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Great American Smokeout — November 15, 2007

In 2006, approximately 45.3 million (one in five) U.S. adults were current smokers (1). November 15, 2007, marks the American Cancer Society's 31st annual Great American Smokeout, an event designed to encourage cigarette smokers to quit smoking for at least 1 day so that they might quit permanently. Smoking cessation has substantial and immediate health benefits for men and women of all ages (2).

Smokers who use effective cessation aids such as clinician assistance, pharmacotherapy approved by the Food and Drug Administration, and behavioral counseling (e.g., quitlines) can increase their likelihood of quitting permanently (3). All 50 states, the District of Columbia, and certain U.S. territories have quitlines that can be reached at 800-QUIT-NOW (800-784-8669). Other interventions that increase cessation include implementing sustained media campaigns, reducing patient out-of-pocket treatment costs, increasing the price of tobacco products, and establishing smoke-free environments (4).

Information on the Great American Smokeout is available at http://www.cancer.org/docroot/ped/ped_10_4.asp or by telephone: 800-227-2345. Advice on how to quit smoking is available at http://www.smokefree.gov.

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Cigarette Smoking Among Adults — United States, 2006

One of the national health objectives for 2010 is to reduce the prevalence of cigarette smoking among adults to $\leq 12\%$ (objective 7-1a) (1). To assess progress toward achieving this objective, CDC analyzed data from the 2006 National Health Interview Survey (NHIS). This report summarizes the results of that analysis, which indicated that in 2006, approximately 20.8% of U.S. adults were current cigarette smokers. This prevalence had not changed significantly since 2004 (2), suggesting a stall in the previous 7-year (1997-2004) decline in cigarette smoking among adults in the United States. In addition, the findings indicated that persons with a diagnosis of a smoking-related chronic disease have a significantly higher prevalence of being a current smoker than persons with other chronic diseases or persons with no chronic disease. To reduce smoking prevalence further in the United States, comprehensive, evidence-based approaches for preventing smoking initiation and increasing cessation, including clinical interventions for populations at high risk, need to be fully implemented (3).

The 2006 NHIS adult core questionnaire, containing questions on cigarette smoking and cessation attempts, was administered by in-person interview to a nationally representative sample of 24,275 persons in the noninstitutionalized U.S. civilian population aged ≥18 years; the overall response rate was 70.8%. To classify smoking status, respondents were asked, "Have you smoked at least 100 cigarettes in your entire life?"; Those who

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answered "yes" were asked, "Do you now smoke cigarettes every day, some days, or not at all?" Ever smokers were defined as those who reported having smoked at least 100 cigarettes during their lifetimes. Current smokers were those who had smoked at least 100 cigarettes during their lifetimes and, at the time of the interview, reported smoking every day or some days. Former smokers were those who reported smoking at least 100 cigarettes during their lifetimes but currently did not smoke. Never smokers were those who reported never having smoked 100 cigarettes during their lifetimes. Among current cigarette smokers, making at least one cessation attempt during the preceding year was defined as a "yes" response to the question, "During the past 12 months, have you stopped smoking for more than one day because you were trying to quit smoking?" Respondents were categorized as having a chronic disease if they answered "yes" to any one of a series of questions about 42 chronic diseases (i.e., "Have you ever been told by a doctor or other health professional that you had...?"); of these chronic diseases, 16 were considered to be smoking related* (4). Data were adjusted for nonresponse and weighted to provide national estimates of cigarette smoking prevalence. Because the distribution of smoking-related morbidity varies by age, estimates of current, former, and never smokers by chronic disease status were age adjusted to the 2000 U.S. adult population; 95% confidence intervals were calculated using statistical analysis software to account for the survey's multistage probability sample design. Statistical significance was determined by non-overlapping confidence intervals.

In 2006, an estimated 20.8% (45.3 million) of U.S. adults were current cigarette smokers; of these, 80.1% (36.3 million) smoked every day, and 19.9% (9.0 million) smoked some days. Among current cigarette smokers, an estimated 44.2% (19.9 million) had stopped smoking for more than 1 day during the preceding 12 months because they were trying to quit. Of the estimated 91 million persons who had smoked at least 100 cigarettes during their lifetimes (i.e., ever smokers), 50.2% (45.7 million) had quit smoking at the time of the interview.

The prevalence of current cigarette smoking varied substantially among population subgroups. By sex, prevalence was higher among men (23.9%) than women (18.0%) (Table 1). Among racial/ethnic groups, Asians had the

^{*} Cigarette smoking has been identified by the Surgeon General as a cause of selected malignant neoplasms, cardiovascular diseases, and respiratory diseases (4). Smoking-related chronic diseases include 1) cancers: lung; bladder; cervix; esophagus; kidney; larynx-windpipe; mouth, tongue, or lip; pancreas; stomach; and throat-pharynx; 2) cardiovascular diseases: coronary heart disease, angina pectoris, heart attack, and stroke; and 3) respiratory diseases: emphysema and chronic bronchitis.

TABLE 1. Estimated percentage of persons aged ≥18 years who were current smokers,* by sex and selected characteristics — National Health Interview Survey, United States, 2006

	(n	Men = 10,715)	-	Vomen = 13,560)	(N	Total = 24,275)
Characteristic	%	(95% CI†)	%	(95% CI)	%	(95% CI)
Race/Ethnicity§						
White, non-Hispanic	24.3	(23.0-25.6)	19.7	(18.6-20.8)	21.9	(21.0-22.8)
Black, non-Hispanic	27.6	(24.2–31.0)	19.2	(17.3–21.1)	23.0	(21.1–24.9)
Hispanic	20.1	(17.8–22.4)	10.1	(8.5–11.7)	15.2	(13.7–16.7)
American Indian/Alaska Native, non-Hispanic¶	35.6	(18.7-52.5)	29.0	(15.7-42.3)	32.4	(19.7-45.1)
Asian, non-Hispanic**	16.8	(13.1-20.5)	4.6	(3.0-6.2)	10.4	(8.4–12.4)
Education (yrs) ^{††}						
0-12 (no diploma)	30.6	(27.9 - 33.3)	23.0	(20.7-25.3)	26.7	(25.0-28.4)
<u><</u> 8	22.3	(18.5–26.1)	12.3	(9.7–14.9)	17.4	(15.1–19.7)
9–11	40.1	(35.7–44.5)	31.4	(27.7–35.1)	35.4	(32.5–38.3)
1 2	27.9	(21.5–34.3)	23.3	(17.5–29.1)	25.6	(21.2–30.0)
GED§§ diploma	51.3	(43.4-59.2)	40.2	(33.2-47.2)	46.0	(40.5-51.5)
High school diploma	27.6	(25.3-29.9)	20.4	(18.7–22.1)	23.8	(22.3-25.3)
Associate degree	25.4	(22.1-28.7)	17.8	(15.2-20.4)	21.2	(19.1–23.3)
Some college	26.1	(24.2-28.0)	20.0	(18.3-21.7)	22.7	(21.4-24.0)
Undergraduate degree	10.8	(9.0-12.6)	8.4	(7.0-9.8)	9.6	(8.5-10.7)
Graduate degree	7.3	(5.4-9.2)	5.8	(4.1-7.5)	6.6	(5.3-7.9)
Age group (yrs)						
18–24	28.5	(24.7 - 32.3)	19.3	(16.7-21.9)	23.9	(21.7-26.1)
25–44	26.0	(24.3–27.7)	21.0	(19.7–22.3)	23.5	(22.4–24.6)
45–64	24.5	(22.7-26.3)	19.3	(17.9–20.7)	21.8	(20.6–23.0)
≥65	12.6	(10.6–14.6)	8.3	(7.0–9.6)	10.2	(9.2–11.2)
Poverty status ^{¶¶}						
At or above federal poverty level	22.9	(21.6-24.2)	17.8	(16.8-18.8)	20.4	(19.6-21.2)
Below federal poverty level	34.0	(30.0–38.0)	28.0	(25.2–30.8)	30.6	(28.0–33.2)
Unknown	23.3	(21.0–25.6)	14.2	(12.6–15.8)	18.3	(16.9–19.7)
Total	23.9	(22.8–25.0)	18.0	(17.2–18.8)	20.8	(20.1–21.5)

^{*} Persons who reported smoking at least 100 cigarettes during their lifetimes and who, at the time of interview, reported smoking every day or some days. Excludes 315 respondents whose smoking status was unknown.

lowest prevalence (10.4%). Hispanics had a significantly lower prevalence of smoking (15.2%) than American Indians/Alaska Natives (32.4%), non-Hispanic blacks (23.0%), and non-Hispanic whites (21.9%).

Prevalence also varied by level of education. Smoking prevalence was highest among adults who had earned a General Educational Development (GED) diploma (46.0%) and those with 9–11 years of education (35.4%); overall, smoking prevalence decreased as education level increased. By age group, adults aged 18–24 years and 25–44 years had the highest prevalence of smoking (23.9% and 23.5%, respectively). The prevalence of current smoking was higher among adults living below the federal poverty level (30.6%) than among those at or above this level (20.4%).

Before 2006, certain population subgroups already had achieved smoking prevalences that were lower than the

national health objective of 12%, and the prevalences remained low in 2006. These included Hispanic (10.1%) and Asian (4.6%) women, women with undergraduate (8.4%) or graduate (5.8%) degrees, men with undergraduate (10.8%) or graduate (7.3%) degrees, and women aged >65 years (8.3%).

In 2006, the age-adjusted prevalence of current smoking was 36.9% among persons with a smoking-related chronic disease and 19.3% among those without a chronic disease (Table 2). Current smoking prevalence was higher among persons with smoking-related cancers (other than lung cancer) (38.8%), coronary heart disease (CHD) (29.3%), and stroke (30.1%) than among persons without chronic diseases, and nearly half (49.1%) of U.S. adults with emphysema and 41.1% of those with chronic bronchitis were current smokers. With the exception of persons who had a stroke, persons with any smoking-related chronic disease

[†] Confidence interval.

[§] Excludes 266 respondents of unknown race or multiple races.

[¶] Wide variances in estimates reflect small sample sizes.

^{**} Does not include Native Hawaiians or Other Pacific Islanders.

^{††} Among persons aged ≥25 years. Excludes 305 persons whose educational level was unknown.

^{§§} General Educational Development.

¹¹ Based on family income reported by respondents and 2005 poverty thresholds published by the U.S. Census Bureau.

TABLE 2. Estimated age-adjusted prevalence of current smokers,* former smokers,† and never smokers§ among U.S. adults aged ≥18 years, by chronic disease status — National Health Interview Survey, United States, 2006

	Curre	ent smokers	Form	ner smokers	Never smokers
Disease	%	(95% CI ¹)	%	(95% CI)	% (95% CI)
Any smoking-related chronic disease**	36.9	(34.2–40.0)	26.0	(23.6–28.5)	37.1 (34.3–40.0)
Malignant neoplasms					
Lung	20.9	(9.5-39.8)	61.2	(41.5-77.9)	17.9 (8.0–35.6)
Other cancers ^{††}	38.8	(32.0-46.1)	33.2	(26.3-40.9)	28.0 (22.2-34.7)
Cardiovascular disease					
Coronary heart disease§§	29.3	(23.2 - 36.2)	31.8	(25.7 - 38.6)	38.9 (33.7-44.4)
Stroke	30.1	(22.6 - 38.8)	23.0	(17.8-29.1)	47.0 (38.4–55.8)
Respiratory disease					
Emphysema	49.1	(40.1 - 58.2)	28.6	(21.8 - 36.5)	22.3 (13.6-34.3)
Chronic bronchitis	41.1	(37.4 - 45.0)	20.0	(17.4-23.0)	38.9 (34.9-43.0)
Other chronic disease ^{¶¶}	23.0	(21.9-24.1)	23.5	(22.5-24.5)	53.5 (52.2-54.9)
No chronic disease	19.3	(18.4–20.2)	16.4	(15.4–17.4)	64.3 (63.1–65.6)

- * Persons who reported smoking at least 100 cigarettes during their lifetimes and who, at the time of interview, reported smoking every day or some days.
- [†] Persons who reported smoking at least 100 cigarettes during their lifetimes but who currently did not smoke.
- § Persons who reported never smoking 100 cigarettes during their lifetimes.
- ¶ Confidence interval.
- ** Includes smoking-related malignant neoplasms, cardiovascular diseases, and respiratory diseases. Cigarette smoking has been identified by the Surgeon General as a cause of these diseases (US Department of Health and Human Services. The health consequences of smoking: a report of the Surgeon General. Atlanta, GA: US Department of Health and Human Services, CDC; 2004).
- ^{††} Includes cancers of the bladder; cervix; esophagus; kidney; larynx-windpipe; mouth, tongue, or lip; pancreas; stomach; and throat-pharynx.
- §§ Includes coronary heart disease, angina pectoris, and myocardial infarction.

¶¶ Includes chronic diseases that were not smoking related.

were significantly less likely to have never smoked than those with other chronic diseases (53.5%) or no chronic disease (64.3%). Persons with lung cancer (17.9%) and emphysema (22.3%) were least likely to be never smokers.

