waterborne pathogens. Additional information regarding CDC activities is available at http://www.cdc.gov/health/water.htm, http://www.cdc. gov/safewater, http://www.cdc.gov/nceh/globalhealth/projects/ waterplus.htm, and http://www.cdc.gov/fluoridation. Additional information about National Drinking Water Week is available at http://www.awwa.org/advocacy/dww and http://www. epa.gov/safewater/index.html.

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<sup>\*</sup> Potable water that is supplied through a household connection, public standpipe, borehole well, protected dug well, protected spring, or rain water collection.

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending April 28, 2007 (17th Week)\*

	Current	Cum	5-year weekly	Total c	ases rep	orted for	r previou	s years	
Disease	week	2007	averaget	2006	2005	2004	2003	2002	States reporting cases during current week (No.)
Anthrax	_	_	_	1	_	_	_	2	
Botulism:									
foodborne	_	_	0	19	19	16	20	28	
infant	1	18	1	96	85	87	76	69	PA (1)
other (wound & unspecified)	_	4	0	45	31	30	33	21	
Brucellosis	2	34	3	123	120	114	104	125	TN (1), OK (1)
Chancroid	5	9	1	34	17	30	54	67	MA (1), SC (4)
Cholera	_	_	0	7	8	5	2	2	
Cyclosporiasis§	1	16	12	135	543	171	75	156	FL (1)
Diphtheria	_	_	_	_	_	_	1	1	
Domestic arboviral diseases <sup>§,¶</sup> :									
California serogroup	_	_	0	63	80	112	108	164	
eastern equine	_	_	_	7	21	6	14	10	
Powassan	_	_	—	1	1	1	_	1	
St. Louis	—	—	0	9	13	12	41	28	
western equine	_	_	—	—	_	_	_	—	
Ehrlichiosis <sup>§</sup> :									
human granulocytic	1	15	4	593	786	537	362	511	VA (1)
human monocytic	_	32	2	501	506	338	321	216	
human (other & unspecified)	_	11	1	237	112	59	44	23	
Haemophilus influenzae,**									
invasive disease (age <5 yrs):									
serotype b	_	4	0	13	9	19	32	34	
nonserotype b	3	18	3	128	135	135	117	144	NY (2), FL (1)
unknown serotype	4	97	4	222	217	177	227	153	PA (1), OH (1), AR (1), UT (1)
Hansen disease§	2	17	1	62	87	105	95	96	FL (2)
Hantavirus pulmonary syndrome§	_	2	0	37	26	24	26	19	
Hemolytic uremic syndrome, postdiarrheal§	1	33	3	268	221	200	178	216	MI (1)
Hepatitis C viral, acute	6	197	22	859	652	713	1,102	1,835	NY (1), MO (1), FL (1), TN (1), OK (1), ID (1)
HIV infection, pediatric (age <13 yrs) <sup>++</sup>	_	_	3	52	380	436	504	420	
Influenza-associated pediatric mortality §.§§	4	53	0	41	45	_	N	N	CT (1), CO (1), VA (2)
Listeriosis	2	145	10	829	896	753	696	665	OH (1), IN (1)
Measles <sup>11</sup>	_	6	1	52	66	37	56	44	
Meningococcal disease, invasive***:			_						
A, C, Y, & W-135	4	79	5	250	297	_	_	—	NY (1), IN (2), MD (1)
serogroup B	2	34	2	160	156	_	—	_	NY (1), IN (1)
other serogroup	1	/	0	28	27	_	_	_	
unknown serogroup	6	234	17	678	765				IN (1), MI (1), IN (2), CA (2)
Mumps	17	309	127	6,561	314	258	231	270	ND (1), WV (1), NC (11), WA (4)
Novel influenza A virus infections	_	_		N	N	N	N	N	
Plague	_	_	0	17	8	3	I	2	
Poliorityeillis, paralylic	_	_	_		I NI				
Pollovirus infection, nonparalytic <sup>3</sup>	_			IN 01	10	10	10	10	
P sillacosis <sup>3</sup>		3	0	176	10	12	12	10	
Rebies human	3	40	2	1/0	130	70	2	01	NE(1), ND(2)
Ruballatt	_			0		10	2 7	10	
Rubella concenital syndrome	_	9	0	9 1	1	10	1	10	
	_	_	0	1		_	0	N	
Smallnov <sup>§</sup>	_	_	_			_	0	IN	
Streptococcal toxic-shock syndrome	1	23	1	10/	120	132	161	118	OH(1)
Supplie congonital (ago <1 vr)	1	20 51	4	240	220	252	/12	/10	UT(1)
		3	1	340	229	3/	20	95	1×(1)
Toxic-shock syndrome (stanbylococcal)§	_	23	2	94	90	95	133	109	
Trichinellosis		1	0	13	16	5	6	1/	
Tularemia	_	3	1	80	154	134	120	90	
Typhoid fever	2	77	5	315	324	322	356	321	CT (1), VA (1)
Vancomycin-intermediate Stanbylococcus aure	us <sup>§</sup> —	3	_	5	2	522	N	N	
Vancomycin-resistant Stanbylococcus aureus	uu —		0	1	3	1	N	N	
Vibriosis (non-cholera Vibrio species infections)	§ 4	39	_	Ň	N	N	N	N	FL (2) CA (1) HI (1)
Yellow fever		_	_		_	_	_	1	$\cdots = (-), \cdots (\cdot), \cdots (\cdot)$

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

No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Incidence data for reporting years 2006 and 2007 are provisional, whereas data for 2002, 2003, 2004, and 2005 are finalized. Calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years. Additional information is available at http://www.cdc.gov/epo/dphsi/phs/files/5yearweeklyaverage.pdf. Not notifiable in all states. Data from states where the condition is not notifiable are excluded from this table, except in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm. Includes both neuroinvasive and non-neuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II. § ¶

Data for *H. influenzae* (all ages, all serotypes) are available in Table II. Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Implementation of HIV reporting †† influences the number of cases reported. Updates of pediatric HIV data have been temporarily suspended until upgrading of the national HIV/AIDS surveillance data management system is completed. Data for HIV/AIDS, when available, are displayed in Table IV, which appears quarterly. Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. A total of 54 cases were reported for the 2006–07 flu season.

§§ 99 No measles cases were reported for the current week. \*\*\*

Data for meningococcal disease (all serogroups) are available in Table II. No rubella cases were reported for the current week. +++

\$8\$ Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases.

