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## 2009 Pandemic Influenza A (H1N1) in Pregnant Women Requiring Intensive Care — New York City, 2009

Pregnant women are at increased risk for severe illness and complications from infection with seasonal influenza (1-3) and 2009 pandemic influenza A (H1N1) (4-6). To characterize the severity of 2009 H1N1 infection in pregnant women, the New York City Department of Health and Mental Hygiene (DOHMH) conducted active and passive surveillance for cases of 2009 H1N1 infection in pregnant women requiring intensive care. This report summarizes the results of that surveillance, which found that, during 2009, 16 pregnant women and one who was postpartum were admitted to New York City intensivecare units (ICUs). Two women died. Of the 17 women, 12 had no recognized risk factors for severe influenza complications other than pregnancy (7). All 17 women received antiviral treatment with oseltamivir; however, treatment was initiated  $\leq 2$ days after symptom onset in only one woman and was begun ≥5 days after symptom onset in four women. Because initiation of antiviral treatment  $\leq 2$  days after onset is associated with better outcomes (5,6), pregnant women should be encouraged to seek medical care immediately if they develop influenza-like symptoms, and health-care providers should initiate empiric antiviral therapy for these women as soon as possible, even if >2 days after symptom onset. Health departments and healthcare providers should educate pregnant and postpartum women regarding the risks posed by influenza and highlight the effectiveness and safety of influenza vaccination. Obstetricians and other health-care providers should offer influenza vaccination to their pregnant patients.

To identify cases of 2009 H1N1 infection in pregnant and postpartum women, beginning April 25, 2009, DOHMH conducted surveillance for hospitalizations and deaths during three separate periods. Surveillance methods varied as the 2009 H1N1 pandemic evolved and influenza activity changed in New York City. During April–June, DOHMH conducted citywide active surveillance for deaths from 2009 H1N1 and enhanced citywide surveillance for hospitalized cases of influenza in pregnant and postpartum women, actively requesting specimens and testing for 2009 H1N1 at the New York City Public Health Laboratory. During July–September, influenza activity was low in New York City; however, ongoing passive surveillance was conducted for hospitalized patients who tested positive for influenza A. During October–December, citywide surveillance was passive, except active surveillance was reestablished at five sentinel hospitals. During all three periods, data on pregnancy, ICU status, and vital status were collected for all patients hospitalized with 2009 H1N1 throughout New York City. Chart abstractions for all identified cases were conducted by medical epidemiologists at DOHMH. For this case series, a case was defined as severe illness with laboratory-confirmed or probable 2009 H1N1 infection\* in a woman who was pregnant or postpartum (within 6 weeks of delivery), resulting in admission to an ICU or death.

During 2009, a total of 17 patients (16 pregnant women and one who was postpartum) met the case definition; nine were admitted to ICUs during April–June, and eight were admitted during October–December. No patients met the case definition during July–September. Median age of the patients was 23 years (range: 20–37 years), and median gestational age at

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<sup>\*</sup> In 15 of the cases, 2009 H1N1 was confirmed by real-time reverse transcription– polymerase chain reaction. Two cases with laboratory evidence of influenza A that were not subtyped were considered probable 2009 H1N1 because surveillance data indicated >90% of circulating influenza A in New York City at the time was 2009 H1N1.

hospital admission was 34 weeks (range: 6–41 weeks) (Table). Median length of hospital stay was 12 days (range: 4-38 days). Five of the 17 women had risk factors for severe influenza complications recognized by the Advisory Committee for Immunization Practices (ACIP) other than pregnancy (7). One patient had asthma and cardiovascular disease (diagnosed postmortem). The other four patients had sickle cell disease, asthma, seizure disorder, and diabetes mellitus, respectively. Only one of the 17 patients had received 2009 H1N1 vaccine, according to the medical records; she had been administered H1N1 vaccine >4 weeks before hospitalization, after being administered seasonal influenza vaccine >8 weeks before hospitalization. Eleven of the 17 women were in their third trimester, including five who developed acute respiratory distress syndrome (ARDS). All 17 women received antiviral treatment with oseltamivir; however, treatment was initiated ≤2 days after symptom onset in only one woman and was begun  $\geq 5$ days after symptom onset in four women; initiation of antiviral treatment  $\leq 2$  days after onset is associated with better outcomes (5, 6).

Four of the nine women who gave birth during their 2009 H1N1 hospitalization had an emergency cesarean delivery; eight infants were live-born (including one who died soon after birth), and one was stillborn. Six of the eight live-born infants were admitted to a neonatal ICU.

#### **Illustrative Case Reports**

Patient 1. A woman aged 27 years who was at 32 weeks' gestation (Table) went to her primary care physician during May 2009 after 1 day of fever and cough (Figure). She was treated with antibiotics for 3 days without improvement. Five days after symptom onset, she went to the emergency department, reporting persistent fevers, chills, cough, wheezing, and an episode of near-syncope. On admission she was afebrile, with a respiratory rate of 22 breaths per minute, a heart rate of 96 beats per minute, blood pressure of 100/70 mmHg, and oxygen saturation of 99% on room air. A chest radiograph revealed bilateral lobar pneumonia, and she was treated for community-acquired pneumonia. On hospital day 2, she developed fever to 102.9°F (39.4°C), tachycardia

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Patient	Month of	Patient	Fetal gestational age at admission	Total hospital length of	ICU length of	Maternal	No. of days from symptom		Mechanical	Diagnosis during hospital course		Infant
no.	admission	(yrs)	(wks)	stay (days)	ength of length of Maternal onset tay (days) stay (days) outcome tre		treatment	ACIP* risk factor	ventilation	Pneumonia	ARDS <sup>†</sup>	outcome
1	May	27	32	38	37	Died	6	None	Yes	Yes	Yes	Died
2	May	25	37	13	12	Discharged	5	None	Yes	Yes	Yes	NICU§
3	May	25	39	19	17	Died	3	Asthma, CVD <sup>¶</sup>	Yes	Yes	Yes	NICU
4	May	23	40	15	4	Discharged	5	Sickle cell disease	No	Yes	No	Nursery
5	May	30	6	4	2	Discharged	8	None	No	No	No	NA**
6	May	23	Postpartum <sup>††</sup>	7	7	Discharged	3	Asthma	No	Yes	No	NA
7	June	21	23	38	32	Discharged	4	Seizure disorder	Yes	Yes	No	Stillborn
8	June	28	35	33	21	Discharged	3	None	Yes	Yes	Yes	NICU
9	June	21	25	18	4	Discharged	2	None	No	No	No	NA
10	October	26	29	10	10	Discharged	3	None	No	Yes	No	NA
11	November	22	41	9	NA	Discharged	4	None	No	Yes	No	NICU
12	November	37	37	12	NA	Discharged	4	None	No	Yes	No	NA
13	November	21	34	7	5	Discharged	3	Diabetes mellitus	No	Yes	No	NICU
14	November	22	35	4	2	Discharged	3	None	No	Yes	No	NA
15	November	21	34	32	24	Discharged	7	None	Yes	Yes	Yes	NICU
16	December	27	25	10	8	Discharged	3	None	Yes	Yes	No	NA
17	December	22	10	7	7	Discharged	9	None	No	No	No	NA

TABLE. Clinical characteristics of severe 2009 pandemic influenza A (H1N1) in 16 pregnant women and one postpartum woman hospitalized in intensive-care units (ICUs) — New York City, 2009

\* Advisory Committee on Immunization Practices recognized risk factor for severe influenza complications other than pregnancy. CDC. Prevention and control of seasonal influenza with vaccines: recommendations of the Advisory Committee on Immunization Practices (ACIP), 2009. MMWR 2009;58(No. RR-8).

<sup>†</sup> Acute respiratory distress syndrome.

§ Neonatal ICU.

<sup>¶</sup> Cardiovascular disease diagnosed postmortem.

\*\* Not available. Patient was discharged before giving birth.

<sup>++</sup> <2 weeks after delivery.

(141 beats per minute) and severe respiratory distress. ARDS was diagnosed, and the patient was transferred to the ICU for mechanical ventilation and treated empirically with oseltamivir, 75 mg twice daily. Rapid influenza diagnostic tests performed on nasopharyngeal specimens 1 day before hospital admission and on hospital day 3 were negative for influenza.