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Editorial Note: Cigarette smoking remains the leading preventable cause of disease and death in the United States, resulting in approximately 438,000 deaths annually (5). The prevalence of cigarette smoking remained relatively unchanged during the early 1990s but gradually decreased from 1997 (24.7%) to 2004 (20.9%) (Figure). This report indicates that the prevalence of current smoking among U.S. adults in 2006 (20.8%) was not significantly different from the prevalence in 2004 (20.9%), suggesting a stall in previous declines. This lack of a decrease in cigarette use during 2 years might be a result of several factors. Most notably, funding for comprehensive state programs for tobacco control and prevention decreased by 20.3% from 2002 to 2006 (6), and tobacco-industry marketing expenditures nearly doubled from 1998 (\$6.7 billion) to

2005 (\$13.1 billion) (7). In 2005, approximately 81% (\$10.6 billion) of tobacco-industry marketing expenditures were related to discounting strategies (e.g., coupons, two-for-one offers, or promotional discounts for retailers or wholesalers) (7) that reduce the impact of increases in the unit price of tobacco, which are effective in preventing initiation of smoking and increasing cessation.[†]

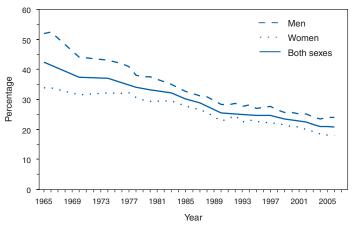
Among smokers who already have a smoking-related chronic disease, those who quit have a lower risk for death from the disease than those who continue smoking (8). Smokers who quit have a slower rate of decline in lung function and a lower incidence of bronchitis, emphysema, and other respiratory conditions than persons who continue to smoke (8). Among smokers with CHD, those who quit have a lower risk for further CHDrelated morbidity and mortality than those who continue to smoke (8). In addition, smokers who have cancer and who continue smoking during

treatment decrease treatment effectiveness, overall survival prognosis, and quality of life and increase the risk for having another malignancy or comorbid condition (9). The continuation of smoking among those who have smoking-related chronic diseases described in this report highlights the need for health-care providers to emphasize the importance of quitting. Health-care providers should repeatedly offer intensive smoking-cessation interventions to all of their patients, especially those with smoking-related chronic diseases who continue to smoke.

The findings in this report are subject to at least three limitations. First, estimates of cigarette smoking are based on self-report and are not validated by biochemical tests. However, self-reported population-based data on current smoking status have high validity when compared with measured serum cotinine levels (10). Second, the NHIS questionnaire is administered in English and Spanish only, which might have resulted in imprecise estimates for certain racial/ethnic subgroups because of language barriers. Third, the small NHIS samples for certain population groups (e.g.,

[†] CDC. The guide to community preventive services: tobacco. Available at http://www.thecommunityguide.org/tobacco.

FIGURE. Estimated percentage of persons aged ≥18 years who were current smokers,* by sex — National Health Interview Survey, United States, 1965–2006



*During 1965–1991, current smokers were defined as persons who reported smoking at least 100 cigarettes during their lifetimes and who, at the time of interview, reported smoking ("Have you smoked at least 100 cigarettes in your entire life?" and "Do you smoke cigarettes now?"). In 1992, the definition changed to more accurately assess intermittent smoking (i.e., smoking on some days) and included persons who reported they smoked either every day or some days ("Do you now smoke cigarettes every day, some days, or not at all?")

American Indians/Alaska Natives) resulted in unstable single-year estimates with large confidence intervals.

Since the 1960s, smoking prevalence in the United States has decreased substantially (Figure); however, recent data suggest that declines in both adolescent and adult smoking prevalence might be stalling. Cigarette smoking continues to result in substantial costs. The economic costs of smoking in the United States are estimated at \$167 billion annually (\$92 billion in productivity losses from premature death and \$75.5 billion in health-care expenditures) (5). In 2007, the Institute of Medicine concluded that funding comprehensive tobacco-control programs at levels recommended by CDC and regulations designed to foster policy innovations are essential strategies that should be implemented to reduce tobacco use (3).

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Salmonella Typhimurium Infection Associated with Raw Milk and Cheese Consumption — Pennsylvania, 2007

In February 2007, the Pennsylvania Department of Health received reports, through routine electronic laboratory disease reporting, of two persons with recent laboratoryconfirmed infections with Salmonella enterica serotype Typhimurium. Both persons had reported drinking raw (unpasteurized) milk from the same York County, Pennsylvania, dairy (dairy A). S. Typhimurium isolates from these persons had pulsed-field gel electrophoresis (PFGE) patterns that were indistinguishable by use of the XbaI restriction enzyme. The same month, the Pennsylvania Department of Agriculture (PDA) received reports of illness from raw-milk customers of dairy A. PDA obtained milk samples from the raw-milk bulk tank at dairy A, which yielded S. Typhimurium with a PFGE pattern that was identical to the pattern from patient isolates. On February 26, the Pennsylvania Department of Health and PDA launched an investigation to determine the source and scope of the outbreak. This report summarizes the findings of that investigation, which determined that 29 cases of diarrheal illness caused by S. Typhimurium were associated with consumption of raw milk or raw-milk products from dairy A. The findings underscore the need to inform policymakers and the public of the potential health risks associated with raw-milk consumption.

Epidemiologic and Laboratory Investigation

In Pennsylvania, raw-milk sales are legal at farms that hold a PDA permit, and vendors must display public notices regarding the potential hazards of consuming raw milk (1). Dairy A owned 120 cows and sold raw milk for pasteurization and by PDA permit directly to consumers. In February 2007, PDA estimated that dairy A was selling 200–300 gallons of raw milk weekly to 275 regular customers.

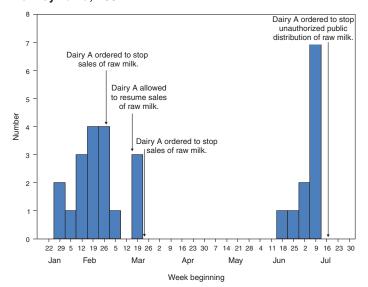
A case of salmonellosis was defined as a diarrheal illness with onset since February 1, 2007, in a Pennsylvania resident who provided a stool specimen that tested positive for S. Typhimurium with a PFGE pattern that matched the outbreak pattern by use of the XbaI restriction enzyme. Nationally notifiable disease reports from Pennsylvania since January 2005 were reviewed for PFGE-matched S. Typhimurium isolates to identify cases and risk factors. To locate additional cases, ill household contacts of persons with confirmed cases were asked to provide food histories and submit stool specimens for testing. Raw milk for testing was obtained from dairy A milk tanks on five dates (February 20, February 28, March 27, May 14, and July 19) and from households of two ill persons on two dates (February 28 and July 20). In addition, PDA conducted multiple dairy A inspections during February-July 2007.

Investigative Findings

A total of 29 cases were identified, with illness onset occurring in three temporal clusters during February 3–July 14, 2007 (Figure). The first cluster consisted of 15 cases with onsets of illness from February 3 to March 5. Raw-milk samples were collected February 20 from a dairy A bulk milk tank and February 28 from the home of an ill person. Both sets of samples yielded the outbreak strain of S. Typhimurium. On March 2, PDA ordered dairy A to stop raw-milk sales and advised the public not to consume raw-milk products from dairy A.

On March 19, PDA allowed dairy A to resume sales of raw milk after PDA conducted inspections and recorded two consecutive negative cultures from milk-tank samples. However, a second cluster of three cases was detected when the outbreak strain of *S*. Typhimurium was identified in another patient, whose diarrheal illness began on March 21 and who had consumed raw milk from dairy A after sales resumed. The two additional cases were identified in persons with onsets of illness on March 19 and March 22. The first of these occurred in one of six ill persons who primarily spoke Spanish and who told investigators they

FIGURE. Number of cases* of diarrheal illness caused by infection with *Salmonella* Typhimurium, indistinguishable by pulsed-field gel electrophoresis, by week of illness onset — Pennsylvania, 2007



*N = 29.

had not consumed raw milk. However, when reinterviewed in early April, three of these six persons reported consuming queso fresco (a type of soft cheese) they bought at a grocery store serving the local Hispanic community. PDA learned that the queso fresco had been made by an unlicensed producer who purchased approximately 20 gallons of raw milk weekly from dairy A. Sale of raw-milk cheeses aged <60 days is illegal in Pennsylvania. Subsequently, in April, PDA inspectors seized 18 unlabeled retail containers of queso fresco from the grocery store. The cheese tested positive for alkaline phosphatase, indicating the cheese was produced from unpasteurized milk (2). Bacterial cultures were negative for pathogens.

On March 27, PDA again ordered dairy A to halt raw-milk sales and suspended its raw-milk permit. No additional cases were noted until June–July 2007, when a third cluster of 11 PFGE-matched S. Typhimurium cases was detected through routine electronic laboratory reporting. Of these, 10 occurred among residents of three counties near dairy A. On July 19, PDA confirmed that dairy A had been distributing raw milk to the public despite its suspended permit; the date when illegal milk distribution began could not be determined. The outbreak strain of S. Typhimurium was isolated from dairy A raw milk collected from a bulk milk tank on July 19 and from the home of an ill person on July 20. PDA ordered dairy A to halt distribution of raw milk on July 20 and subsequently revoked the raw-milk permit for this dairy.

Among the 29 persons identified with diarrheal illness and PFGE-matched S. Typhimurim, 17 (59%) were male, and the median age was 6 years (range: 5 months-76 years). Fourteen (48%) patients reported drinking raw milk from dairy A, four (14%) consumed unregulated queso fresco (three linked to dairy A raw milk and one from an unknown source), and two (7%) consumed raw milk but did not identify the source. Two (7%) other patients were unrelated infants aged 5 months and 7 months. The parents of these infants acknowledged that raw milk from dairy A was present in their households but told investigators the milk was not consumed by the infants. For seven (24%) patients who did not reside with any of the other patients, no source of exposure to S. Typhimurium could be determined. Two of the 29 patients were hospitalized; no deaths were reported.

Environmental Inspections

Eight PDA inspections of dairy A conducted during January–April 2007 revealed improper cleaning of milking equipment, insufficient supervision of workers, unspecified illness among lactating cows, and bird and rodent infestation. On at least two inspections, the required public notice regarding the potential hazards of drinking raw milk was not visible at the dairy A retail store.

S. Typhimurium matched by PFGE to the outbreak pattern was isolated from dairy A raw-milk tank samples collected on three different dates (February 20, May 14, and July 19); an S. Typhimurium isolate collected from a milk tank February 28 was unavailable for PFGE typing. In addition to Salmonella, dairy A raw-milk tank samples also yielded Listeria monocytogenes (February 28, May 14, and July 19) and Campylobacter jejuni (February 28 and May 14). Although a stool specimen from one patient with February 28 illness onset yielded both S. Typhimurium and C. jejuni, the Campylobacter isolate was unavailable for subtyping. No Listeria infections were associated with dairy A.

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Editorial Note: Raw milk is a well-documented source of infections from *Salmonella*, *Escherichia coli* O157:H7, *Campylobacter*, *Listeria*, *Mycobacterium bovis*, and other pathogens (2–6). In 1938, before widespread adoption of milk pasteurization in the United States, an estimated 25% of all foodborne and waterborne outbreaks of disease were associated with milk (7). By 2001, the percentage of such outbreaks associated with milk was estimated at <1% (7).

During 1998–2005, a total of 45 outbreaks of foodborne illness were reported to CDC in which unpasteurized milk (or cheese suspected to have been made from unpasteurized milk) was implicated. These outbreaks accounted for 1,007 illnesses, 104 hospitalizations, and two deaths (CDC, unpublished data, 2007). Because not all cases of foodborne illness are recognized and reported, the actual number of illnesses associated with unpasteurized milk likely is greater.

In the investigations described in this report, the evidence indicating raw milk from dairy A as the source of this outbreak included the 1) high percentage of ill persons who reported consuming either raw milk (48%) or queso fresco traced to raw milk (10%) from dairy A, 2) temporal associations between clusters of illnesses and starts and stops of distribution of raw milk by dairy A, and 3) repeated isolation of the outbreak strain of S. Typhimurium from dairy A raw-milk tanks. The PFGE pattern of the outbreak strain (XbaI JPXX01.0022) is rare, previously identified only 24 times in isolates from 11 states in 3 years, in a national PulseNet database of approximately 43,000 S. Typhimurium isolates.

Consumers have reported consuming raw milk for convenience, taste preference, or perceived health benefits. Although some advocates claim health benefits from raw milk compared with pasteurized milk, including decreased risks for atherosclerosis, arthritis, and lactose intolerance, such claims are not supported by scientific evidence (8). Unsubstantiated claims of health benefits of raw milk for infants and children are particularly concerning for caregivers because infants and children are dependent on their caregivers to make safe dietary decisions for them. Sixteen of the 29 ill persons in this outbreak were aged <7 years.

Pathogens that infect humans are shed in the feces of cows, can be present in or on the udders of cows, and can contaminate their milk. Standard hygiene practices during milking can reduce but not eliminate the risk for milk contamination. In a 2001–2002 survey of Pennsylvania dairy farms, pathogenic bacteria, including *Salmonella*, were isolated from 13% of samples from raw-milk bulk tanks (9). Pasteurization decreases the number of pathogenic organisms, prevents transmission of pathogens, and has been determined to improve the safety of milk more than other measures, including certification of raw milk (4,5).

Farms in Pennsylvania that hold PDA raw-milk permits undergo twice-monthly milk testing for coliforms and standard plate counts and monthly testing for growth inhibitors and somatic cell counts; annual PDA inspection and culture of raw milk for *Salmonella*, *Campylobacter*, *E. coli* O157, and *L. monocytogenes*; and annual herd skin testing

for *Mycobacterium bovis* and *Brucella* (1). Despite these measures, consumers cannot be assured that certified raw milk is free of pathogens.

As of 2004, at least 27 states permitted some form of raw-milk sales to the public, including sales at dairies, farmers' markets, or through purchase of "cow shares." Certain states also allow public sales of raw milk but for pet food only (10). In Pennsylvania, the number of dairies with raw-milk permits increased from 42 in 2005 to 75 in 2007. During 2006–2007, three clusters of illness from Campylobacter were associated with consumption of raw milk from three different Pennsylvania dairies (Pennsylvania Department of Health, unpublished data, 2007). During the same period, PDA announced raw-milk recalls from three other dairies after finding L. monocytogenes in milk samples; no human illness was associated with these findings.