	Chlamydia <sup>†</sup>						Coccid	ioidomy	cosis		Cryptosporidiosis				
Reporting area	Current	Prev 52 w	vious veeks Max	Cum	Cum	Current	Pre 52 v Med	vious veeks Max	Cum	Cum	Current	Prev 52 w	/ious /eeks Max	Cum	Cum
United States	10.876	19.858	23.487	302.276	326.268	100	151	649	2.556	2.919	27	69	302	741	825
New England Connecticut Maine <sup>§</sup> Massachusetts New Hampshire Rhode Island <sup>§</sup> Vermont <sup>§</sup>	498 157 34 201 8 98	673 194 47 306 38 63 20	1,364 833 73 604 69 108 45	10,577 2,468 831 5,286 613 1,090 289	9,882 2,240 674 4,865 593 1,089 421	N 	0 0 0 0 0 0 0	0 0 0 0 0 0 0	N 	N	2     	3 0 0 1 0 1	22 7 6 14 5 5 5	33 7 7 8 5 6	72 38 9 22 1 2
<b>Mid. Atlantic</b> New Jersey New York (Upstate) New York City Pennsylvania	1,534 126 607 381 420	2,533 386 501 757 805	4,164 541 2,745 1,541 1,262	44,177 5,132 7,988 13,785 17,272	39,908 6,345 7,062 13,525 12,976	N N N N	0 0 0 0	0 0 0 0		N N N N N	 	10 0 3 2 4	33 1 13 12 18	90 — 33 15 42	135 9 26 34 66
<b>E.N. Central</b> Illinois Indiana Michigan Ohio Wisconsin	1,694 632  462 506 94	3,199 1,010 380 765 643 376	6,275 1,259 632 1,225 3,863 528	51,327 14,039 6,503 11,951 13,071 5,763	55,951 18,030 6,808 9,232 14,689 7,192	       N	1 0 1 0	3 0 3 2 0	10 — 8 2 N	13 — 9 4 N	8 3 3	15 2 1 2 5 4	110 22 18 9 33 53	170 17 15 38 60 40	181 24 11 32 66 48
W.N. Central lowa Kansas Vinnesota Missouri Nebraska <sup>§</sup> North Dakota South Dakota	215 110 — 26 18 61	1,179 160 149 241 440 104 28 50	1,445 239 266 298 628 180 64 84	16,354 2,741 2,446 3,117 5,220 1,598 418 814	20,280 2,819 2,682 4,322 7,277 1,684 634 862	N     N N N	0 0 0 0 0 0 0	54 0 54 1 0 0	3 N N 3 N N N	N N     N N N N N N N N N N N N N N N	4 3 1 	12 2 1 2 1 0 1	77 28 25 21 16 1 7	111 20 13 31 21 6 1 19	122 11 18 47 26 9 1
S. Atlantic Delaware District of Columbia Florida Georgia Maryland <sup>§</sup> North Carolina South Carolina <sup>§</sup> Virginia <sup>§</sup> West Virainia	3,222 47 113 — 487 48 1,944 527 56	3,614 69 71 947 702 341 624 395 473 54	6,115 111 1,187 3,022 945 1,772 2,105 685 96	48,735 1,135 1,726 3,300 7,608 6,926 9,403 9,714 8,148 775	61,276 1,179 963 15,306 10,715 5,779 11,111 7,490 7,768 965	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 0 1 0 0 0 0	1 N N 1 N N N	2 N N 2 N N N N	11 — 7 — 1 1 2	17 0 8 5 0 1 1 0	68 3 32 12 2 11 14 5 3	208 2 3 100 52 8 13 13 15 2	193 — 57 57 6 25 6 13 2
E.S. Central Alabama <sup>§</sup> Kentucky Mississippi Tennessee <sup>§</sup>	1,006 64 357  585	1,470 419 126 401 528	2,095 539 691 959 703	25,497 6,103 2,412 7,401 9,581	25,207 8,249 3,339 5,414 8,205	N N N N	0 0 0 0	0 0 0 0 0	N N N	N N N N N N N	1 	3 0 1 0 1	14 11 3 7 5	40 12 15 7 6	25 8 8 1 8
<b>W.S. Central</b> Arkansas <sup>§</sup> Louisiana Oklahoma Texas <sup>§</sup>	1,453 203 52  1,198	2,184 160 317 264 1,440	3,027 337 610 473 1,910	35,501 2,843 5,125 4,076 23,457	36,913 2,661 5,794 3,399 25,059	N N N	0 0 0 0	1 0 1 0 0	N N N	N   N N	 	5 0 1 1 2	45 2 9 4 36	29 2 11 11 5	42 5 — 11 26
Mountain Arizona Colorado Idaho <sup>§</sup> Montana <sup>§</sup> Nevada <sup>§</sup> New Mexico <sup>§</sup> Utah Wyoming <sup>§</sup>	206 80  12  100 14	1,273 478 311 44 51 107 179 95 29	2,018 993 416 253 144 397 324 200 54	16,973 6,387 1,874 1,175 823 2,234 2,591 1,483 406	20,848 6,331 5,099 1,117 781 2,032 3,380 1,650 458	93 93 N N 	101 99 0 0 1 0 1 0	296 296 0 0 3 3 4 0	1,825 1,789 N N 12 5 19	2,130 2,070 N N 27 6 25 2 2		4 0 1 0 0 0 0 0 0	40 3 7 26 2 5 3 11	40 10 11 3 2 6 1 4	32 4 9 3 5 3 3 5
<b>Pacific</b> Alaska California Hawaii Oregon <sup>§</sup> Washington	1,048 54 535 4 144 311	3,371 87 2,660 107 161 350	4,069 157 3,259 130 394 621	53,135 1,326 41,233 1,652 3,057 5,867	56,003 1,336 43,574 1,901 3,215 5,977	7 N 7 N N	53 0 53 0 0 0	299 0 299 0 0 0	717 N 717 N N	774 N 774 N N N	1  1 	1 0 0 1 0	5 1 0 1 4 0	20 — — 20 —	23 1  22 
American Samoa C.N.M.I. Guam Puerto Rico U.S. Virgin Islands	U U 	0  118 4	46  235 	U U 2,360 U	U U 1,546 U	U U N U	0  0 0	0  0 0	U U N U	U U N U	U U N U	0  0 0	0  0 0	U U N U	U U N U

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 2006 and 2007 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly. Chamydia refers to genital infections caused by *Chlamydia trachomatis*. S Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

Giardiasis Previous							G	onorrhea	a		Hae	<i>mophilu</i> All age	s influen s, all ser	z <i>ae</i> , invas otypes†	ive
	Current	Prev 52 w	ious	Cum	Cum	Current	Pre	evious	Cum	Cum	Current	Prev 52 w	vious	Cum	Cum
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	2006
United States	139	314	1,029	4,011	4,701	3,316	6,794	8,665	96,838	110,939	33	43	144	773	761
New England	7	18	44	164	344	100	111	259	1,696	1,655	_	2	12	26	41
Connecticut Maine§	1	5 4	24 14	70 44	88 25	37	42	203	547 23	555 40	_	0	7 4	17	8
Massachusetts	_	0	18	—	159	42	48	96	888	802	_	Ő	7	_	21
New Hampshire	6	0	9 17	2	1	6 14	3	8	52 169	79 160	_	0	3	3	2
Vermont <sup>§</sup>	_	3	12	36	46	—	10	5	18	19	_	0	2	_	3
Mid. Atlantic	30	66	123	727	964	360	676	1,519	11,578	10,668	8	10	26	184	168
New Jersey	26	7	17	36	149	49 104	102	156	1,483	1,748		1	5 14	17 53	31
New York City	20	17	33	239	299	72	176	376	3,036	3,284	-	2	6	37	36
Pennsylvania	2	14	35	180	228	135	239	413	5,111	3,702	4	3	10	77	60
E.N. Central	6	42	96 97	558	806	542	1,291	2,566	20,620	22,193	4	6	14	81	114
Indiana	N	9	0	N N	102 N	- 102	154	289	4,942 2,647	2,959	1	1	10	16	19
Michigan	2	13	38	187	229	139	313	880	5,200	3,555	_	0	5	9	15
Unio Wisconsin	4	15 8	32 24	212 77	246 149	170	315 135	1,636	5,782 2,049	6,677 2,381	3	2	63	46	30 14
W.N. Central	6	23	539	273	398	45	383	515	5.030	6.098	3	3	23	47	35
lowa	_	5	16	56	76	16	38	63	612	578	_	0	1	_	_
Kansas Minnesota	_	3	11 514	35 12	51 78	4	43 62	87 87	714 841	756 1.005	3	0	2 17	4 18	6 13
Missouri	2	9	28	125	135		195	269	2,354	3,209	_	1	5	19	13
Nebraska <sup>s</sup> North Dakota	1	2	9 4	24	25	17	26	48	393	403	_	0	2	5	3
South Dakota	_	1	6	17	28	5	6	15	94	110	_	ŏ	Ō	_	_
S. Atlantic	35	52	98	766	687	1,150	1,580	2,696	19,063	26,529	7	11	28	208	196
Delaware District of Columbia	1	0	4	8 17	8	29	28 36	44	463	483	_	0	3	5	1
Florida	27	24	44	362	284		446	549	1,564	7,051	3	3	9	67	64
Georgia Maruland <sup>®</sup>	_	12	26	162	154	164	348	1,539	3,159	4,874	_	2	6	53	46
North Carolina		4	0	69	45	164	317	238 676	4.873	2,197 5.547	3	2	5 8	18	28 15
South Carolina <sup>§</sup>	1	2	8	20	31	822	167	1,026	3,959	3,382	1	1	4	19	16
Virginia <sup>s</sup> West Virginia	4	9	28 21	120	139	88 8	124	238 44	1,938	2,137 247	_	0	6	1 6	16 9
E.S. Central	8	8	34	124	116	357	578	878	9,162	9,947	3	2	9	42	52
Alabama§	1	3	22	54	58	21	191	271	2,478	3,761	—	0	3	8	11
Mississippi	N	0	0	N N	N	137	48 157	268 434	845 2.607	2.008	_	0	1	2	4
Tennessee§	7	5	12	70	58	199	194	240	3,232	3,027	3	1	6	32	33
W.S. Central	1	7	26	96	46	456	960	1,483	14,604	15,599	3	1	27	41	27
Arkansas <sup>s</sup> Louisiana	1	3	13	44 22	21	66 21	81 193	142 366	1,350	1,481 3,346	1	0	2	3 4	2
Oklahoma	_	2	13	30	25	_	103	237	1,669	1,190	2	ĩ	25	32	23
Texas <sup>§</sup>	N	0	0	N	N	369	561	931	8,498	9,582		0	2	2	1
Mountain	12	31	69	381	435	32	264	455	3,234	4,478	5	4	14	106	92
Colorado	_	10	26	120	149		70	93	586	1,164		1	4	21	28
Idaho <sup>§</sup>	1	3	12	35	48	_	2	20	75	68	—	0	1	4	3
Nontana <sup>3</sup> Nevada <sup>§</sup>	_	2	9	25 26	22 31		28	135	534	46 704	_	0	2	5	6
New Mexico <sup>§</sup>		1	6	21	19		30	65	443	563	_	Ö	2	9	13
Utah Wyoming <sup>§</sup>	11	6 1	27 4	85 12	122 6	15 2	16 2	28 5	225 22	302 54	3	0	3 1	15 1	9
Pacific	34	60	147	922	905	274	776	971	11.851	13.772	_	2	8	38	36
Alaska	1	1	17	19	11	7	10	27	137	182	_	0	2	4	3
California Hawaii	19	42 1	71 4	644 21	681 19	199 1	640 14	833 30	9,972 198	11,421 357	_	0	6 1	2	10 6
Oregon§	7	9	14	132	123	24	26	46	357	458		1	6	32	16
Washington	7	8	68	106	71	43	75	142	1,187	1,354		0	2	—	1
American Samoa C N M I	U	0	0	U	U	U	0	2	U	U	U	0	0	U	U
Guam	_	_	_	_	_	_	_	_		_	_	_	_	_	_
Puerto Rico U.S. Virgin Islands	1 U	5 0	19 0	49 U	32 U	4 U	6 0	16 3	119 U	116 U	1 U	0	2	1 U	
	-	•	•	•	-	-	5	-	5	-	-	•	•	•	0

