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Federal Air Travel Restrictions for Public Health Purposes — United States, June 2007–May 2008

Persons with communicable diseases who travel on commercial aircraft can pose a risk for infection to the traveling public (*1,2*). In June 2007, federal agencies developed a public health Do Not Board (DNB) list, enabling domestic and international public health officials to request that persons with communicable diseases who meet specific criteria and pose a serious threat to the public be restricted from boarding commercial aircraft departing from or arriving in the United States. The public health DNB list is managed by CDC and the U.S. Department of Homeland Security (DHS). To describe the experience with the public health DNB list since its inception, CDC analyzed data from June 2007 to May 2008. This report summarizes the results of that analysis, which indicated that CDC received requests for inclusion of 42 persons on the public health DNB list, all with suspected or confirmed pulmonary tuberculosis (TB). From the requests, 33 (79%) persons were included on the list. The public health DNB list enables public health officials to prevent travel on commercial aircraft by persons who pose a risk for infection to other travelers. State and local health departments in the United States and other countries should be aware of this new public health tool.

The public health DNB list is intended to supplement local public health measures when they are deemed insufficient to prevent persons who are contagious from boarding commercial aircraft. Use of the list is limited to diseases that would pose a serious health threat to fellow air travelers. The list is authorized under the Aviation and Transportation Security Act of 2001* and is managed jointly by DHS and CDC; however, DHS defers to CDC regarding public health decisions and actions.

To request that a person be placed on the public health DNB list, state or local public health officials contact the CDC Quarantine Station for their region[†]; health-care providers make requests by contacting their state or local public health departments, and foreign and U.S. government agencies contact the Director's Emergency Operations Center (DEOC) at CDC in Atlanta. To include someone on the list, CDC must determine that the person 1) likely is contagious with a communicable disease that would constitute a serious public health threat should the person be permitted to board a flight; 2) is unaware of or likely to be nonadherent with public health recommendations, including treatment; and 3) likely will attempt to board a commercial aircraft. Once a person is placed on the list, airlines are instructed not to issue a boarding pass to the person for any commercial domestic flight or for any commercial international flight arriving in or departing from the United States. The public health DNB list does not apply to other means of transportation (e.g., buses or trains). Governments of foreign countries are notified when their citizens or persons residing in their countries are placed on the list.

Multiple criteria are used to decide whether a person with a communicable disease constituting a serious public health threat should be placed on the public health DNB list and when a person can be removed. For persons with suspected

* 49 USC § 114 (f) and (h).

† Available at http://www.cdc.gov/ncidod/dq/resources/quarantine_station_contact_list.pdf.

INSIDE

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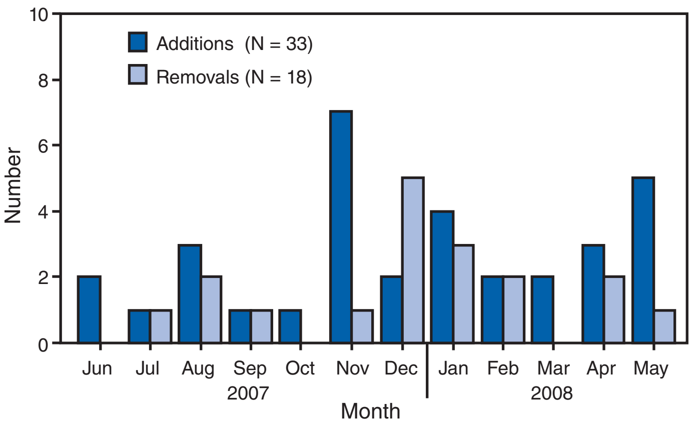
or confirmed pulmonary TB, criteria have been developed in consultation with subject-matter experts in CDC's Division of Tuberculosis Elimination and the National Tuberculosis Controllers Association, and include initial assessment of contagiousness based on clinical, radiographic, and microbiologic evaluation; treatment adequacy; and mycobacteriologic response (e.g., sputum smear microscopy and culture results). These criteria are derived from existing general guidance on prevention of TB transmission and guidance specific to air travel (*3–5*). For situations in which multidrug-resistant TB (MDR TB) is confirmed or suspected, more stringent criteria (e.g., evidence of negative culture results) are applied because the consequences of transmission are substantially more severe.

During June 2007–May 2008, CDC received requests to place 42 persons on the public health DNB list. Thirty-three (79%) persons met the criteria and were placed on the list (Figure). Of the other nine persons, four were the subjects of other actions pursued by local health departments (e.g., local isolation orders), three agreed not to attempt to board a commercial aircraft, and two were determined to be noncontagious. Twenty-eight (85%) of the 33 public health DNB placements came from state, territorial, or local health departments in the United States; the greatest number of requests came from Texas (seven) and California (five). Three requests came from Canada, one from Mexico, and one from the U.S. Department of State. Fourteen persons (42%) were placed on the public health DNB list while they were outside the United States.

Of the 33 persons placed on the list, all were thought to have infectious pulmonary TB. Their median age was 41 years (range: 20–77 years), and 20 (61%) were male. Drug-susceptibility testing results were available for 27 (82%) persons, of whom 19 (70%) were susceptible to first-line anti-TB medications. Among the others, seven (26%) had MDR TB, and one had extensively drug-resistant TB (XDR TB). Fifteen (45%) persons on the public health DNB list were citizens of countries designated by the World Health Organization as TB high-burden countries (*6*).

Public health officials who request placement of a person on the public health DNB list are asked to notify their CDC Quarantine Station as soon as the person on the list is determined to be noncontagious. Once public health authorities confirm that a person is no longer contagious, CDC and DHS remove the person from the list, typically within 24 hours. In addition, on a monthly basis, CDC reviews all persons on the public health DNB list to determine whether they are eligible for removal. During June 2007–May 2008, 18 (55%) of the 33 persons placed on the public health DNB list later were removed because they were determined either to be no longer contagious or not to have TB (Figure). Persons removed during this period had been on the public health DNB list for a

FIGURE. Number of public health Do Not Board list additions and removals, by type and month — United States, June 2007–May 2008



median of 26 days (range: 2–193 days). The 15 persons not removed had been on the public health DNB list for a median of 72 days (range: 1–364 days).

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Editorial Note: The public health DNB list is a new tool that federal, state, local, and international public health officials can use to help prevent the spread of communicable disease via commercial air travel. Judicious use of the public health DNB list can obviate the human and economic costs associated with conducting contact investigations when persons with communicable diseases travel on commercial aircraft (*7,8*).

Although the public health DNB list can be used only for commercial air travel, other public health tools can be used to restrict travel by air and other conveyances (e.g., ships), including isolation and border lookout records. Additionally, retrospective contact investigations among exposed persons can help to prevent disease transmission. A border lookout record is a mechanism by which CDC, acting through DHS Customs and Border Protection (CBP), can alert border authorities when public health officials determine that a person with a communicable disease who might pose a serious threat to public health might attempt to enter the country through a seaport, airport, or land border. The lookout record prompts CBP staff, in collaboration with CDC quarantine staff, to conduct a thorough inquiry and evaluation of such persons when they attempt to enter the United States. Persons who are included on the public health DNB list also are routinely assigned a lookout record.

Backup measures such as border lookout records are important adjuncts to the public health DNB list. Two (6%) of the 33 persons on the public health DNB list during June 2007–May 2008 are known to have attempted to evade the U.S. air travel restriction. Both persons were successfully detected by CBP officers before they were admitted into the United States and were taken to local hospitals for evaluation and care of TB.

CDC and DHS regularly evaluate the public health DNB mechanism to ensure that it is operating effectively and that the list is used only when other measures are unlikely to prevent air travel. Ensuring the accuracy of information such as name, date of birth, and other unique identifiers, is especially critical. CDC also works with local and state public health officials and other partners to close any gaps not covered by the list. For example, compulsory local, state, or federal isolation orders might be required to restrict movement of certain persons who attempt to contravene official travel restrictions or who are otherwise noncompliant with public health recommendations and present a serious threat to the public. To enable effective use of such orders, state and local public health officials should be familiar with their legal authorities and operational procedures, including law enforcement capabilities, for implementing isolation or quarantine orders.

The public health DNB list is not limited to those communicable diseases for which the federal government can legally impose isolation and quarantine[§]; the list can be used for other communicable diseases that would pose a serious health threat to air travelers. However, to date, the list has only been used for persons with suspected or confirmed pulmonary TB, which is transmitted via the respiratory route and which has had transmission documented during commercial air travel. Persons with TB also can remain contagious for long periods, especially when infected with MDR TB (*3,9,10*).

Before June 2007, when the public health DNB list was established, CDC Quarantine Station officers worked directly with airlines and health departments to prevent persons known or suspected of having communicable diseases that posed serious threats to fellow passengers from traveling on commercial flights. Under certain circumstances, airlines may decline to

[§] Under section 361 of the Public Health Service Act (42 USC § 264), the CDC Director may apprehend, detain, examine, or conditionally release persons believed to be carrying certain communicable diseases that are specified in an executive order of the president. This list of diseases currently includes cholera, diphtheria, infectious tuberculosis, plague, smallpox, yellow fever, viral hemorrhagic fevers (Lassa, Marburg, Ebola, Crimean-Congo, South American, and others not yet isolated or named), severe acute respiratory syndrome, and influenza caused by novel or reemergent influenza viruses that are causing, or have the potential to cause, a pandemic (executive orders 13295, April 4, 2003, and 13375, April 1, 2005).

board passengers with communicable diseases pursuant to regulations promulgated under the authority of the Air Carrier Access Act of 1986. Air carriers must base their decisions on reasonable judgment that relies on current medical knowledge or on the best available objective evidence, including that from public health authorities.¶

Public health DNB list procedures are reviewed periodically by CDC and DHS to ensure privacy protections and assess ethical issues. In addition, CDC works with state and local public health departments to ensure that 1) persons placed on the public health DNB list are notified of the action taken, 2) criteria for being removed from the list are known, and 3) steps are taken to obtain appropriate public health management of the person's communicable disease.

State and local health departments may obtain more information about the process for requesting federal assistance with travel restrictions through the CDC Quarantine Station for their region. Information also is available from CDC's DEOC at 770-488-7100. International health officials should call the DEOC for information about travel restrictions. Health-care providers who are concerned that a patient with infectious TB, or another communicable disease posing a serious public health threat, is planning to travel by commercial aircraft despite instructions to the contrary should contact their local health department.

¶ 49 USC § 41705; 14 CFR § 382.51.

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Impact of Expanded Newborn Screening — United States, 2006

Universal newborn screening for selected metabolic, endocrine, hematologic, and functional disorders is a well-established practice of state public health programs. Recent developments in tandem mass spectrometry (MS/MS), which is now capable of multi-analyte analysis in a high throughput capacity, has enabled newborn screening to include many more disorders detectable from a newborn blood spot (*1*). In 2006, to address the substantial variation that existed from state to state in the number of disorders included in newborn screening panels, the American College of Medical Genetics (ACMG), under guidance from the Health Resources and Services Administration, recommended a uniform panel of 29 disorders, which was subsequently endorsed by the federal Advisory Committee on Heritable Disorders in Newborns and Children (*2*). After 2006, most states began to expand their panels to include all 29 disorders; currently, 21 states and the District of Columbia have fully implemented the ACMG panel.* To estimate the burden to state newborn screening programs resulting from this expansion (*3*), CDC used 2001–2006 data from those states with well-established MS/MS screening programs† to estimate the number of children in the United States who would have been identified with disorders in 2006 if all 50 states and the District of Columbia had been using the ACMG panel. This report describes the results of that analysis, which indicated that, although such an expansion would have increased the number of children identified by only 32% (from 4,370 to 6,439), these children would have had many rare disorders that require local or regional capacity to deliver expertise in screening, diagnosis, and management. The findings underscore the need for public health and health-care delivery systems to build or expand the programs required to

* Additional information available at http://www.marchofdimes.com/peristats/tlanding.aspx?dv=lt&reg=99&top=12&lev=0&slev=1.

† Massachusetts, North Carolina, and Wisconsin. Data from California also were included because that state had conducted a rigorous pilot study (*4*) before it implemented expanded screening in 2005.

manage the rare disorders detected through expanded newborn screening, while also continuing programs to address more common disorders.

Data on the number of children detected by newborn screening with a confirmed disorder were obtained from four state health departments: California, Massachusetts, North Carolina, and Wisconsin. Massachusetts, North Carolina, and Wisconsin were included because they were the only states with well-established MS/MS screening programs that had been screening for a majority of the disorders in the ACMG panel for at least 6 years. California was included because the state implemented a more recent expansion (in 2005) after a well-documented pilot study (*4*) and had a large number of births per year. The 2006 estimates were based on newborn screening data for the period 2001–2006; not all states contributed data for all the disorders for the entire period. Tyrosinemia type 1 and hearing loss, two disorders included in the ACMG panel, were not included in this analysis. Tyrosinemia type 1 was not included based on recent evidence that current laboratory screening methods are insufficient for detecting the majority of cases of this disorder (*5*). Data for children identified from newborn hearing screening were not included because they are reported in separate systems at the state level.

The cumulative incidence for each disorder was determined by summing the total number of cases observed in all four state newborn screening programs for the periods that each state was screening for the disorder, and dividing that sum by the total number of live births in the four states combined during the respective periods. To estimate the number of live births in the United States affected by each disorder in 2006, CDC multiplied the disorder-specific rate by the number of live births in the United States in 2006. All live birth data (state and U.S.) were obtained from National Center for Health Statistics vital records files using state of occurrence of the live birth rather than state of residence, which is analogous to the newborn screening procedures at the state level. For hemoglobinopathies, the estimate of live births affected was based on race- and ethnicity-specific prevalence rates using the following categories: non-Hispanic white, non-Hispanic black, other (i.e., American Indian/Alaskan Native, Asian/Pacific Islander, and Hispanic), and unknown race/ethnicity. Exact Poisson 95% confidence intervals were calculated for the disorder-specific rates that were used to estimate the upper and lower bounds for the estimated number of cases in the United States for 2006 (*6*). Because of the large number of total cases, the 95% confidence interval for this value was estimated using the normal approximation.