On hospital day 4, because her oxygen saturations worsened to approximately 75% despite maximal ventilation settings, an emergency cesarean delivery was performed. During the procedure, the patient was hypotensive and required multiple blood transfusions. Cultures from bronchoalveolar lavage collected the previous day grew Acinetobacter baumanii. On hospital day 11, diagnosis of 2009 H1N1 was confirmed from a nasopharyngeal swab specimen submitted to the DOHMH Public Health Laboratory on hospital day 3. On hospital day 16, because of refractory hypoxemia and severe ARDS, the woman was transferred to another hospital ICU for extracorporeal membrane oxygenation (ECMO), and oseltamivir was increased to 150 mg, twice daily. Her subsequent hospital course was complicated by volume overload, septic shock, and ventilator-associated pneumonia with Klebsiella pneumoniae and A. baumanii. She died on hospital day 38, a total of 42 days after symptom onset (Figure). At birth, her infant weighed 1,500 g

and had Apgar scores of 1 at 1 minute and 1 at 5 minutes after birth; the infant stopped breathing, and neonatal resuscitation efforts were unsuccessful.

Patient 15. A woman aged 21 years who was at 34 weeks' gestation was admitted to a hospital during November 2009 (Table) with respiratory distress; 6 days of fever, cough, and myalgia; and 2 days of blood-tinged sputum (Figure). A few days before admission she had been prescribed antibiotics and oseltamivir by her primary-care provider but only took the antibiotics. On admission, she had a fever of 100.9°F (38.3°C), tachycardia (141 beats per minute), blood pressure of 101/66 mmHg, and a respiratory rate of 20 breaths per minute; her chest radiograph showed bilateral pulmonary infiltrates consistent with ARDS. On hospital day 2, she was transferred to the ICU for mechanical ventilation; she developed septic shock requiring vasopressors and was treated with broad-spectrum antibiotics and oseltamivir, 150 mg twice daily. Her respiratory status deteriorated and she underwent emergency cesarean delivery.

On hospital day 3, the patient was transferred to another hospital ICU for ECMO treatment of severe ARDS and septic shock. Soon after transfer, she experienced cardiac arrest with ventricular fibrillation; defibrillation was successful after less than 2 minutes of no pulse. Oseltamivir was changed to FIGURE. Timeline of key events in two cases of severe 2009 pandemic influenza A (H1N1) in pregnant women hospitalized in intensive-care units — New York City, 2009



**Abbreviations:** PCP = primary-care provider, Abx = antibiotics, ICU = intensive-care unit, ARDS = acute respiratory distress syndrome, PHL = New York City Department of Health and Mental Hygiene Public Health Laboratory, ECMO = extracorporeal membrane oxygenation, DIC = disseminated intravascular coagulation. \* Date of PCP visit was not confirmed but was 1–3 days after symptom onset.

empiric intravenous peramivir and broad-spectrum antibiotics. On hospital day 4, diagnosis of 2009 H1N1 was confirmed from a nasopharyngeal swab specimen submitted to the DOHMH Public Health Laboratory on hospital day 2. Her hospital course included spontaneous pneumothoraces, hypotension requiring vasopressors, an episode of asystole, infection with *K. pneumoniae*, fevers to 107.1°F (41.7°C), disseminated intravascular coagulation, and tracheostomy placement. Her respiratory status improved, and ECMO was discontinued on hospital day 14. She was transferred from the ICU without supplemental oxygen on hospital day 26 and discharged home with physical therapy on hospital day 32. On discharge she was fully alert and walking with assistance. At birth, her infant weighed 2,080 grams and had Apgar scores of 3 at 1 minute and 6 at 5 minutes after birth. The infant required mechanical ventilation and was treated with antibiotics for suspected sepsis; oseltamivir was not administered. The infant improved and was discharged on day 3 of life.

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#### **Editorial Note**

An analysis of New York City 2009 H1N1 hospitalizations during May–June 2009 showed that pregnant women were 7.2 times more likely to be hospitalized and 4.3 times more likely to be admitted to an ICU than nonpregnant women (6). Immunologic changes, increased ventilatory demand, and decreased functional residual capacity and oncotic pressure all are postulated to predispose pregnant and postpartum women to severe respiratory complications from influenza virus infection (5,6).

The case series in this report highlights some delays in pregnant women seeking care and obtaining appropriate diagnosis and treatment of 2009 H1N1 virus infection in New York City, despite extensive outreach to the public and health-care providers by public health officials. The illustrative cases highlight some factors contributing to the delays, including false-negative rapid diagnostic test results and not taking oseltamivir as prescribed. In addition, only one of the 17 women was reported to have received 2009 H1N1 vaccine. Although no vaccine is 100% effective, vaccination remains the most important and effective means of preventing influenza among pregnant women.

The findings in this report are subject to at least three limitations. First, this report represents a case series rather than a population-based study, and methods of case ascertainment and influenza activity in New York City differed among the April-June, July-September, and October-December periods. The number of severe illnesses from 2009 H1N1 infection in pregnant women identified during these different periods might not be comparable for various reasons. For example, the threshold for admission to an ICU might have been lower in the fall than in the spring, given increased awareness of the potential severity of 2009 H1N1 infection in pregnant women. Second, underascertainment of cases might have occurred during all three periods because of limitations in active case-finding. Finally, 2009 H1N1 vaccine was not available until October, and the vaccination status for most of the 17 women was unknown; therefore, no

#### What is already known on this topic?

Pregnant women have an increased risk for severe illness and complications from seasonal and pandemic influenza virus infection.

#### What is added by this report?

During 2009 in New York City, among 17 pregnant or postpartum women who were admitted to intensivecare units with severe illness from 2009 H1N1 influenza virus infection, two maternal deaths, one infant death, and a stillbirth resulted; for some of these patients, delays in care-seeking, diagnosis, and treatment of influenza might have increased the potential for rapid clinical decline.

#### What are the implications for public health practice?

Health departments and health-care providers should educate pregnant and postpartum women to recognize influenza-like symptoms and seek care promptly, and emphasize the need for prompt empiric antiviral treatment when influenza is circulating in the community; obstetricians and other health-care providers should offer influenza vaccination to their pregnant patients.

conclusions can be drawn regarding the prevalence of vaccination in this group.

All clinicians, including obstetricians and healthcare providers, should maintain a high index of suspicion for influenza when surveillance data suggest that influenza is circulating in a community. Pregnant and postpartum patients should be educated to recognize influenza-like symptoms and counseled to seek care immediately and to take antiviral therapy as prescribed (9). Health-care providers should ensure prompt evaluation and early empiric treatment with oseltamivir, irrespective of negative rapid influenza diagnostic test results; treatment with antipyretics and antibiotics also should be considered when indicated (5,8,10).

For pregnant or postpartum women and for those women considering becoming pregnant, clinicians and health departments should emphasize the importance of vaccination against seasonal influenza and 2009 H1N1 to prevent life-threatening complications. Although 2009 H1N1 activity has declined in the United States, the virus is still circulating and causing illness, and increases in influenza activity remain possible. Clinicians caring for pregnant and postpartum women should continue to encourage influenza vaccination during this and subsequent years and remember the importance of prompt empiric antiviral therapy for pregnant or postpartum patients with possible 2009 H1N1 influenza.

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## Racial and Ethnic Differences in Breastfeeding Initiation and Duration, by State — National Immunization Survey, United States, 2004–2008

The American Academy of Pediatrics recommends exclusive breastfeeding to age 6 months and continued breastfeeding for at least the first year of life (1). The Healthy People 2010 (HP2010) targets (16-19a-c) for initiating breastfeeding, breastfeeding to age 6 months, and breastfeeding to age 12 months, are 75%, 50%, and 25%, respectively. National estimates from the United States indicate substantial racial/ethnic differences in breastfeeding (2). To monitor state-specific progress toward achieving the HP2010 objectives for breastfeeding initiation and duration among different racial/ethnic groups, CDC analyzed 2004-2008 National Immunization Survey (NIS) data for children born during 2003–2006. This report summarizes the results of that analysis, which found that non-Hispanic blacks had a lower prevalence of breastfeeding initiation than non-Hispanic whites in all but two states; Hispanics generally had lower prevalence than non-Hispanic whites in western states and higher in eastern states. Most states were not meeting the HP2010 targets for breastfeeding duration for any racial/ethnic group. Breastfeeding should be promoted through comprehensive clinical and social supports starting in pregnancy, and including the birth, delivery, and postpartum periods.