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

<sup>1</sup> Incidence data for reporting years 2006 and 2007 are provisional.
 <sup>1</sup> Data for *H. influenzae* (age <5 yrs for serotype b, nonserotype b, and unknown serotype) are available in Table I.</li>
 <sup>9</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

			Hepatiti	s (viral, ac	ute), by ty	pe <sup>†</sup>		B					aionellos	is	
	A B Previous Previous Ourse Ou										Prev	ious	015		
<b>D</b>	Current	52 w	eeks	Cum	Cum	Current	52 w	eeks	Cum	Cum	Current	52 w	eeks	Cum	Cum
Reporting area	week	Med	120	2007	1 225	week	70	200	1 174	1 2006	19	Med	107	2007	2006
New England	20	1	10	11	67	55	79	509	1,174	1,521	10	49	107	417	10
Connecticut	_	1	3	4	11	_	0	5	10	21	_	0	9	3	3
Maine <sup>§</sup>	—	0	2	1	3	—	0	2	1	6	—	0	2	—	2
New Hampshire	_	0	15	3	40	_	0	2	2		_	0 0	2	_	2
Rhode Island <sup>§</sup>	_	0	2	3	2	_	0	4 1	5 1	3 1	_	0	6	5 1	1
Mid. Atlantic	2	7	19	103	97	3	9	19	134	164	6	15	53	112	119
New Jersey		2	4	21	31		2	6	30	50	_	2	11	12	15
New York (Upstate) New York City	1	2	12 11	27 39	18 33	2	1	14 6	26 24	23 33	5	5	30 20	36 16	38 17
Pennsylvania	1	1	4	16	15	1	3	7	54	58	1	5	19	48	49
E.N. Central	2	6	13	71	98	4	8	19	124	150	3	10	30	81	84
Indiana	_	0	47	5	21	_	0	5 17	15	54 9	_	1	5	5	3
Michigan	1	2	8	26	35		2	8	41	50		3	10	30	17
Wisconsin	_	0	4		10	4	0	3	52	2		4	3	45	13
W.N. Central	_	2	17	43	40	_	2	14	45	48	_	1	16	15	13
lowa Kansas	_	0	1	6	3 16	_	0	3	8 4	8	_	0	3	1	1
Minnesota	_	Õ	17	24	2	_	Ő	13	4	2	_	Ő	11	2	-
Missouri Nebraska <sup>ş</sup>	_	1	3	7 4	10 4	_	1	5	24	29 2	_	0	2	8	8
North Dakota	—	Ö	Ō			—	Ő	Ő	_		_	Ő	ō	<u> </u>	
South Dakota	_	0	2	2	5		0	1	2	1	_	0	1	1	1
S. Atlantic Delaware	8	9 0	27 2	148	177 4	19	23 0	53 4	320 5	381 14	4	9 0	24 2	109 1	100
District of Columbia	_	0	5	14	1		0	2	1	4	_	Ö	5		4
Florida Georgia	4	3	13 5	54 16	64 13	11	3	14 8	110 39	140 54	3	3 1	9 5	51 11	48 2
Maryland <sup>§</sup>	1	1	7	22	26	_	2	8	28	54	—	2	8	22	16
South Carolina	_	0	11	4	40 7	_	1	16 5	52 25	66 23	_	0	5 2	9 5	13
Virginia <sup>§</sup>	3	1	5	30	21	3	2	5	41	13	1	1	5	7	13
vvest virginia	- 1	0	3	1	11	5	0	23	19 74	13	_	0	4	3 17	12
Alabama <sup>§</sup>	_	2	2	3	2		1	10	22	27	_	0	9 2	1	3
Kentucky Mississippi	—	0	2	4	19	—	1	5	2	31	_	1	6	8	3
Tennessee§	1	1	5	11	18	2	3	7	43	44	_	1	7	8	6
W.S. Central	3	6	18	43	110	3	19	151	211	206	4	1	12	22	8
Arkansas <sup>§</sup> Louisiana	_	0	2	4	27	_	1	4	7 14	19	_	0	1	1	1
Oklahoma	3	Õ	.3	3	_3	_	1	37	11	1	_	Ő	6	-	1
Texas <sup>§</sup>		5	15	29	77	3	15	108	179	180	4	1	12	20	6
Mountain Arizona	11	5 3	17 13	107 90	107 62	_	3 0	9 6	71 33	47 2	_	2 1	8 4	26 9	23 7
Colorado	—	1	3	7	17	—	0	4	8	11	_	0	2	5	5
Montana <sup>§</sup>	_	0	2	1	4	_	0	2	4	5	_	0	3	1	
Nevada <sup>§</sup>	—	0	2	5	6	—	1	5	13	14	_	0	2	2	4
Utah	_	0	2	2	8	_	0	2 4	4 9	8	_	0	2	2 4	5
Wyoming <sup>§</sup>	—	0	1	—	1	—	0	1	—	—	—	0	1	2	_
Pacific Alaska	1	14	52 1	205 1	498 1	2	11	38	176	166	1	1	11	26	36
California	1	12	48	184	463	2	8	26	135	130	_	1	11	20	36
Hawaii Oregon§	_	0	2	2	6 12	_	0	1	 27	2	1	0	0	1	_
Washington	_	1	4	9	16	_	2 1	12	11	24 9		0	2	5	_
American Samoa	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
C.N.M.I. Guam	U	_	_	U	U	U	_	_	U	U	U	_	_	U	U
Puerto Rico		1	10	15	16	-	1	9	15	7	-	0	1		-
U.S. Virgin Islands	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U