Given the continued interest in raw-milk production, policymakers, parents, and the public need to be informed regarding the potential health risks posed by raw-milk consumption. The only sure way for consumers to prevent raw-milk-associated infection from *Salmonella* or other pathogens is to refrain from consuming raw milk.

Acknowledgments

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Syringe Exchange Programs — United States, 2005

Syringe exchange programs (SEPs) provide free sterile syringes* in exchange for used syringes to reduce transmission of bloodborne pathogens among injection-drug users (IDUs) (1). SEPs in the United States began as a way to prevent the spread of human immunodeficiency virus (HIV) and other bloodborne infections such as hepatitis B and hepatitis C. The National Institute on Drug Abuse recommends that persons who continue to inject drugs use a new, sterile syringe for each injection (2). Monitoring syringe exchange activity is an important part of assessing HIV prevention measures in the United States. As of November 2007, a total of 185 SEPs were operating in 36 states, the District of Columbia (DC), and Puerto Rico (North American Syringe Exchange Network [NASEN], unpublished data, 2007). This report summarizes a survey of SEP activities in the United States during 2005 and compares the findings with previous SEP surveys (3-7; Beth Israel Medical Center [BIMC], unpublished data, 2000 and 2004). The findings indicated an increase in overall funding for SEPs, including an increase in public funding, and a stabilization in both the number of SEPs operating and the number of syringes exchanged since 2004. This report also documents an expansion of services offered by SEPs, a trend that resulted from an increase in state and local funding. These expanded services are helping protect IDUs and their communities from the spread of bloodborne pathogens and are providing access to health services for a population at high risk. Monitoring of syringe exchange activity should continue.

In March 2006, staff members from BIMC and NASEN mailed surveys to directors of all 166 SEPs registered with NASEN at that time (compared with 68 known SEPs for the 1994–1995 survey, 101 for 1996, 113 for 1997, 131 for 1998, 154 for 2000, 148 for 2002, and 174 for 2004) (3–7; BIMC, unpublished data, 2000 and 2004). Registration with NASEN provides important benefits to SEPs and does not involve any cost; thus, nearly all SEPs in the

^{*} For this report, the term "syringes" refers to both syringes and needles.

United States are likely to be registered. The surveys included questions regarding the number of syringes exchanged, the types of services provided, and budgets and funding during 2005. Data for 2005 were collected during March–August 2006. Telephone interviews were conducted to clarify responses received on surveys. The methods were similar to those used in previous SEP surveys, except for an Internet-based option that was used in the 2002 survey only.

Of the 166 SEPs contacted, 118 (71%) completed the survey. These 118 SEPs reported operating in 91 cities[†] in 28 states/territories[§] and in DC. A total of 79 (67%) SEPs were operating in six states: 22 in California, 17 in New Mexico, 15 in Washington, 10 in Wisconsin, nine in New York, and six in Connecticut.

SEP size was determined by the number of syringes exchanged during 2005 (Table 1); 117 SEPs reported exchanging a total of 22,472,168 syringes (one SEP did not track the number of syringes exchanged in 2005). The 12 largest programs exchanged 11,863,932 (53% of all the syringes exchanged). §

In addition to exchanging syringes, SEPs provided various supplies, services, and referrals in 2005 (Table 2). Nearly all SEPs provided alcohol pads (117 [99%]), male condoms (115 [97%]), and referrals to substance-abuse treatment 102 (86%). Certain medical services also were offered by SEPs, including counseling and testing for HIV (96 [81%]) and hepatitis C (66 [56%]). Vaccinations for hepatitis B were provided by 46 (39%) SEPs, and hepatitis A

TABLE 1. Number of syringes exchanged by syringe exchange programs (SEPs), by program size — United States, 2005

SEP size	No. of syringes exchanged per SEP	No. of SEPs	Total no. of syringes exchanged	% of total syringes exchanged
Small	<10,000	24	89,626	0.4
Medium	10,000-55,000	33	810,953	3.6
Large	55,001-499,999	48	9,707,657	43.0
Very large	≥500,000	12	11,863,932	53.0
Total		117*	22,472,168	100.0

^{*}One of the 118 programs responding to the survey did not track the number of syringes exchanged in 2005.

TABLE 2. Number and percentage of syringe exchange programs (SEPs),* by selected supplies and services provided — United States, 2005

Supplies and services	No.	(%)
Prevention supplies		
Male condoms	115	(97)
Female condoms	98	(83)
Alcohol pads	117	(99)
Bleach	82	(69)
On-site medical screenings and services		
HIV counseling and testing	96	(81)
Hepatitis C counseling and testing	66	(56)
Hepatitis B counseling and testing	44	(37)
Hepatitis A counseling and testing	28	(24)
Hepatitis B vaccination	46	(39)
Hepatitis A vaccination	43	(37)
Sexually transmitted disease (STD) screening	57	(49)
Tuberculosis screening	33	(28)
On-site medical care	34	(29)
Referrals		
Substance-abuse treatment	102	(86)
Education		
HIV/AIDS prevention	116	(98)
Hepatitis A, B, and C prevention	114	(97)
Safer injection practice	113	(96)
Vein care	110	(93)
STD prevention	110	(93)
Abscess prevention	107	(91)
Male condom use	112	(95)
Female condom use	97	(82)

^{*} N = 118.

vaccinations were provided by 43 (37%). Thirty-four (29%) SEPs offered other on-site medical care.

In 2005, many SEPs operated multiple sites, including fixed sites and mobile van routes. The total number of hours that clients were served by SEPs was summed for all sites operated by each program. This total number of hours per program ranged from 1 to 168 hours per week (mean: 26 hours per week; median: 20 hours per week). Delivery of syringes and other risk-reduction supplies to residences or meeting spots was reported by 56 (47%) SEPs. A total of 110 (93%) SEPs allowed persons to exchange syringes on behalf of other persons (i.e., secondary exchange).

[†] Cities with more than one SEP: Eureka, Los Angeles, Oakland, and San Francisco, California; Detroit, Michigan; Minneapolis, Minnesota; Albuquerque and Farmington, New Mexico; New York, New York; Burlington, Vermont; Bremerton, Seattle, and Tacoma, Washington; and Madison and Milwaukee, Wisconsin.

[§] States/territories with SEPs: California (22); New Mexico (17); Washington (15); Wisconsin (10); New York (nine); Connecticut (six); Illinois (four); Massachusetts, Michigan, Minnesota, Oregon, and Vermont (three each); Louisiana, Maine, and Texas (two each); and Alaska, Colorado, Georgia, Hawaii, Indiana, Kansas, Missouri, New Jersey, North Carolina, Oklahoma, Pennsylvania, Puerto Rico, and Utah (one each). In addition, DC has one SEP.

States with SEPs that exchanged ≥500,000 syringes in 2005: California (four SEPs); Washington (three); Illinois, New Mexico, Oregon, Pennsylvania, and Wisconsin (one each). The largest-volume SEPs were San Francisco AIDS Foundation HIV Prevention Project (2.3 million syringes exchanged per year); Chicago Recovery Alliance, Chicago, Illinois (2.3 million); Street Outreach Services, Seattle, Washington (1.0 million); HIV Education and Prevention Project of Alameda, Oakland, California (0.9 million); Public Health − Seattle & King County Needle Exchange, Seattle, Washington (0.9 million); Point Defiance AIDS Project, Tacoma, Washington (0.8 million); San Diego Clean Needle Exchange Program, San Diego, California (0.8 million); San Na Needle Exchange Program/HIV Alliance, Eugene, Oregon (0.6 million); Prevention Point Pittsburgh, Pittsburgh, Pennsylvania (0.6 million); Lifepoint, Milwaukee, Wisconsin (0.5 million); Homeless Healthcare, Los Angeles, California (0.5 million); and Project De Sida, Albuquerque, New Mexico (0.5 million).

A total of 114 SEPs reported budget information for 2005; four SEPs lacked budget information for this period. The reported budgets for these 114 SEPs totaled \$15.2 million (Table 3). Some SEPs received funding from a common source, and allocating funds from the common source to individual programs was not always possible. For the 97 SEPs for which individual budget information could be generated, the 2005 budgets ranged from \$648 to \$1,516,375. The mean SEP budget increased from \$131,301 in 2004 to \$133,450 in 2005. In 2005, a total of 30 (31%) SEPs operated with a budget of <\$25,000, 29 (30%) with \$25,000-\$100,000, and 38 (39%) with >\$100,000. SEPs reported multiple sources of financial support in 2005, including individuals, foundations, and state and local governments. In 2005, a total of 72 (61%) of the 118 SEPs that responded to the survey received public funding totaling nearly \$11.3 million from city, county, and state governments,** accounting for approximately 74% of total funding. The total amount of public funding increased by nearly \$2 million in 2005, and the mean public funding budgets increased by nearly \$10,000 (\$145,633 in 2004 versus \$157,273 in 2005). Federal law prohibits the use of federal funds to support SEPs.

From the period 1994–1995, when the first national survey of SEPs was conducted, to 2002, the number of SEPs and the number of syringes exchanged by these programs increased consistently. However, in 2005, a reduction was observed in the number of SEPs and syringes

exchanged. In 2005, eight fewer SEPs were operating than previously indicated by results from the 2004 survey (BIMC, unpublished data, 2004), and two fewer states had SEPs operating. However, four additional cities had SEPs operating in 2005, compared with 2004. The number of syringes exchanged decreased from approximately 24.0 million in 2004 to 22.5 million in 2005.

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Editorial Note: Compared with data from previous national SEP surveys, the findings in this report indicate an overall stabilization in the number of SEPs operating in the United States. Total funding of SEPs increased in 2005 despite a reduction in the number of SEPs. Increases in funding, particularly public funding, provided opportunities for SEPs to expand the types of services they provide. As a result of these increases, many SEPs have evolved into larger, community-based organizations that provide numerous social and medical services to IDUs and their communities (e.g., testing for HIV and hepatitis A, hepatitis B, and hepatitis C; vaccinations for hepatitis A and hepatitis B; and general medical care). These more costly services have been added to many SEPs during the past several years, and continued increases in funding might make these services more available. By expanding such services, SEPs are becoming part of a comprehensive approach to the prevention of bloodborne infections among IDUs and their communities.

The findings in this report are subject to at least three limitations. First, the extent of SEP activity in the United States is likely underestimated because 48 (29%) of the SEPs known to NASEN did not complete the survey. Other

TABLE 3. Characteristics of syringe exchange programs (SEPs) — United States, 1994–1998, 2000, 2002, 2004, and 2005

Characteristic	1994–1995	1996	1997	1998	2000*	2002	2004*	2005
No. of SEPs known to NASEN [†]	68	101	113	131	154	148	174	166
No. of known SEPs participating in survey (%)	60 (88)	87 (86)	100 (88)	110 (84)	127 (82)	126 (85)	109 (63)	118 (71)
No. of cities with known SEPs participating in								
survey	46	71	80	81	106	102	87	91
No. of states§ (territories) with known SEPs								
participating in survey	20 (1)	28 (1)	30 (2)	31 (2)	33 (2)	31 (1)	30 (1)	28 (1)
No. of syringes exchanged (millions)	8.0	13.9	17.5	19.4	22.6	24.9	24	22.5
Total SEP budgets (in millions of dollars)	6.2	6.5	8.4	8.6	12.1	13.0	13.5	15.2
Total public funding budget (in millions of dollars	3) 2.3	4.5	4.2	6.0	8.9	7.3	9.5	11.3

^{*}Based on unpublished data from 2000 and 2004 surveys of SEP activities, Beth Israel Medical Center, New York, New York.

^{**} State/territorial governments providing public funding: California, Connecticut, Georgia, Hawaii, Illinois, Massachusetts, New Mexico, New York, Oregon, Puerto Rico, Washington, and Wisconsin. County governments providing public funding: Clark, King, Pierce, and Skagit, Washington; Alameda, Humboldt, Los Angeles, and Santa Clara, California; Dane and Eau Claire, Wisconsin; Boulder, Colorado; Cook, Illinois; and Lane and Multnomah, Oregon. City governments providing public funding: Inglewood, Los Angeles, Reseda, and San Francisco, California; Seattle and Vancouver, Washington; Chicago, Illinois; Milwaukee and Madison, Wisconsin; New York, New York; and Bridgeport, Connecticut.

North American Syringe Exchange Network. Includes District of Columbia.

SEPs might exist but are not known to NASEN. Second, certain SEPs operating within larger organizations were not able to report exact budget information because of difficulties in allocating shared costs across administrative units. Finally, data collected were based on self-reports by program directors and were not verified independently.

Although the number of SEPs in the United States has stabilized, many SEPs are providing a wider range of services than initially offered. On-site medical services are being provided by an increasing number of SEPs. IDUs often encounter problems in accessing health care, and offering these services in SEP locations increases the likelihood that IDUs will receive these services.

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Notice to Readers

Satellite Broadcast and Webcast: Cutting-Edge Legal Preparedness for Chronic Disease Prevention

Public Health Grand Rounds, a project sponsored by CDC in collaboration with the University of North Carolina School of Public Health, will air a satellite broadcast and webcast, "Cutting-Edge Legal Preparedness for Chronic Disease Prevention," on November 29, 2007, at 2:00 p.m. EST. CDC's Public Health Law Program and National Center for Chronic Disease Prevention and Health Promotion will present the broadcast, which describes innovative use of public health laws in New York City, such as posting calorie information on restaurant menus, phasing out use of trans fats, requiring laboratory reporting of blood-glucose test results, and prohibiting smoking in nearly all workplaces.

Additional information and broadcast registration are available at http://www.publichealthgrandrounds.unc.edu. Continuing education credit will be offered to participants.