NIS is an ongoing, random-digit-dialed survey in 50 states and the District of Columbia that includes households with children aged 19-35 months at the time of interview (3). Although the survey primarily is intended to estimate national, state, and selected urban area vaccination coverage rates, questions on breastfeeding initiation and duration were added to NIS in 1999. Because children are aged 19-35 months at the time of the NIS interview, each cross-sectional survey includes children born in 3 different calendar years. To maximize sample size and allow for representative state-level analyses stratified by racial/ethnic group, data from the 2004-2008 surveys were combined to create a cohort of children born during 2003–2006. Council of American Survey Research Organizations (CASRO) response rates for NIS 2004-2008 ranged from 63% to 72%.\* The child's race/ethnicity, and mother's age, education, and participation in the Women, Infants, and Children (WIC) supplemental nutrition program were self-reported. Data were suppressed when sample size was <50 because of unstable estimates. Because of inadequate sample sizes for other racial/ethnic groups, analyses by state were restricted to children whose racial/ethnic groups were categorized as Hispanic, non-Hispanic white, or non-Hispanic black. Data were weighted to adjust for households with multiple telephone lines, household nonresponse, and exclusion of households without landline telephones. Estimates were adjusted using final survey weights to correct for nonresponse (3). T-tests were used to determine whether estimates for Hispanics and non-Hispanic blacks were significantly different (p<0.05) from estimates for non-Hispanic whites.

To assess breastfeeding initiation, survey participants were asked "Was [child] ever breastfed or fed breast milk?" To assess breastfeeding duration, in NIS 2004 and 2005, survey participants were asked "How long was [child] breastfed or fed breast milk?" The wording changed slightly for NIS 2006 onwards to "How old was [child's name] when [child's name] completely stopped breastfeeding or being fed breast milk?"; these changes had a minimal effect on estimates of breastfeeding duration.<sup>†</sup>

National estimates for breastfeeding initiation and duration to 6 months and 12 months were 73.4%, 41.7%, and 21.0%, respectively (Table 1). Breastfeeding estimates varied by race/ethnicity, participation in the WIC supplemental nutrition program, and mother's age and education.

In the state-specific analysis, for all but two states (Minnesota and Rhode Island), prevalence of breastfeeding initiation was lower among non-Hispanic blacks than non-Hispanic whites, although these differences were not significant in all such states (Table 2). In 13 states, the difference between non-Hispanic blacks and non-Hispanic whites was  $\geq 20$  percentage points, with the largest differences observed predominantly in southeastern states. In six states the prevalence of breastfeeding initiation among non-Hispanic

<sup>\*</sup> The CASRO household response rate is the product of the resolution rate (82.3%–83.9%), the screening completion rate (90.2%–94.9%), and the interview completion rate (84.2%–92.0%).

<sup>&</sup>lt;sup>†</sup>Additional information available at http://www.cdc.gov/breast feeding/data/nis\_data/survey\_methods.htm.

				Breastfe	eding		
	New	In	itiation	6	months	12	months
Characteristic	respondents	%	(95% Cl <sup>§</sup> )	%	(95% CI)	%	(95% CI)
Total	100,930	73.4	(72.4–74.4)	41.7	(40.7–42.7)	21.0	(20.2–21.8)
Race/Ethnicity (child)							
Hispanic	21,159	80.4	(79.5-81.3)	45.1	(43.9-46.3)	24.0	(22.9–25.1)
White, non-Hispanic	57,891	74.3	(73.7–74.9)	43.2	(42.6-43.8)	21.4	(20.9–21.9)
Black, non-Hispanic	11,476	54.4	(52.6-56.2)	26.6	(25.3–27.9)	11.7	(10.7–12.7)
American Indian/Alaska Native	3,359	69.8	(63.9–75.7)	37.1	(31.2-43.0)	19.4	(14.5-24.3)
Asian or Pacific Islander	6,683	80.9	(77.4-84.4)	52.4	(48.1–56.7)	29.7	(25.8–33.6)
Recipient of WIC <sup>¶</sup>							
Yes	43,730	66.1	(64.7-67.5)	32.7	(31.1-34.3)	16.5	(15.3–17.7)
No (but eligible)	4,924	76.5	(72.6-80.4)	50.4	(45.7–55.1)	30.1	(25.8-34.4)
No (not eligible)	47,497	82.2	(81.0-83.4)	51.7	(50.3–53.1)	25.5	(24.3–26.7)
Mother's education							
Less than high school diploma or GED**	11,889	66.2	(63.5-68.9)	35.9	(33.0-38.8)	19.9	(17.5–22.3)
High school diploma or GED	21,372	65.2	(63.2-67.2)	31.7	(29.7-33.7)	15.7	(14.1–17.3)
Some college	23,792	74.8	(73.0-76.6)	40.5	(38.5-42.5)	19.7	(17.9–21.5)
College graduate	43,877	85.4	(84.4-86.4)	56.5	(55.1–57.9)	28.6	(27.2-30.0)
Mother's age (yrs)							
<20	2,188	53.0	(46.1-59.9)	19.3	(13.8-24.8)	8.1	(4.4-11.8)
20–29	36,304	69.0	(67.4–70.6)	33.8	(32.2-35.4)	16.2	(14.8–17.6)
≥30	62,438	77.5	(76.3–78.7)	48.5	(47.1–49.9)	25.4	(24.2–26.6)

TABLE 1. National prevalence of breastfeeding initiation and duration to 6 months and 12 months,\* by selected sociodemographic characteristics — National Immunization Survey (NIS), United States, 2004–2008<sup>†</sup>

\* Breastfeeding initiation was determined based on response to the question, "Was [child] ever breastfed or fed breast milk?" Breastfeeding duration was determined based on response to the question, "How long was [child] breastfed or fed breast milk?" (NIS 2004–2005) or "How old was [child's name] when [child's name] completely stopped breastfeeding or being fed breast milk?" (NIS 2006–2008).

<sup>†</sup> Among children born during 2003–2006.

§ Confidence interval.

<sup>¶</sup> Special supplemental nutrition program for Women, Infants and Children.

\*\* General Education Development certificate.

blacks was less than 45%. In general, compared with non-Hispanic whites, lower prevalence of breastfeeding initiation was observed among Hispanics in western states and higher prevalence was observed among Hispanics in eastern states.

Among states with sample sizes sufficient for analysis ( $\geq$ 50 respondents per group), Hispanics, non-Hispanic whites, and non-Hispanic blacks met the HP2010 targets<sup>§</sup> for breastfeeding initiation of 75% in 33 of 49, 27 of 51, and one of 33 states, respectively (Figure). For breastfeeding duration, Hispanics, non-Hispanic whites, and non-Hispanic blacks met the HP2010 targets of 50% breastfeeding to 6 months in eight of 49, 14 of 51, and two of 33 states, and of 25% breastfeeding to 12 months in 12 of 49, 14 of 51, and three of 33 states, respectively.

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#### **Editorial Note**

Breastfeeding provides a wide range of benefits to the mother, child, and community, and reaching a higher prevalence of infant breastfeeding is an important public health goal. In 1984, the Surgeon General held the first Workshop on Breastfeeding. In 1990, breastfeeding targets were included in HP2000, and in 2000, the U.S. Department of Health and Human Services released Blueprint for Action on Breastfeeding<sup>¶</sup> (4). Since 1990, national estimates of breastfeeding initiation have shown a consistent increase, and the overall national prevalence is close to reaching the HP2010 target of 75% (4). However, racial and ethnic differences in breastfeeding are substantial, and, as shown in this report, the national prevalence of breastfeeding initiation among non-Hispanic blacks is far from the HP2010 target. In 1990 the difference in breastfeeding initiation prevalence between

SAdditional information available at http://www.healthypeople.gov/ document/pdf/volume2/16mich.pdf.

<sup>9</sup> Available at http://www.womenshealth.gov/breastfeeding/programs/ blueprints/index.cfm.