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 2006 and 2007 are provisional. \* Data for acute hepatitis C, viral are available in Table I. \* Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

	Lyme disease Previous						Malaria Previous						Meningococcal disease, invasive⁺ All serogroups Previous				
	0	Prev	/ious	0	0	0	Prev	vious	0	0	0	Pre	vious	0	0		
Reporting area	week	Med	Max	2007	2006	week	Med 52 w	Max	2007	2006	week	Med	Max	2007	2006		
United States	41	253	1,029	1,693	1,866	9	25	50	213	339	13	19	38	354	478		
New England	_	22	255	79	106	_	0	6	4	10	1	1	3	8	15		
Connecticut	—	9	227	21	49	—	0	3	_	1	1	0	2	3	4		
Maine <sup>3</sup> Massachusetts	_	2	39	15	22	_	0	1	3	2	_	0	3	2	2 9		
New Hampshire	—	5	97	35	5	—	Ō	3	1	_	—	Ō	2		_		
Rhode Island <sup>§</sup> Vermont <sup>§</sup>	_	0	93 15		1	_	0	1	_	1	_	0	1	1	_		
Mid Atlantic	20	147	571	824	1 289	2	5	18	50	95	2	2	8	42	78		
New Jersey		27	190	102	326	_	1	7		26	_	ō	2	1	, 0		
New York (Upstate)	10	52	392	233	516	2	1	7	15	8	2	1	4	11	13		
Pennsylvania	10	45	237	483	430	_	1	9 4	29	11	_	0	4 5	20	29		
E.N. Central	_	10	158	19	112	1	3	10	32	44	5	2	7	46	64		
Illinois	—	0	1	1		—	1	6	10	16		0	2	10	17		
Michigan	_	1	5	6	3	_	0	2	7	6	4	0	3	13	12		
Ohio	—	0	5	2	12	1	0	2	8	12	—	1	4	12	18		
Wisconsin		9	154	9	94		0	3	6	5	_	0	2		9		
lowa		5	188	43	42	_	1	13	14	6	_	1	5	28 7	24		
Kansas	_	0	2	2		_	0	2	_	_	_	0	1	1	1		
Minnesota Missouri	6 1	2	188	32	33	_	0	12	7	2	_	0	3	8	3		
Nebraska§	_	0	2	_	1	_	Ő	1	2	_	_	Ő	1	1	5		
North Dakota	_	0	0	_	_	_	0	0	1	1	_	0	1	1	1		
S Atlantic	1/	11	135	675	270	3	5	15	53	90	1	3	9	52	84		
Delaware	3	8	28	129	94	_	Ő	1	2	2	_	0	1		2		
District of Columbia	1	0	7	3	7	1	0	2	2	14	—	0	1		24		
Georgia	_	0	1		1	_	1	6	4	32	_	0	3	6	9		
Maryland <sup>§</sup>	7	21	105	431	155	1	1	4	17	12	1	0	2	13	5		
South Carolina	_	0	4 2	6 4	8 1	_	0	4	4	4	_	0	6	4 5	14		
Virginia <sup>§</sup>	3	7	36	88	6	_	1	4	9	15	_	0	2	2	10		
West Virginia		0	14	4	_	_	0	1	1	1	_	0	2		1		
E.S. Central	_	0	4	7	2	1	0	3	10 1	8	2	1	4	18	16		
Kentucky	_	Õ	2	_	_	_	Õ	1	1	1	_	õ	1	1	4		
Mississippi	_	0	1	6	1		0	1	1	2		0	4	4	3		
WS Control	_	1	2	10	2	1	1	2	2	15	2	1	12	36	20		
Arkansas <sup>§</sup>	_	0	0			_	0	2	_		_	ò	2	5	5		
Louisiana	—	0	1	2	_	—	0	1	1	1	_	0	4	9	4		
Texas <sup>§</sup>	_	1	6	8	2	_	1	6	1	12	_	0	4 9	13	15		
Mountain	_	0	4	4	3	_	1	6	11	18	_	1	4	32	32		
Arizona	—	0	2	—	3	—	0	3	4	3	—	0	3	10	9		
Idaho§	_	0	2	1	_	_	0	2	4	6	_	0	2	8	1		
Montana <sup>§</sup>	_	0	1	1	_	_	0	1	1	1	_	0	1	1	1		
Nevada <sup>§</sup>	_	0	1	2	_	_	0	1	_	1	_	0	1	3	3		
Utah	_	0	1	_	_	_	ŏ	2	2	7	_	Ő	2	6	4		
Wyoming§	_	0	1	_	—	_	0	0	_	—	—	0	2	1	2		
Pacific Alaska	—	3	17	32	31	2	4	14	36	53	2	4	11	92	136		
California	_	3	14	30	31	1	2	6	26	42	2	3	9	64	89		
Hawaii	Ν	0	0	Ν	Ν		0	2			—	0	2	2	4		
Washington	_	0	3	_	_	۱ 	0	3 11	1	4 3	_	0	3 5	12	19		
American Samoa	U	0	0	U	U	U	0	0	U	U	U	0	0	_	_		
C.N.M.I.	U	_	_	Ū	Ū	Ű	_	_	Ū	Ŭ	Ū	_	_	—	_		
Guam Puerto Rico	N			N	N	_	0	1	1	_	_	0	1	3	2		
U.S. Virgin Islands	ü	õ	õ	ü	ü	U	õ	0	Ú	U	U	õ	0	_	_		