The estimated number of cases of disorders that would have been identified in 2006 using the ACMG panel was 6,439, 32% more than the 4,370 that would have been identified otherwise (Table). The three hemoglobinopathies and congenital hypothyroidism combined accounted for 61% of the total estimated number of cases. Ten disorders accounted for an estimated 100 or more cases (phenylketonuria, 3-methylcrotonyl-CoA carboxylase deficiency, medium-chain acyl-CoA dehydrogenase deficiency, Hb SS, Hb SC, Hb S/β thalassemia, congenital hypothyroidism, congenital adrenal hyperplasia, galactosemia, and cystic fibrosis). Four disorders accounted for an estimated 50 or more cases (methylmalonic acidemia attributed to mutase deficiency, very long-chain acyl-CoA dehydrogenase deficiency, carnitine uptake defect, and biotinidase deficiency). Nine of the disorders accounted for an estimated 15 or fewer cases.

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Editorial Note: With advances in treatment and the ACMG-recommended expansion of the newborn screening panel, the adverse health consequences of various disorders can now be minimized or avoided. For example, one of the disorders included in the expanded panel, medium-chain acyl-CoA dehydrogenase deficiency (MCAD), involves a simple treatment (i.e., avoiding fasting); thus, proper medical management of a child identified with MCAD can be lifesaving. The findings in this report indicate that if all state newborn screening programs had used the expanded ACMG panel in 2006 to screen for disorders identifiable from a newborn blood spot, 6,439 newborns would have been identified with one of these disorders.

In 2003, before the recommendation to expand the screening panel, all but four states were screening for six disorders (galactosemia, hemoglobinopathies [Hb SS, Hb SC, and Hb S/β thalassemia], phenylketonuria, and congenital hypothyroidism).[§] These six disorders represent 68% of the estimated caseload for 2006, and congenital hypothyroidism and the hemoglobinopathies account for the majority of these cases. The addition of 21 disorders, many of which were estimated to have fewer than 15 cases, underscores the dual challenge of continuing the screening program for the more common disorders while also building the expertise and resources to manage the many rare disorders. Several states are addressing these resource concerns by outsourcing laboratory testing and working collaboratively to share expertise on laboratory, diagnostic, and treatment

[§] Additional information available at http://www2.uthscsa.edu/nnsis.

TABLE. Estimated number of U.S. children who would have been identified with disorders in 2006 using the American College of Medical Genetics recommended newborn screening panel,* based on incidence of these disorders in four state newborn screening programs during 2001–2006, by disorder

Disorder	California, Massachusetts, North Carolina, and Wisconsin (2001–2006)†				United States (2006)	
	Observed no. of cases	No. of births	Rate per 100,000	(95% CI§)	Estimated no. of cases¶	(95% CI)
Amino acid disorders						
Phenylketonuria (includes clinically significant hyperphenylalaninemia variants)	254	4,884,217	5.20	(4.76–5.68)	215	(197–235)
Maple syrup urine disease	14	2,214,329	0.63	(0.42–0.94)	26	(17–39)
Homocystinuria	6	2,214,329	0.27	(0.14–0.50)	11	(6–21)
Citrullinemia I	13	2,214,329	0.59	(0.38–0.89)	24	(16–37)
Argininosuccinic acidemia	4	2,214,329	0.18	(0.08–0.39)	7	(3–16)
Organic acid metabolism disorders						
Isovaleric acidemia	19	2,474,313	0.77	(0.54–1.08)	32	(22–45)
Glutaric acidemia type I	23	2,474,313	0.93	(0.68–1.26)	38	(28–52)
Hydroxymethylglutaric aciduria	2	2,474,313	0.08	(0.02–0.24)	3	(1–10)
Multiple carboxylase deficiency	2	2,474,313	0.08	(0.02–0.24)	3	(1–10)
Methylmalonic acidemia (mutase deficiency)	30	2,474,313	1.21	(0.93–1.58)	50	(38–66)
Methylmalonic acidemia CblA,B	7	2,474,313	0.28	(0.16–0.50)	12	(6–21)
3-Methylcrotonyl-CoA carboxylase deficiency	60	2,474,313	2.43	(2.01–2.92)	100	(83–121)
Propionic acidemia	9	2,474,313	0.36	(0.22–0.60)	15	(9–25)
Beta-ketothiolase deficiency	4	2,474,313	0.16	(0.07–0.35)	7	(3–14)
Fatty acid oxidation disorders						
Medium-chain acyl-CoA dehydrogenase deficiency	143	2,460,473	5.81	(4.90–6.85)	239	(212–269)
Very long-chain acyl-CoA dehydrogenase deficiency	41	2,460,473	1.67	(1.20–2.26)	69	(55–86)
Long-chain 3-hydroxyacyl-CoA dehydrogenase deficiency	8	2,460,473	0.33	(0.14–0.64)	13	(8–23)
Trifunctional protein deficiency	1	2,460,473	0.04	(0.00–0.23)	2	(0–7)
Carnitine uptake defect	26	1,256,869	2.07	(1.35–3.03)	85	(63–113)
Hemoglobinopathies**						
Hb SS	777	4,403,132	17.65	(16.78–18.56)	1,128	(1,063–1,200)
Hb SC	326	4,403,132	7.40	(6.85–8.01)	484	(442–532)
Hb S/β thalassemia	74	3,673,283	2.02	(1.70–2.38)	163	(131–205)
Other disorders						
Primary congenital hypothyroidism (excluding secondary, transient, or other)	2,544	4,884,217	52.09	(50.67–53.55)	2,156	(2,097–2,216)
Biotinidase deficiency (including partial)	19	1,268,943	1.50	(1.06–2.10)	62	(44–87)
Congenital adrenal hyperplasia (excluding non 21-hydroxylase deficiency)	121	2,474,313	4.89	(4.29–5.57)	202	(178–230)
Classical galactosemia+variant (excluding GALK and GALE)	264	4,884,217	5.41	(4.95–5.90)	224	(205–244)
Cystic fibrosis (including nonclassical)	270	895,410	30.15	(27.66–32.87)	1,248	(1,145–1,360)
Total (all disorders)					**6,439**	**(6,282–6,596)**

* Available at http://www.acmg.net/resources/policies/nbs/nbs-sections.htm. Two of the 29 disorders listed in the screening panel are not included: tyrosinemia type I and hearing loss.
† Not all states screened for all disorders during this period. Number of births varies based on period in which the disorder was screened for in each state.
§ Confidence interval.
¶ Based on live birth occurrence data for 2006 (n = 4,138,349).
** Estimated number of cases was calculated based on race- and ethnicity-specific prevalence rates using the following categories: non-Hispanic white, non-Hispanic black, other (i.e., American Indian/Alaskan Native, Asian/Pacific Islander, and Hispanic), and unknown race/ethnicity.

issues. At the federal level, the Health Resources and Services Administration is facilitating development of technical and clinical expertise through a regional network of technical centers; in addition, a federal advisory committee, the Committee on Heritable Disorders in Newborns and Children, provides guidance on the appropriate application of newborn screening tests, technologies, policies, and guidelines (*7*).

The continued success of the expanded screening programs depends on the development of surveillance and tracking capacities that will enable ongoing evaluation and improvement. In addition, the health outcomes of children affected by these disorders should be monitored. Better understanding of response to clinical treatments and other interventions and the development of novel approaches to treatment are needed, particularly for rare disorders for which treatment protocols are less well defined. Surveillance programs can provide the research platform for both observational and experimental approaches to refine medical and other interventions for many of these disorders (*8*).

The findings in this report are subject to at least three limitations. First, for the majority of the disorders screened, the cumulative incidence was derived from screening results for the approximately 2 million live births that occurred in the four states during 2001–2006. Although this number of births is sufficient to provide accurate estimates for many of the disorders (as evidenced by the relatively narrow 95% confidence intervals), the results observed among the four states might not be representative of the entire U.S. population (*9*). The analysis did account for some of this variability, particularly for hemoglobinopathies (which vary substantially by race and ethnicity) by using race- and ethnicity-specific rates to calculate the expected number of births. However, this approach was not possible as a general strategy because of lack of sufficient numbers of cases by race and ethnicity and lack of race- and ethnicity-specific information for Massachusetts. Second, an assessment of the accuracy of the rates for the rare disorders will not be possible until additional, population-based newborn screening data become available. Nevertheless, even if the estimated rates for the rare disorders were inaccurate by a factor of twofold or threefold, they would have only a modest impact on the estimated number of children with disorders identified using the expanded newborn screening panel. Finally, this analysis was not able to account for variations in the screening and diagnostic protocols among states that might have affected state-specific prevalences and estimates of the total number of cases.

Newborn screening continues to be a critical public health program that ensures better health and developmental outcomes for newborns at high risk. The recent recommendation to expand newborn screening programs presents challenges in terms of 1) ensuring screening and follow-up for the many rare disorders and 2) facilitating the clinical care and management of complex and more common disorders (e.g., cystic fibrosis and hemoglobinopathies), which require different types of specialists and life-long clinical management.

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Thallium Poisoning from Eating Contaminated Cake — Iraq, 2008

Thallium is an odorless, tasteless, heavy metal formerly used in rodenticides and still used in some manufacturing processes (e.g., electronics, pharmaceuticals, and glass). Thallium also has been used for intentional poisonings (*1*). Acute thallium poisoning produces gastrointestinal symptoms and signs, such as vomiting and acute abdominal pain, in the first few hours after ingestion, and initially is indistinguishable from other causes of acute gastrointestinal toxicity. However, within several days of ingestion, acute thallium poisoning often produces neurologic symptoms, such as extreme pain and acute muscle weakness ascending from the lower extremities, consistent with heavy metal toxicity (*2*). On January 22, 2008, 10 of 12 members in two families in Baghdad, Iraq, developed gastrointestinal symptoms; four of those 10 persons subsequently died from acute thallium poisoning, and five developed neurologic symptoms but survived. The Jordan Field Epidemiology Training Program* investigated this cluster at the request of the World Health Organization (WHO) representative in Iraq. The preliminary investigation indicated this was an intentional poisoning, and law enforcement officials began a criminal investigation. Physicians who see the sudden onset of painful peripheral neuropathy and hair loss in patients should consider the possibility of thallium poisoning.

On January 22, 2008, 10 members of two families sought treatment at a health-care facility in Baghdad. All 10 of the ill patients were experiencing abdominal pain, vomiting, and dysphagia. Over the next 4 days, five of the patients developed

* The Jordan Field Epidemiology Training Program was begun in 1998 with funding by the U.S. Agency for International Development and support from CDC. It became independent in 2008 and operates as part of Jordan's Ministry of Health.

neurologic symptoms and signs of varying severity (i.e., pain, abnormal sensations, and weakness, especially in the lower limbs). On January 26, the treating physician submitted specimens from the patients and a sample of a cake, which all 10 had eaten, to the poison testing laboratory of the Iraq Ministry of Health in Baghdad. On January 27, the WHO representative in Iraq was notified that the laboratory had detected thallium qualitatively in patient specimens and the cake. One of the patients, a child aged 11 years, died on January 30.

On February 1, the nine surviving patients were evacuated to Amman, Jordan, to receive Prussian blue (ferric hexacyanoferrate) as an antidote for thallium poisoning, which was not available in Iraq. A second child, aged 2 years, died soon after arrival in Jordan, before therapy could begin. Prussian blue therapy was begun in the eight surviving patients 11 days after they had eaten the contaminated cake; however, two of the eight patients were already in coma with severe cerebral edema and subsequently died. Over the next 30 days, all six long-term survivors developed hair loss, and five of the six survivors developed muscle weakness and spasticity of the lower limbs, with differing severity.

An epidemiologic investigation was initiated on February 5, 2008. Investigators learned that the fathers of the two families (family A and family B) were board members of an Iraqi sporting club. The board held a routine meeting in the club's conference room in Baghdad at midday on January 21. The cake, divided into 10 pieces, was prepared by a local bakery and delivered to the board meeting as a gift from a former board member. However, the cake arrived late, after most board members had departed. The board members who remained (the fathers of two families) divided the cake and took the halves home to their families. No cake was eaten at the board meeting; the cake was eaten at both families' homes after the evening meal on January 21.

Family A was composed of seven members (father, mother, and five children); family B was composed of five members (father, mother, uncle, and two children). Ten cases of abdominal pain, vomiting, and dysphagia were identified among family members who consumed any portion of the cake on January 21. No other board members or their families reported illness, and no similar illnesses were found at the health facility in Baghdad or at nearby health facilities.

The overall attack rate was 83% (10 of 12 persons): six of seven persons in family A and four of five persons in family B. Four patients died (case-fatality rate = 40%; family-specific fatality rates = 33% [two of six] for family A and 50% [two of four] for family B) (Table). Food exposure histories were collected in Jordan through interviews with family members. Ten persons who ate portions of the cake on January 21 became ill; neither of the two persons who did not eat cake became ill (relative risk = undefined, p=0.02, Fisher exact test). However, one of the two had tasted the cake icing and tested positive for thallium in blood and urine specimens. Six (60%) of the ill patients were male; four (40%) were female. The median age of the patients was 12.5 years (range: 2–40 years). The median onset of illness was 24 hours after exposure (range: 12–72 hours) (Figure). An inverse relation was suggested between the amount of cake eaten and time to onset of symptoms. More rapid onset of illness occurred in persons who ate the most cake, and in adults. Of five patients who ate at least one piece[†] of cake, onset of illness was a median of 16 hours after exposure; of five patients who ate half a piece of cake or less, median onset of illness was 48 hours after exposure (r = -0.56, p=0.09, Pearson product-moment). Among the four patients aged ≥19 years, median onset of illness was 14 hours; among the six patients aged ≤14 years, median onset was 24 hours (r = -0.58, p=0.08, Pearson product-moment). Fatality was not significantly associated with sex, age, the amount of cake eaten, or the time to illness onset.