 TABLE 2. Prevalence of breastfeeding initiation and duration to 6 months and 12 months,\* by state and race/ethnicity —

 National Immunization Survey, United States, 2004–2008<sup>†</sup>

		Breastfeeding							
	N C	Ir	nitiation	6	months	12 months			
State, Race/Ethnicity	respondents	%	(95% Cl <sup>§</sup> )	%	(95% CI)	%	(95% CI)		
Alabama									
Hispanic	131	72.0	(63.0-81.0)	31.7	(22.4-41.0)	15.5	(8.5-22.5)		
White, non-Hispanic	1,161	65.7	(62.0-69.4)	31.2	(28.0-34.4)	13.8	(11.6–16.0)		
Black, non-Hispanic	332	34.0	(27.8–40.2)¶	14.1	(9.8–18.4) <sup>¶</sup>	5.0	(2.4–7.6)¶		
Alaska									
Hispanic	108	78.1	(68.7–87.5) <sup>¶</sup>	46.0	(34.9–57.1) <sup>¶</sup>	26.5	(17.5–35.5)		
White, non-Hispanic	662	89.8	(87.0–92.6)	58.8	(54.4–63.2)	33.1	(29.1–37.1)		
Black, non-Hispanic	**		_		_		_		
Arizona									
Hispanic	805	81.4	(77.9–84.9)	42.1	(38.0–46.2)	23.1	(19.5–26.7)		
White, non-Hispanic	1,015	84.9	(82.0-87.8)	50.8	(47.0–54.6)	23.1	(17.1–29.1)		
Black, non-Hispanic	—		_				_		
Arkansas									
Hispanic	167	75.1	(67.2–83.0)	36.6	(28.0–45.2)	15.6	(9.2–22.0)		
White, non-Hispanic	990	66.3	(62.0–70.6)	30.8	(27.1–34.5)	12.8	(10.3–15.3)		
Black, non-Hispanic	150	35.6	(26.7–44.5)¶	12.5	(6.3–18.7)¶	3.7	(0.4–7.0)¶		
California									
Hispanic	3,020	84.8	(82.7–86.9)	51.4	(48.4–54.4)¶	28.3	(25.6–31.0)¶		
White, non-Hispanic	2,068	86.3	(83.0–89.6)	61.4	(57.3–65.5)	33.8	(30.1–37.5)		
Black, non-Hispanic	263	66.7	(57.8–75.6)¹	28.5	(20.1–36.9)1	12.3	(6.2–18.4)1		
Colorado			(		(				
Hispanic	321	78.5	(72.7-84.3)1	38.9	(32.1-45.7)"	17.2	(11.9–22.5)"		
White, non-Hispanic	1,002	89.4	(86.8–92.0)	57.6	(53.2–62.0)	30.1	(26.1–34.1)		
Black, non-Hispanic	—						_		
Connecticut	242	74.0			(22.2.42.42.4)	20.4	(440.060)		
Hispanic	212	76.8	(70.2-83.4)	35./	(28.8–42.6)"	20.1	(14.2-26.0)		
White, non-Hispanic	8/1	/8.3	(74.9-81.7)	45.8	(42.1-49.5)	22.4	(19.4–25.4)		
Black, non-Hispanic	12	66.8	(54.7–78.9)	29.8	(17.9–41.7)"	18.4	(8.1–28.7)		
Delaware	222	74.4	((0.0.00.0)	20.4	(21 5 45 2)	10.6	(141 251)		
	233	74.4	(68.2-80.6)"	38.4	(31.5 - 45.3)	19.6	(14.1 - 25.1)		
Risch non-Hispanic	813	07.0 59.3	(63.2-72.0)	3/./	(33.0-41.8) (10.7, 33.0)¶	10.9	(14.0-19.8)		
District Of Columbia	213	50.5	(30.3-00.1)	20.5	(19.7-32.9)"	11.0	(0.0-13.2)*		
Hispanic	220	02 7	(79 4 90 0)¶	516	(171 619)	26.5	(20.6, 12.1)		
White non Hispanic	239	03./	(76.4-69.0)"	54.0 79.0	(47.4-01.6)"	42.0	(29.0-45.4)		
	714	5/0	(93.3-98.3)	76.9	(73.4-82.4)	42.0	(37.7-40.3)		
Elorida	/14	54.0	(30.0–39.0)*	20.5	(23.0-30.0)*	11.0	(0.0-13.4)*		
Hispanic	1 380	80.5	(76 7_84 3)¶	40.1	(35 3_44 0)	21.7	(17 5_25 0)		
White non-Hispanic	1,580	72 A	(70.7-64.3)*	37.7	(33.3 - 44.9) (34.0 - 41.4)	18.2	(17.3-23.9) (15.2-21.2)		
Black pop-Hispanic	649	63.3	(00.0-70.2) (56.4-70.2)¶	30.2	(33.0-36.5)¶	14.7	(13.2-21.2)		
Georgia	049	05.5	(30.4-70.2)	50.2	(23.9-30.3)	14.7	(9.0-19.0)		
Hispanic	318	76 5	(70 5-82 5)	42.9	(35.7_50.1)	21.7	(15 5_27 9)		
White non-Hispanic	1 231	70.5	(67 3_75 9)	38.1	(34.2_42.0)	17.2	$(13.5 \ 27.5)$ $(14.5 \ 19.9)$		
Black non-Hispanic	498	53.2	(07.5 7 5.5) $(47.2 - 59.2)^{\$}$	27.3	(22 1-32 5) <sup>¶</sup>	11.2	(78–158) <sup>¶</sup>		
Hawaii	190	55.2	(17.2 35.2)	27.5	(22.1 52.5)	11.0	(7.0 15.0)		
Hispanic	239	87.8	(82 4-92 3)	53.5	(46.2 - 60.8)	31.3	(24 7-37 9)		
White, non-Hispanic	232	84.3	(78.5-90.1)	58.0	(50.0-66.0)	40.6	(33.2-48.0)		
Black, non-Hispanic			_		_				
Idaho									
Hispanic	171	80.2	(73.4-87.0)	46.1	(38.3–53.9) <sup>¶</sup>	20.4	(14.3-26.5)		
White, non-Hispanic	843	85.4	(82.7–88.1)	55.2	(51.4–59.0)	25.4	(22.3–28.5)		
Black, non-Hispanic	_		_		_		_		
Illinois									
Hispanic	893	77.6	(73.6-81.6)	42.6	(37.9–47.3)	20.3	(16.4-24.2)		
White, non-Hispanic	1.819	73.1	(69.8–76.4)	41.5	(38.1–44.9)	18.4	(15.8–21.0)		
Black, non-Hispanic	649	45.9	(40.5–51.3) <sup>¶</sup>	24.9	(20.1–29.7) <sup>¶</sup>	9.1	(6.2–12.0)¶		
Indiana									
Hispanic	297	72.3	(64.4-80.2)	34.2	(26.4-42.0)	22.1	(15.0-29.2)		
White, non-Hispanic	1.656	66.8	(63.2–70.4)	36.1	(32.9–39.3)	18.1	(15.7–20.5)		
Black, non-Hispanic	270	60.9	(52.0–69.8)	29.5	(20.8–38.2)	11.7	(5.9–17.5) <sup>¶</sup>		
lowa			,				,,		
Hispanic	125	79.5	(71.0-88.0)	40.7	(31.2–50.2)	19.7	(12.3–27.1)		
White, non-Hispanic	979	71.7	(68.4–75.0)	39.5	(36.0-43.0)	17.9	(15.3–20.5)		
Black, non-Hispanic	_		_		_		_		

See footnotes at end of table.