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(,	Pertussis Previous							Rocky Mountain spotted fever							
		Prev	vious	-			Pre	vious	-			Pre	vious		
Reporting area	Current week	<u>52 w</u> Med	<u>eeks</u> Max	Cum 2007	Cum 2006	Current week	<u>52 v</u> Med	veeks Max	Cum 2007	Cum 2006	Current week	<u>52 v</u> Med	<u>/eeks</u> Max	Cum 2007	Cum 2006
United States	64	245	977	2,017	4,466	43	96	174	1,054	1,644	13	30	114	160	327
New England Connecticut Mainet	=	16 2 2	54 9	75 15 32	464 24 23	7 5 1	11 4 2	25 14 8	135 47 26	189 40 28	N	0 0	8 0	N	
Massachusetts New Hampshire	_	0	22 28		344 17	- - 1	0 1	7 5		96 —		0	1 1		
Rhode Island <sup>†</sup> Vermont <sup>†</sup>	_	0 1	30 14	16	21 35	_	0 2	3 6	12 39	5 20	_	0 0	8 0	_	_
Mid. Atlantic New Jersey	10	32 4	159 12	394 46	539 122	1	16 0	57 0	121	230	_	2	7 2	13	19 5
New York (Upstate) New York City Pennsylvania	4	20 0 9	150 6 22	238  110	235	1	0 1 16	5 56	24 97	1 229		0 0 1	2 3 4	4	2 12
E.N. Central	20	39 9	79 23	466 50	687 176	_	2 0	18 7	8 3	9 1	1	1 0	6 4	5 1	4
Indiana Michigan	2	3 10	37 39	11 102	54 135	_	0	2 5	4	8	1	0	1	1	1
Ohio Wisconsin	18	12 3	56 10	262 41	230 92	_	0 0	9 0	1	_	_	0 0	4 1	2	2
W.N. Central Iowa Kansas	3	17 4 3	140 16	138 39 53	544 143 117	2	5 1 2	20 7 6	51 7 31	68 9 26	2	3 0 0	13 1	24	11
Minnesota Missouri	_	0 4	120 10	 21	71 142	_	0 1	6 6	3	20 7 6	2	0 3	2 12	24	1 10
Nebraska† North Dakota South Dakota	3	1 0	4 9 4	7 4 14	60 4 7	1	0 0	0 7 3	6	2 18	_	0 0	5 0	_	_
S. Atlantic	17	17 0	163 1	296	327 2	27	38	62	602	742	5	11	67 3	87	257
District of Columbia Florida	2	0 4	2 18	2 93	3 75	_	0 0	0 18	 41	 176	1 2	0 0	1 4	1 5	6
Georgia Maryland <sup>†</sup> North Carolina		0 2 0	3 7 112	42	8 63 70	7	4 5 11	16 12 21	36 93 149	76 122 108	1 1	0 1 4	5 6	2 14 46	4 6 228
South Carolina <sup>†</sup> Virginia <sup>†</sup>		3	11 19	27 33	49 53		3 12	11 31	35 224	39 196		1	5 12		3
West Virginia <b>E.S. Central</b>	2	0 6	19 24	6 70	4 85	- 1	2 4	8 13	24 28	25 63	5	0 5	2 27	1 30	 24
Alabama† Kentucky Micsissippi	_	1 0	17 5 7	21 1 7	21 14 10	1	1	8 4 1	7	19 4 2	_	1 0	9 1	6	6
Tennessee <sup>†</sup>	_	3	11	41	40	_	2	7	21	37	5	4	22	24	18
W.S. Central Arkansas <sup>†</sup> Louisiana	1 	16 1 0	147 13 2	92 2 5	195 17 5	1	2 0 0	34 5 0	27 9 —	249 9 	_	1 0 0	28 10 1	_	5 4
Oklahoma Texas†	1	0 14	9 134	1 84	2 171	1	0	9 29	18	11 229	_	0	18 6	_	1
<b>Mountain</b> Arizona	10 2	36 6	75 30	399 95	1,072 205	_	3 2	28 10	25 24	42 37	_	0 0	5 2	1	6 2
Colorado Idaho† Montana†	3	8 1 1	20 7	102 15	417 27	_	0	0 24 2	_		_	0	1 3 2	1	1
Nevada <sup>†</sup> New Mexico <sup>†</sup>	_	0	9 8	3	20 29	_	0 0	1 2	_	2	_	0	0	_	2
Utah Wyoming <sup>†</sup>	5	10 1	50 8	144 12	306 26	_	0 0	1 2	1	_	_	0 0	0 1	_	1
Pacific Alaska	3	33 1	229 8	87 8	553 28	3 1	4	12 6	57 26	52 11	N	0	1	N	1 N
California Hawaii Oregon†	_	22 0 2	226 7 7		311 42 50	2 N	0 0	11 0 4	31 N	40 N 1	Ν	0	1 0 1	N	N 1
Washington	3	4	46	43	122	—	Ō	0	_	_	Ν	Ō	0	Ν	N
American Samoa C.N.M.I. Guam	U U	0 	0	U U	U U	U U	0	0	U U	U U	U U N	0	0 	U U N	U U N
Puerto Rico U.S. Virgin Islands	U	0 0	1 0	U	U	U	1 0	6 0	17 U	32 U	N U	0 0	0 0	N U	N U

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<u>.                                    </u>		S	almonello	sis	Shiga t	EC)†	Shigellosis								
	Current	Prev 52 w	vious veeks	Cum	Cum	Current	Prev 52 v	vious veeks	Cum	Cum	Current	Pre 52 v	vious veeks	Cum	Cum
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Мах	2007	2006
United States	275	831	1,336	8,011	8,949	37	75	179	573	617	189	258	528	3,204	2,924
New England Connecticut Maine <sup>§</sup>	4	18 0 2	82 68 14	162 68 29	831 503 23	1 — 1	2 0 0	16 5 8	23 5 11	106 84 3		2 0 0	14 8 5	23 8 12	126 67 
New Hampshire Rhode Island <sup>§</sup> Vermont <sup>§</sup>	4	4 2 1	26 15 6	27 25 13	11 19 8		0 0 0	4 2 4	4 1 2	10 1 2		0 0 0	2 3 2	2	4 1
Mid. Atlantic New Jersey New York (Upstate) New York City Pennsylvania	38 — 27 2 9	99 19 28 24 30	194 50 93 50 67	1,096 54 354 277 411	1,066 211 210 293 352	3 3 —	8 1 3 0 3	62 16 14 4 47	68 1 30 5 32	73 21 21 8 23	1 1 	13 3 3 5 1	48 34 43 14 6	137 13 35 68 21	261 78 76 77 30
<b>E.N. Central</b> Illinois Indiana Michigan Ohio Wisconsin	39  7 6 26 	103 26 15 18 23 17	198 61 55 35 56 27	945 120 146 184 308 187	1,284 369 140 221 326 228	5  1 	9 1 1 3 2	59 7 8 6 18 39	70 5 14 35 11	97 15 11 21 24 26	6 2 4	23 10 2 4 3	68 50 17 5 14 10	164 19 20 10 79 36	304 106 42 72 51 33
W.N. Central Iowa Kansas Minnesota Missouri Nebraska <sup>§</sup> North Dakota South Dakota	25  10  	46 8 7 11 15 3 0 3	109 26 16 60 35 9 5 11	637 94 96 151 210 34 8 44	595 105 89 136 166 59 6 34	5  2 1 2 	11 2 0 3 3 1 0 0	45 38 4 26 13 11 0 5	78 12 6 30 18 12 —	81 13 2 31 24 8 — 3	64 — 2 61 — 1	42 2 5 14 1 0 6	76 14 11 24 68 14 18 24	660 18 9 84 526 6 4 13	242 9 26 23 131 26 4 23
S. Atlantic Delaware District of Columbia Florida Georgia Maryland <sup>§</sup> North Carolina South Carolina <sup>§</sup> Virginia <sup>§</sup> West Virginia	79 — 56 — 9 2 3 8 1	226 2 1 95 34 14 29 19 20 1	395 10 4 176 66 32 130 55 58 31	2,459 22 8 1,057 408 175 377 187 193 32	2,091 23 19 950 287 91 373 142 182 24	11 	12 0 2 1 2 0 3 0	32 3 1 8 7 9 11 3 11 5	153 4 46 16 28 23 2 33 1	96 1 16 16 8 21 3 31 —	72 1 67 1 1 1 2	70 0 36 24 1 1 0 2 0	143 2 5 76 54 10 14 10 9 2	1,165 4 757 318 23 19 17 22 1	698 3 300 248 17 65 48 17
E.S. Central Alabama <sup>§</sup> Kentucky Mississippi Tennessee <sup>§</sup>	24 7 8 	53 9 9 12 17	138 70 23 62 32	523 128 123 62 210	463 147 94 91 131	3 1 - 1	4 0 1 0 2	21 5 12 0 9	28 5 9 	43 4 12  27	10 8  2	12 4 2 1 4	75 66 15 45 14	226 87 29 45 65	192 38 100 26 28
<b>W.S. Central</b> Arkansas <sup>§</sup> Louisiana Oklahoma Texas <sup>§</sup>	13 7 6	84 14 17 9 46	186 45 42 40 107	319 100 94 89 36	735 234 71 61 369	2  1 1	3 0 0 2	52 7 1 17 48	31 5  8 18	28 2  2 24	23 6 1 16	38 2 3 2 31	192 10 24 9 174	318 36 57 16 209	375 27 8 28 312
Mountain Arizona Colorado Idaho <sup>§</sup> Montana <sup>§</sup> Nevada <sup>§</sup> New Mexico <sup>§</sup> Utah Wyoming <sup>§</sup>	21 8 - 2 - - 9 2	52 18 12 3 2 4 5 4 0	87 45 30 9 10 20 15 14 4	627 242 143 37 28 46 46 65 20	615 175 170 41 33 43 56 77 20	4 1 	8 2 1 0 0 1 1 0	36 13 8 0 5 5 14 3	64 25 9 4 	64 17 16 10 — 10 5 5 1	7 5 1 — 1 —	26 11 3 0 1 2 1 0	87 35 15 3 13 20 15 4 19	201 104 30 4 9 11 25 6 12	227 118 32 6 1 24 31 12 3
Pacific Alaska California Hawaii Oregon <sup>§</sup> Washington	32 — 12 1 2 17	116 1 89 4 7 11	306 5 218 16 17 83	1,243 22 956 58 75 132	1,269 28 949 73 118 101	3 N  - 3	5 0 0 1 2	24 0 5 3 9 22	58 N 31 3 9 15	29 N 4 17 8	6 3 	32 0 28 1 1 2	94 2 81 3 6 13	310 6 244 12 15 33	499 4 378 13 57 47
American Samoa C.N.M.I. Guam Puerto Rico U.S. Virgin Islands	U U 3 U	0  14 0	0  65 0	U U 131 U	U U 75 U	U U N U	0  0 0	0  0 0		U U N U	U U   U	0  0 0	0  6 0	U U 5 U	U U 3 U