Notice to Readers

World COPD Day — November 14, 2007

Chronic obstructive pulmonary disease (COPD) describes a group of slowly progressive diseases (e.g., chronic bronchitis or emphysema) characterized by airflow obstruction that interferes with normal breathing (1). COPD is the fourth leading cause of death in the United States and a major cause of morbidity and disability, resulting in substantial costs to persons and society. Smoking is the most common cause of COPD, accounting for approximately 80% of COPD cases (2). Other causes include exposure to occupational hazards, air pollution, and secondhand smoke. To increase global awareness of COPD and the importance of early diagnosis, the Global Initiative for Chronic Obstructive Lung Disease (http://www.goldcopd.com) is sponsoring World COPD Day on November 14, 2007.

Early diagnosis of COPD is important for better outcomes. The National Heart, Lung, and Blood Institute (NHLBI) recommends that persons at risk for COPD who have cough, sputum production, or shortness of breath should be tested for the disease using spirometry, a simple breathing test for assessing lung function (3). Persons who smoke or those at risk for COPD should stop smoking and avoid areas with tobacco smoke. Resources to help smokers quit are available at http://www.smokefree.gov, at the National Cancer Institute website (http://www.cancer.gov), or by telephone (800-QUIT-NOW [800-784-8669]).

NHLBI and the COPD Foundation also have initiated the Learn More, Breathe Better Campaign to heighten awareness of COPD as a serious lung disease, increase the understanding that COPD is treatable, and encourage those at risk for COPD to talk with their physicians and get a breathing test. A tool kit has been developed to help partner organizations share campaign information with their communities (2).

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TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending November 3, 2007 (44th Week)*

	Current	Cum	5-year weekly	Total	cases rep	orted for	previous	syears	
Disease	week	2007	average†	2006	2005	2004	2003	2002	States reporting cases during current week (No.
Anthrax	_		_	1				2	
Botulism:									
foodborne	_	16	0	20	19	16	20	28	
infant	_	70	1	97	85	87	76	69	
other (wound & unspecified)	_	19	1	48	31	30	33	21	
Brucellosis	1	101	3	121	120	114	104	125	FL(1)
Chancroid	2	30	1	33	17	30	54	67	TX (2)
Cholera	_	5	0	9	8	5	2	2	()
Cyclosporiasis§	_	88	1	136	543	171	75	156	
Diphtheria	_	_	0	_	_		1	1	
Domestic arboviral diseases ^{§,1} :			ŭ						
California serogroup	_	27	1	67	80	112	108	164	
eastern equine	_	3	0	8	21	6	14	10	
Powassan	_	1	_	1	1	1	_	1	
St. Louis	_	4	0	10	13	12	41	28	
western equine	_	4	_	—	—	- 12	41	<u> 20</u>	
	_	_	_	_	_	_	_	_	
Ehrlichiosis§:	_	400	10	0.40	700	507	000	-44	NIX (4) NANI (4)
human granulocytic	5	433	10	646	786	537	362	511	NY (1), MN (4)
human monocytic	4	550	7	578	506	338	321	216	NY (1), NC (1), OK (2)
human (other & unspecified)	2	141	1	231	112	59	44	23	NC (1), TN (1)
Haemophilus influenzae,**									
invasive disease (age <5 yrs):									
serotype b	_	14	0	29	9	19	32	34	
nonserotype b	1	115	3	175	135	135	117	144	IN (1)
unknown serotype	5	181	3	179	217	177	227	153	OH (2), GA (2), UT (1)
Hansen disease§	2	51	2	66	87	105	95	96	FL (1), CA (1)
Hantavirus pulmonary syndrome§	_	22	0	40	26	24	26	19	
Hemolytic uremic syndrome, postdiarrheal§	4	183	4	288	221	200	178	216	NY (1), OH (1), TN (1), CA (1)
Hepatitis C viral, acute	3	554	19	802	652	713	1,102	1,835	FL (1), TX (1), CA (1)
HIV infection, pediatric (age <13 yrs)††	_	_	6	52	380	436	504	420	
Influenza-associated pediatric mortality §. §§	_	73	0	43	45	_	N	N	
Listeriosis	5	577	18	875	896	753	696	665	OH (1), IN (1), TN (1), TX (1), CA (1)
Measles [¶]	_	30	1	55	66	37	56	44	- () () () () - ()
Meningococcal disease, invasive***:									
A, C, Y, & W-135	3	234	4	318	297	_	_	_	PA (1), MN (2)
serogroup B	2	110	2	193	156	_	_	_	TX (2)
other serogroup	1	26	1	32	27	_	_	_	OH (1)
unknown serogroup	7	497	12	651	765	_	_	_	NY (1), OH (1), NC (1), FL (2), CA (2)
Mumps	13	635	10	6,584	314	258	231	270	NY (1), OH (1), MN (6), MO (3), WA (2)
Novel influenza A virus infections	_	4	_	0,504 N	N	230 N	N	N	141 (1), O11 (1), WIN (0), WO (3), WA (2)
	_	6	0	17	8	3	1	2	
Plague Poliomyelitis, paralytic	_	_	_		1	_		_	
		_	_	 N	N	N	N	N	
Poliovirus infection, nonparalytic§	_								
Psittacosis [§]	_	6	0	21	16	12	12	18	EL (4)
Q fever§	1	142	1	169	136	70	71	61	FL (1)
Rabies, human	_		0	3	2	7	2	3	
Rubella ^{†††}	_	11	_	11	11	10	7	18	
Rubella, congenital syndrome	_	_	_	1	1	_	1	1	
SARS-CoV ^{§,§§§}	_	_	_	_	_	_	8	N	
Smallpox§	_	_	_						
Streptococcal toxic-shock syndrome§	_	83	2	125	129	132	161	118	
Syphilis, congenital (age <1 yr)	3	376	8	380	329	353	413	412	NY (1), VA (1), TX (1)
Tetanus	_	16	1	41	27	34	20	25	
Toxic-shock syndrome (staphylococcal)§	2	66	2	101	90	95	133	109	PA (1), CA (1)
Trichinellosis	_	6	0	15	16	5	6	14	
Tularemia	_	103	2	95	154	134	129	90	
Typhoid fever	4	291	6	353	324	322	356	321	OH (1), NC (1), AZ (1), CA (1)
Vancomycin-intermediate Staphylococcus aure		19	Ő	6	2	_	N	N	\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
Vancomycin-resistant <i>Staphylococcus aureus</i> §		_	0	1	3	1	N	N	
Vibriosis (noncholera <i>Vibrio</i> species infections)		318	2	Ň	N	Ň	N	N	FL (1), AZ (1), CA (1)
Yellow fever	_	010	_			_		1	(-), (-), (-)

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

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

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

Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. A total of 71 cases were reported for the 2006–07 flu season. No measles cases were reported for the current week.

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

No rubella cases were reported for the current week.

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

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

(44th Week)*			Chlamyd	ia [†]			Coccid	ioidomyo	neis			Crvi	ptosporid	linsis	
		Pre	vious	iu				vious	,0313				vious	10313	
Reporting area	Current week	Med Med	veeks Max	Cum 2007	Cum 2006	Current week	Med 52 v	veeks Max	Cum 2007	Cum 2006	Current week	Med 52 v	veeks Max	Cum 2007	Cum 2006
United States	10,911	20,512	25,327	865,097	867,973	122	144	658	6,298	6,699	139	83	964	9,152	4,896
New England Connecticut Maine [§] Massachusetts New Hampshire Rhode Island [§] Vermont [§]	187 — 45 — 52 78 12	699 217 50 301 39 62 20	1,357 829 74 480 74 106 45	28,932 8,684 2,168 12,943 1,801 2,587 749	28,421 8,404 1,919 12,735 1,659 2,721 983	N 	0 0 0 0 0	1 0 0 0 1 0	2 N — 2 — N		2 - 2 - -	5 0 1 2 1 0 1	39 39 6 11 5 3	283 39 45 107 47 8 37	346 38 40 169 41 14
Mid. Atlantic New Jersey New York (Upstate) New York City Pennsylvania	1,263 — 730 — 533	2,735 399 515 951 754	4,284 528 2,758 1,982 1,760	119,255 16,859 22,820 41,123 38,453	106,340 17,201 20,558 34,999 33,582	N N N N	0 0 0 0	0 0 0 0	N N N N	N N N N	8 -6 - 2	10 0 3 1 4	113 6 20 6 103	1,201 41 218 79 863	575 42 145 134 254
E.N. Central Illinois Indiana Michigan Ohio Wisconsin	317 — — 124 69 124	3,135 945 397 705 750 367	6,220 1,367 646 1,059 3,647 443	139,299 39,704 17,179 29,181 37,564 15,671	145,187 45,773 16,797 30,227 34,938 17,452		1 0 0 0 0	3 0 0 3 1 0	26 — 17 9 N	39 — 33 6 N	21 4 1 12 4	18 2 1 3 5 6	130 13 12 11 61 58	1,537 145 92 155 519 626	1,220 185 86 128 318 503
W.N. Central lowa Kansas Minnesota Missouri Nebraska [§] North Dakota South Dakota	631 120 148 — 321 — 42	1,212 162 154 256 455 99 27 49	1,465 252 294 314 551 183 61 85	51,522 7,376 6,847 10,254 19,688 3,956 1,209 2,192	52,674 7,108 6,726 10,932 19,579 4,566 1,558 2,205	N N — — N N	0 0 0 0 0 0	54 0 0 54 1 0 0	7 N N - 7 N N	1 N N — 1 N N N	22 — 3 17 2 — —	13 2 1 3 2 1 0 2	123 61 15 34 13 21 11	1,346 574 87 254 130 132 15	786 164 76 193 177 89 9 78
S. Atlantic Delaware District of Columbia Florida Georgia Maryland [§] North Carolina South Carolina [§] Virginia [§] West Virginia	3,199 122 — 1,261 9 477 296 531 486 17	3,921 64 103 1,141 640 393 550 506 479 60	6,760 140 166 1,767 3,822 696 1,905 3,030 621 94	169,595 2,899 4,627 49,730 20,966 17,131 23,672 27,231 20,836 2,503	166,982 3,052 2,641 41,934 30,387 18,008 28,721 19,308 20,465 2,466	 	0 0 0 0 0 0 0	1 0 0 0 0 1 0 0	3 — N N 3 — N N	4 	41 — 20 8 1 — 12 —	20 0 0 11 4 0 1 1 1	68 4 2 35 22 2 18 5 4 5	1,069 20 3 577 202 29 101 73 54	1,018 13 13 462 243 16 86 124 52 9
E.S. Central Alabama [§] Kentucky Mississippi Tennessee [§]	1,283 54 242 455 532	1,458 367 150 342 506	2,044 577 691 959 721	61,277 14,209 7,011 16,607 23,450	64,390 19,946 6,844 16,024 21,576	N N N N	0 0 0 0	0 0 0 0	N N N	N N N N	4 3 — 1	4 1 1 0 1	63 14 40 11 19	552 105 240 91 116	152 52 38 24 38
W.S. Central Arkansas [§] Louisiana Oklahoma Texas [§]	1,786 311 128 156 1,191	2,294 173 361 263 1,490	2,966 328 853 467 1,946	103,091 8,112 16,114 11,087 67,778	98,268 7,044 15,389 10,508 65,327	N - N N	0 0 0 0	1 0 1 0 0	1 N 1 N N	1 N 1 N N	6 1 — 5 —	5 0 1 1 2	41 8 4 11 29	304 30 39 113 122	356 20 82 35 219
Mountain Arizona Colorado Idahos Montanas Nevadas New Mexicos Utah Wyomings	184 61 — — — — — 123	1,265 489 208 56 46 176 149 104 23	1,710 834 358 253 73 293 393 209 38	50,944 19,271 7,581 2,883 1,489 7,279 6,918 4,567 956	58,901 19,290 13,899 2,639 2,209 7,153 8,287 4,205 1,219	96 96 N N N	94 90 0 0 0 1 0	293 293 0 0 0 5 2 7	4,086 3,961 N N N 50 17 55 3	4,591 4,467 N N N 56 18 48 2	35 — 25 2 — — 8	7 0 1 0 1 0 1 0	572 6 25 71 7 3 8 498 8	2,735 40 140 420 61 18 93 1,913 50	366 27 65 35 131 10 39 15 44
Pacific Alaska California Hawaii Oregon [§] Washington	2,061 76 1,539 — 239 207	3,368 88 2,628 104 160 289	4,362 157 3,627 133 394 621	141,182 3,645 114,128 4,452 7,355 11,602	146,810 3,721 115,225 4,850 8,082 14,932	26 N 26 N N	45 0 45 0 0	311 0 311 0 0	2,173 N 2,173 N N N	2,063 N 2,063 N N	_ _ _ _	2 0 0 0 2 0	19 2 0 4 15 0	125 3 — 6 116	77 4 - 4 69 -
American Samoa C.N.M.I. Guam Puerto Rico U.S. Virgin Islands	136 U	0 3 125 3	32 — 207 544 7	U 430 6,390 U	U U 755 4,252 U	U U N U	0 0 0 0	0 0 0 0	U U N U	U 	U U N U	0 0 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 year 2007 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly. Chlamydia refers to genital infections caused by *Chlamydia trachomatis*.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