† "Piece" was not further defined; quantities were determined by subjective responses from family members.

TABLE. Number of persons who ate thallium-contaminated cake, became ill, and died, by amount of cake eaten* — Baghdad, Iraq, 2008

Amount of cake eaten	No. exposed	Became ill No.	Became ill (%)	Died No.	Died (%)	Median incubation time (hrs)†	Median blood thallium (μg/L)§	Median 24-hr urine thallium (μg/L)
None	1	0	(0)	0	(0)	NA¶	NA	NA
Taste of icing	1	0	(0)	0	(0)	NA	58	625
1/4 piece	2	2	(100)	1	(50)	36	53	542
1/2 piece	3	3	(100)	1	(33)	72	289	4,624
1 piece	3	3	(100)	1	(33)	24	407	2,550
1 1/2 pieces	2	2	(100)	1	(50)	14	808	7,549
Total	**12**	**10**	**(83)**	**4**	**(40)**	**24**	**289**	**3,063**

* Quantities were determined by subjective responses from family members; "piece" was not further defined.
† Correlation with amount of cake eaten, r = -0.56, p=0.09, Pearson product-moment.
§ Correlation with amount of cake eaten, r = 0.66, p=0.06, Pearson product-moment.
¶ Not applicable.

By 30 days after ingestion, eight (80%) patients had experienced hair loss, which had begun within 7 days after eating the cake, and five (50%) still had neurologic deficits (e.g., lower limb muscle weakness and spasticity, with differing severity). Quantitative thallium levels were determined from blood and urine specimens of nine patients on the 16th day after eating any portion of the cake. Thallium was detected in all nine patients; median blood thallium level was 289 µg/L (range: 53–1,408 µg/L; reference level expected: <2 µg/L), and median calculated 24-hour urine excretion of thallium was 3,063 µg/L (range: 542–12,556 µg/L; reference level expected: <5 µg/L) (*3*). Blood thallium levels were weakly correlated with the amount of cake reported eaten (r = 0.66, p=0.06, Pearson product-moment). The father of family A, who did not become ill, but had tasted icing from the cake, had elevated blood and urine thallium levels.

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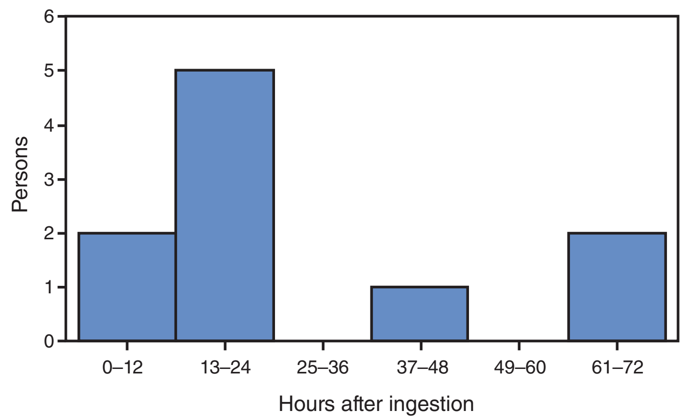
Editorial Note: When ingested, thallium is a systemic poison that can produce multiple organ toxicity involving the gastrointestinal, neurologic, and cardiovascular systems (*2*). Among the distinctive effects of thallium poisoning are hair loss and painful, usually ascending, peripheral neuropathy (e.g., extreme pain, paresthesia, and weakness in distal extremities). In 1973, WHO recommended that thallium sulfate use as a rodenticide be discontinued because of its toxicity (*4*), and use in the United States for this purpose has been banned since 1975 (*5*). Approximately 60%–70% of thallium production is used in the electronics industry, with the remainder being used in manufacturing pharmaceuticals and glass.

Prussian blue, a pigment discovered in the 1700s, acts as a sequestering agent for certain heavy metal ions and as an antidote to thallium poisoning. In 2003, the U.S. Food and Drug Administration approved the use of Prussian blue in 500 mg capsules as safe and effective for treatment of known or suspected internal contamination with thallium (radioactive or nonradioactive) or radioactive cesium.

Deliberate contamination of food during production and preparation is rare (*6,7*), but instances of intentional thallium poisoning have been reported (*1*). This report describes one of the largest known clusters of thallium poisoning (*8–10*). Initial clinical findings in this report (i.e., gastrointestinal [100%] and neurologic symptoms [50%]) are similar to findings reported from previous clusters (gastrointestinal symptoms ranged from 11%–100% in previous clusters and neurologic symptoms ranged from 50%–100%). Although, the attack rate in this report (83%) is similar to those of previous clusters (71%–100%), the case-fatality rate in this report (40%) is higher than in previous clusters (0%–20%). Differences in clinical findings and case-fatality rates might be related to dosing and timing of ingestion, vehicles used (e.g., soft drinks, marzipan candy, and coffee), or formulation of the poisons (one cluster included both arsenic and thallium). The progression of signs and symptoms in this report are similar to those of previous clusters.

FIGURE. Hours to onset of symptoms among 10 persons who ate thallium-contaminated cake — Baghdad, Iraq, 2008



Multiple government agencies and private sector health-care providers assisted and worked with each other, within and between countries, during the response to this incident. Such coordination and cooperation is critical for immediate, effective response to such events, whether they arise from unintentional or intentional circumstances. The sudden appearance of the characteristic signs and symptoms of hair loss and painful peripheral neuropathy in patients should prompt clinical consideration of thallium poisoning. Because of historical precedents, investigation should include assessment for criminal intent.

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Notice to Readers

National Child Passenger Safety Week — September 21–27, 2008

In 2006, in the United States, 462 children aged ≤4 years died and approximately 45,000 were treated in emergency departments because of injuries sustained in motor-vehicle crashes (*1,2*). This year, National Child Passenger Safety Week, September 21–27, 2008, will focus on the importance of the correct installation and use of child safety seats.

The use of child safety seats has been found to reduce the risk for death in a crash by 71% for infants and by 54% for toddlers (i.e., children aged 1–4 years) (*3*). Child safety seat use is mandatory in every state in the United States and in the District of Columbia, although the age at which children can transition to adult safety belts varies by state.

In the first national probability sample of correct child safety seat use, the National Highway Traffic Safety Administration (NHTSA) reported in 2006 that 28% of infants aged <1 year were not placed in rear-facing seats, and 44% of children who weighed 20–40 pounds were not in forward-facing child seats, as recommended by NHTSA (*4*). An estimated 73% of child safety seats are incorrectly installed or misused (*5*). The most common errors are loose harness straps and loose or improper attachment of the child safety seat to the vehicle using the seatbelt or LATCH (i.e., lower anchors and tethers for children) system (*5,6*). Incorrect installation or use reduces child safety seat effectiveness.

Information about National Child Passenger Safety Week activities and child passenger safety is available from NHTSA at http://www.nhtsa.dot.gov and from CDC at http://www.cdc.gov/ncipc/factsheets/childpas.htm.

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Errata: Vol. 57, No. 33

In Vol. 57, No. 33 (August 22, 2008), in "Final 2007 Reports of Nationally Notifiable Infectious Diseases," errors occurred in Table 2, "Reported cases of notifiable diseases, by geographic division and area — United States, 2007." On page 908, under "Lyme disease," the number of cases for the following areas and states should read, **United States, 27,444**; **New England, 7,786**; New Hampshire, **896**; **E.N. Central, 2,102**; Michigan, **51**; Wisconsin, **1,814**; **W.N. Central, 1,398**; Iowa, **123**; Kansas, **8**; Minnesota, **1,238**; Nebraska, **7**; **E.S. Central, 51**; Alabama, **13**; Mississippi, **1**; Tennessee, **31**; **W.S. Central, 91**; Arkansas, **1**; **Mountain, 45**; Arizona, **2**; Idaho, **9**; Montana, **4**; Wyoming, **3**; **Pacific, 103**; Oregon, **6**.

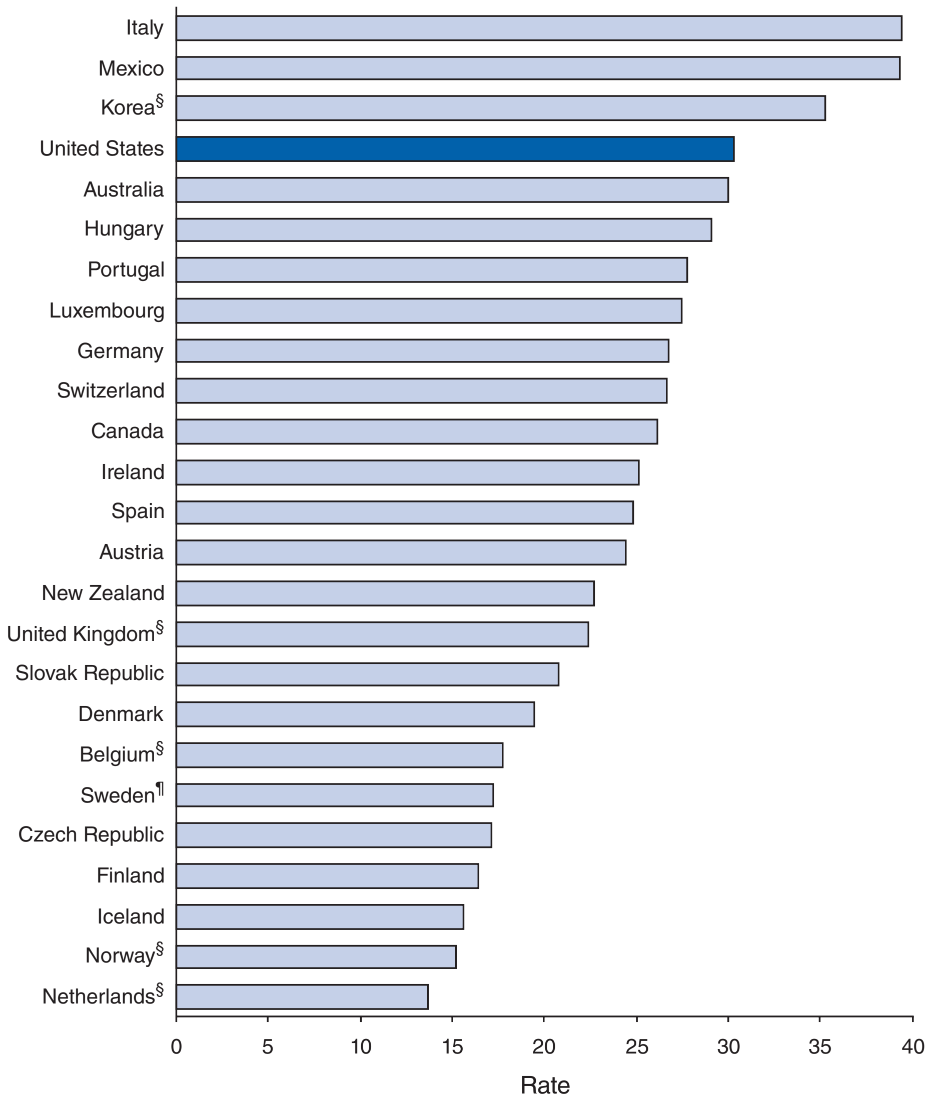
Errata: Vol. 55, No. 53

In Vol. 55, No. 53 (March 21, 2008, for 2006), "Summary of Notifiable Diseases —United States, 2006," an error occurred in Table 8, "Reported cases of notifiable diseases — United States, 1999–2006." On page 76, under "Botulism, total (including wound and unspecified)," the total for 2006 should read **165**.

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Rates* of Cesarean Deliveries — Selected Countries,† 2005



* Per 100 live births.
† Includes rates from 25 of 30 Organisation for Economic Co-operation and Development member countries; recent data on cesarean deliveries were not available from France, Greece, Japan, Poland, and Turkey.
§ Based on 2004 data.
¶ Based on 2003 data.

In 2005, cesarean deliveries accounted for more than 25% of all live births in 12 industrialized countries, including the United States (30%). Nearly 40% of births were by cesarean delivery in Italy and Mexico. The Netherlands had the lowest rate of cesarean deliveries (14%), and four of the six lowest rates were in Nordic countries.

SOURCE: Organisation for Economic Co-operation and Development. OECD health data 2008: statistics and indicators for 30 countries. Paris, France: Organisation for Economic Co-operation and Development; 2008. Available at http://www.oecd.org/health/healthdata.