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	Stre	ptococca	l disease,	invasive, g	roup A	Strept	ococcus p	neumonia Age <5 yea	<i>e</i> , invasive ars	disease⁺							
Reporting area	Current	Prev 52 w	vious veeks	Cum	Cum	Current	Prev 52 w	vious reeks	Cum	Cum							
	week	Med	Max	2007	2006	week	Med	Max	2007	2006							
United States	70	88	217	1,729	2,167	28	24	93	502	453							
New England	6	2	21	54	74	_	1	4	10	21							
Connecticut	5	0	17	22	_	_	0	0	_	_							
Maine <sup>s</sup> Massachusetts	_	0	2		8 56	_	0	2	_	21							
New Hampshire	1	0	9	15	3	_	Ő	4	6	<u> </u>							
Rhode Island <sup>§</sup>	—	0	6		4	_	0	3	3	_							
Vermont <sup>®</sup>	—	0	2	10	3	_	0	1	1	_							
Mid. Atlantic	22	17	39	347	447	3	3	20	45	72							
New Jersey New York (Lipstate)	16	2	6 26	28	135	3	0	4 1/		24 48							
New York City		3	9	71	86	_	0	3									
Pennsylvania	6	6	11	116	149	Ν	0	0	Ν	Ν							
E.N. Central	7	15	31	290	490	4	6	14	79	132							
Illinois	_	4	11	63	153	—	1	6	9	33							
Indiana	3	2	12	45	53	-	0	10	8	17							
Ohio	3	3	10	108	107	3	1	5 7	34 27	29							
Wisconsin	_	1	6	_	59	_	Ö	2	1	22							
W.N. Central	2	4	32	139	156	1	2	10	45	35							
lowa	_	0	0	_		_	ō	0	_	_							
Kansas	—	0	3	19	34	_	0	3	3	9							
Minnesota	1	0	29	60 /1	67 28	1	1	6	26 12	12							
Nebraska§	_	0	2	7	16	_	0	2	3	4							
North Dakota	1	0	2	9	6	—	0	1	1	2							
South Dakota	—	0	2	3	5	—	0	0	—	—							
S. Atlantic	15	20	42	423	421	8	2	11	100	22							
Delaware District of Columbia	_	0	2	1	4	—	0	0	_	—							
Florida	5	6	16	101	101	5	0	5	26	_							
Georgia	_	5	11	94	112	_	Õ	5	31	_							
Maryland <sup>§</sup>	5	4	10	77	51	3	1	6	30	17							
North Carolina	- 1	0	26	51	61	_	0	0		_							
Virginia <sup>§</sup>	3	2	10	55	49	_	0	1	2	_							
West Virginia	1	0	6	7	8	_	Ō	3	2	5							
E.S. Central	5	4	11	71	95	1	0	6	29	6							
Alabama§	N	0	0	Ν	N	Ν	0	0	N	N							
Kentucky	1	0	4	17	26	—	0	0	_	_							
IVIISSISSIPPI Tennessee§	N A	0	7	IN 54	IN 69	1	0	2	2	6							
W.C. Control	-	6	61	100	166	7	4	20	05	71							
Arkansas <sup>§</sup>	0	0	2	120	14		4	39	95 7	12							
Louisiana	_	õ	2	3	2	_	õ	4	18	2							
Oklahoma	2	2	5	38	52	1	1	12	22	16							
lexas <sup>®</sup>	5	3	56	68	98	6	2	24	48	41							
Mountain	4	12	42	245	287	4	4	12	87	91							
Arizona Colorado	2	5	34 9	101	149 49	4	2	/ 4	54 19	54 21							
Idaho§	_	0	1	6	5	_	0	1	2	1							
Montana <sup>§</sup>	N	0	0	Ν	N	Ν	0	0	N	Ν							
Nevada <sup>§</sup>	_	0	1	1	1	—	0	1	1	15							
I Itah	2	1	0 7	48	57 24	_	0	4		15							
Wyoming§	_	ò	1	3	2	_	õ	õ	_	_							
Pacific	1	3	9	40	31	_	0	4	12	3							
Alaska	1	õ	2	.0	N	_	Õ	2	10	_							
California	N	0	0	N	N	Ν	0	0	N	N							
Hawaii Oregon§	N	2	9	31	31 N	N	0	2	2 N	3 N							
Washington	N	0	0	N	N	N	0	0	N	N							
American Samoa	11	0	0		11	11	0	0		11							
C.N.M.I.	U	_		U	U	U	_		U	U							
Guam	_	_	_	_	_	N	—	_	Ň	N							
Puerto Rico	<del></del>	0	0	<u> </u>		N	0	0	N	N							
u.a. virgin islands	U	U	U	U	U	U	U	U	U	U							