			Giardiasi	s			G	onorrhe	а		Нае		s influen s, all ser	<i>zae</i> , invas otypes†	ive
	Commont	Prev		C		Commont		vious	٥		Commont		/ious	C	۰
Reporting area	Current week	52 we	Max	Cum 2007	Cum 2006	Current week	Med	weeks Max	Cum 2007	Cum 2006	Current week	Med	eeks Max	Cum 2007	Cum 2006
United States	212	305	1,513	14,060	15,200	3,730	6,716	8,941	281,491	302,746	26	44	184	1,899	1,929
New England	11	26	54	1,228	1,258	14	109	259	4,585	4,794	2	3	19	155	151
Connecticut Maine§		6 3	18 10	301 165	264 159		42 2	204 8	1,751 104	1,994 111	1	0 0	7 3	45 12	42 18
Massachusetts New Hampshire	6	10 0	29 3	521 23	548 21		51 2	96 8	2,202 129	2,039 166	1	2	6 2	74 15	68 11
Rhode Island§	_	0	15	71	100	7	8	18	351	426	_	0	10	7	4
/ermont [§]	3	3	9	147	166	1	1	5	48	58	_	0	1	2	3
/lid. Atlantic New Jersey	34	55 4	127 11	2,374 142	2,992 414	341	715 114	1,537 159	30,863 4,911	28,364 4,654	4	10 1	27 5	379 51	398 68
lew York (Úpstate) lew York City	26 3	23 15	108 25	977 663	1,041 826	171	111 201	1,035 363	5,770 8,561	5,308 8,773	3	2	15 6	109 83	128 73
Pennsylvania	5	14	29	592	711	170	241	586	11,621	9,629	1	3	10	136	129
.N. Central	24	46	80	2,036	2,455	152	1,258	2,593	56,456	60,032	3	6	15	245	323
linois ndiana	N	12 0	24 0	522 N	614 N	_	350 164	498 307	14,786 7,393	17,121 7,462	_ 1	2 1	6 7	73 50	97 71
⁄lichigan Dhio	 20	11 15	20 37	469 698	619 706	39 39	263 331	747 1,572	11,842 16,940	12,777 16,771	_	0 2	5 5	22 86	23 72
Visconsin	4	8	20	347	516	74	126	206	5,495	5,901	_	0	2	14	60
V.N. Central	18	21	553	997	1,589	164	380	514	16,139	16,529	8	2	24	116	136
owa Kansas	1 7	5 2	23 8	261 122	253 173	18 28	39 43	60 86	1,618 1,924	1,611 1,895	_	0 0	1 2	1 9	16 16
linnesota lissouri	 5	0 8	514 22	12 380	479 484	 114	66 196	86 266	2,657 8,504	2,754 8,630	7	0 1	17 5	56 34	72 32
lebraska§	5	2	8	125	102	_	26	57	1,140	1,192	1	Ö	2	14	8
Iorth Dakota South Dakota	_	0 1	16 6	18 79	19 79	4	2 6	7 11	78 218	127 320	_	0	2	2	_6
S. Atlantic	50	57	106	2,432	2,360	1,415	1,575	3,209	66,298	75,088	3	11	34	490	478
elaware histrict of Columbia	1	1 0	6 7	39 34	35 55	29	26 47	43 71	1,099 1,906	1,263 1,526	_	0	3 2	8 3	1
lorida	35	24	47	1,099	949	528	478	717	20,340	20,529	_	3	8	139	145
ieorgia Iaryland [§]	5 5	10 4	33 18	516 216	566 206	4 84	290 118	2,068 227	8,718 5,235	15,237 6,105	3	2 1	7 6	104 70	98 68
orth Carolina		0 2	0	— 87	92	408 186	248 206	675 1,361	11,641 11,394	14,939 8,993	_	0 1	9	48 40	49
outh Carolina§ irginia§	_	9	21	396	431	168	122	220	5,196	5,694	_	1	22	53	61
Vest Virginia	2	0	21	45	26	8	18	37	769	802	_	0	6	25	19
i.S. Central Jabama§	9 5	10 5	23 16	463 219	372 168	462 26	562 158	752 242	23,754 6,304	26,363 9,256	1 1	2	9	104 22	98 20
(entucky	N N	0	0	N N	N N	108 157	57 135	268 310	2,785 6,314	2,480 6,339	_	0	1	2 7	12
lississippi ennessee [§]	4	5	16	244	204	171	184	260	8,351	8,288	_	1	6	73	61
V.S. Central	3	7	55	299	308	763	981	1,200	42,788	43,292	1	2	34	86	74
Arkansas§ ₋ouisiana	1	2 1	13 9	102 74	117 80	119 81	78 220	120 384	3,478 9,334	3,670 9,296	_	0 0	2 2	8 6	19
Oklahoma Texas§	2 N	3 0	42 0	123 N	111 N	57 506	101 575	235 731	4,292 25,684	3,942 26,384	1	1 0	29 3	65 7	40 7
Nountain	30	30	66	1,387	1,459	56	250	346	10,219	13,145	2	4	12	210	182
rizona	_	3	11	165	140	21	105	175	4,037	4,848	_	1	6	78	76
Colorado daho§	4	8 3	24 12	383 154	485 164	_	50 4	93 20	1,945 215	3,162 161	1	1 0	4 1	45 6	44 5
¶ontana [§] Ievada [§]	_	2	8 8	93 89	91 99	_	1 44	7 87	57 1,781	172 2,439	_	0	1 2	2 9	13
lew Mexico§	_	2	6	89	72	_	30	58	1,432	1,521	_	1	4	34	27
Jtah Vyoming [§]	26 —	7 1	32 4	380 34	376 32	35 —	17 1	34 5	687 65	733 109	1	0 0	3 1	32 4	14
Pacific	33	63	558	2,844	2,407	363	708	875	30,389	35,139	2	3	16	114	89
llaska California	1 16	1 45	5 93	63 1,902	101 1,914	10 302	10 605	27 734	411 26,375	517 29,006	_	0	4 10	14 34	10 25
lawaii	_	1	4	59	45	_	12	22	527	807	_	0	2	10	15
Dregon [§] Vashington	5 11	9 8	16 449	386 434	347	22 29	23 52	63 142	918 2,158	1,243 3,566		1 0	6 5	54 2	39
merican Samoa	U	0	0	U	U	U	0	2	U	U	U	0	0	U	Ų
C.N.M.I. Guam	U —			U —	<u>U</u>	U —	_ 1	38	U 91	U 92	U —			<u>U</u>	L 1
Puerto Rico		5	15	165	218	6	6	23	291	258	_	0	1	2	3
J.S. Virgin Islands	U	0	0	U	U	U	1	3	U	U	U	0	0	U	l

Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

				itis (viral,	acute), by	type [†]						14	egionellos	eie	
		Previ	A ious				Prev	B ious					vious	515	
Reporting area	Current week	52 we		Cum 2007	Cum 2006	Current week		eeks Max	Cum 2007	Cum 2006	Current week		veeks Max	Cum 2007	Cum 2006
United States	24	52	201	2,342	3,002	65	77	405	3,342	3,748	26	43	106	1,931	2,343
New England	2	2	6	106	166	_	2	5	64	103	2	2	13	110	157
Connecticut Maine [§]	2	0	3 1	23 3	37 8	_	0	5 2	28 11	44 21	2	0	5 1	34 5	45 9
Massachusetts	_	1	4	49	79	_	0	1	4	18	_	0	3	21	62
New Hampshire Rhode Island§	_	0	3 2	12 11	22 12	_	0	1 3	5 13	8 9	_	0	2 6	7 34	13 21
Vermont [§]	_	0	1	8	8	_	ő	1	3	3	_	ő	2	9	7
Mid. Atlantic	1	8	18	360	343	1	9	21	379	460	8	12	35	617	851
New Jersey New York (Upstate)	_ 1	2 1	6 11	89 65	97 80	_ 1	1 2	8 13	73 84	148 54	<u> </u>	1 4	11 22	75 193	107 288
New York City	_	3	7	132	109	_	2	6	80	108	_	2	10	98	165
Pennsylvania	_	2	5	74	57	_	3	8	142	150	2	4	21	251	291
E.N. Central Illinois	3	6 2	13 5	251 90	309 93	1	9 2	23 6	370 96	431 119	5	8 1	27 8	429 66	520 113
Indiana Mishigan	1	0	7	30	23	1	0	21	47 94	46	_	1 3	7	45	40
Michigan Ohio		1 1	8 4	67 57	106 47	_	2 2	8 7	113	127 107	<u> </u>	3	10 17	129 181	129 197
Wisconsin	_	0	3	7	40	_	0	3	20	32	_	0	3	8	41
W.N. Central lowa	1	2 1	18 4	144 37	120 10	1	2	15 3	112 20	127 19	_	1 0	9 1	83 9	74 10
Kansas	1	0	1	4	26	_	0	2	7	10	_	0	1	2	7
Minnesota Missouri	_	0	17 2	62 24	17 41	_ 1	0 1	13 5	18 52	18 57	_	0 1	6 3	23 36	23 20
Nebraska [§]	_	0	2	12	17		0	2	10	18	_	Ö	1	9	9
North Dakota South Dakota	_	0	3 1	 5	<u> </u>	_	0	1 1	 5	 5	_	0	1 1	4	 5
S. Atlantic	9	10	21	438	479	16	19	56	827	1,043	4	7	25	314	402
Delaware	_	0	1	7	11	_	0	2	15	44	_	0	2	8	11
District of Columbia Florida	_	0 3	5 7	14 133	7 186	9	0 7	2 14	1 297	7 355	3	0 2	4 10	1 130	27 138
Georgia	1	1	4	61	50	2	2	7	101	178	_	0	2	19	30
Maryland [§] North Carolina	1 7	1 0	5 11	69 56	58 83	2	2	6 16	95 120	132 142	1	1 1	4 4	57 37	93 31
South Carolina§	_	0	4	15	23	_	1	5	52	80	_	0	2	15	5
Virginia§ West Virginia	_	1 0	5 2	75 8	55 6	_	3 0	8 23	107 39	57 48	_	1 0	4 4	37 10	54 13
E.S. Central	_	2	5	90	112	_	7	17	302	270	1	2	6	83	94
Alabama [§] Kentucky	_	0	3 2	16 19	12 31	_	2 1	10 7	106 60	72 63	_	0 1	1 4	9 43	9 39
Mississippi	_	0	4	8	8	_	0	8	25	10	_	Ö	1	_	4
Tennessee§	_	1	5	47	61	_	3	8	111	125	1	1	4	31	42
W.S. Central Arkansas§	_	4 0	43 2	181 10	324 44	41 1	17 1	169 7	715 58	758 68	_	2	16 3	93 8	57 4
Louisiana	_	0	3	24	27	_	1	4	62	49	_	0	1	3	10
Oklahoma Texas [§]	_	0 3	8 39	11 136	6 247	38 2	1 13	24 135	103 492	58 583	_	0 2	6 13	5 77	1 42
Mountain	2	4	15	214	233	1	3	7	142	120	1	2	7	93	111
Arizona	2	3	11	153	139	_	1	4	49	_	_	0	5	37	35
Colorado Idaho§	_	0	3 1	21 4	35 9	_	0	3 1	24 11	31 12	_	0	2 1	14 5	24 11
Montana§	_	0	2	9	10	_	0	3	_	2	_	0	1	3	6
Nevada [§] New Mexico [§]	_	0	2	9 9	11 14	_	1 0	3 2	29 10	32 21	_	0	2 2	7 8	8 5
Utah	_	0	1	6	13	1	0	4	17	22	1	0	3	16	22
Wyoming§ Pacific	6	0 13	1 92	3 558	2 916	4	0 10	1 106	2 431	436	5	0 2	1 11	3 109	— 77
Alaska	_	0	1	4	1	_	0	1	6	8	_	0	1	_	_
California Hawaii	6	10 0	40 2	482 4	869 11	3	7 0	31 2	318 6	349 7	4	1 0	11 1	79 2	77
Oregon§	_	1	2	25	35	_	1	4	55	72		Ö	1	9	=
Washington	_	0	52	43	_	1	1	74	46	_	1	0	3	19	_
American Samoa C.N.M.I.	U U	0	0	U	U U	U U	0	0	U	U U	U	0	0	U U	U U
Guam	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Puerto Rico U.S. Virgin Islands		1 0	10 0	45 U	53 U	_ U	1 0	9	44 U	55 U		0	2	3 U	1 U