TABLE 1. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending September 13, 2008 (37th week)*

Disease	Current week	Cum 2008	5-year weekly average[†]	Total cases reported for previous years 2007	2006	2005	2004	2003	States reporting cases during current week (No.)
Anthrax	—	—	0	1	1	—	—	—	
Botulism:									
foodborne	—	7	0	32	20	19	16	20	
infant	—	65	2	85	97	85	87	76	
other (wound & unspecified)	—	12	1	27	48	31	30	33	
Brucellosis	5	57	2	131	121	120	114	104	FL (4), CA (1)
Chancroid	1	30	0	23	33	17	30	54	NY (1)
Cholera	—	1	0	7	9	8	6	2	
Cyclosporiasis[§]	—	104	2	93	137	543	160	75	
Diphtheria	—	—	—	—	—	—	—	1	
Domestic arboviral diseases[§,¶]:									
California serogroup	—	21	5	55	67	80	112	108	
eastern equine	—	2	0	4	8	21	6	14	
Powassan	—	1	0	7	1	1	1	—	
St. Louis	—	8	1	9	10	13	12	41	
western equine	—	—	—	—	—	—	—	—	
Ehrlichiosis/Anaplasmosis[§,**]:									
Ehrlichia chaffeensis	13	513	13	828	578	506	338	321	MO (3), NE (1), MD (3), VA (1), TN (4), TX (1)
Ehrlichia ewingii	—	7	—	—	—	—	—	—	
Anaplasma phagocytophilum	25	214	15	834	646	786	537	362	MN (25)
undetermined	—	50	4	337	231	112	59	44	
Haemophilus influenzae,[††]									
invasive disease (age <5 yrs):									
serotype b	—	18	0	22	29	9	19	32	
nonserotype b	2	119	2	199	175	135	135	117	OH (1), NC (1)
unknown serotype	—	138	3	180	179	217	177	227	
Hansen disease[§]	—	50	2	101	66	87	105	95	
Hantavirus pulmonary syndrome[§]	1	11	0	32	40	26	24	26	ND (1)
Hemolytic uremic syndrome, postdiarrheal[§]	3	123	7	292	288	221	200	178	MN (1), TN (1), CA (1)
Hepatitis C viral, acute	6	571	16	849	766	652	720	1,102	OH (1), MI (2), MD (1), NC (1), FL (1)
HIV infection, pediatric (age <13 years)[§§]	—	—	3	—	—	380	436	504	
Influenza-associated pediatric mortality[§,¶¶]	—	88	0	77	43	45	—	N	
Listeriosis	8	406	22	808	884	896	753	696	NY (1), PA (1), OH (4), FL (1), CA (1)
Measles[***]	—	128	1	43	55	66	37	56	
Meningococcal disease, invasive[†††]:									
A, C, Y, & W-135	1	205	4	325	318	297	—	—	WA (1)
serogroup B	2	117	2	167	193	156	—	—	FL (1), TN (1)
other serogroup	—	25	0	35	32	27	—	—	
unknown serogroup	4	449	9	550	651	765	—	—	FL (2), TX (1), CA (1)
Mumps	2	284	14	800	6,584	314	258	231	PA (1), IN (1)
Novel influenza A virus infections	—	—	—	1	N	N	N	N	
Plague	—	1	0	7	17	8	3	1	
Poliomyelitis, paralytic	—	—	0	—	—	1	—	—	
Polio virus infection, nonparalytic[§]	—	—	—	—	N	N	N	N	
Psittacosis[§]	2	10	0	12	21	16	12	12	FL (1), CA (1)
Qfever[§,§§§] total:	—	78	2	171	169	136	70	71	
acute	—	71	—	—	—	—	—	—	
chronic	—	7	—	—	—	—	—	—	
Rabies, human	—	—	0	1	3	2	7	2	
Rubella[¶¶¶]	—	11	0	12	11	11	10	7	
Rubella, congenital syndrome	—	—	—	—	1	1	—	1	
SARS-CoV[§,****]	—	—	—	—	—	—	—	8	
Smallpox[§]	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome[§]	—	102	1	132	125	129	132	161	
Syphilis, congenital (age <1 yr)	—	141	8	430	349	329	353	413	
Tetanus	—	7	1	28	41	27	34	20	
Toxic-shock syndrome (staphylococcal)[§]	—	45	2	92	101	90	95	133	
Trichinellosis	1	6	0	5	15	16	5	6	FL (1)
Tularemia	2	74	3	137	95	154	134	129	ID (2)
Typhoid fever	2	262	12	434	353	324	322	356	VA (1), CA (1)
Vancomycin-intermediate *Staphylococcus aureus*[§]	—	6	0	37	6	2	—	N	
Vancomycin-resistant *Staphylococcus aureus*[§]	—	—	—	2	1	3	1	N	
Vibriosis (noncholera *Vibrio* species infections)[§]	14	274	7	447	N	N	N	N	MD (1), NC (1), FL (3), TN (1), WA (1), CA (7)
Yellow fever	—	—	—	—	—	—	—	—	

See Table 1 footnotes on next page.

TABLE 1. (*Continued*) Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending September 13, 2008 (37th week)*

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

* Incidence data for reporting years 2007 and 2008 are provisional, whereas data for 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 and 2008 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.

** The names of the reporting categories changed in 2008 as a result of revisions to the case definitions. Cases reported prior to 2008 were reported in the categories: Ehrlichiosis, human monocytic (analogous to *E. chaffeensis*); Ehrlichiosis, human granulocytic (analogous to *Anaplasma phagocytophilum*), and Ehrlichiosis, unspecified, or other agent (which included cases unable to be clearly placed in other categories, as well as possible cases of *E. ewingii*).

†† 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. Eighty-six cases occurring during the 2007–08 influenza season have been reported.

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

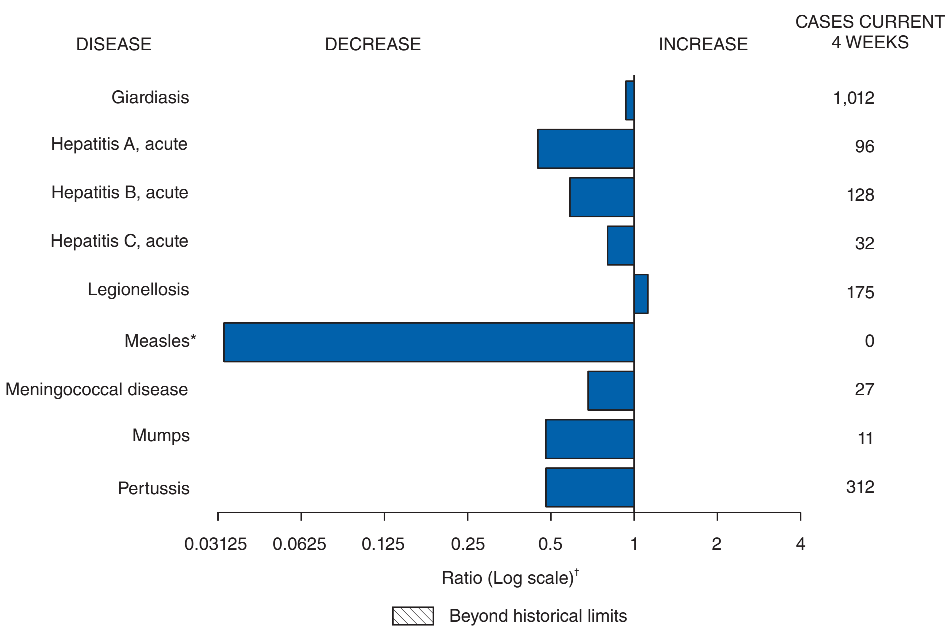
††† Data for meningococcal disease (all serogroups) are available in Table II.

§§§ In 2008, Q fever acute and chronic reporting categories were recognized as a result of revisions to the Q fever case definition. Prior to that time, case counts were not differentiated with respect to acute and chronic Q fever cases.

¶¶¶ 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.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals September 13, 2008, with historical data



* No measles cases were reported for the current 4-week period yielding a ratio for week 37 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.

Notifiable Disease Data Team and 122 Cities Mortality Data Team

Patsy A. Hall

Deborah A. Adams	Rosaline Dhara
Willie J. Anderson	Michael S. Wodajo
Lenee Blanton	Pearl C. Sharp