TABLE 2. (*Continued*) Prevalence of breastfeeding initiation and duration to 6 months and 12 months,\* by state and race/ ethnicity — National Immunization Survey, United States, 2004–2008<sup>†</sup>

				Breas	tfeeding		
	No. of	In	itiation	6	months	12	months
State, Race/Ethnicity	respondents	%	(95% Cl <sup>§</sup> )	%	(95% CI)	%	(95% Cl)
Kansas							
Hispanic	279	76.2	(69.9-82.5)	38.4	(30.9-45.9)	18.4	(12.3–24.5)
White, non-Hispanic	1,238	76.9	(73.7-80.1)	42.8	(39.4-46.2)	19.8	(17.2–22.4)
Black, non-Hispanic	55	63.9	(48.4-79.4)	32.8	(17.6-48.0)	19.7	(5.4-34.0)
Kentucky							
Hispanic	80	65.8	(52.0–79.6)	32.3	(21.1-43.5)	10.8	(4.0–17.6)
White, non-Hispanic	1,154	54.8	(51.3–58.3)	26.1	(23.3–28.9)	12.7	(10.6–14.8)
Black, non-Hispanic	94	36.4	(25.8–47.0) <sup>¶</sup>	11.1	(4.6–17.6) <sup>¶</sup>	2.8	(0.4–6.0) <sup>¶</sup>
Louisiana							
Hispanic	156	58.4	(47.1–69.7)	22.4	(15.0–29.8)	9.8	(5.0–14.6)
White, non-Hispanic	1,290	59.8	(56.3–63.3)	24.4	(21.8–27.0)	10.9	(9.1–12.7)
Black, non-Hispanic	556	31.8	(27.1–36.5) <sup>¶</sup>	13.6	(10.1–17.1) <sup>¶</sup>	3.8	(2.1–5.5) <sup>¶</sup>
Maine							
Hispanic	_		_		_		_
White, non-Hispanic	1,032	76.2	(73.1–79.3)	45.9	(42.5–49.3)	26.7	(23.8–29.6)
Black, non-Hispanic	—		_				_
Maryland							
Hispanic	284	84.4	(78.1–90.7)	46.6	(38.6–54.6)	23.4	(16.8–30.0)
White, non-Hispanic	1,191	78.0	(74.4–81.6)	46.8	(42.8–50.8)	23.7	(20.4–27.0)
Black, non-Hispanic	876	63.6	(58.4–68.8)¶	35.1	(30.2–40.0)¶	18.6	(14.6–22.6)
Massachusetts							
Hispanic	246	77.2	(69.5–84.9)	30.8	(22.7–38.9)¶	12.4	(7.5–17.3) <sup>¶</sup>
White, non-Hispanic	1,077	76.7	(73.2–80.2)	45.3	(41.5–49.1)	22.5	(19.4–25.6)
Black, non-Hispanic	149	65.9	(52.9–78.9)	52.6	(39.3–65.9)	26.1	(14.1–38.1)
Michigan	222		(50.0.75.0)		(22.4.20.2)	10.0	(11.0.05.7)
Hispanic	220	67.0	(58.2-75.8)	30.2	(22.1-38.3)	18.8	(11.9–25.7)
White, non-Hispanic	1,14/	68.5	(64.9-72.1)	35.9	(32.6-39.2)	17.2	(14.8–19.6)
Black, non-Hispanic	612	50.9	(43.1–58./)"	22.7	(16.1–29.3)"	10.4	(5.4–15.4)"
Hispanic	122	04.2	(77.2, 01.4)	40.2	(20.4 50.2)	20.0	(21.1.29.0)
Hispanic White new Usersein	132	84.3	(77.2-91.4)	49.3	(39.4-59.2)	30.0	(21.1-38.9)
Risch non-Hispanic	1,080	80.2	(77.0-83.4) (82.7.07.5)¶	47.7	(44.1-51.3)	23.0	(20.7 - 20.5)
ыаск, поп-пізрапіс Mississippi		90.0	(03.7-97.3)"	02.5	(40.0-70.2)"	55.5	(19.5-47.7)
Hispanic	62	65 4	(470 020)	21.0	(16 / 17 2)	15.6	(20.20.2)
White non Hispanic	03	59.4	(47.0-03.0)	24.7	(10.4 - 47.2)	10.4	(3.0-20.2)
Black non-Hispanic	540	35.4	(34.4-02.4)	15.3	(21.4-28.0) (11.6-19.0)¶	5.7	(3.2 - 12.0)
Missouri	540	55.4	(30.0-40.2)	15.5	(11.0-19.0)	5.7	(3.4-0.0)
Hispanic	135	72.6	(62 6-82 6)	373	(27.4 - 47.2)	13.0	(7.5 - 20.3)
White non-Hispanic	1 325	67.7	(64 3-71 1)	34.2	(21.1-37.3)	16.0	(136–184)
Black non-Hispanic	196	56.9	(01.3 71.1) (48.2–65.6)¶	27.1	(19.0-35.2)	12.4	(65-183)
Montana	150	50.9	(40.2 05.0)	27.1	(19.0 33.2)	12.4	(0.5 10.5)
Hispanic	88	75.5	(65.1-85.9) <sup>¶</sup>	53.1	(41.1-65.1)	28.3	(16.9-39.7)
White, non-Hispanic	1.043	87.0	(84.4-89.6)	56.7	(53.2–60.2)	31.2	(28.0-34.4)
Black, non-Hispanic			_				
Nebraska							
Hispanic	185	82.5	(76.3-88.7)	51.5	(43.4–59.6)	27.5	(19.7–35.3)
White, non-Hispanic	974	76.6	(73.3–79.9)	45.8	(42.2-49.4)	22.3	(19.5–25.1)
Black, non-Hispanic	_		_		_		_
Nevada							
Hispanic	576	80.8	(77.2-84.4)	43.8	(39.2-48.4)	21.2	(17.4–25.0)
White, non-Hispanic	707	77.4	(73.5-81.3)	45.7	(41.3-50.1)	22.8	(19.2–26.4)
Black, non-Hispanic	63	56.2	(42.7–69.7) <sup>¶</sup>	22.4	(11.4–33.4)¶	9.0	(1.3–16.7) <sup>¶</sup>
New Hampshire							
Hispanic	73	73.5	(59.6-87.4)	41.7	(28.8-54.6)	24.4	(13.7–35.1)
, White, non-Hispanic	1,048	77.8	(74.7-80.9)	50.2	(46.8–53.6)	26.6	(23.7–29.5)
Black, non-Hispanic	_		_		_		_
New Jersey							
Hispanic	760	81.0	(76.2–85.8) <sup>¶</sup>	45.4	(39.1–51.7)	22.4	(17.2–27.6)
White, non-Hispanic	921	70.7	(66.9–74.5)	43.8	(39.8-47.8)	19.9	(16.6–23.2)
Black, non-Hispanic	422	67.5	(59.5–75.5)	40.0	(31.2-48.8)	15.1	(8.2–22.0)
New Mexico			· · ·				
Hispanic	843	75.5	(71.6–79.4) <sup>¶</sup>	39.5	(35.4–43.6) <sup>¶</sup>	22.5	(19.0–26.0) <sup>¶</sup>
White, non-Hispanic	583	87.2	(83.2-91.2)	57.7	(52.4-63.0)	32.5	(27.9-37.1)
Black, non-Hispanic	_		_		_		_

See footnotes at end of table.

TABLE 2.	(Continued)	Prevalence of	of breastfeeding	initiation and	l duration to 6	6 months and	12 months,* b	y state and ra	ace/
ethnicity	— National	Immunizatio	on Survey, United	States, 2004-	-2008†				