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

		L	yme disea	ase			N	lalaria			ivier		serogrou	se, invasiv ıps	/e'
		Prev		_			Prev		_				/ious		
Reporting area	Current week	Med Med	eeks Max	Cum 2007	Cum 2006	Current week	Med Med	eeks Max	Cum 2007	Cum 2006	Current week	Med Med	eeks Max	Cum 2007	Cum 2006
United States	219	255	1,194	17,257	17,285	7	21	105	912	1,227	13	21	87	867	949
New England	47	41	296	3,166	3,969	_	1	5	48	47	_	1	3	36	46
Connecticut Maine§	6 40	11 3	214 53	1,555 406	1,618 231	_	0	3 2	1 7	10 4	_	0	1 3	6 7	5
Massachusetts	_	3	27	211	1,402	_	0	3	29	22	_	0	2	19	22
lew Hampshire Rhode Island§	1	6 0	81 93	722 151	595 31	_	0	4 1	8	9 1	_	0	1 1	_ 1	2
ermont [§]	_	1	13	121	92	_	Ö	2	3	i	_	Ö	i	3	2
lid. Atlantic	78	108	615	8,779	8,891	_	5	14	227	322	2	3	8	118	140
lew Jersey lew York (Upstate)	66	26 49	143 426	1,859 2,922	2,283 3,325	_	0 1	2 5	<u> </u>	82 40		0 1	2 3	13 31	18 31
lew York City	_	1	22	168	285	_	3	7	135	157	_	0	4	26	53
ennsylvania	12	40	298	3,830	2,998	_	1	4	36	43	1	1	5	48	38
.N. Central linois	1	8 1	136 12	1,164 111	1,654 107	1	2 1	6 6	93 41	148 76	2	3 1	9 3	126 40	145 39
ndiana	_	0	7	41	21	_	0	2	9	11	_	Ö	4	24	21
1ichigan Dhio	_	1 0	5 3	53 16	51 42	_ 1	0	2 2	15 19	17 27		0 1	3 2	23 30	24 42
/isconsin	1	6	123	943	1,433		Ö	2	9	17	_	Ö	3	9	19
/.N. Central	57	4	195	520	716	_	0	12	28	46	2	1	5	55	58
owa ansas	_	1 0	11 2	100 9	94 4	_	0 0	1 1	3 2	2 7	_	0 0	3 1	12 1	17
linnesota	57	1	188	374	601	_	0	12	11	26	2	0	3	18	13
lissouri ebraska§	_	0	6 1	29 6	5 11	_	0	1 1	5 6	6 3	_	0	3 2	14 5	14
orth Dakota	_	0	7	2	_	_	0	1	_	1	_	0	3	2	
outh Dakota	_	0	0	_	1	_	0	1	1	1	_	0	1	3	(
. Atlantic elaware	33 1	57 12	175 34	3,358 631	1,893 439	3	4 0	13 1	215 4	301 5	3	3 0	11 1	145 1	164
strict of Columbia	_	0	7	13	55	_	0	2	3	3	_	0	1	_	
orida eorgia	_	1 0	11 1	77 2	19 7	1 1	1 0	7 5	52 30	52 82	2	1 0	7 5	56 22	6 ₄
aryland§	32	27	111	1,803	1,067	1	1	5	53	69	_	0	2	20	10
orth Carolina outh Carolina§	_	0	8 2	42 23	27 18	_	0	4 1	20 6	28 9	1	0	6 2	17 14	2 ⁴
rginia§	_	12	61	700	248	_	1	4	45	51	_	0	2	13	17
est Virginia	_	0	14	67	13	_	0	1	2	2	_	0	2	2	3
.S. Central labama [§]	_	1 0	5 3	47 11	31 7	_	0	3 1	31 5	23 9	_	1 0	4 2	42 7	39
entucky	_	0	2	5	7	_	0	1	8	3	_	0	2	10	10
lississippi ennessee§	_	0	0 4	31	3 14	_	0	1 2	2 16	6 5	_	0	4 2	9 16	19
/.S. Central	3	1	6	60	22	1	1	29	74	91	2	2	15	87	84
rkansas§	_	0	1	1	_	1	0	1	2	4	_	0	2	9	10
ouisiana klahoma	_	0	1 0	2	1 —	_	0 0	2 3	14 5	8 7	_	0 0	4 4	25 15	34
exas§	3	1	6	57	21	_	1	25	53	72	2	0	11	38	32
lountain	_	0	4	36	27	_	1	6	50	68	_	1	4	53	64
rizona olorado	_	0 0	1	2 2	9	_	0 0	3 2	12 16	22 17	_	0 0	2	12 17	15 20
aho [§]	_	0	2 2	7 4	6	_	0	2	2	1 2	_	0	1	3 2	;
ontana [§] evada [§]	_	0	2	8	3	_	0 0	1	2	4	_	0	1 1	4	(
ew Mexico§	_	0	1	4	3	_	0	1	4	5	_	0	1	2	6
tah /yoming [§]	_	0 0	2 1	6 3	5 1	_	0 0	3 0	11 —	17 —	_	0 0	2 1	11 2	6
acific	_	2	16	127	82	2	3	45	146	181	2	4	48	205	209
laska alifornia	_	0 2	1 9	7 114	3 73	_	0 2	1 7	2 106	23 139		0 3	1 10	1 146	162
awaii	N	0	0	N	N	_	0	1	2	8	_	0	2	8	8
regon [§] /ashington	_	0	1 8	3	6		0	3 43	13 23	11	_	0	3 43	29 21	36
rasnington merican Samoa	U U	0	0	J U	U U	2 U	0	43 0	23 U	U	U U	0	43	۷۱	
.N.M.I.	U	_	_	U	U	U	_	_	Ü	U	U	_	_	_	_
uam uerto Rico	 N	0	0	N	N	_	0	0 1	_ 3	_ 1	_	0	0 1	<u> </u>	-
J.S. Virgin Islands	IN U	0	0	U	U	U	0	0	U	Ú	U	0	0	Ö	6

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

* Incidence data for reporting year 2007 are provisional.

* Data for meningococcal disease, invasive caused by serogroups A, C, Y, & W-135; serogroup B; other serogroup; and unknown serogroup are available in Table I.

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

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

			Pertussis	s				ies, anim	al		R			otted feve	r
	Current		ious eeks	Cum	Cum	Current		/ious eeks	Cum	Cum	Current		vious veeks	Cum	Cum
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	2006
United States	65	171	1,479	7,360	12,008	39	94	157	4,278	4,873	33	31	211	1,757	1,890
New England	6	28	77	1,172	1,529	7	11	22	504	418	_	0	10	4	11
Connecticut Maine [†]	_	2 1	5 13	59 70	102 123	4 1	4 2	10 5	202 75	182 107	_	0 0	0 0	_	_
Massachusetts New Hampshire	4	24 1	46 7	928 50	966 194	_ 1	0 1	0 4	— 43	— 41	_	0	1 0	4	10 1
Rhode Island†	_	0	31	19	49	_	0	4	36	29	_	0	9	_	_
Vermont [†] Mid. Atlantic	2	0 22	9 155	46 973	95 1,586	1	3 14	13 44	148 733	59 474	_	0 1	0 6	— 55	— 82
New Jersey	_	2	11	117	266	_	0	0	733 —		_	0	2	6	38
New York (Upstate) New York City	6	12 3	146 6	498 105	716 86	_	_ 1	 5	<u>-</u>	— 31	_	0 0	1 3	3 24	22
Pennsylvania	2	6	15	253	518	_	13	44	693	443	_	Ö	3	22	22
E.N. Central Illinois	3	28 3	79 23	1,199 112	1,903 478	7 1	4 1	48 15	375 112	152 46	_	1 0	4	40 23	61 25
Indiana	=	0	45	51	200	1	0	1	12	11	_	0	2	4	6
Michigan Ohio	1 2	7 14	20 54	248 589	521 511		1 0	27 11	175 76	44 51	_	0	1 2	3 10	4 25
Wisconsin	_	3	24	199	193	_	0	0	_	_	_	0	0	_	1
W.N. Central lowa	4	13 2	151 16	559 116	1,097 272	4	5 0	13 3	231 30	275 56	5 —	4 0	31 4	365 13	188 5
Kansas	1	3	12	109	258	_	2	8	96	67	_	0	1	1	1
Minnesota Missouri	_	0 2	119 9	157 68	161 277	4	0	5 3	32 39	37 63		0 4	1 25	1 333	3 154
Nebraska† North Dakota	1	1 0	12 18	53 4	84 25	_	0	0 6	— 16	 16	_	0	2	13	25
South Dakota	_	1	6	52	20	_	0	2	18	36	_	0	1	4	_
S. Atlantic	9	17	163	797	971	16	40	76	1,823	2,024	26	12	111	852	1,045
Delaware District of Columbia	_	0 0	2 1	11 2	3 6	_	0 0	0 0	_	_	_	0 0	2 1	14 1	21 1
Florida Georgia	4	4 0	18 4	194 25	189 86	_	0 4	29 34	107 234	176 236	_	0	4 5	20 33	14 49
Maryland [†]	5	2 4	8	99 273	127	_	7 9	18	304	373	2	1 4	7	57	75
North Carolina South Carolina [†]	_	2	112 9	66	171 161	5 —	0	19 11	439 46	458 154	24 —	1	96 7	545 60	754 36
Virginia [†] West Virginia	_	2 0	11 19	99 28	185 43	11	13 0	31 10	629 64	535 92	_	2	11 3	117 5	92 3
E.S. Central	1	6	32	353	305	_	3	9	140	224	_	5	16	230	345
Alabama [†] Kentucky	_ 1	2	18 1	79 9	73 56	_	0	2	 18	76 27	_	1 0	9 2	74 5	83 3
Mississippi	_	1	29	193	33	_	0	1	1	4	_	Ö	2	13	7
Tennessee [†] W.S. Central	_	1 20	7 226	72 821	143	_	3 1	7 27	121	117	_ 2	2 1	10 168	138	252
Arkansas†	_	2	17	130	740 82	1 1	0	5	73 28	875 26	_	0	53	170 90	110 49
Louisiana Oklahoma	_	0	1 36	14 6	24 18	_	0	1 22	— 45	6 58	_	0	1 108	2 47	4 28
Texas [†]	_	17	174	671	616	_	0	20	_	785	_	Ō	7	31	29
Mountain Arizona	23	22 4	61 13	933 179	2,233 457	_	3 2	14 12	202 141	204 133	_	0	4 1	33 7	46 11
Colorado	_	6	17	230	657	_	0	0	_	_	_	0	2	4	4
Idaho† Montana†	_	1 0	5 7	34 36	82 108	_	0	0 3	 17	24 14	_	0 0	1 1	4 1	14 2
Nevada [†] New Mexico [†]	_	0	5 7	12 61	66 121	_	0	1 2	2 8	5 9	_	0	0 1	_ 4	_ 8
Utah	23	8	47	361	668	_	0	2	16	11	=	0	1	1	_
Wyoming [†]	_	0	4	20	74		0	4	18	8	_	0	2	12	7
Pacific Alaska	<u>11</u>	13 0	547 8	553 43	1,644 88	4	4 0	10 6	197 39	227 16	N	0 0	3 0	8 N	2 N
California Hawaii	_	3	167 2	152 18	1,377 84	4 N	2	8	147 N	188 N	N	0	3	6 N	_ N
Oregon [†]	-	2	14	102	95		Ō	3	11	23	_	Ō	1	2	2
Washington	11	2	377	238	_	_	0	0	_	_	N	0	0	N	N
American Samoa C.N.M.I.	U U	0		U U	U U	U U	0		U U	U U	U U	0	0	U U	U
Guam Puerto Rico	_	0	1 1	_	61 3	_	0	0 5	 37	— 74	N N	0	0	N N	N N
U.S. Virgin Islands	U	0	Ö	U	Ü	U	0	0	Ü	Ú	Ü	0	0	Ü	Ü

Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

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

* Incidence data for reporting year 2007 are provisional.

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

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

		s	almonello	sis		Shigat	oxin-pro	ducing E	. coli (STE	EC)†		;	Shigellos	is	
	Current		rious eeks	Cum	Cum	Current		/ious reeks	Cum	Cum	Current		vious veeks	Cum	Cum
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	2006
United States	535	869	2,338	36,973	37,563	55	80	336	3,765	3,500	262	348	1,287	13,975	11,824
New England Connecticut	6	37 0	388 373	2,000 373	2,023 503		4 0	67 61	261 61	257 75	_	4 0	41 38	220 38	252 67
Maine§ Massachusetts	3 2	3 24	14 57	124 1,198	114 1,063	_ 1	1 2	4 10	34 130	37 94	_	0 3	5 8	14 144	4 156
New Hampshire	1	3 2	10 20	143 90	193 83	<u>.</u>	0	4 2	19	24 8	_	0	2	5 16	6
Rhode Island [§] Vermont [§]	_	1	5	72	67	1	0	1	11	19	_	0	1	3	6
Mid. Atlantic New Jersev	31	103 16	181 35	4,705 642	4,712 982	4	7 1	63 20	370 31	421 107	9	12 2	47 9	616 107	794 276
New York (Upstate)	24	28	112	1,263	1,133	4	3	15	183	151	7	3	42	137	202
New York City Pennsylvania	2 5	24 33	50 69	1,179 1,621	1,110 1,487	_	0 3	5 47	37 119	42 121		5 1	10 21	223 149	239 77
E.N. Central	52	99	252	4,833	4,904	6	10	34	561	603	40	34	131	1,890	1,214
Illinois Indiana	22	30 15	186 54	1,488 634	1,377 766	5	1	10 13	84 91	100 78	12	11 2	32 13	430 119	546 137
Michigan Ohio	1 28	18 27	41 65	780 1,166	883 1,080	_ 1	1 3	6 11	82 144	83 158	 28	1 12	7 104	62 1,075	142 166
Wisconsin	1	16	50	765	798	_	3	10	160	184	_	4	13	204	223
W.N. Central lowa	34 1	50 9	102 19	2,376 400	2,322 407	6 1	13 2	45 38	678 160	595 116	20 —	35 2	156 14	1,612 76	1,544 99
Kansas Minnesota	4 8	7 13	20 44	296 604	319 602	_	0 4	4 17	39 228	23 181	1 5	0 5	3 24	21 214	128 192
Missouri Nebraska [§]	18 3	15 5	29 13	671 226	669 169	1 2	2 1	12 6	130 75	149 72	14	22 0	72 7	1,166 20	602 118
North Dakota South Dakota	_	0	23 11	36 143	29 127	_	0	12 5	2 44	6 48	_	0	127 30	5 110	92 313
S. Atlantic	251	222	427	9,928	9,862	14	15	37	610	538	51	88	177	3,904	2,808
Delaware District of Columbia	_	2	8 4	127 16	138 54	_	0	3 1	14 1	9 2	_	0	2 5	10 4	9 15
Florida Georgia	181 39	85 34	176 76	4,020 1,742	4,028 1,609	13	2	8 9	133 94	78 76	33 11	43 29	76 95	1,988 1,395	1,290 1,063
Maryland§	9	15	43	772	673	1	2	6	84	106	3	2	7	94	118
North Carolina South Carolina§	16	29 18	110 51	1,368 889	1,436 913	_	2	24 3	122 18	100 12	4	0 2	14 20	75 139	139 77
Virginia [§] West Virginia	1 5	19 2	38 31	834 160	887 124	_	3 0	8 5	126 18	143 12	_	3 0	11 36	139 60	93 4
E.S. Central	33	59 16	137	2,761	2,447	4	4	26	281	271	86	28	164	2,184	646
Alabama [§] Kentucky	13 8	16 10	78 22	791 497	651 402	1	1	19 12	60 105	28 90	15 11	12 3	67 35	584 417	197 224
Mississippi Tennessee§	1 11	13 17	101 34	765 708	717 677	3	0 2	1 10	5 111	10 143	47 13	9 3	107 27	960 223	86 139
W.S. Central	36	82	595	3,501	4,467	_	3	73	145	208	32	39	655	1,538	1,669
Arkansas [§] Louisiana	27	14 14	51 35	740 573	807 974	_	1 0	3	32 3	44 17	5	2 8	10 22	79 349	101 226
Oklahoma Texas [§]	9	9 41	103 470	557 1,631	440 2,246	_	0 2	8 68	17 93	35 112	4 23	2 24	63 580	112 998	116 1,226
Mountain	33	48	90	2,163	2,275	9	8	31	420	490	7	19	58	788	1,247
Arizona Colorado	20	17 10	44 22	821 438	762 543	4	2	8 9	97 66	97 101	6	10 2	33 8	474 90	625 207
Idaho [§] Montana [§]	2 1	3 2	9 6	121 87	156 115	3	1 0	16 0	118	92	1	0 1	2 13	11 21	14 37
Nevada [§] New Mexico [§]	_	4 5	10 13	148 223	192 229	_	0	3 3	18 33	30 43	_	0 2	9 5	47 84	115 166
Utah Wyoming [§]	10	4 1	18 4	264 61	237 41	2	1 0	9	88	109 18	_	1 0	5 19	30 31	62 21
Pacific	 59	113	890	4,706	4,551	10	7	164	439	117	17	29	256	1,223	1,650
Alaska California	1 46	1 94	5 260	72 3,583	68 3,908	N 4	0 4	0 33	N 223	N N	 14	0 24	2 84	7 1,006	7 1,485
Hawaii Oregon [§]	1	5 7	16 15	217 270	211 362	3	0	4	18 78	17 100	_	0	2	21 67	45 113
Washington	11	10	625	564	2	3	1	162	120	_	3	1	170	122	_
American Samoa C.N.M.I.	U U	0	0	U U	U U	U U	0	0	U	U U	U	0	0	U	U
Guam Puerto Rico	_	0 11	0 66	— 446		Ň	0	0	Ň	Ň	_	0	0 4	— 18	36
U.S. Virgin Islands	U	0	0	446 U	527 U	U	0	0	U	U	U	0	0	U	- JO