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Chlamydia†					Coccidiodomycosis					Cryptosporidiosis				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	12,300	21,242	28,892	757,740	772,957	116	125	341	4,585	5,300	182	103	933	4,092	7,264
New England	614	676	1,516	25,560	24,763	—	0	1	1	2	2	5	29	246	232
Connecticut	140	212	1,093	7,556	7,380	N	0	0	N	N	—	0	27	27	42
Maine§	—	49	73	1,591	1,806	N	0	0	N	N	2	1	5	31	35
Massachusetts	355	331	660	12,641	11,172	N	0	0	N	N	—	2	11	91	81
New Hampshire	38	38	73	1,405	1,476	—	0	1	1	2	—	1	4	45	39
Rhode Island§	71	54	98	1,915	2,205	—	0	0	—	—	—	0	3	5	6
Vermont§	10	15	44	452	724	N	0	0	N	N	—	1	6	47	29
Mid. Atlantic	2,437	2,806	5,026	104,568	100,118	—	0	0	—	—	14	13	88	486	999
New Jersey	191	410	519	14,406	15,185	N	0	0	N	N	—	0	6	10	46
New York (Upstate)	808	564	2,177	19,462	18,538	N	0	0	N	N	12	5	20	186	149
New York City	988	1,008	3,094	40,873	35,902	N	0	0	N	N	—	2	8	66	71
Pennsylvania	450	810	1,047	29,827	30,493	N	0	0	N	N	2	6	61	224	733
E.N. Central	1,176	3,538	4,373	121,391	126,387	—	1	3	34	25	64	23	134	1,168	1,229
Illinois	—	1,058	1,711	33,093	36,761	N	0	0	N	N	—	2	13	57	138
Indiana	319	377	656	14,238	14,912	N	0	0	N	N	4	3	41	132	57
Michigan	629	790	1,226	31,521	26,589	—	0	3	25	18	1	5	10	166	137
Ohio	51	881	1,261	30,622	34,274	—	0	1	9	7	59	6	58	449	347
Wisconsin	177	358	614	11,917	13,851	N	0	0	N	N	—	9	59	364	550
W.N. Central	585	1,240	1,701	45,111	44,487	—	0	77	1	6	15	17	111	627	1,019
Iowa	174	160	240	6,116	6,148	N	0	0	N	N	—	4	42	184	438
Kansas	233	166	529	6,575	5,679	N	0	0	N	N	—	1	15	44	87
Minnesota	—	262	373	9,000	9,535	—	0	77	—	—	9	5	34	146	115
Missouri	108	473	567	16,867	16,425	—	0	1	1	6	2	3	13	110	110
Nebraska§	—	93	253	3,292	3,714	N	0	0	N	N	3	2	13	79	116
North Dakota	—	34	65	1,221	1,180	N	0	0	N	N	1	0	51	4	16
South Dakota	70	54	86	2,040	1,806	N	0	0	N	N	—	1	9	60	137
S. Atlantic	2,761	3,849	7,609	130,908	153,252	1	0	1	3	3	40	18	65	589	777
Delaware	35	66	150	2,559	2,444	—	0	1	1	—	—	0	2	10	13
District of Columbia	87	131	217	5,012	4,221	—	0	1	—	1	—	0	2	5	3
Florida	1,167	1,317	1,552	48,787	39,904	N	0	0	N	N	35	8	35	305	383
Georgia	3	520	1,338	10,283	30,179	N	0	0	N	N	1	4	14	135	173
Maryland§	391	459	667	16,093	15,433	1	0	1	2	2	—	0	4	16	24
North Carolina	—	126	4,783	5,901	21,524	N	0	0	N	N	2	0	18	27	59
South Carolina§	363	449	3,051	18,263	19,542	N	0	0	N	N	2	1	15	32	58
Virginia§	714	534	1,062	21,888	17,742	N	0	0	N	N	—	1	5	46	54
West Virginia	1	59	96	2,122	2,263	N	0	0	N	N	—	0	3	13	10
E.S. Central	1,412	1,557	2,394	57,476	58,824	—	0	0	—	—	7	3	64	110	373
Alabama§	—	473	589	15,647	18,045	N	0	0	N	N	1	2	14	48	66
Kentucky	288	232	370	8,386	5,740	N	0	0	N	N	—	1	40	22	170
Mississippi	362	369	1,048	13,923	15,664	N	0	0	N	N	1	0	11	12	68
Tennessee§	762	531	789	19,520	19,375	N	0	0	N	N	5	1	18	28	69
W.S. Central	752	2,712	4,426	100,335	87,283	—	0	1	2	2	14	6	37	195	247
Arkansas§	253	270	455	10,126	6,564	N	0	0	N	N	—	1	8	33	28
Louisiana	271	382	774	14,491	14,114	—	0	1	2	2	—	1	6	36	46
Oklahoma	126	208	392	7,324	9,531	N	0	0	N	N	14	1	12	77	74
Texas§	102	1,873	3,923	68,394	57,074	N	0	0	N	N	—	2	28	49	99
Mountain	547	1,340	1,811	42,571	52,091	53	89	170	3,091	3,348	9	10	443	384	2,051
Arizona	122	462	650	15,009	17,589	53	86	168	3,024	3,245	2	1	9	63	36
Colorado	33	214	488	6,119	12,407	N	0	0	N	N	5	2	25	78	132
Idaho§	68	60	314	2,648	2,500	N	0	0	N	N	1	1	71	42	190
Montana§	36	53	363	2,100	1,895	N	0	0	N	N	—	1	6	35	48
Nevada§	135	183	416	6,668	6,821	—	1	7	41	45	—	0	6	11	18
New Mexico§	—	145	561	4,804	6,244	—	0	3	20	19	1	2	22	123	89
Utah	153	119	209	4,232	3,776	—	0	7	4	36	—	1	335	22	1,496
Wyoming§	—	25	58	991	859	—	0	1	2	3	—	0	4	10	42
Pacific	2,016	3,694	4,676	129,820	125,752	62	32	217	1,453	1,914	17	9	37	287	337
Alaska	72	93	129	3,167	3,463	N	0	0	N	N	—	0	1	3	3
California	1,485	2,862	4,115	101,233	98,022	62	32	217	1,453	1,914	14	5	19	173	180
Hawaii	—	109	151	3,707	4,017	N	0	0	N	N	—	0	1	1	6
Oregon§	254	184	402	7,062	6,793	N	0	0	N	N	—	1	11	44	93
Washington	205	386	634	14,651	13,457	N	0	0	N	N	3	2	16	66	55
American Samoa	—	0	22	73	73	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	7	25	107	611	—	0	0	—	—	—	0	0	—	—
Puerto Rico	104	121	612	5,015	5,271	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	20	42	678	131	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly.
† Chlamydia refers to genital infections caused by *Chlamydia trachomatis*.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Giardiasis					Gonorrhea					*Haemophilus influenzae,* invasive All ages, all serotypes†				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	384	301	1,158	11,210	12,040	3,516	6,046	8,913	210,950	249,291	20	48	173	1,820	1,787
New England	6	26	58	939	999	97	103	227	3,683	3,896	1	3	12	118	131
Connecticut	1	6	18	222	251	39	50	199	1,727	1,494	1	0	9	30	31
Maine§	4	3	11	116	130	—	2	6	60	92	—	0	3	9	9
Massachusetts	—	11	22	343	435	43	44	127	1,561	1,859	—	2	5	57	67
New Hampshire	—	2	6	93	24	3	2	6	76	111	—	0	1	9	15
Rhode Island§	—	1	15	57	36	12	6	13	236	293	—	0	1	5	7
Vermont§	1	3	10	108	123	—	1	5	23	47	—	0	3	8	2
Mid. Atlantic	61	56	131	1,960	2,085	660	630	1,028	23,461	25,822	2	10	31	359	346
New Jersey	—	5	15	131	279	97	112	168	3,820	4,289	—	1	7	55	52
New York (Upstate)	40	23	111	763	733	206	126	545	4,373	4,516	1	3	22	105	97
New York City	2	16	29	541	588	209	175	518	7,313	7,719	—	1	6	62	76
Pennsylvania	19	15	29	525	485	148	230	394	7,955	9,298	1	4	9	137	121
E.N. Central	28	48	109	1,730	1,958	515	1,259	1,644	43,366	51,544	5	8	28	271	280
Illinois	—	11	32	355	623	—	370	589	11,575	13,762	—	2	7	75	90
Indiana	N	0	0	N	N	151	151	296	5,759	6,349	—	1	20	56	43
Michigan	4	11	21	373	428	298	301	657	11,788	10,955	—	0	3	14	22
Ohio	24	16	31	608	545	15	315	531	11,017	15,698	5	2	6	104	79
Wisconsin	—	10	54	394	362	51	109	214	3,227	4,780	—	1	4	22	46
W.N. Central	116	28	621	1,358	843	116	326	426	11,454	14,082	1	3	24	135	103
Iowa	—	6	24	196	189	24	29	53	1,035	1,411	—	0	1	2	1
Kansas	3	3	11	93	115	53	41	130	1,609	1,643	—	0	3	10	11
Minnesota	105	0	575	508	6	1	61	92	2,038	2,439	—	0	21	41	40
Missouri	5	9	22	324	350	32	157	210	5,552	7,269	1	1	6	53	34
Nebraska§	3	4	10	141	99	—	26	47	915	1,056	—	0	3	21	14
North Dakota	—	0	36	14	12	—	2	7	73	79	—	0	2	8	3
South Dakota	—	1	10	82	72	6	6	15	232	185	—	0	0	—	—
S. Atlantic	61	54	102	1,724	2,044	883	1,277	3,072	44,420	57,976	9	11	29	441	451
Delaware	1	1	6	28	27	11	21	44	781	951	—	0	2	6	6
District of Columbia	—	1	5	34	52	36	48	104	1,866	1,697	—	0	1	7	3
Florida	52	22	47	847	882	381	470	549	16,436	16,402	4	3	10	136	118
Georgia	—	12	25	399	439	2	192	561	3,854	12,300	1	2	10	109	89
Maryland§	5	1	18	67	180	99	119	188	4,288	4,653	1	1	3	27	67
North Carolina	N	0	0	N	N	—	87	1,949	2,638	9,636	3	1	9	57	44
South Carolina§	3	3	7	80	73	179	186	833	6,708	7,402	—	1	7	39	39
Virginia§	—	9	39	240	361	172	155	486	7,331	4,249	—	1	6	43	66
West Virginia	—	0	5	29	30	3	15	34	518	686	—	0	3	17	19
E.S. Central	5	9	23	306	375	487	559	945	20,763	22,989	2	2	8	96	101
Alabama§	4	5	12	176	176	—	188	287	6,189	7,805	—	0	2	15	23
Kentucky	N	0	0	N	N	109	89	161	3,281	2,264	—	0	1	2	6
Mississippi	N	0	0	N	N	124	131	401	5,080	5,901	—	0	2	11	7
Tennessee§	1	4	14	130	199	254	165	297	6,213	7,019	2	2	6	68	65
W.S. Central	10	8	41	273	288	300	1,004	1,355	34,506	36,275	—	2	29	85	75
Arkansas§	1	3	11	96	107	100	86	167	3,318	2,913	—	0	3	8	8
Louisiana	—	2	9	79	91	118	178	317	6,293	8,198	—	0	2	7	4
Oklahoma	9	3	35	98	90	44	83	134	2,789	3,680	—	1	21	64	56
Texas§	N	0	0	N	N	38	643	1,102	22,106	21,484	—	0	3	6	7
Mountain	36	29	68	973	1,128	100	221	337	7,403	9,849	—	5	14	218	192
Arizona	2	3	11	90	134	22	70	115	2,162	3,641	—	2	11	94	71
Colorado	27	11	26	368	366	34	58	88	2,113	2,449	—	1	4	41	46
Idaho§	6	3	19	134	127	2	4	18	114	185	—	0	4	12	4
Montana§	1	2	9	61	67	3	1	48	72	51	—	0	1	2	2
Nevada§	—	2	6	71	98	28	43	130	1,585	1,674	—	0	1	12	9
New Mexico§	—	2	6	63	84	—	26	104	896	1,231	—	1	4	26	31
Utah	—	6	32	169	221	11	12	36	377	564	—	1	6	29	25
Wyoming§	—	0	3	17	31	—	2	9	84	54	—	0	1	2	4
Pacific	61	55	185	1,947	2,320	358	644	809	21,894	26,858	—	2	7	97	108
Alaska	—	2	5	59	50	9	10	24	352	389	—	0	4	13	9
California	46	35	91	1,280	1,591	289	528	683	18,007	22,533	—	0	3	25	42
Hawaii	—	1	5	30	58	—	12	22	406	469	—	0	2	14	8
Oregon§	3	9	19	313	304	22	23	63	879	806	—	1	4	42	47
Washington	12	8	87	265	317	38	62	97	2,250	2,661	—	0	3	3	2
American Samoa	—	0	0	—	—	—	0	1	3	3	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	2	—	1	12	45	102	—	0	1	—	—
Puerto Rico	8	2	31	88	274	7	5	25	204	233	—	0	0	—	2
U.S. Virgin Islands	—	0	0	—	—	—	4	12	128	34	N	0	0	N	N