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		Streptococcus pneumoniae, invasive disease, drug resistant <sup>†</sup>																
		Dura	All ages			Age <5 years					Syphilis, primary and secondary							
	Current 52 weeks			Cum	Cum	Current	52 v	vious veeks	Cum	Cum	Current	52 v	vious veeks	Cum	Cum			
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	2006			
United States	31	43	242	939	1,046	6	6	32	137	142	91	182	262	2,570	2,864			
New England	_	1	7	21	14	_	0	1	2	2	9	4	13	65	64			
Connecticut	—	0	0		_	_	0	0			2	0	10	8	15			
Massachusetts	_	0	2	4		_	0	0	_	_	5	2	7	39	34			
New Hampshire	—	0	0			—	Ō	0		—	2	0	2	7	5			
Rhode Island <sup>§</sup>	_	0	4	8 9	3	_	0	1	1	1	_	0	5	9 1	5			
Mid Atlantic	_	3	8	62	60	_	0	5	1/	9	31	24	14	517	361			
New Jersey	_	0	0			_	0	0				3	8	57	59			
New York (Upstate)	—	1	5	21	17	—	0	4	7	4	4	3	14	41	51			
New York City Pennsylvania	_	0	0	41	43	_	0	0	7	5	22 5	15 5	35 12	342 77	170			
E.N. Central	20	10	40	244	237	4	1	7	29	40	3	15	32	172	294			
Illinois	_	0	2	3	8	_	Ö	1	1	3	_	6	13	35	167			
Indiana	3	2	30	51	49	2	0	5	5	11		2	5	15	26			
Ohio	17	5	38	190	171	2	1	5	23	25		4	9	59 67	20 60			
Wisconsin	N	0	0	N	N	_	0	Ō	_	_	1	1	4	16	13			
W.N. Central	_	1	124	40	17	_	0	15	5	1	_	5	13	50	79			
lowa	_	0	0		_	_	0	0	_	_	_	0	3	1	6			
Minnesota	_	Ő	123	_	_	_	0	15	_	_	_	Ő	5	21	19			
Missouri	—	1	6	30	17	—	0	2	3	1	—	3	9	21	43			
Nebraska <sup>s</sup>	_	0	1	2	_	_	0	0	_	_	_	0	2	_	2			
South Dakota	_	Ő	3 3	4	_	_	õ	ĩ	2	_	_	Ő	3	_	_			
S. Atlantic	10	21	54	442	578	2	3	8	66	50	13	41	136	446	610			
Delaware	—	0	1	3	17	_	0	1	1		_	0	3	3	9			
Florida	5	11	29	4 254	268	2	2	8	60	2 47	_	13	23	49 68	228			
Georgia	_	6	17	157	254	_	ō	1	_	1	_	6	105	20	54			
Maryland <sup>§</sup>	—	0	1	1	—	_	0	0	_	—	4	5	15	102	108			
South Carolina <sup>§</sup>	_	0	0	_	_	_	0	0	_	_	4	5 1	23 5	29	25			
Virginia§	Ν	0	Ō	Ν	Ν	_	Õ	Ō	_	_	4	4	17	66	47			
West Virginia	5	1	17	23	39	_	0	1	5	_	_	0	2	2	1			
E.S. Central	1	2	7	56	83	_	0	3	10	16	8	14	29	243	195			
Kentucky	IN	0	2	12	21	_	0	1	1	3		э 1	7	82 29	90 28			
Mississippi	_	0	0	_	_	_	Ō	0	_	_	_	1	8	33	20			
Tennessee <sup>§</sup>	1	2	7	44	62	_	0	3	9	13	6	6	12	99	57			
W.S. Central	_	1	7	50	9	_	0	2	5	3	24	29	56	485	446			
Louisiana	_	1	3	17	4 5	_	0	1	2	2	2 5	6	30	101	28 62			
Oklahoma	_	0	6	32	_	_	Õ	2	3	_	_	1	5	27	23			
Texas <sup>§</sup>	_	0	0	_	_	_	0	0	_	_	17	21	31	320	333			
Mountain	—	1	5	24	48	_	0	5	6	21	—	8	27	83	142			
Colorado	_	0	0	_	_	_	0	0	_	_	_	1	5	29 5	24			
Idaho§	N	0	0	N	Ν	—	0	0	—	—	_	0	1	1	2			
Montanas	—	0	0	10	10	—	0	0		—	_	0	1	1	1			
New Mexico <sup>§</sup>	_	0	0			_	0	0		_	_	1	5	24	21			
Utah	—	0	5	8	21	_	0	4	2	15	—	0	2	3	3			
Wyoming <sup>®</sup>	_	0	3	3	15	_	0	2	1	6	_	0	1	1				
Pacific Alaska	_	0	0	_	_	_	0	0	_	_	3	37 0	54 2	509 4	673 5			
California	N	ŏ	õ	Ν	Ν	_	ŏ	ŏ	_	_	2	34	51	457	585			
Hawaii		0	0			_	0	0	_	_	—	0	1	1	9			
Washington	N N	0	0	N N	N	_	0	0	_	_	1	0	6 11	5 42	5 69			
American Samoa	11	ů N	ů N			11	0	n	11	11		0	0		11			
C.N.M.I.	Ŭ	_	_	Ŭ	Ŭ	Ŭ	_	_	Ŭ	Ŭ	Ŭ	_	_	Ŭ	U			
Guam	N	_	_	N	N	—	_	_	—	—	_							
Fuerto MICO	IN II	0	0				0	0			9	2	0	42	53			

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 2006 and 2007 are provisional. † Includes cases of invasive pneumococcal disease caused by drug-resistant *S. pneumoniae* (DRSP) (NNDSS event code 11720). § Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

			Neu	West roinvasiv	Nile virus /e	Non-neuroinvasive <sup>§</sup>									
	Previous					Previous				Previous					
Reporting area	Current	<u>52 w</u> Med	Max	Cum 2007	Cum 2006	Current	52 v	veeks Max	Cum 2007	Cum 2006	Current	52 v	/eeks Max	Cum 2007	Cum 2006
United States	653	794	1.496	15.176	18.583		0	178	2007	9		1	399	2007	2000
New England	7	21	74	231	496	_	0	3	_	_	_	0	2	_	_
Connecticut	_	0	0			_	Ö	3	_	_	_	Ő	1	_	_
Maine <sup>1</sup>	—	1	17	_	111	_	0	0	_	—	_	0	0	_	_
Nassachusells New Hampshire	7	6	43	88	92 27	_	0	0	_	_	_	0	0	_	_
Rhode Island <sup>1</sup>	_	Ō	0	_	_	_	Ō	Ō	_	_	_	Ō	Ō	_	_
Vermont <sup>1</sup>	_	10	66	143	266	_	0	0	_	_	_	0	0	_	_
Mid. Atlantic	57	105	193	1,914	2,171	_	0	11	_	—	_	0	4	_	_
New York (Upstate)	N	0	0	N	N	_	0	2 5	_	_	_	0	1	_	_
New York City		0	0			_	0	4	_	_	_	0	2	_	_
Pennsylvania	57	105	193	1,914	2,171	_	0	2	_	—	_	0	1	_	_
E.N. Central	177	228	568	4,506	7,196	_	0	43	_	_	_	0	33	_	_
Indiana	_	Ó	0			_	0	7	_	_	_	0	12	_	_
Michigan	50	89	258	1,746	2,091	—	0	11	—	—	—	0	2	—	—
Uhio Wisconsin	127	122 17	449 64	2,289 417	4,477	_	0	11	_	_	_	0	3	_	_
W N Central	31	30	136	869	953	_	0	36	_	_	_	0	70		_
lowa	N	0	0	N	955 N	_	0	3	_	_	_	0	4	_	_
Kansas	—	8	52	335	167	—	0	3	—	—	—	0	3	—	—
Minnesota Missouri		0 15	0 78	409	739	_	0	6 14	_	_	_	0	7	_	_
Nebraska <sup>¶</sup>	N	0	0	N	N	_	0	9	_	_	_	ŏ	38	_	_
North Dakota		0	60	84	18	—	0	5	—	—	—	0	28	—	—
South Dakota	13	1	15	41	29	_	0	/	_	_	_	0	- 22	_	_
S. Atlantic	63	85	211	1,752	1,952	_	0	2	_	_	_	0	7	_	_
District of Columbia	_	0	5		14	_	0	0	_	_	_	Ő	1	_	_
Florida	43	0	42	484	N	—	0	1	—	—	—	0	0	—	—
Georgia Marvland <sup>1</sup>	N N	0	0	N	N N	_	0	1	_	_	_	0	4	_	_
North Carolina	_	õ	õ	_	_	_	Ő	1	_	_	_	õ	ō	_	_
South Carolina <sup>1</sup>	6	22	72	515	530	_	0	1	_	—	_	0	0	_	_
Virginia West Virginia	14	25 25	56	237 505	620 750	_	0	1	_	_	_	0	2	_	_
E.S. Central	6	5	43	134	34	_	0	15	_	3	_	0	16	_	_
Alabama <sup>1</sup>	6	5	43	132	34	—	Ō	2	—	_	—	0	0	—	—
Kentucky	N	0	0	N	N	_	0	2	_		_	0	1	_	_
Tennessee <sup>1</sup>	N	0	2	∠ N	N	_	0	4	_		_	0	2	_	_
W.S. Central	295	200	966	4.623	4.398	_	0	58	_	4	_	0	26	_	2
Arkansas <sup>1</sup>		9	92	171	356	_	Õ	4	_	_	_	Õ	2	_	_
Louisiana Oklahoma	_	1	11	41	31	_	0	13	_	_	_	0	9	_	1
Texas <sup>1</sup>	295	172	873	4,411	4,011	_	0	38	_	4	_	0	16	_	1
Mountain	17	55	105	1,127	1,383	_	0	61	_	2	_	1	228	_	_
Arizona	_	0	0	, <u> </u>		_	0	9	_	_	_	0	15	_	_
Colorado Idaho <sup>¶</sup>	N	22	51	417 N	/12 N	_	0	10 30	_	2	_	0	51 157	_	_
Montana <sup>1</sup>		0	26	153	N	_	0	3	_	_	_	Ő	8	_	_
Nevada	—	0	3		4	—	0	9	—	—	—	0	16	—	—
New Mexico" Utah	17	4 18	19 65	123 421	262 393	_	0	1	_	_	_	0	1 17	_	_
Wyoming <sup>1</sup>	—	0	11	13	12	_	õ	7	_	_	_	õ	10	_	_
Pacific	_	0	9	20	_	_	0	15	_	_	_	0	51	_	_
Alaska	—	0	9	20	N	—	0	0	—	—	_	0	0	—	_
Calitornia Hawaii	_	0	0	_	N	_	0	15 0	_	_	_	0	37	_	_
Oregon <sup>1</sup>	N	ŏ	õ	Ν	Ν	_	ŏ	2	_	_	_	ő	14	_	_
Washington	N	0	0	N	N	—	0	0	—	—	_	0	2	—	_
American Samoa	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	<u> </u>	_	_	<u> </u>	<u> </u>	<u> </u>	_	_	<u> </u>		<u> </u>	_	_	<u> </u>	0
Puerto Rico	2	12	24	176	199	_	0	0	_	_	_	0	0	_	_
U.S. Virgin Islands	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U