C.N.M.I.: Commonwealth of Northern Mariana Islands.
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* Incidence data for reporting year 2007 are provisional.
Includes E. coli O157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.

Scontains data reported through the National Electronic Disease Surveillance System (NEDSS). Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

	Stre	<u> </u>		invasive, gr	oup A	Streptococcus pneumoniae, invasive disease, nondrug resistant [†] Age <5 years							
Reporting area	Current	Prev 52 wo		Cum 2007	Cum 2006	Current week		rious eeks Max	Cum 2007	Cum 2006			
United States	43	98	261	4,188	4,521	23	29	108	1,307	1,108			
New England	-	5	28	343	307	5	2	11	108	102			
Connecticut	_	0	23	111	80	_	0	6	15	30			
Maine§	_	0	3	23	17	_	0	1	2	_			
Massachusetts	_	3	12	155	155	4	2	6	72	60			
New Hampshire Rhode Island [§]	_	0 0	4 12	32 6	35 7	1	0 0	2 2	9 8	8 4			
Vermont [§]	_	Ö	2	16	13	_	0	1	2	_			
Mid. Atlantic	1	17	41	769	814	4	4	37	225	159			
New Jersey	_	3	10	108	131	_	1	4	26	55			
New York (Upstate)	1	5	27	253	262	4	3	15	94	78			
New York City Pennsylvania	_	4 5	13 11	181 227	147 274	N	1 0	35 0	105 N	26 N			
•													
E.N. Central Illinois	7	16 5	33 13	695 190	857 260	1	5 1	14 6	192 48	289 78			
Indiana	3	2	12	105	260 102		0	10	48 18	78 47			
Michigan	1	4	10	170	179	<u>.</u>	1	4	60	64			
Ohio .	3	4	14	200	214	_	1	7	54	58			
Wisconsin	_	0	6	30	102	_	0	2	12	42			
W.N. Central	8	5	32	286	303	6	2	8	100	98			
Iowa Kansas	_ 1	0 0	0 3	<u> </u>	— 50	_	0 0	0 1	_ 1	 11			
Minnesota	7	0	29	144	136	4	0	6	68	61			
Missouri	_	2	6	68	67	2	0	2	19	13			
Nebraska [§]	_	0	3	23	28	_	0	1	11	10			
North Dakota South Dakota	_	0 0	2	13 9	12 10	_	0 0	2	1	3			
S. Atlantic Delaware	15 —	21 0	52 1	1,067 10	1,022 10	1	5 0	14 0	235	66 —			
District of Columbia	_	Ö	3	8	15	_	0	1	_	1			
Florida	9	6	16	269	255	1	1	5	58	_			
Georgia Manufand [®]	_	5	13	212	217	_	0 1	5	44	<u> </u>			
Maryland [§] North Carolina	5 1	4 1	10 22	183 145	187 145	_	0	6 0	53	54 —			
South Carolina§		i	7	84	56	_	1	4	42	_			
Virginia§	_	2	11	131	112	_	0	4	31				
West Virginia	_	0	3	25	25	_	0	4	7	11			
E.S. Central	7	4	13	186	184	_	1	6	78	17			
Alabama [§] Kentucky	<u>N</u>	0 1	0 3	N 35	N 41	<u>N</u>	0 0	0 0	N —	N 			
Mississippi	N	0	0	N	N N	_	0	2	3	17			
Tennessee§	7	3	13	151	143	_	1	6	75	_			
W.S. Central	3	6	90	265	345	5	4	43	187	185			
Arkansas [§]	_	0	2	17	24	_	0	2	10	20			
Louisiana	_	0	4	16	16	_	0	4	27	20			
Oklahoma Texas§	2 1	1 3	23 64	63 169	90 215	2	1 2	13 27	45 105	47 98			
Mountain Arizona	2 1	10 4	23 11	461 180	583 302	1	4 2	12 7	154 92	172 94			
Colorado	<u>.</u>	3	9	128	103		0	4	36	46			
daho§		0	2	16	8		0	1	2	3			
Montana§ Nevada§	N	0 0	0 1	N 2	N —	<u>N</u>	0 0	0 1	N 1	N 2			
Nevada ^s New Mexico§	_	1	4	50	 112	_	0	4	19	27			
Utah	1	2	7	80	54	_	0	2	4	_			
Wyoming [§]	_	0	1	5	4	_	0	0	_	_			
Pacific	_	3	9	116	106	_	0	4	28	20			
Alaska	_	0	3	31	N		0	2	26				
California Hawaii	N 	0 2	0 9	N 85	N 106	<u>N</u>	0 0	0 2	N 2	N 20			
nawaii Oregon§	 N	0	0	N	N	 N	0	0	N	∠u N			
Washington	N	Ö	ő	N	N	N	Ő	Ö	N	N			
American Samoa	U	0	0	U	U	U	0	0	U	U			
C.N.M.I.	ŭ	_	_	ŭ	ŭ	Ū	_	_	Ū	Ü			
Guam Puerto Rico	_	0	0	_	_	N N	0 0	0	N N	N N			

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

* Incidence data for reporting year 2007 are provisional.
Includes cases of invasive pneumococcal disease, in children aged <5 years, caused by *S. pneumoniae*, which is susceptible or for which susceptibility testing is not available (NNDSS event code 11717).

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

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

		St	reptococ												
			All ages					<5 years	s	Sy			d seconda	ary	
	Current	Previ		Cum	Cum	Current		vious veeks	Cum	Cum	Current		vious reeks	Cum	O
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	Cum 2006
United States	18	46	256	1,909	2,032	3	8	35	356	334	131	201	310	8,773	8,099
New England	_	2	12	87	108	_	0	3	11	3	2	5	13	223	172
Connecticut	_	1	5	50	82	_	0	2	4	_	_	0	10	28	37
Maine [§] Massachusetts	_	0 0	2 0	9	6	_	0	2	_	1	_	0 3	2 8	9 132	8 105
New Hampshire	_	0	0		_	_	0	0	_	_	1	0	3	26	11
Rhode Island [§] Vermont [§]	_	0	4 2	15 13	9 11	_	0	1 1	3 2	_	1	0 0	5 1	26 2	9 2
Mid. Atlantic	_	2	9	102	125	_	0	5	22	19	6	28	44	1,274	983
New Jersey	_	0 1	0 5	— 35	<u> </u>	_	0	0 4		9	 5	4 3	8 14	170 118	148 129
New York (Upstate) New York City	_	0	0	- JS	40	_	0	0	_	-	<u> </u>	17	34	783	476
Pennsylvania	_	2	6	67	85	_	0	2	15	10	1	4	10	203	230
E.N. Central	3	9	40	444	432	1	2	7	65	72	6	15 7	27	650	745
Illinois Indiana	_	0 3	4 31	16 121	22 119	1	0	1 5	2 23	6 19	_	1	13 6	291 45	361 79
Michigan	_	0	1	2	16	_	0	1	1	2	_	2	9	101	97
Ohio Wisconsin	3 N	5 0	38 0	305 N	275 N	_	1 0	5 0	39	45 —	6	4 1	9 4	166 47	150 58
W.N. Central	_	2	124	119	87	_	0	15	9	13	1	7	14	297	250
lowa	_	0	0	_	_	_	0	0	_	_	_	0	3	15	18
Kansas Minnesota	_	0	11 123	63	— 51	_	0	2 15	5	10	_	0 1	2 4	18 62	22 43
Missouri	_	1	5	47	34	_	0	0	_	3	1	4	11	193	147
Nebraska [§] North Dakota	_	0	1 0	2	1	_	0	0 0	_	_	_	0	1 0	2	7 1
South Dakota	_	0	3	7	1	_	0	1	4	_	_	0	3	7	12
S. Atlantic	11	20	59	845	965	2	4	15	182	156	47	49	180	2,081	1,815
Delaware District of Columbia	_	0	1	8 5	 24	_	0	1 0	2		3	0 3	3 12	15 141	16 102
Florida	9	11	29	487	514	1	2	8	104	100	25	17	44	787	626
Georgia Maryland [§]	2	7 0	17	291	329	1	1 0	10 0	68	54	7	7 6	153	320 263	328
งเลางเลกเฉร North Carolina	_	0	1 0	1	_	_	0	0	_	_	3	5	15 23	263 279	255 257
South Carolina§	_	0	0	_	_	_	0	0	_	_	_	2	11	83	58
Virginia [§] West Virginia	N —	0 1	0 17	N 53	N 98	_	0	0 1	 8	_	9	4 0	16 1	188 5	164 9
E.S. Central	2	3	9	137	163	_	0	3	30	29	18	17	30	754	617
Alabama§	N	0	0	N	N	_	0	0	_	_	4	7	16	302	276
Kentucky Mississippi	1	0	2 2	20	32 22	_	0	1 0	2	6	1 4	1 2	7 9	51 92	61 65
Tennessee§	1	2	8	117	109	_	0	3	28	23	9	7	14	309	215
W.S. Central	1	2	12	123	70	_	0	3	17	7	25	35	55	1,547	1,333
Arkansas§ Louisiana	1	0 1	1 4	3 52	10 60	_	0	0 2	7	2 5	2	2 9	10 23	107 391	64 270
Oklahoma	_	0	10	68	_	_	0	2	10	_	_1	1	4	49	60
Texas [§]	_	0	0	_	_	_	0	0	_	_	22	21	39	1,000	939
Mountain Arizona	1	1 0	6 0	52	82	_	0	3 0	17	35	22 22	7 3	19 12	316 147	423 163
Colorado	_	0	0	_	_	_	0	0	_	_	_	1	5	31	60
Idaho§ Montana§	N —	0	0	N	N —	_	0	0	_	_	_	0	1 2	1 3	3
Nevada§	_	0	3	18	16	_	0	2	5	2	_	2	6	87	116
New Mexico§ Utah	_ 1	0 0	0 6	 20	— 34	_	0	0 3	 10	 23	_	1 0	7 2	38 6	65 15
Wyoming [§]		0	2	14	32	_	0	1	2	10	_	0	1	3	—
Pacific	_	0	0	_	_	_	0	1	3	_	4	39	58	1,631	1,761
Alaska California	N	0	0	N	 N	_	0	0	_	_	<u> </u>	0 36	1 55	7	10
California Hawaii		0	0			_	0	1	3	_	<u>4</u>	0	2	1,488 7	1,564 16
Oregon§ Washington	N N	0	0	N	N	_	0	0	_	_	_	0 2	6	14 115	17 154
Washington		0	0	N	N		0				_		12	115	154
American Samoa C.N.M.I.	U	0	0	U	U U	U U		1	U U	U U	U U	0	0	U U	U
Guam	N	0	0	N	N	_	0	0	_	_	_	0	1	3	_
Puerto Rico U.S. Virgin Islands	N U	0	0 0	N U	N U	_ U	0	0	 U	_ U	1 U	3 0	10 0	134 U	124 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 year 2007 are provisional.

† Incidence data for reporting year 2007 are provisional.

† Includes cases of invasive pneumococcal disease caused by drug-resistant *S. pneumoniae* (DRSP) (NNDSS event code 11720).