		Breastfeeding								
	N (	In	itiation	6	months	12 months				
State, Race/Ethnicity	No. of respondents	%	(95% Cl <sup>§</sup> )	%	(95% CI)	%	(95% CI)			
New York										
Hispanic	701	80.3	(77.0–83.6) <sup>¶</sup>	47.4	(43.1–51.7)	27.4	(23.6-31.2)			
White, non-Hispanic	1,551	73.1	(70.5–75.7)	47.5	(44.7-50.3)	26.4	(24.0-28.8)			
Black, non-Hispanic	394	67.8	(61.6–74.0)	35.6	(30.1–41.1) <sup>¶</sup>	18.8	(14.3–23.3) <sup>¶</sup>			
North Carolina										
Hispanic	197	84.6	(78.8–90.4)¶	48.1	(40.3–55.9) <sup>¶</sup>	23.3	(16.8–29.8)			
White, non-Hispanic	862	72.4	(68.3–76.5)	39.5	(35.6-43.4)	20.1	(17.1–23.1)			
Black, non-Hispanic	186	49.8	(41.4–58.2) <sup>¶</sup>	19.5	(13.3–25.7) <sup>¶</sup>	11.3	(6.3–16.3) <sup>¶</sup>			
North Dakota										
Hispanic	60	71.3	(58.4–84.2)	40.9	(27.2–54.6)	17.2	(7.2–27.2)			
White, non-Hispanic	1,159	72.8	(69.8–75.8)	40.9	(37.8–44.0)	19.2	(16.8–21.6)			
Black, non-Hispanic	—		_		_		_			
Ohio										
Hispanic	179	61.3	(51.0–71.6)	34.2	(24.4–44.0)	15.3	(7.9–22.7)			
White, non-Hispanic	1,758	64.7	(61.5–67.9)	33.4	(30.5–36.3)	14.7	(12.7–16.7)			
Black, non-Hispanic	343	54.1	(46.3–61.9)1	23.4	(16.9–29.9)¶	9.5	(5.5–13.5)1			
Jklahoma			()¶		()					
Hispanic	242	66.6	(58.7–74.5)1	31.4	(24.8–38.0)	15.9	(11.2–20.6)			
white, non-Hispanic	778	73.1	(69.1-77.1)	35.8	(31.9-39.7)	15.1	(12.4–17.8)			
Black, non-Hispanic	100	52.4	(40.8-64.0)1	21.2	(12.5–29.9)1	13.7	(6.2–21.2)			
Jregon	224	07.2	(02 7 01 0)	(1)	(57 ( 70 0)	41.0	(25.2.40.5)			
Hispanic	234	87.3	(82.7-91.9)	64.2	(57.6-70.8)	41.9	(35.3-48.5)			
Risch non-Hispanic	701	90.5	(87.0-93.4)	01./	(57.2-00.0)	35.8	(31.7-39.9)			
Black, non-Hispanic			_		_		_			
Hispanic	416	72.1	(67 2 79 0)	22.4	(26.0.20.0)	146	(0.0.10.2)			
Mispanic White non Hispanic	410	/ 5. I	(07.3-70.9)	55.4 40.1	(20.9 - 39.9)	14.0	(9.9-19.5)"			
	600	54.2	(03.8-71.0) (49.1_60.5)¶	40.1	(37.2 - 43.0)	20.2	(17.0-22.0)			
Phode Island	090	54.5	(40.1-00.3)*	23.9	(10.9-20.9)*	10.0	(7.2-14.4)*			
Hispanic	250	75 5	(69 3_81 7)¶	323	(25.1_39.5)¶	17 5	(11 7_23 3)			
White non-Hispanic	905	68.4	(64.7_72.1)	40.6	(26.9_44.3)	17.5	(11.7 23.5) (16.0-21.6)			
Black non-Hispanic	68	71.8	(58 9_84 7)	38.6	(24.8-52.4)	17.0	(10.0-21.0) (67-277)			
South Carolina	00	71.0	(50.5 04.7)	50.0	(24.0 32.4)	17.2	(0.7 27.7)			
Hispanic	187	76.7	(69 6-83 8)	46.4	(37.8-55.0) <sup>¶</sup>	21.8	(14 1-29 5)			
White non-Hispanic	1 105	71.0	(67 7-74 3)	36.3	(33.0-39.6)	15.8	(134 - 182)			
Black, non-Hispanic	325	43.3	$(37.2 - 49.4)^{\P}$	15.9	$(11.7-20.1)^{\text{9}}$	4.6	(2.1–7.1) <sup>¶</sup>			
South Dakota	525	1010	(0)12 (0)1)		(, 2011)		(, ,,			
Hispanic	75	78.3	(67.8-88.8)	45.4	(32.1-58.7)	23.9	(11.8-36.0)			
White, non-Hispanic	1,193	76.4	(73.3–79.5)	44.6	(41.2–48.0)	20.7	(18.0–23.4)			
Black, non-Hispanic	_		_		_		_			
Tennessee										
Hispanic	241	68.6	(58.5–78.7)	38.8	(29.0-48.6)	20.1	(12.3–27.9)			
White, non-Hispanic	1,617	66.2	(62.5-69.9)	33.5	(30.3–36.7)	15.2	(13.0–17.4)			
Black, non-Hispanic	467	45.4	(38.4–52.4) <sup>¶</sup>	21.1	(15.4–26.8) <sup>¶</sup>	8.1	(3.9–12.3) <sup>¶</sup>			
Texas										
Hispanic	4,225	79.1	(76.9-81.3)	42.6	(39.8-45.4)	22.3	(19.9–24.7)			
White, non-Hispanic	1,995	76.5	(73.1–79.9)	43.1	(39.5-46.7)	19.8	(17.1-22.5)			
Black, non-Hispanic	715	54.7	(48.3–61.1) <sup>¶</sup>	24.6	(19.3–29.9) <sup>¶</sup>	7.9	(5.4–10.4) <sup>¶</sup>			
Utah										
Hispanic	150	88.9	(83.3-94.5)	49.7	(40.6–58.8) <sup>¶</sup>	30.5	(22.1–38.9)			
White, non-Hispanic	970	89.4	(86.8–92.0)	63.7	(60.0-67.4)	28.3	(25.0-31.6)			
Black, non-Hispanic	—		_		_					
/ermont										
Hispanic	—		_		_		_			
White, non-Hispanic	959	83.0	(80.0-86.0)	56.6	(52.8–60.4)	34.6	(31.2–38.0)			
Black, non-Hispanic	—		_		_					
/irginia										
Hispanic	194	80.9	(74.2–87.6)	50.3	(42.0–58.6)	26.1	(19.2–33.0)			
White, non-Hispanic	994	78.3	(74.6-82.0)	47.5	(43.5–51.5)	22.7	(19.7–25.7)			
Black, non-Hispanic	190	60.6	(52.5–68.7) <sup>¶</sup>	33.7	(26.0–41.4) <sup>¶</sup>	13.1	(7.7–18.5) <sup>¶</sup>			
Washington										
Hispanic	510	88.5	(84.9–92.1)	57.0	(51.4–62.6)	31.5	(26.1–36.9)			
White, non-Hispanic	1,597	91.0	(89.0–93.0)	59.0	(55.6–62.4)	34.2	(31.1–37.3)			
Black, non-Hispanic	54	73.5	(59.5–87.5) <sup>¶</sup>	49.9	(33.9-65.9)	26.8	(12.9-40.7)			

See footnotes at end of table.

		Breastfeeding							
	No. of	In	itiation	6	months	12 months			
State, Race/Ethnicity	respondents	%	(95% Cl <sup>§</sup> )	%	(95% CI)	%	(95% CI)		
West Virginia									
Hispanic	52	67.8	(53.1-82.5)	34.1	(19.1–49.1)	7.4	(1.0–13.8) <sup>¶</sup>		
White, non-Hispanic	1,251	56.8	(53.4-60.2)	26.4	(23.7-29.1)	12.9	(10.9–14.9)		
Black, non-Hispanic	_		_		_		_		
Wisconsin									
Hispanic	244	70.0	(61.3–78.7)	40.6	(31.7-49.5)	21.6	(14.3-28.9)		
White, non-Hispanic	1,265	76.6	(73.5–79.7)	44.5	(41.0-48.0)	20.8	(17.9–23.7)		
Black, non-Hispanic	171	46.6	(36.8–56.4) <sup>¶</sup>	19.5	(12.4–26.6) <sup>¶</sup>	7.8	(2.8–12.8) <sup>¶</sup>		
Wyoming									
Hispanic	154	81.4	(74.3-88.5)	43.3	(34.9-51.7)	21.6	(14.9-28.3)		
White, non-Hispanic	1,007	84.1	(81.4-86.8)	46.4	(42.9-49.9)	21.4	(18.7-24.1)		
Black, non-Hispanic	—		—		_		—		

TABLE 2. (*Continued*) Prevalence of breastfeeding initiation and duration to 6 months and 12 months,\* by state and race/ ethnicity — National Immunization Survey, United States, 2004–2008<sup>†</sup>

\* Breastfeeding initiation was determined based on response to the question, "Was [child] ever breastfed or fed breast milk?" Breastfeeding duration was determined based on response to the question, "How long was [child] breastfed or fed breast milk?" (NIS 2004–2005) or "How old was [child's name] when [child's name] completely stopped breastfeeding or being fed breast milk?" (NIS 2006–2008).

<sup>†</sup> Among children born during 2003–2006.

§ Confidence interval.

<sup>¶</sup> Referent group is non-Hispanic whites. Estimate is statistically significant (p<0.05).

 $^{\$}$  Not available. Data were suppressed when sample size was <50.

non-Hispanic blacks and non-Hispanic whites was 35 percentage points (4). The results described in this report indicate that by 2003–2006, this difference had declined to 20 percentage points nationally. However, many states still have large differences, particularly in the southeastern United States, where 13 states had a prevalence of breastfeeding initiation that was  $\geq$ 20 percentage points different between non-Hispanic blacks and non-Hispanic whites.