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### TABLE III. Deaths in 122 U.S. cities,\* week ending April 28, 2007 (17th Week)

	All causes, by age (years)								All causes, by age (years)								
Reporting Area	All Ages	<u>≥</u> 65	45-64	25-44	1-24	<1	P&l⁺ Total	Reporting Area	All Ages	<u>&gt;</u> 65	45-64	25-44	1-24	<1	P&I <sup>†</sup> Total		
New England	578	410	108	38	14	8	66	S. Atlantic	1,339	819	329	116	42	33	65		
Boston, MA	133	83	31	7	8	4	16	Atlanta, GA	66	36	17	8	3	2			
Bridgeport, CT	39	30	4	4	1		1	Baltimore, MD	14/	74	48	14	8	3	13		
Fall River MA	17	12	3	2	_	_	4		312	199	72	22	11	8	13		
Hartford, CT	58	40	12	4	1	1	11	Miami, FL	132	82	30	14	4	2	4		
Lowell, MA	29	20	7	2	_	_	4	Norfolk, VA	51	27	13	5	1	5	3		
Lynn, MA	15	9	4	2	_	—	2	Richmond, VA	59	35	14	6	2	2	4		
New Bedford, MA	28	21	6	1	_	—	7	Savannah, GA	66	52	10	2	1	1	1		
New Haven, CI	46	30	11	3	2		5	St. Petersburg, FL	53	25	17	5	3	3	4		
Somerville MA	64 5	47	2	4	_	2	5	Tampa, FL Washington D C	215	134	52 21	23	3	3	1		
Springfield MA	46	33	8	3	1	1	3	Wilmington DF	13	10	2	10					
Waterbury, CT	24	19	4	1			5										
Worcester, MA	60	52	5	2	1	_	3	E.S. Central	800	532	187	42	25	14	59		
Mid Atlantic	2 4 1 0	1 667	518	132	52	41	135	Chattanooga TN	84	60	15	8	- 5	2	14		
Albany, NY	51	26	14	7	3	1	1	Knoxville, TN	71	41	21	5	2	2	7		
Allentown, PA	22	16	5	_	1	_	_	Lexington, KY	71	51	14	3	1	2	2		
Buffalo, NY	78	46	26	3	1	2	8	Memphis, TN	153	95	46	6	4	2	5		
Camden, NJ	33	18	10	1	1	3	—	Mobile, AL	68	48	14	4	2	_	8		
Elizabeth, NJ	18	12	3	2	1	_	3	Montgomery, AL	38	21	10	1	4	2	5		
Erie, PA	57	39	13	2	2	1	6	Nashville, TN	155	105	31	9	/	3	13		
New York City, NY	1 1 1 1 4	797	238	51	20	8	45	W.S. Central	1,543	1,004	371	94	32	42	84		
Newark, NJ	72	34	19	7	20	10	5	Austin, TX	91	49	23	11	1	7	10		
Paterson, NJ	20	8	10	1	1	_	_	Baton Rouge, LA	40	30	8	2	_	_	_		
Philadelphia, PA	469	310	94	37	15	13	26		50 106	41	/ 51	10		2	9 14		
Pittsburgh, PA§	37	29	6	1	1	—	3		190	144	34	9	5		2		
Reading, PA	41	32	7	2	_	_	5	Fort Worth, TX	138	92	35	4	1	6	6		
Rochester, NY	154	116	26	6	3	3	8	Houston, TX	326	190	89	23	11	13	11		
Screnton PA	30	26	2	2	_	_	1	Little Rock, AR	57	33	17	2	1	4	2		
Svracuse NY	124	88	29	6	1	_	20	New Orleans, LA <sup>1</sup>	U	U	U	U	U	U	U		
Trenton, NJ	21	14	5	2		_	1	San Antonio, TX	229	161	48	11	6	3	15		
Utica, NY	14	13	1	_	_	—	1	Shreveport, LA	109	65	20	4	1	2	11		
Yonkers, NY	26	21	5	—	—	—	1		103			10					
E.N. Central	2,242	1,464	545	128	51	54	137	Mountain	1,216	807	259	91	28	29	83		
Akron, OH	53	36	13	1	2	1	3	Boise ID	73	52	44	12	3	2	12		
Canton, OH	47	32	15				3	Colorado Springs, CO	111	81	22	7	_	1	6		
Chicago, IL	409	244	118	26	11	10	34	Denver, CO	93	54	28	6	1	4	9		
Cincinnati, OH	97	169	31	10	3	6	17	Las Vegas, NV	273	180	60	26	3	4	19		
Columbus OH	200	127	57	13	6	6	13	Ogden, UT	31	24	2	3	1	1	3		
Davton, OH	135	92	29	6	4	4	16	Phoenix, AZ	179	99	39	17	12	10	12		
Detroit, MI	163	96	54	9	3	1	7	Pueblo, CO Salt Liko City, LIT	40	27	11	1	1		4		
Evansville, IN	34	24	4	5	1	_	1		120	95	20	6	2	1	5		
Fort Wayne, IN	77	55	13	4	_	5	2		1		20		-				
Gary, IN Grand Banida MI	23	0	11	2	1	3		Pacific Barkalov CA	1,398	983	283	82	28	22	99		
Indiananolis IN	217	139	48	14	9	7	10	Eresno CA	64	49	13	_	2	_	5		
Lansing, MI	52	36	13	1	_	2	3	Glendale, CA	Ŭ	Ŭ	Ű	U	Ū	U	ŭ		
Milwaukee, WI	100	65	27	4	2	2	2	Honolulu, HI	81	55	19	4	2	1	9		
Peoria, IL	61	43	10	7	_	1	5	Long Beach, CA	54	39	8	4	3	_	8		
Rockford, IL	43	35	3	3	1	1	1	Los Angeles, CA	U	U	U	U	U	U	U		
South Bend, IN	50	37	9	3	1		1	Pasadena, CA	57	42	12	2	_	1	7		
Youngstown OH	120	83 55	25	1	4	1	8	Portiand, OR Sacramonto, CA	147	90 107	32	10	4	6	10		
roungstown, orr	05	55	0				5	Sacramento, CA	150	101	30	10	1	4	10		
W.N. Central	584	387	128	36	17	15	41	San Francisco. CA	110	78	27	4	1	_	12		
Des Moines, IA	57	49	6	2	_	_	6	San Jose, CA	183	139	25	16	2	1	15		
Kansas City KS	∠3 21	12	0	2	1	_	_	Santa Cruz, CA	35	24	9	1	1	—	1		
Kansas City, MO	120	82	25	6	3	4	8	Seattle, WA	135	91	28	10	3	3	6		
Lincoln, NE	27	19	6	2	_	_	2	Spokane, WA	62	45	12	2	2	1	1		
Minneapolis, MN	54	24	16	6	3	5	4	I acoma, WA	119	89	19	/	4	_	7		
Omaha, NE	67	48	14	3	1	1	2	Total	12,110**	8,073	2,728	759	289	258	769		
St. Louis, MO	91	47	24	9	7	3	5										
St. Paul, MN	59	45	12	2		_	9										
WWICHITA KS	hh	////	1.4	/1	.,	.,	· - 4	1									

U: Unavailable.

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

<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.





\* 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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