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 3, 2007, and November 4, 2006 (44th Week)*

		Vario	ella (chick	(enpox		West Nile virus disease† Neuroinvasive Nonneuroinvasive§										
			ious	Спроху				ious					vious	15140		
	Current	52 w	eeks	Cum	Cum	Current	52 w	eeks	Cum	Cum	Current	52 w	reeks_	Cum	Cum	
Reporting area	week	Med	Max	2007	2006	week	Med	Max	2007	2006	week	Med	Max	2007	2006	
United States	333	778	2,813	28,751	37,810	_	1	130	1,064	1,485	1	2	290	2,201	2,764	
New England Connecticut	6	15 0	124 76	589 2	3,644 1,365	_	0	2 2	7 4	9 7	_	0	2 1	5 1	3 2	
Maine ¹	_	0	7	_	204	_	0	0	_	_	_	0	0	_	_	
Massachusetts New Hampshire		0 7	1 14	 281	1,141 347	_	0 0	2	3	2	_	0	2	3	1	
Rhode Island ¹		0	0			_	0	0	_	_	_	0	1 0	1	_	
Vermont [¶] Mid. Atlantic	1	6 98	66 195	306 3,308	587	_	0	3	18	_	_	0	1	 5	- 10	
New Jersey	N	98	195	3,308 N	4,192 N	_	0	1	1	26 2	_	0	0	<u> </u>	12 3	
New York (Upstate) New York City	N	0	0	N	N	_	0	0 3	 12	8 8	_	0	0 1	_	4	
Pennsylvania	1	98	195	3,308	4,192	_	0	1	5	8	_	0	1	3	1	
E.N. Central	101	214	568	8,101	12,237	_	0	18	100	244	_	0	11	57	174	
Illinois Indiana	_	2	11 0	114	123	_	0 0	13 4	58 12	127 27	_	0 0	8 2	35 10	88 53	
Michigan	14	88	258	3,279	3,926	_	0	5	13	43	_	0	0	_	12	
Ohio Wisconsin	87	91 19	449 80	3,870 838	7,312 876	_	0 0	4 2	12 5	36 11	_	0 0	3 1	7 5	11 10	
W.N. Central	21	33	136	1,383	1,485	_	0	40	233	223	_	0	114	705	484	
Iowa	N	0	0	N	N	_	0	4	10	22	_	0	3	14	15	
Kansas Minnesota	6	8 0	52 0	456	281	_	0	3 11	11 42	17 31	_	0	7 11	26 57	13 34	
Missouri	15	15	78	780	1,087	_	0	9	55	51	_	0	2	11	11	
Nebraska [¶] North Dakota	_N	0	0 60	N 84	N 45	_	0	5 11	18 49	44 20	_	0	15 47	126 312	219 117	
South Dakota	_	1	15	63	72	_	Ő	9	48	38	_	ő	32	159	75	
S. Atlantic	56	97	239	4,176	3,832	_	0	12	40	18	_	0	6	32	14	
Delaware District of Columbia	_	1 0	4 8	38 14	62 39	_	0	1 0	1	_	_	0	0	_	_	
Florida	13	23	76	1,040	N	_	0	1	3	3	_	0	0	_	_	
Georgia Maryland ¹	N N	0	0	N N	N N	_	0	8 2	23 6	2 10	_	0	4 2	23 4	6 1	
North Carolina		0	0	_		_	0	1	3	1	_	0	1	2	_	
South Carolina ¹ Virginia ¹	17 —	20 23	72 190	903 1,200	974 1,456	_	0	2 1	2 2	1	_	0	1 1	2 1	 5	
West Virginia	26	22	50	981	1,301	_	0	0	_	1	_	0	0	_	_	
E.S. Central Alabama ¹	10 10	8 8	571 571	483 480	28 26	_	0	11 2	64 16	118 8	_	0	13 1	87 4	98	
Kentucky	N	0	0	460 N	N	_	0	1	3	5	_	0	0	_	1	
Mississippi Tennessee ¹	N	0	2	3 N	2 N	_	0	7 1	41 4	89 16	_	0	11 1	80 3	91 6	
W.S. Central	122	156	1,640	8,537	10,019		0	27	195	370		0	13	81	234	
Arkansas ¹	_	11	105	593	798	_	0	5	13	24	_	0	2	6	5	
Louisiana Oklahoma	_	1 0	11 0	99	193	_	0	5 10	20 50	90 27	_	0	3 7	9 38	87 21	
Texas ¹	122	149	1,534	7,845	9,028	_	Ö	16	112	229	_	ő	5	28	121	
Mountain	16	54	131	2,140	2,373	_	0	35	254	389	_	1	139	993	1,483	
Arizona Colorado	_	0 21	0 62	825	1,246	_	0 0	6 17	35 96	64 66	_	0 0	12 65	48 459	78 279	
Idaho ¹	N	0	0	N	N	_	0	2	8	139	_	0	19	101	857	
Montana ¹ Nevada ¹	7	6 0	40 1	341 1	N 9	_	0	10 1	36 1	12 34	_	0	30 3	159 10	22 90	
New Mexico ¹	_	5	37	309	327	_	0	8	38	3	_	0	6	22	5	
Utah Wyoming ¹	9	13 0	73 9	630 34	734 57	_	0	8 4	25 15	56 15	_	0	7 33	29 165	102 50	
Pacific	_	0	9	34	_	_	0	17	153	88	1	0	22	236	262	
Alaska	_	0	9	34	N	_	0	0	_	_	_	0	0	_	_	
California Hawaii	_	0 0	0	_	N	_	0 0	17 0	149	81 —	1 —	0 0	21 0	218	197 —	
Oregon [¶]	N N	0	0	N	N	_	0	1	4	7	_	0	4	18	62	
Washington	N U	0	0	N U	N U	U U	0	0	U	U U	U U	0	0	U	3	
American Samoa C.N.M.I.	U	_	_	Ū	Ū	U	_	_	U	U	U	_	_	U	U	
Guam Puerto Rico	_	5 11	30 30	168 467	219 504	_	0	0	_	_	_	0	0	_	_	
U.S. Virgin Islands	U	0	0	467 U	504 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 year 2007 are provisional.
Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.

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

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

TABLE III. Deaths in 122 U.S. cities.* week ending November 3, 2007 (44th Week)

TABLE III. Deaths			-	y age (ye					All ca	uses, by	age (yea	ars)			
Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	P&I [†] Total	Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	P&I [†] Total
New England	502	345	109	30	7	11	47	S. Atlantic	1,069	640	263	85	37	44	58
Boston, MA	117	78	22	7	6	4	10	Atlanta, GA	110	53	28	14	7	8	6
Bridgeport, CT	26	11	13	2	_	_	2	Baltimore, MD	145	85	40	8	6	6	16
Cambridge, MA Fall River, MA	16 12	13 10	3 1	1	_	_	2	Charlotte, NC Jacksonville, FL	115 176	66 96	27 48	13 17	5 4	4 11	12 4
Hartford, CT	61	42	16	3		_	10	Miami, FL	105	69	20	9	4	3	4
Lowell, MA	18	13	1	3	_	1	2	Norfolk, VA	53	39	11	_	_	3	2
Lynn, MA	10	4	5	1	_	_	2	Richmond, VA	56	27	22	5	2	_	2
New Bedford, MA	29	28	1	_	_	_	2	Savannah, GA	52	27	19	5	1	_	3
New Haven, CT	19	13	4	_	1	1	4	St. Petersburg, FL	55	38	8	3	3	3	1
Providence, RI Somerville, MA	63 5	43 4	10 1	8	_	2	_	Tampa, FL Washington, D.C.	185 U	126 U	38 U	10 U	5 U	6 U	8 U
Springfield, MA	52	33	14	3		2	 5	Wilmington, DE	17	14	2	1	_	_	_
Waterbury, CT	16	11	5	_	_	_	1								
Worcester, MA	58	42	13	2	_	1	7	E.S. Central Birmingham, AL	761 162	506 121	172 29	52 4	18 8	13	55 18
Mid. Atlantic	1,916	1,307	417	119	41	30	76	Chattanooga, TN	60	121 42	29 11	4	_	3	3
Albany, NY	42	30	11	_	1	_	_	Knoxville, TN	120	85	26	8	_	1	10
Allentown, PA	21	19	2	_	_	_	_	Lexington, KY	86	51	24	6	_	5	4
Buffalo, NY	56	41	10	1	2	2	2	Memphis, TN	116	74	27	12	3	_	9
Camden, NJ	23	11	5	4	3	_	_	Mobile, AL	25	17	3	4	1	_	2
Elizabeth, NJ	17	15	2	_	_	_	3	Montgomery, AL	48	37	9	1	1	_	2
Erie, PA Jersey City, NJ	41 19	35 10	3 5	3 4	_	_	2	Nashville, TN	144	79	43	13	5	4	7
New York City, NY	981	689	205	64	11	10	31	W.S. Central	1,366	847	336	79	47	57	83
Newark, NJ	37	15	12	4	4	2	1	Austin, TX	75	48	20	3	2	2	6
Paterson, NJ	30	11	9	4	1	5	3	Baton Rouge, LA	61 43	29	10	12 3	10	_ 4	_
Philadelphia, PA	276	155	81	20	15	5	11	Corpus Christi, TX Dallas, TX	186	33 95	3 57	12	7	15	3 8
Pittsburgh, PA§	31	22	6	1	2	_	1	El Paso, TX	99	74	12	8	2	3	2
Reading, PA	32	25	4	2	_	1	_	Fort Worth, TX	110	65	32	3	2	8	9
Rochester, NY Schenectady, NY	146 23	111 15	25 7	8	1	2	11 2	Houston, TX	313	189	92	14	6	12	21
Scranton, PA	18	12	5			1	_	Little Rock, AR	64	33	22	4	4	1	
Syracuse, NY	57	42	12	1	_	2	2	New Orleans, LA ¹	U	U	U	U	U	U	U
Trenton, NJ	30	20	7	3	_	_	1	San Antonio, TX	221 64	151 42	44	11 4	8 1	7	20
Utica, NY	17	13	4	_	_	_	1	Shreveport, LA Tulsa, OK	130	42 88	13 31	5	5	4	7 7
Yonkers, NY	19	16	2	_	1	_	3	l '							
E.N. Central	2,051	1,312	516	119	60	43	128	Mountain Albuquerque, NM	976 94	644 64	200 17	80 5	26 4	24 4	58 3
Akron, OH	59	35	11	1	12	_	1	Boise, ID	59	37	16	3	1	2	3
Canton, OH	44	32	11	1	_	_	3	Colorado Springs, CO	80	51	15	11	2	1	4
Chicago, IL Cincinnati, OH	323 90	181 52	87 24	31 8	12	11 6	28 14	Denver, CO	73	48	18	4	1	2	7
Cleveland, OH	212	144	50	11	 5	2	6	Las Vegas, NV	275	189	58	20	6	2	15
Columbus, OH	173	109	52	6	2	4	9	Ogden, UT	28	18	5	4	1	_	5
Dayton, OH	126	97	17	6	4	2	7	Phoenix, AZ Pueblo, CO	119 41	68 29	21 8	19 4	8	1	6 1
Detroit, MI	166	77	66	11	7	5	9	Salt Lake City, UT	113	69	27	4	1	12	12
Evansville, IN	45	35	6	4	_	_	4	Tucson, AZ	94	71	15	6	2	_	2
Fort Wayne, IN Gary, IN	58 12	39 5	15 5	3 2	1	_	4 1	Pacific	1,215	811	274		22	31	83
Grand Rapids, MI	57	39	15	2	1	_	4	Berkeley, CA	1,213	11	3	76 2		1	2
Indianapolis, IN	174	108	45	8	6	7	10	Fresno, CA	Ü	Ü	Ü	Ū	U	Ú	Ū
Lansing, MI	50	36	12	2	_	_	4	Glendale, CA	Ü	Ū	Ü	Ū	Ū	U	U
Milwaukee, WI	104	57	29	8	7	3	_	Honolulu, HI	64	51	9	3	_	1	5
Peoria, IL	55	44	11	_		_	9	Long Beach, CA	61	41	12	4	2	2	8
Rockford, IL	39	29	8	1	1	_	_	Los Angeles, CA	U	U	ñ	U	Ų	Ų	Û
South Bend, IN Toledo. OH	74 116	53 80	17 24	3 9	_ 1	1 2	4 5	Pasadena, CA Portland, OR	28 117	20 74	5 26	1 9	1 3	1 5	6 11
Youngstown, OH	74	60	11	2	i	_	6	Sacramento, CA	183	121	44	12	1	5	14
								San Diego, CA	165	110	32	14	4	4	6
W.N. Central Des Moines, IA	580 58	368 48	150 8	36 2	14	11	40 5	San Francisco, CA	113	64	34	6	3	6	9
Duluth, MN	28	48 17	11	_	_	_	3	San Jose, CA	173	122	35	11	3	2	12
Kansas City, KS	22	11	7	1	3		_	Santa Cruz, CA	32	25	7	_	_	_	3
Kansas City, MO	78	49	19	5	3	2	9	Seattle, WA	114	67	37	5	1	4	5
Lincoln, NE	39	31	7	1	_	_	6	Spokane, WA Tacoma, WA	53 95	39 66	13 17	1 8	4	_	2
Minneapolis, MN	61	32	20	4	1	4	5								
Omaha, NE	80	48	22	8	1	1	9	Total	10,436**	6,780	2,437	676	272	264	628
St. Louis, MO	77 65	43	22 17	8	2	2	1								
St. Paul, MN Wichita, KS	65 72	42 47	17 17	3 4	1 3	2	2								
**ioiiia, NO	12	41	17		J			l							

U: Unavailable. —:No reported cases.

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

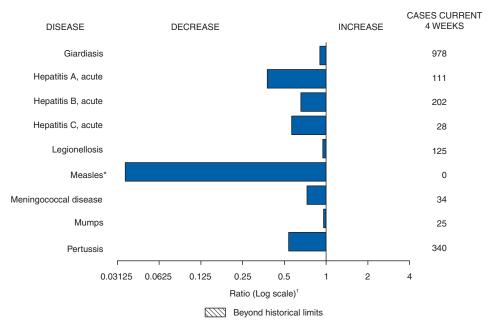
† Pneumonia and influenza.

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

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

**Total includes unknown ages.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals November 3, 2007, with historical data



Notifiable Disease Data Team and 122 Cities Mortality Data Team

Patsy A. Hall

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

^{*} No measles cases were reported for the current 4-week period yielding a ratio for week 44 of zero (0).

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

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