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U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 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 September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Hepatitis (viral, acute), by type† A: Current week	A: Previous 52 weeks Med	A: Previous 52 weeks Max	A: Cum 2008	A: Cum 2007	B: Current week	B: Previous 52 weeks Med	B: Previous 52 weeks Max	B: Cum 2008	B: Cum 2007	Legionellosis: Current week	Legionellosis: Previous 52 weeks Med	Legionellosis: Previous 52 weeks Max	Legionellosis: Cum 2008	Legionellosis: Cum 2007
United States	18	48	171	1,739	2,067	39	72	259	2,353	3,032	49	54	128	1,809	1,747
New England	—	2	7	83	92	—	1	7	44	86	—	3	13	87	102
Connecticut	—	0	3	18	13	—	0	7	15	29	—	0	5	27	28
Maine§	—	0	2	6	2	—	0	2	10	7	—	0	2	5	3
Massachusetts	—	1	5	38	48	—	0	3	9	33	—	0	3	13	28
New Hampshire	—	0	2	9	10	—	0	1	4	4	—	0	4	21	6
Rhode Island§	—	0	2	10	11	—	0	2	4	12	—	0	5	16	30
Vermont§	—	0	1	2	8	—	0	1	2	1	—	0	1	5	7
Mid. Atlantic	1	6	16	197	332	3	10	18	316	382	18	15	52	603	557
New Jersey	—	1	6	40	94	—	3	7	97	110	—	1	8	52	77
New York (Upstate)	—	1	6	44	52	1	1	7	47	57	12	5	19	214	140
New York City	—	2	7	67	121	—	2	6	64	85	—	2	10	57	123
Pennsylvania	1	1	6	46	65	2	3	7	108	130	6	6	32	280	217
E.N. Central	—	6	16	214	253	1	7	18	248	333	6	11	36	401	416
Illinois	—	1	10	64	94	—	1	6	57	106	—	1	5	23	91
Indiana	—	0	4	15	16	—	0	8	24	37	—	1	7	35	37
Michigan	—	2	7	85	64	—	2	5	83	82	—	3	16	111	117
Ohio	—	1	4	29	52	1	2	7	78	91	6	5	18	203	144
Wisconsin	—	0	3	21	27	—	0	1	6	17	—	0	7	29	27
W.N. Central	—	5	29	204	125	—	2	9	70	88	2	2	8	79	77
Iowa	—	1	7	90	36	—	0	2	10	19	—	0	2	8	9
Kansas	—	0	3	12	6	—	0	3	6	8	—	0	1	1	8
Minnesota	—	0	23	26	49	—	0	5	7	15	—	0	4	9	15
Missouri	—	0	3	35	17	—	1	4	41	30	1	1	5	42	33
Nebraska§	—	1	5	39	12	—	0	1	5	10	1	0	4	17	8
North Dakota	—	0	2	—	—	—	0	1	1	—	—	0	2	—	—
South Dakota	—	0	1	2	5	—	0	1	—	6	—	0	1	2	4
S. Atlantic	4	8	15	248	347	12	15	60	549	737	14	8	28	281	278
Delaware	—	0	1	6	5	—	0	3	7	14	—	0	2	8	7
District of Columbia	U	0	0	U	U	U	0	0	U	U	—	0	1	10	10
Florida	3	3	8	109	105	10	6	12	234	245	4	3	10	103	100
Georgia	1	1	4	33	54	1	3	8	92	115	—	0	3	18	25
Maryland§	—	0	3	11	59	1	0	6	15	82	3	1	10	61	51
North Carolina	—	0	9	48	37	—	0	17	52	95	7	0	7	23	31
South Carolina§	—	0	2	8	14	—	1	6	43	47	—	0	2	9	13
Virginia§	—	1	5	29	66	—	2	16	75	102	—	1	6	35	34
West Virginia	—	0	2	4	7	—	0	30	31	37	—	0	3	14	7
E.S. Central	3	1	9	59	79	2	7	13	247	268	2	2	10	87	68
Alabama§	—	0	4	8	16	—	2	5	69	92	—	0	2	12	8
Kentucky	1	0	3	21	15	—	2	5	62	51	1	1	4	42	35
Mississippi	—	0	2	4	7	1	0	3	29	26	—	0	1	1	—
Tennessee§	2	1	6	26	41	1	3	8	87	99	1	1	5	32	25
W.S. Central	1	5	55	177	169	5	15	131	470	625	1	1	23	55	91
Arkansas§	—	0	1	5	10	—	1	4	31	58	—	0	2	10	9
Louisiana	—	0	2	10	24	—	1	4	55	75	—	0	1	6	4
Oklahoma	—	0	7	7	10	2	3	37	79	37	—	0	3	3	5
Texas§	1	5	53	155	125	3	9	107	305	455	1	1	18	36	73
Mountain	2	4	10	143	181	1	3	11	140	154	1	2	5	52	75
Arizona	1	2	9	72	124	—	1	4	46	66	—	0	5	14	24
Colorado	1	0	3	28	21	1	0	3	21	24	1	0	1	5	18
Idaho§	—	0	3	17	3	—	0	2	6	10	—	0	1	3	5
Montana§	—	0	1	1	9	—	0	1	—	—	—	0	1	3	3
Nevada§	—	0	2	5	9	—	1	3	30	35	—	0	1	8	8
New Mexico§	—	0	3	15	8	—	0	2	9	10	—	0	1	4	8
Utah	—	0	2	2	5	—	0	5	25	5	—	0	3	15	6
Wyoming§	—	0	1	3	2	—	0	1	3	4	—	0	0	—	3
Pacific	7	11	51	414	489	15	8	30	269	359	5	4	18	164	83
Alaska	—	0	1	2	3	—	0	2	9	4	—	0	1	1	—
California	7	9	42	340	427	12	5	19	185	267	5	3	14	130	62
Hawaii	—	0	2	12	5	—	0	2	4	10	—	0	1	4	1
Oregon§	—	0	3	22	20	2	1	3	35	43	—	0	2	13	6
Washington	—	1	7	38	34	1	1	9	36	35	—	0	3	16	14
American Samoa	—	0	0	—	—	—	0	0	—	14	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	1	—	2	—	0	0	—	—
Puerto Rico	—	0	4	15	53	1	1	5	32	55	—	0	1	1	4
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 are provisional.
† Data for acute hepatitis C, viral are available in Table I.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Lyme Disease					Malaria					Meningococcal disease, invasive† All serotypes				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	452	370	1,375	16,238	20,511	15	21	136	655	885	7	19	53	796	793
New England	—	56	224	2,432	6,538	—	1	35	32	42	—	0	3	20	35
Connecticut	—	0	45	—	2,694	—	0	27	11	1	—	0	1	1	6
Maine§	—	2	67	299	262	—	0	1	—	6	—	0	1	4	5
Massachusetts	—	16	114	1,039	2,646	—	0	2	14	24	—	0	3	15	17
New Hampshire	—	9	106	882	776	—	0	1	3	8	—	0	0	—	3
Rhode Island§	—	0	77	—	54	—	0	8	—	—	—	0	1	—	1
Vermont§	—	2	35	212	106	—	0	1	4	3	—	0	1	—	3
Mid. Atlantic	309	170	945	10,444	8,331	4	5	18	157	267	—	2	6	93	97
New Jersey	2	37	167	1,936	2,525	—	0	4	—	57	—	0	2	10	13
New York (Upstate)	258	56	453	3,517	2,277	3	1	8	25	43	—	0	3	25	27
New York City	—	1	13	20	324	1	3	9	105	136	—	0	2	20	19
Pennsylvania	49	56	484	4,971	3,205	—	1	4	27	31	—	1	5	38	38
E.N. Central	1	10	43	455	1,860	—	2	7	87	100	—	3	10	132	122
Illinois	—	0	6	34	137	—	1	6	36	47	—	1	4	38	50
Indiana	1	0	8	28	42	—	0	2	5	8	—	0	4	22	18
Michigan	—	0	12	65	46	—	0	2	12	12	—	0	3	23	20
Ohio	—	0	4	25	25	—	0	3	22	19	—	1	4	32	27
Wisconsin	—	7	32	303	1,610	—	0	3	12	14	—	0	4	17	7
W.N. Central	102	3	740	666	309	1	1	9	41	27	—	2	8	72	46
Iowa	—	1	4	34	106	—	0	1	2	3	—	0	3	14	10
Kansas	—	0	1	1	8	—	0	1	3	2	—	0	1	3	3
Minnesota	101	1	731	599	178	1	0	8	20	11	—	0	7	19	13
Missouri	—	0	3	19	9	—	0	4	8	5	—	0	3	23	13
Nebraska§	1	0	2	9	5	—	0	2	8	5	—	0	2	10	2
North Dakota	—	0	9	1	3	—	0	2	—	—	—	0	1	1	2
South Dakota	—	0	1	3	—	—	0	0	—	1	—	0	1	2	3
S. Atlantic	33	54	172	1,939	3,290	2	4	13	150	191	3	3	9	115	131
Delaware	3	12	37	585	563	—	0	1	1	4	—	0	1	1	1
District of Columbia	2	2	11	118	98	—	0	1	1	2	—	0	0	—	—
Florida	4	1	8	59	17	1	1	4	38	45	3	1	3	44	50
Georgia	—	0	3	17	8	—	1	3	36	34	—	0	3	14	19
Maryland§	22	17	136	591	1,875	1	0	4	13	46	—	0	3	7	19
North Carolina	1	0	8	20	31	—	0	7	22	17	—	0	4	11	14
South Carolina§	—	0	4	16	20	—	0	2	9	5	—	0	3	19	12
Virginia§	1	12	68	499	621	—	1	7	30	37	—	0	2	16	14
West Virginia	—	0	9	34	57	—	0	0	—	1	—	0	1	3	2
E.S. Central	—	0	5	33	41	—	0	3	13	27	1	1	6	39	40
Alabama§	—	0	3	9	10	—	0	1	3	4	—	0	2	5	7
Kentucky	—	0	1	2	4	—	0	1	4	7	—	0	2	7	9
Mississippi	—	0	1	1	—	—	0	1	1	2	—	0	2	9	10
Tennessee§	—	0	3	21	27	—	0	2	5	14	1	0	3	18	14
W.S. Central	1	2	11	65	52	2	1	64	48	69	1	2	13	87	81
Arkansas§	—	0	1	2	—	—	0	1	—	—	—	0	2	7	9
Louisiana	—	0	1	1	2	—	0	1	2	14	—	0	3	19	23
Oklahoma	—	0	1	—	—	—	0	4	2	5	—	0	5	12	14
Texas§	1	2	10	62	50	2	1	60	44	50	1	1	7	49	35
Mountain	—	0	4	32	34	1	1	5	20	46	—	1	4	41	52
Arizona	—	0	1	3	2	—	0	1	8	10	—	0	2	6	11
Colorado	—	0	1	4	—	—	0	2	3	17	—	0	1	9	19
Idaho§	—	0	2	7	7	1	0	1	1	2	—	0	2	3	4
Montana§	—	0	2	4	2	—	0	0	—	3	—	0	1	4	1
Nevada§	—	0	2	8	10	—	0	3	4	2	—	0	2	6	4
New Mexico§	—	0	2	4	5	—	0	1	2	3	—	0	1	7	2
Utah	—	0	1	—	5	—	0	1	2	9	—	0	2	4	9
Wyoming§	—	0	1	2	3	—	0	0	—	—	—	0	1	2	2
Pacific	6	4	9	172	56	5	3	10	107	116	2	4	17	197	189
Alaska	—	0	2	5	5	—	0	2	4	2	—	0	2	3	1
California	6	3	8	126	46	3	2	8	77	80	1	3	17	141	139
Hawaii	N	0	0	N	N	—	0	1	2	2	—	0	2	4	7
Oregon§	—	0	5	34	4	—	0	2	4	12	—	1	3	26	25
Washington	—	0	7	7	1	2	0	3	20	20	1	0	5	23	17
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	1	1	1	—	0	0	—	—
Puerto Rico	N	0	0	N	N	—	0	1	1	3	—	0	1	2	6
U.S. Virgin Islands	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 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 September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Pertussis					Rabies, animal					Rocky Mountain spotted fever				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	79	154	849	5,329	6,916	62	86	153	3,026	4,479	22	29	195	1,456	1,473
New England	—	18	49	496	1,080	9	7	20	265	398	—	0	1	2	7
Connecticut	—	0	4	—	69	8	3	17	146	170	—	0	0	—	—
Maine†	—	1	5	24	62	—	1	5	36	62	N	0	0	N	N
Massachusetts	—	14	33	420	852	N	0	0	N	N	—	0	1	1	7
New Hampshire	—	0	4	24	61	1	1	3	30	38	—	0	1	1	—
Rhode Island†	—	0	25	19	9	N	0	0	N	N	—	0	0	—	—
Vermont†	—	0	6	9	27	—	2	6	53	128	—	0	0	—	—
Mid. Atlantic	24	21	43	637	895	9	20	32	771	751	—	1	5	51	62
New Jersey	—	0	9	4	160	—	0	0	—	—	—	0	2	2	23
New York (Upstate)	15	6	24	299	427	9	9	20	367	378	—	0	3	15	6
New York City	—	2	7	46	92	—	0	2	13	34	—	0	2	16	22
Pennsylvania	9	9	23	288	216	—	9	23	391	339	—	0	2	18	11
E.N. Central	11	20	190	891	1,210	4	5	27	188	345	—	1	9	84	48
Illinois	—	3	9	114	129	—	1	21	81	98	—	0	7	50	30
Indiana	2	0	12	42	47	1	0	2	7	9	—	0	2	7	5
Michigan	—	4	16	149	217	—	1	9	58	181	—	0	1	3	3
Ohio	9	6	176	526	533	3	1	5	42	57	—	0	4	24	9
Wisconsin	—	2	9	60	284	N	0	0	N	N	—	0	0	—	1
W.N. Central	14	12	142	466	476	12	4	12	132	207	2	4	33	344	309
Iowa	—	1	5	37	123	—	0	3	15	23	—	0	2	3	15
Kansas	—	1	5	27	81	—	0	7	—	94	—	0	1	—	11
Minnesota	—	1	131	155	110	10	0	7	45	22	—	0	4	—	1
Missouri	6	3	18	163	66	2	0	9	43	33	1	3	33	322	265
Nebraska†	8	1	12	68	35	—	0	0	—	—	1	0	4	16	12
North Dakota	—	0	5	1	7	—	0	8	17	18	—	0	0	—	—
South Dakota	—	0	3	15	54	—	0	2	12	17	—	0	1	3	5
S. Atlantic	10	14	50	535	693	21	34	94	1,322	1,625	20	9	109	525	659
Delaware	—	0	3	11	10	—	0	0	—	—	—	0	3	22	14
District of Columbia	—	0	1	4	8	—	0	0	—	—	—	0	2	7	3
Florida	5	3	20	195	173	—	0	77	94	128	2	0	3	12	8
Georgia	—	1	4	44	30	10	6	42	280	209	—	1	8	43	55
Maryland†	5	1	6	37	84	—	0	13	88	313	—	1	4	36	49
North Carolina	—	0	38	79	227	11	9	16	347	360	18	0	96	264	390
South Carolina†	—	2	22	78	59	—	0	0	—	46	—	0	5	29	53
Virginia†	—	2	8	83	89	—	12	27	446	523	—	1	14	109	82
West Virginia	—	0	12	4	13	—	1	11	67	46	—	0	1	3	5
E.S. Central	4	6	13	201	362	2	2	7	85	123	—	4	22	206	219
Alabama†	—	1	6	29	73	—	0	0	—	—	—	1	8	58	67
Kentucky	—	1	8	55	22	2	0	4	35	17	—	0	1	1	5
Mississippi	—	2	9	64	199	—	0	1	2	2	—	0	3	5	16
Tennessee†	4	1	5	53	68	—	1	6	48	104	—	2	18	142	131
W.S. Central	—	20	198	817	786	—	3	40	77	785	—	2	153	217	136
Arkansas†	—	1	11	47	142	—	1	6	43	24	—	0	14	44	59
Louisiana	—	0	5	45	16	—	0	0	—	6	—	0	1	3	4
Oklahoma	—	0	26	32	5	—	0	32	32	45	—	0	132	142	45
Texas†	—	17	179	693	623	—	0	34	2	710	—	1	8	28	28
Mountain	6	18	37	576	785	—	1	4	51	66	—	0	3	23	30
Arizona	—	3	10	136	171	N	0	0	N	N	—	0	2	8	6
Colorado	4	4	13	112	225	—	0	0	—	—	—	0	2	1	3
Idaho†	2	0	4	22	37	—	0	1	—	8	—	0	1	1	4
Montana†	—	1	11	72	35	—	0	2	7	14	—	0	1	3	1
Nevada†	—	0	7	23	33	—	0	2	6	9	—	0	1	1	—
New Mexico†	—	1	5	30	58	—	0	3	23	9	—	0	1	2	4
Utah	—	6	27	171	206	—	0	2	3	10	—	0	0	—	—
Wyoming†	—	0	2	10	20	—	0	2	12	16	—	0	2	7	12
Pacific	10	22	303	710	629	5	4	12	135	179	—	0	1	4	3
Alaska	3	1	29	106	42	—	0	4	12	37	N	0	0	N	N
California	—	7	129	257	339	5	3	12	117	134	—	0	1	1	1
Hawaii	—	0	2	8	18	—	0	0	—	—	N	0	0	N	N
Oregon†	—	3	14	120	86	—	0	1	6	8	—	0	1	3	2
Washington	7	5	169	219	144	—	0	0	—	—	N	0	0	N	N
American Samoa	—	0	0	—	—	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	N	0	0	N	N
Puerto Rico	—	0	0	—	—	1	1	5	48	39	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	N	0	0	N	N	N	0	0	N	N