National estimates for breastfeeding to 6 months also have increased consistently since 1990 (4). However, despite overall progress in breastfeeding duration, no improvement has been observed in reducing the difference between non-Hispanic blacks and non-Hispanic whites. In 1990, the difference

#### What is already known on the topic?

National estimates indicate that non-Hispanic black women are less likely to initiate breastfeeding and more likely to stop breastfeeding than Hispanic and non-Hispanic white women.

What is added by this report?

Differences in breastfeeding between Hispanics and non-Hispanic whites varied by state, and rates were lower among non-Hispanic blacks in almost all states.

What are the implications for public health practice?

Breastfeeding should be promoted through comprehensive clinical and social supports starting in pregnancy, and including the birth, delivery, and postpartum periods. in prevalence of breastfeeding to 6 months between non-Hispanic blacks and non-Hispanic whites was approximately 16 percentage points, the same as shown in this report for 2003–2006. Surveillance data for breastfeeding to 12 months are more limited and suggest modest increases nationally since 1999.

Many factors are associated with not breastfeeding, including younger maternal age, lower income, lower maternal education, and being unmarried (4). However, previous analyses, including analyses of NIS data, have shown that differences in breastfeeding between non-Hispanic blacks and non-Hispanic whites exist across most of these sociodemographic groups (5). For example, among women with a college degree, non-Hispanic blacks were less likely to breastfeed than non-Hispanic whites. Other possible contributors to the differences include lack of culturally relevant information and images of non-Hispanic black women breastfeeding, perceptions that breastfeeding is inferior to formula feeding, non-Hispanic black women returning to work sooner (where support for breastfeeding often is insufficient), lack of social or partner support, and lack of knowledge of the health benefits associated with breastfeeding (6).

The results of the analysis in this report, like previous national estimates, suggest that overall Hispanics have slightly higher rates of breastfeeding initiation than non-Hispanic whites (2). However, the analysis found that this relationship varied by state, with many states east of the Mississippi River having lower estimates among Hispanics compared with non-Hispanic whites. Some of this difference might be explained by acculturation and length of residence in the United States. Previous research has shown that the longer Hispanic women live in the United States, the less likely they are to breastfeed, and the more likely they are to perceive formula feeding as acceptable (7).

Numerous factors contribute to a woman's decision to breastfeed, including social and cultural norms, social support, guidance and support from health-care providers, work environment, and the media. The CDC Guide to Breastfeeding Interventions\*\* recommends various strategies to improve breastfeeding practices in many of these areas, allowing state and local communities to adapt the interventions that best meet their needs. A better understanding of the underlying factors contributing to the racial/ethnic differences in breastfeeding is needed to develop specific interventions for addressing the differences. In the meantime, directing some of these broader interventions at non-Hispanic black populations might help to reduce disparities in breastfeeding. For example, some studies have suggested that intention to breastfeed is lower among non-Hispanic black women because they are more comfortable with formula feeding (8).

The findings in this report are subject to at least three limitations. First, estimates do not control for other sociodemographic factors that might be associated with breastfeeding. For example, participation in WIC has been associated with lower breastfeeding rates, and non-Hispanic black women might be more likely to participate in WIC. However, previous analyses have shown that racial/ethnic differences in breastfeeding exist independent of other sociodemographic factors. Second, mothers were asked about their breastfeeding behaviors when their child was aged 19-35 months, which is after many women in the United States stop breastfeeding, and therefore might be subject to recall bias. However, mothers accurately recall initiation and duration of breastfeeding, especially when recall is within 3 years; whether accuracy of recall varies by race/ethnicity is unknown (9). Finally, NIS is a landline telephone survey; although statistical adjustments adequately compensate for noncoverage of households without





\* Breastfeeding initiation was determined based on response to the question, "Was [child] ever breastfed or fed breast milk?"

<sup>†</sup> Among children born during 2003–2006.

<sup>¶</sup> Data were suppressed when sample size was <50.

<sup>\*\*</sup> Available at http://www.cdc.gov/breastfeeding/pdf/breastfeeding\_ interventions.pdf.

<sup>&</sup>lt;sup>§</sup> Healthy People 2010 target for initiating breastfeeding.

landline telephones, some nonresponse and noncoverage bias might remain (10).

To continue to work toward reducing racial/ethnic disparities in breastfeeding, CDC is reassessing strategies for promoting and supporting breastfeeding among non-Hispanic black women. In December 2009, CDC hosted a meeting with a group of experts in the area of breastfeeding among non-Hispanic black women. Outcomes from the meeting and directions forward are being finalized.

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# Tick-Borne Encephalitis Among U.S. Travelers to Europe and Asia — 2000–2009

Tick-borne encephalitis virus (TBEV) is the most common arbovirus transmitted by ticks in Europe. Approximately 10,000 cases of tick-borne encephalitis (TBE) are reported annually in Europe and Russia (1). Although TBE is endemic in parts of China, information regarding its incidence is limited (1,2). TBEV is closely related to Powassan virus (POWV), another tick-borne flavivirus that is a rare cause of encephalitis in North America and Russia; TBEV and POWV can cross-react in serologic tests (3,4). Before 2000, two cases of TBE in North American travelers to Europe were reported (5,6). State health officials or clinicians send specimens from patients with unexplained encephalitis to CDC as part of routine surveillance and diagnostic testing. CDC recently reviewed all 2000-2009 laboratory records to identify cases of TBE among U.S. travelers; the five cases identified are summarized in this report. All five cases had TBEV or POWV immunoglobulin M (IgM) antibodies in serum and were confirmed as acute TBE cases by plaque-reduction neutralization tests against both viruses. All four patients who had traveled to Europe or Russia had biphasic illnesses (a common feature of TBE) and made nearly complete recoveries. The fifth patient, the first reported case of TBE in a U.S. traveler to China, had a monophasic illness with severe encephalitis and neurologic sequelae. Health-care providers should be aware of TBE, should counsel travelers about measures to reduce exposure to tick bites, and should consider the diagnosis of TBE in travelers returning from TBE-endemic countries with meningitis or encephalitis.

#### **Case Reports**

**Case 1.** On July 11, 2001, a previously healthy man aged 57 years was admitted to a Utah hospital with fever of 102.7°F (39.3°C), tachycardia, mental status changes, right arm tremors, and right-sided rigidity (Table 1). In June, he had traveled to eastern Russia where he noted having multiple tick bites. On June 26, 15 days before admission, he developed fever, myalgias, and cough, which improved with empiric antibiotics. Ten days before admission, the symptoms recurred and he was treated with intramuscular penicillin. Four days before admission, he developed headache, neck stiffness, and confusion, which progressed over

the next few days. On admission to the hospital, the patient was disoriented and stuporous. Cerebrospinal fluid (CSF) showed lymphocytic pleocytosis and elevated protein; bacterial cultures, herpes simplex virus (HSV), and enterovirus polymerase chain reaction (PCR) were negative. Brain magnetic resonance imaging (MRI) revealed left-sided cerebral edema with ischemic changes of the thalamus and striatum. The patient was diagnosed with encephalitis of unknown etiology and treated empirically with antibiotics and corticosteroids, with resolution of fever and recovery of normal mental status the next day. He returned home after 14 days with residual right-sided weakness and rigidity and impaired cognition. His motor symptoms resolved during the next 6 months; however, he continued to experience mild cognitive impairment. Serum collected on admission tested positive for TBEV IgM and TBEV-specific neutralizing antibodies (Table 2). Serologic tests for other arboviruses and pathogens\* were negative.

Case 2. On August 27, 2004, a previously healthy man aged 20 years was admitted to a Wyoming hospital with fever of 104.0°F (40.0°C), conjunctival injection, photophobia, and altered mental status (Table 1). During June-August, he had traveled in Siberia, Russia, and noted having multiple tick bites. On August 3, approximately 3 weeks before admission, he experienced fatigue, nausea, vomiting, and myalgias, which subsequently resolved. However, 8 days before admission, he developed fever and headache, which worsened until the day of admission. A CSF specimen collected on admission to the hospital showed pleocytosis and elevated protein; bacterial cultures and HSV and enterovirus PCR were negative. Brain MRI was normal. The patient was diagnosed with encephalitis of unknown etiology and treated empirically with antibiotics. He was hospitalized for 4 days and recovered fully. Serum collected on admission tested negative for TBEV IgM but positive for POWV IgM and TBEV-specific neutralizing antibodies (Table 2). Serologic tests for other arboviruses<sup>†</sup> and Borrelia burgdorferi were negative.