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* Incidence data for reporting years 2007 and 2008 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 September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Salmonellosis					Shiga toxin-producing *E. coli* (STEC)†					Shigellosis				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	799	809	2,110	29,067	31,189	80	81	248	3,286	3,297	291	416	1,227	13,178	11,715
New England	1	23	388	1,434	1,839	1	3	32	163	242	—	3	27	137	206
Connecticut	—	0	358	358	431	—	0	29	29	71	—	0	26	26	44
Maine§	1	2	14	106	89	1	0	4	13	29	—	0	6	18	14
Massachusetts	—	16	52	741	1,063	—	2	11	80	104	—	2	5	78	133
New Hampshire	—	3	8	97	131	—	0	5	21	24	—	0	1	3	5
Rhode Island§	—	1	13	66	64	—	0	3	7	6	—	0	9	9	7
Vermont§	—	1	7	66	61	—	0	3	13	8	—	0	1	3	3
Mid. Atlantic	71	92	212	3,468	4,330	7	7	192	499	369	13	32	90	1,602	547
New Jersey	—	15	37	450	954	—	1	5	21	87	—	7	36	505	123
New York (Upstate)	47	25	73	946	1,014	7	3	188	351	138	11	7	35	458	100
New York City	2	23	48	867	962	—	0	5	37	39	—	9	35	513	185
Pennsylvania	22	30	83	1,205	1,400	—	2	9	90	105	2	2	65	126	139
E.N. Central	41	89	166	3,135	4,445	13	11	39	490	487	59	74	147	2,677	1,907
Illinois	—	21	63	699	1,560	—	1	11	53	96	—	20	37	549	418
Indiana	11	9	53	421	489	1	1	13	47	54	6	11	83	507	78
Michigan	7	17	37	634	694	1	2	16	106	73	—	2	7	74	54
Ohio	23	25	65	931	969	11	2	17	136	112	53	21	76	1,051	869
Wisconsin	—	14	35	450	733	—	4	17	148	152	—	14	51	496	488
W.N. Central	42	48	115	1,833	1,969	10	12	54	555	537	6	19	39	633	1,446
Iowa	—	8	14	282	352	—	2	16	131	131	—	3	11	102	69
Kansas	4	7	18	227	291	1	0	4	28	39	1	0	4	25	20
Minnesota	8	13	70	522	475	1	3	21	127	157	2	4	25	225	174
Missouri	24	14	29	500	522	2	3	12	112	101	2	6	29	166	1,047
Nebraska§	6	5	13	172	175	6	2	28	120	65	—	0	2	4	20
North Dakota	—	0	35	28	23	—	0	20	2	7	1	0	15	35	3
South Dakota	—	2	11	102	131	—	1	5	35	37	—	1	9	76	113
S. Atlantic	303	263	442	7,429	7,716	17	13	49	559	479	42	68	149	2,188	3,264
Delaware	3	2	9	109	115	—	0	1	10	12	—	0	2	7	7
District of Columbia	2	1	4	42	42	—	0	1	8	—	—	0	3	13	15
Florida	161	102	181	3,266	2,932	3	2	18	123	98	8	19	75	629	1,755
Georgia	58	38	86	1,404	1,268	—	1	7	65	72	3	26	51	800	1,121
Maryland§	14	11	32	431	641	8	1	9	72	56	2	1	5	46	81
North Carolina	40	19	228	792	1,031	6	1	14	71	100	27	1	27	139	59
South Carolina§	21	19	45	663	722	—	0	4	30	8	1	9	32	425	89
Virginia§	4	20	49	609	833	—	3	24	159	120	1	4	13	118	130
West Virginia	—	4	25	113	132	—	0	3	21	13	—	0	61	11	7
E.S. Central	50	62	144	2,188	2,202	2	6	21	197	213	17	44	178	1,356	1,301
Alabama§	6	16	50	610	610	—	1	17	49	55	2	10	43	315	445
Kentucky	10	9	21	314	389	1	1	12	61	68	—	6	35	207	285
Mississippi	16	18	57	723	631	—	0	2	5	5	1	10	112	270	436
Tennessee§	18	16	34	541	572	1	2	12	82	85	14	14	32	564	135
W.S. Central	67	99	894	3,654	2,937	1	5	25	155	180	66	66	748	2,862	1,397
Arkansas§	27	13	50	552	452	1	1	4	33	28	10	6	27	415	65
Louisiana	—	17	44	605	605	—	0	1	2	8	—	11	24	442	379
Oklahoma	34	16	72	546	356	—	0	14	22	15	11	3	32	106	87
Texas§	6	57	794	1,951	1,524	—	3	11	98	129	45	48	702	1,899	866
Mountain	54	59	111	2,229	1,877	14	9	21	361	433	14	17	44	636	636
Arizona	33	20	42	738	648	2	1	8	57	81	13	9	34	338	358
Colorado	17	11	43	520	428	10	2	8	105	119	1	2	7	73	83
Idaho§	3	3	14	123	93	2	2	11	80	99	—	0	1	9	9
Montana§	—	2	10	79	70	—	0	3	24	—	—	0	1	5	18
Nevada§	—	4	14	152	188	—	0	4	17	22	—	3	13	135	42
New Mexico§	—	6	32	396	205	—	1	6	40	34	—	1	6	53	78
Utah	—	5	17	194	189	—	1	6	34	64	—	1	5	20	19
Wyoming§	1	1	5	27	56	—	0	2	4	14	—	0	2	3	29
Pacific	170	108	399	3,697	3,874	15	9	35	307	357	74	30	72	1,087	1,011
Alaska	—	1	4	41	69	—	0	1	6	3	—	0	0	—	8
California	125	76	286	2,683	2,920	11	5	22	153	186	70	27	60	941	805
Hawaii	2	5	15	190	195	—	0	5	11	25	1	1	3	33	64
Oregon§	2	6	19	311	243	—	1	7	49	60	—	1	6	52	55
Washington	41	12	103	472	447	4	2	14	88	83	3	2	20	61	79
American Samoa	—	0	1	2	—	—	0	0	—	—	—	0	1	1	4
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	2	10	12	—	0	0	—	—	—	0	3	14	11
Puerto Rico	4	10	44	318	645	—	0	1	2	1	—	0	4	16	21
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 are provisional.
† Includes *E. coli* O157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.
§ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	Streptococcal diseases, invasive, group A					*Streptococcal pneumoniae,* invasive disease, nondrug resistant† Age <5 years				
	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	50	93	259	3,969	4,049	9	37	166	1,123	1,236
New England	1	6	31	291	308	—	1	14	50	94
Connecticut	—	0	26	90	90	—	0	11	—	12
Maine§	—	0	3	20	22	—	0	1	1	1
Massachusetts	—	3	8	138	154	—	1	5	39	63
New Hampshire	—	0	2	19	23	—	0	1	7	8
Rhode Island§	—	0	8	12	4	—	0	1	2	8
Vermont§	1	0	2	12	15	—	0	1	1	2
Mid. Atlantic	9	18	43	815	766	—	4	19	138	212
New Jersey	—	3	11	132	138	—	1	6	28	43
New York (Upstate)	6	6	17	274	237	—	2	14	69	75
New York City	—	3	10	142	184	—	1	12	41	94
Pennsylvania	3	6	16	267	207	N	0	0	N	N
E.N. Central	7	19	63	845	793	—	6	23	231	219
Illinois	—	5	16	205	243	—	1	6	46	56
Indiana	2	2	11	109	95	—	0	14	29	13
Michigan	1	3	10	132	162	—	1	5	53	58
Ohio	4	5	14	219	187	—	1	5	41	46
Wisconsin	—	2	42	180	106	—	1	9	62	46
W.N. Central	—	5	39	302	264	—	2	16	98	63
Iowa	—	0	0	—	—	—	0	0	—	—
Kansas	—	0	5	29	28	—	0	3	13	—
Minnesota	—	0	35	144	124	—	0	13	39	36
Missouri	—	2	10	70	70	—	1	2	28	17
Nebraska§	—	0	3	31	21	—	0	3	7	9
North Dakota	—	0	5	10	13	—	0	2	5	1
South Dakota	—	0	2	18	8	—	0	1	6	—
S. Atlantic	13	18	34	711	968	—	6	13	164	223
Delaware	—	0	2	6	9	—	0	0	—	—
District of Columbia	—	0	4	20	16	—	0	1	1	2
Florida	3	5	11	197	229	—	1	4	44	45
Georgia	3	4	13	173	186	—	1	5	48	51
Maryland§	1	1	6	24	165	—	0	4	5	49
North Carolina	4	2	10	110	134	N	0	0	N	N
South Carolina§	2	1	5	50	86	—	1	4	36	34
Virginia§	—	3	12	104	123	—	0	6	25	35
West Virginia	—	0	3	27	20	—	0	1	5	7
E.S. Central	—	4	9	129	167	1	2	11	70	72
Alabama§	N	0	0	N	N	N	0	0	N	N
Kentucky	—	1	3	29	32	N	0	0	N	N
Mississippi	N	0	0	N	N	—	0	3	16	5
Tennessee§	—	3	7	100	135	1	2	9	54	67
W.S. Central	12	8	85	356	241	5	5	66	186	172
Arkansas§	—	0	2	4	17	—	0	2	5	10
Louisiana	—	0	2	11	14	—	0	2	7	30
Oklahoma	3	2	19	91	54	—	1	7	49	37
Texas§	9	6	65	250	156	5	3	58	125	95
Mountain	8	10	22	409	436	3	5	12	173	168
Arizona	3	3	9	152	165	2	2	8	88	84
Colorado	5	2	8	117	112	1	1	4	47	33
Idaho§	—	0	2	11	12	—	0	1	3	2
Montana§	N	0	0	N	N	—	0	1	4	1
Nevada§	—	0	2	8	2	N	0	0	N	N
New Mexico§	—	2	7	74	73	—	0	3	15	28
Utah	—	1	5	41	67	—	0	3	15	20
Wyoming§	—	0	2	6	5	—	0	1	1	—
Pacific	—	3	10	111	106	—	0	2	13	13
Alaska	—	0	4	29	20	N	0	0	N	N
California	—	0	0	—	—	N	0	0	N	N
Hawaii	—	2	10	82	86	—	0	2	13	13
Oregon§	N	0	0	N	N	N	0	0	N	N
Washington	N	0	0	N	N	N	0	0	N	N
American Samoa	—	0	12	30	4	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	0	1	—	13	—	0	0	—	—
Puerto Rico	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	N	0	0	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 years 2007 and 2008 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 September 13, 2008, and September 15, 2007 (37th Week)*

Reporting area	*Streptococcus pneumoniae*, invasive disease, drug resistant† — All ages: Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Age <5 years: Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007	Syphilis, primary and secondary: Current week	Previous 52 weeks Med	Previous 52 weeks Max	Cum 2008	Cum 2007
United States	19	58	307	2,081	2,185	3	9	43	300	363	100	233	351	8,101	7,683
New England	7	1	49	43	99	—	0	8	6	12	3	6	14	214	183
Connecticut	7	0	44	7	55	—	0	7	—	4	2	0	6	23	24
Maine§	—	0	2	15	10	—	0	1	2	1	—	0	2	8	5
Massachusetts	—	0	0	—	2	—	0	0	—	2	—	4	11	155	107
New Hampshire	—	0	0	—	—	—	0	0	—	—	—	0	2	11	23
Rhode Island§	—	0	3	9	18	—	0	1	2	3	—	0	5	13	22
Vermont§	—	0	2	12	14	—	0	1	2	2	1	0	5	4	2
Mid. Atlantic	1	4	13	186	126	—	0	2	17	22	28	32	50	1,210	1,106
New Jersey	—	0	0	—	—	—	0	0	—	—	3	4	10	149	148
New York (Upstate)	—	1	6	49	43	—	0	2	6	8	3	3	13	97	101
New York City	—	0	5	56	—	—	0	0	—	—	21	17	37	773	666
Pennsylvania	1	2	9	81	83	—	0	2	11	14	1	5	12	191	191
E.N. Central	2	14	64	546	562	—	2	14	76	84	15	18	31	645	628
Illinois	—	2	17	71	123	—	0	6	14	28	—	5	19	159	333
Indiana	—	3	39	162	121	—	0	11	18	19	4	2	10	102	34
Michigan	—	0	3	13	2	—	0	1	2	1	1	2	17	138	77
Ohio	2	8	17	300	316	—	1	4	42	36	9	5	13	209	138
Wisconsin	—	0	0	—	—	—	0	0	—	—	1	1	4	37	46
W.N. Central	1	3	115	127	147	—	0	9	8	28	1	8	15	270	246
Iowa	—	0	0	—	—	—	0	0	—	—	—	0	2	12	12
Kansas	—	1	5	55	71	—	0	1	3	6	—	0	5	24	14
Minnesota	—	0	114	—	19	—	0	9	—	18	1	1	5	68	47
Missouri	1	1	8	68	44	—	0	1	2	—	—	5	10	158	162
Nebraska§	—	0	0	—	2	—	0	0	—	—	—	0	2	8	4
North Dakota	—	0	0	—	—	—	0	0	—	—	—	0	1	—	—
South Dakota	—	0	2	4	11	—	0	1	3	4	—	0	0	—	7
S. Atlantic	6	22	53	882	963	1	3	10	138	172	25	50	215	1,757	1,726
Delaware	—	0	1	3	9	—	0	0	—	2	—	0	4	10	9
District of Columbia	—	0	3	13	15	—	0	0	—	1	1	2	11	85	136
Florida	5	13	30	520	534	1	2	6	93	94	13	20	34	680	567
Georgia	1	8	22	272	349	—	1	5	38	67	—	10	175	313	319
Maryland§	—	0	0	—	1	—	0	0	—	—	5	6	14	232	224
North Carolina	N	0	0	N	N	N	0	0	N	N	6	5	18	195	236
South Carolina§	—	0	0	—	—	—	0	0	—	—	—	1	5	57	68
Virginia§	N	0	0	N	N	N	0	0	N	N	—	5	17	184	161
West Virginia	—	1	9	74	55	—	0	2	7	8	—	0	1	1	6
E.S. Central	2	6	15	208	178	2	1	4	37	26	16	20	31	756	622
Alabama§	N	0	0	N	N	N	0	0	N	N	—	7	16	299	268
Kentucky	1	1	6	59	19	1	0	2	10	2	1	1	7	61	40
Mississippi	—	0	5	1	37	—	0	0	—	—	6	3	15	112	86
Tennessee§	1	4	13	148	122	1	0	3	27	24	9	8	14	284	228
W.S. Central	—	2	7	61	64	—	0	2	12	7	2	41	60	1,428	1,263
Arkansas§	—	0	2	12	4	—	0	1	3	2	1	2	19	113	85
Louisiana	—	1	7	49	60	—	0	2	9	5	1	11	22	357	340
Oklahoma	N	0	0	N	N	N	0	0	N	N	—	1	5	52	48
Texas§	—	0	0	—	—	—	0	0	—	—	—	24	47	906	790
Mountain	—	1	7	26	43	—	0	2	4	9	4	10	29	316	328
Arizona	—	0	0	—	—	—	0	0	—	—	—	5	21	145	172
Colorado	—	0	0	—	—	—	0	0	—	—	1	2	7	76	35
Idaho§	N	0	0	N	N	N	0	0	N	N	1	0	1	3	1
Montana§	—	0	0	—	—	—	0	0	—	—	—	0	3	—	1
Nevada§	N	0	0	N	N	N	0	0	N	N	2	2	6	58	74
New Mexico§	—	0	1	2	—	—	0	0	—	—	—	1	4	32	30
Utah	—	1	7	22	28	—	0	2	4	8	—	0	2	—	12
Wyoming§	—	0	1	2	15	—	0	1	—	1	—	0	1	2	3
Pacific	—	0	1	2	3	—	0	1	2	3	6	42	63	1,505	1,581
Alaska	N	0	0	N	N	N	0	0	N	N	—	0	1	1	6
California	N	0	0	N	N	N	0	0	N	N	3	39	59	1,347	1,453
Hawaii	—	0	1	2	3	—	0	1	2	3	—	0	2	12	5
Oregon§	N	0	0	N	N	N	0	0	N	N	1	0	3	15	14
Washington	N	0	0	N	N	N	0	0	N	N	2	4	9	130	103
American Samoa	N	0	0	N	N	N	0	0	N	N	—	0	0	—	4
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—	8	2	10	110	113
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 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 September 13, 2008, and September 15, 2007 (37th Week)*

	Varicella (chickenpox)					West Nile virus disease† Neuroinvasive					West Nile virus disease† Nonneuroinvasive§				
	Current	Previous 52 weeks		Cum	Cum	Current	Previous 52 weeks		Cum	Cum	Current	Previous 52 weeks		Cum	Cum
Reporting area	week	Med	Max	2008	2007	week	Med	Max	2008	2007	week	Med	Max	2008	2007
United States	246	657	1,660	19,188	28,475	1	1	99	296	1,018	—	3	136	416	2,163
New England	6	13	68	382	1,796	—	0	2	3	2	—	0	1	2	6
Connecticut	—	0	38	—	1,036	—	0	2	3	1	—	0	1	2	2
Maine¶	—	0	26	—	228	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	0	1	1	—	—	0	2	—	1	—	0	1	—	3
New Hampshire	1	6	18	185	250	—	0	0	—	—	—	0	0	—	—
Rhode Island¶	—	0	0	—	—	—	0	0	—	—	—	0	0	—	1
Vermont¶	5	6	17	196	282	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	34	56	117	1,628	3,579	—	0	5	19	15	—	0	3	4	7
New Jersey	N	0	0	N	N	—	0	0	—	1	—	0	0	—	—
New York (Upstate)	N	0	0	N	N	—	0	2	8	3	—	0	1	1	1
New York City	N	0	0	N	N	—	0	3	6	8	—	0	3	3	2
Pennsylvania	34	56	117	1,628	3,579	—	0	2	5	3	—	0	1	—	4
E.N. Central	37	164	378	4,511	8,015	—	0	18	9	83	—	0	11	7	48
Illinois	—	13	124	675	825	—	0	14	—	46	—	0	8	4	27
Indiana	—	0	222	—	—	—	0	2	1	11	—	0	2	—	9
Michigan	5	64	154	1,930	2,959	—	0	1	2	15	—	0	1	—	—
Ohio	32	55	128	1,647	3,421	—	0	3	5	7	—	0	1	—	7
Wisconsin	—	7	34	259	810	—	0	2	1	4	—	0	1	3	5
W.N. Central	52	23	145	827	1,164	—	0	12	27	226	—	0	31	109	690
Iowa	N	0	0	N	N	—	0	2	3	10	—	0	2	4	15
Kansas	1	6	36	259	429	—	0	1	2	11	—	0	3	10	24
Minnesota	—	0	0	—	—	—	0	3	3	39	—	0	6	13	53
Missouri	51	11	47	500	668	—	0	7	4	52	—	0	3	4	11
Nebraska¶	N	0	0	N	N	—	0	1	2	19	—	0	8	20	125
North Dakota	—	0	140	48	—	—	0	2	2	48	—	0	11	34	307
South Dakota	—	0	5	20	67	—	0	5	11	47	—	0	6	24	155
S. Atlantic	48	94	167	3,246	3,768	—	0	4	4	36	—	0	5	4	30
Delaware	—	1	6	39	36	—	0	0	—	1	—	0	0	—	—
District of Columbia	—	0	3	18	24	—	0	0	—	—	—	0	0	—	—
Florida	22	28	87	1,218	897	—	0	0	—	3	—	0	0	—	—
Georgia	N	0	0	N	N	—	0	3	—	19	—	0	5	1	19
Maryland¶	N	0	0	N	N	—	0	1	3	4	—	0	1	3	4
North Carolina	N	0	0	N	N	—	0	1	—	4	—	0	1	—	3
South Carolina¶	25	16	66	606	732	—	0	1	—	2	—	0	0	—	2
Virginia¶	—	21	81	847	1,264	—	0	0	—	3	—	0	0	—	2
West Virginia	1	15	66	518	815	—	0	1	1	—	—	0	0	—	—
E.S. Central	8	18	101	875	380	—	0	9	37	62	—	0	10	61	73
Alabama¶	8	18	101	865	378	—	0	5	10	15	—	0	2	4	4
Kentucky	N	0	0	N	N	—	0	1	—	3	—	0	0	—	—
Mississippi	—	0	2	10	2	—	0	6	23	40	—	0	9	53	65
Tennessee¶	N	0	0	N	N	—	0	1	4	4	—	0	2	4	4
W.S. Central	45	182	886	6,277	7,776	—	1	24	38	202	—	1	12	41	108
Arkansas¶	7	10	39	443	584	—	0	2	8	11	—	0	1	—	5
Louisiana	—	1	10	56	98	—	0	4	4	20	—	0	6	20	6
Oklahoma	N	0	0	N	N	—	0	6	2	49	—	0	4	4	39
Texas¶	38	166	852	5,778	7,094	—	0	14	24	122	—	0	6	17	58
Mountain	16	40	105	1,385	1,945	—	0	16	30	250	—	0	52	115	982
Arizona	—	0	0	—	—	—	0	5	10	31	—	0	10	2	24
Colorado	15	14	43	622	781	—	0	5	10	92	—	0	18	52	458
Idaho¶	N	0	0	N	N	—	0	2	2	10	—	0	7	30	112
Montana¶	1	5	27	221	298	—	0	2	—	35	—	0	16	5	163
Nevada¶	N	0	0	N	N	—	0	1	4	1	—	0	3	7	10
New Mexico¶	—	4	22	153	305	—	0	2	3	36	—	0	1	1	20
Utah	—	9	55	379	537	—	0	5	1	22	—	0	3	13	37
Wyoming¶	—	0	9	10	24	—	0	0	—	23	—	0	5	5	158
Pacific	—	1	7	57	52	1	0	31	129	142	—	0	15	73	219
Alaska	—	1	5	45	27	—	0	0	—	—	—	0	0	—	—
California	—	0	0	—	—	1	0	31	129	135	—	0	15	69	201
Hawaii	—	0	6	12	25	—	0	0	—	—	—	0	0	—	—
Oregon¶	N	0	0	N	N	—	0	1	—	7	—	0	2	4	18
Washington	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	2	17	55	207	—	0	0	—	—	—	0	0	—	—
Puerto Rico	4	9	20	327	557	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

C.N.M.I.: Commonwealth of Northern Mariana Islands.
U: Unavailable. —: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
* Incidence data for reporting years 2007 and 2008 are provisional.
† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.
§ Not notifiable in all states. Data from states where the condition is not notifiable are excluded from this table, except in 2007 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.
¶ Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE III. Deaths in 122 U.S. cities,* week ending September 13, 2008 (37th week)

Reporting area	All causes, by age (years)						
	All Ages	≥65	45–64	25–44	1–24	<1	P&I† Total
New England	**460**	**321**	**92**	**33**	**6**	**8**	**28**
Boston, MA	155	93	39	12	5	6	7
Bridgeport, CT	26	20	3	3	—	—	—
Cambridge, MA	5	5	—	—	—	—	—
Fall River, MA	21	19	—	1	—	1	2
Hartford, CT	38	23	11	3	1	—	4
Lowell, MA	17	13	2	2	—	—	—
Lynn, MA	6	6	—	—	—	—	—
New Bedford, MA	28	20	4	4	—	—	2
New Haven, CT	U	U	U	U	U	U	U
Providence, RI	52	35	14	3	—	—	1
Somerville, MA	3	2	1	—	—	—	—
Springfield, MA	37	27	6	3	—	1	6
Waterbury, CT	23	17	6	—	—	—	1
Worcester, MA	49	41	6	2	—	—	5
Mid. Atlantic	**2,038**	**1,377**	**472**	**121**	**42**	**26**	**100**
Albany, NY	43	29	10	2	2	—	2
Allentown, PA	19	15	2	—	—	2	—
Buffalo, NY	70	45	18	6	1	—	11
Camden, NJ	30	21	4	1	1	3	3
Elizabeth, NJ	15	10	5	—	—	—	2
Erie, PA	42	35	4	3	—	—	5
Jersey City, NJ	14	8	4	1	1	—	3
New York City, NY	1,060	723	256	55	16	10	36
Newark, NJ	33	12	16	3	1	1	1
Paterson, NJ	14	11	2	1	—	—	4
Philadelphia, PA	296	162	84	32	12	6	13
Pittsburgh, PA§	25	14	8	1	1	1	1
Reading, PA	35	33	2	—	—	—	3
Rochester, NY	139	106	22	5	4	2	10
Schenectady, NY	12	10	2	—	—	—	2
Scranton, PA	27	22	2	3	—	—	1
Syracuse, NY	102	80	14	5	2	1	2
Trenton, NJ	31	18	9	3	1	—	—
Utica, NY	6	4	2	—	—	—	1
Yonkers, NY	25	19	6	—	—	—	—
E.N. Central	**1,979**	**1,261**	**502**	**124**	**42**	**50**	**109**
Akron, OH	58	39	14	1	1	3	1
Canton, OH	48	31	14	2	1	—	5
Chicago, IL	307	171	91	28	11	6	24
Cincinnati, OH	U	U	U	U	U	U	U
Cleveland, OH	244	169	50	7	3	15	9
Columbus, OH	196	125	54	11	2	4	10
Dayton, OH	116	82	25	5	3	1	8
Detroit, MI	153	72	52	19	7	3	7
Evansville, IN	54	37	11	5	1	—	—
Fort Wayne, IN	76	57	12	3	1	3	5
Gary, IN	8	3	3	—	1	1	—
Grand Rapids, MI	53	38	10	3	1	1	6
Indianapolis, IN	214	129	57	20	4	4	15
Lansing, MI	52	34	15	2	—	1	2
Milwaukee, WI	117	71	35	8	2	1	5
Peoria, IL	50	39	9	1	—	1	2
Rockford, IL	58	40	9	4	3	2	2
South Bend, IN	37	25	6	3	—	3	1
Toledo, OH	93	60	29	2	1	1	5
Youngstown, OH	45	39	6	—	—	—	2
W.N. Central	**598**	**391**	**137**	**36**	**19**	**15**	**24**
Des Moines, IA	63	46	12	2	1	2	3
Duluth, MN	30	28	2	—	—	—	2
Kansas City, KS	21	10	7	2	1	1	—
Kansas City, MO	100	56	29	8	4	3	1
Lincoln, NE	39	31	7	—	—	1	2
Minneapolis, MN	64	39	16	4	3	2	5
Omaha, NE	93	67	18	5	2	1	4
St. Louis, MO	49	27	16	5	1	—	—
St. Paul, MN	55	38	14	1	2	—	4
Wichita, KS	84	49	16	9	5	5	3
S. Atlantic	**1,305**	**807**	**328**	**97**	**42**	**31**	**70**
Atlanta, GA	130	74	29	19	8	—	2
Baltimore, MD	146	80	46	7	9	4	14
Charlotte, NC	116	70	23	11	2	10	12
Jacksonville, FL	188	109	61	13	3	2	8
Miami, FL	87	56	17	10	4	—	5
Norfolk, VA	62	37	16	5	2	2	1
Richmond, VA	66	42	20	2	—	2	6
Savannah, GA	64	46	8	5	3	2	3
St. Petersburg, FL	54	35	10	4	4	1	4
Tampa, FL	189	131	43	11	1	3	10
Washington, D.C.	189	114	54	10	6	5	3
Wilmington, DE	14	13	1	—	—	—	2
E.S. Central	**760**	**490**	**173**	**63**	**23**	**11**	**47**
Birmingham, AL	165	108	33	15	7	2	10
Chattanooga, TN	56	33	15	5	3	—	4
Knoxville, TN	103	65	22	10	3	3	7
Lexington, KY	76	52	18	4	1	1	6
Memphis, TN	98	54	30	9	2	3	12
Mobile, AL	72	49	13	5	5	—	—
Montgomery, AL	39	24	10	3	1	1	1
Nashville, TN	151	105	32	12	1	1	7
W.S. Central	**1,298**	**801**	**348**	**88**	**37**	**23**	**61**
Austin, TX	87	46	24	12	3	1	6
Baton Rouge, LA	U	U	U	U	U	U	U
Corpus Christi, TX	27	19	6	2	—	—	4
Dallas, TX	199	112	58	19	7	3	9
El Paso, TX	75	54	13	5	2	1	3
Fort Worth, TX	134	80	34	10	7	3	4
Houston, TX	289	166	92	18	7	6	12
Little Rock, AR	82	47	22	7	2	4	4
New Orleans, LA¶	U	U	U	U	U	U	U
San Antonio, TX	216	142	58	8	5	3	12
Shreveport, LA	51	32	13	3	2	1	3
Tulsa, OK	138	103	28	4	2	1	4
Mountain	**995**	**631**	**230**	**73**	**32**	**29**	**65**
Albuquerque, NM	108	77	19	8	2	2	10
Boise, ID	45	40	2	2	1	—	2
Colorado Springs, CO	64	38	20	3	2	1	2
Denver, CO	79	51	19	6	2	1	5
Las Vegas, NV	262	156	66	26	7	7	14
Ogden, UT	29	21	4	—	2	2	1
Phoenix, AZ	102	50	32	12	4	4	10
Pueblo, CO	35	27	6	2	—	—	2
Salt Lake City, UT	116	71	26	9	4	6	11
Tucson, AZ	155	100	36	5	8	6	8
Pacific	**1,616**	**1,094**	**358**	**92**	**42**	**30**	**107**
Berkeley, CA	10	4	4	1	—	1	—
Fresno, CA	113	66	31	9	6	1	3
Glendale, CA	35	29	5	1	—	—	3
Honolulu, HI	81	58	16	6	1	—	3
Long Beach, CA	72	42	25	3	2	—	12
Los Angeles, CA	251	151	67	13	8	12	23
Pasadena, CA	12	9	1	1	1	—	—
Portland, OR	139	104	25	9	1	—	6
Sacramento, CA	182	131	38	11	1	1	13
San Diego, CA	132	92	28	7	2	3	7
San Francisco, CA	115	75	26	8	4	2	15
San Jose, CA	153	115	25	6	4	3	10
Santa Cruz, CA	27	19	7	1	—	—	2
Seattle, WA	117	75	21	9	7	5	5
Spokane, WA	64	52	8	2	1	1	2
Tacoma, WA	113	72	31	5	4	1	3
Total**	**11,049**	**7,173**	**2,640**	**727**	**285**	**223**	**611**

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.

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