<sup>\*</sup>St. Louis encephalitis and West Nile viruses; *Borrelia burgdorferi*, *Leptospria*, and *Rickettsia*.

<sup>&</sup>lt;sup>†</sup>Cĥikungunya, dengue, Japanese encephalitis, snowshoe hare, Sindbis, and West Nile viruses.

TABLE 1. Characteristics of fiv	e tick-borne encephalitis	cases among U.S. travelers	— Europe and Asia, 2000–2009
		<b>J</b>	

Case no.	Age (yrs)	Sex	Travel destination	Dates of travel	Tick bite noted	Date of illness onset	Biphasic illness	Date of neurologic symptom onset	Clinical syndrome	CSF* WBC <sup>†</sup>	CSF protein <sup>§</sup>	Neuroimaging findings	Outcome
1	57	М	Russia	Jun 2001	Yes	Jun 26	Yes	Jul 7	Encephalitis	112	84	Cerebral edema with ischemic changes in the thalamus and striatum	Mild cognitive impairment
2	20	М	Russia	Jun–Aug 2004	Yes	Aug 3	Yes	Aug 19	Encephalitis	40	61	Normal	Recovered
3	46	М	Sweden	Jul–Aug 2006	Yes	Jul 25	Yes	Aug 5	Meningitis	11	55	Normal	Recovered
4	15	F	China	Jun–Jul 2007	No	Jul 4	No	Jul 9	Encephalitis	111	NA¶	Basal ganglia and thalamic lesions	Neurologic sequelae
5	14	Μ	Czech Republic and Russia	Jun–Aug 2008	Yes	Aug 22	Yes	Aug 30	Meningitis	54	71	Normal	Recovered

\* Cerebrospinal fluid.

<sup>†</sup> White blood cells. Normal range: 0–5 WBC/mm<sup>3</sup>.

§ Normal range: 15–45 mg/dL.

<sup>¶</sup> Not available.

TABLE 2. Laboratory results for five tick-borne encephalitis cases among U.S. travelers — Europe and Asia, 2000–2009

		Cerebrospinal flui	d	Serum						
Case no.	Day	TBEV* IgM <sup>†</sup>	POWV <sup>§</sup> IgM	Day	TBEV IgM	POWV IgM	TBEV PRNT <sup>¶</sup>	POWV PRNT		
1	15	Negative	Negative	15	Positive	Nonspecific**	5,210	<20		
2	23	Negative	Negative	23	Negative	Positive	160	10		
3	22	Negative	Positive	25	Positive	Positive	2,560	40		
4	16	Negative	Positive	16	Negative	Positive	1,280	320		
5	14	Negative	Positive	39	Positive	Positive	2,560	160		

\* Tick-borne encephalitis virus.

<sup>+</sup> Immunoglobulin M.

§ Powassan virus.

<sup>¶</sup> Plaque reduction neutralization test. TBEV PRNT was performed using a chimeric virus comprised of the TBEV Far Eastern subtype (Sofjin strain) prM and E antigens inserted into a dengue virus type 4 backbone. A ratio of TBEV PRNT: POWV PRNT titers of  $\geq$ 4 provides laboratory confirmation of a TBEV infection.

\*\* Nonspecific reaction is defined as a sample that reacts with the negative antigen such that the result using the viral antigen cannot be interpreted.

Case 3. On August 19, 2006, a previously healthy man aged 46 years was admitted to a hospital in Connecticut with fever of 102.9°F (39.4°C) and headache (Table 1). During July-August, he had traveled in Sweden and noted having numerous tick bites. On July 25, approximately three and a half weeks before admission, he developed fever and diarrhea requiring a brief hospitalization. His symptoms resolved, but 2 weeks before admission, after returning to the United States, he developed headaches and fever, which subsequently worsened. On admission to the Connecticut hospital, his physical examination was remarkable for diminished deep tendon reflexes bilaterally in the lower extremities. A CSF specimen showed mild pleocytosis and elevated protein. Brain MRI was normal. He was diagnosed with meningitis of unknown etiology, was hospitalized for 3 days, and recovered fully. Serum collected on admission tested

positive for POWV IgM, TBEV IgM, and TBEV-specific neutralizing antibodies (Table 2).

Case 4. On July 18, 2007, a previously healthy girl aged 15 years with acute encephalitis of unknown etiology was airlifted from a hospital in Beijing, China, and admitted to a hospital in New York City (Table 1). During June and July, she had traveled with classmates in Tianjin Province, China. She had no known tick bites. On July 4, she developed fever and diarrhea and was admitted to a local hospital. She was transferred to the Beijing hospital on July 9 for persistent fever and confusion. HSV PCR on CSF and tests for Japanese encephalitis virus antibodies in serum were negative. During the next week in the Beijing hospital, despite empiric treatment with antibiotics and acyclovir, her mental status worsened, and she experienced two seizures and developed Bell's palsy. On admission to the New York City hospital,

her physical examination showed aphasia, hemiplegia, and hyperreflexia. A specimen of CSF showed pleocytosis, and MRI revealed bilateral thalamic and basal ganglia lesions. After a prolonged hospitalization, she was transferred to a rehabilitation facility. She fully recovered cognitive function, but had residual severe dysarthria and mild bradykinesia in the limbs, which improved with dopamine-agonist medications. Serum collected on July 20 tested negative for TBEV IgM but positive for POWV IgM and TBEV-specific neutralizing antibodies (Table 2). Serologic tests for other arboviruses<sup>§</sup> were negative.

Case 5. On September 2, 2008, a previously healthy boy aged 14 years was admitted to a hospital in the District of Columbia with fever, headache, and vomiting. During June-August, he had traveled in the Czech Republic and Siberia, Russia, and noted having multiple tick bites. Eleven days before admission, he developed fever and sore throat, which resolved with oral penicillin. Three days before admission, he developed fever and headache, prompting his return home. During the first 3 days of hospitalization, his fever and headache persisted and he developed neck stiffness and abdominal pain. A specimen of CSF showed pleocytosis and elevated protein; bacterial cultures and HSV and enterovirus PCR were negative. Brain MRI was normal. He was diagnosed with meningitis of unknown etiology; treatment included empiric antibiotics and acyclovir. He fully recovered after an 8-day hospitalization. After consultation with CDC, a convalescent serum sample was collected on September 30, and tested positive for POWV IgM, TBEV IgM, and TBEV neutralizing antibodies (Table 2). Serologic tests for other arboviruses and pathogens<sup>¶</sup> were negative.

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#### **Editorial Note**

TBE is not a nationally notifiable disease in the United States. However, CDC assists state health departments and clinicians with the diagnosis of possible arboviral diseases, including TBE. Although testing for TBEV is available in certain specialized laboratories outside CDC, these five cases are the only TBE cases known to have been diagnosed in the United States during 2000–2009.

Of the four U.S. patients who had traveled to Europe or Russia, all noted having tick bites and had biphasic illnesses. Two had encephalitis and two had meningitis; none had neurologic sequelae. The fifth patient, who traveled to China, had a monophasic illness with severe encephalitis and neurologic sequelae and no history of tick bite. Despite the variable and cross-reactive TBEV and POWV IgM antibody findings, the virus-specific neutralizing antibody results support the diagnosis of TBE for all five cases.

TBEV includes three subtypes: European, Siberian, and Far Eastern. During the past decade, both the apparent geographic distribution and reported incidence of TBE have increased (1,7,8). TBEV is known to be endemic from western Europe through Siberia and parts of Asia including certain areas in China (1,2). However, no cases have been reported previously from Tianjin Province, China, and this is the first reported case of TBE in a U.S. traveler returning from China. Approximately one third of persons infected with TBEV develop clinical symptoms and about two thirds of patients recall having a tick bite (9). Typically, patients infected with the European subtype have a biphasic illness. The first (viremic) phase consists of a nonspecific febrile illness, often followed by a remission of symptoms (7). Approximately one third of these patients then develop the second, more severe (neuroinvasive) phase

<sup>&</sup>lt;sup>§</sup> Chikungunya, dengue, Japanese encephalitis, snowshoe hare, St. Louis encephalitis, and West Nile viruses.

<sup>&</sup>lt;sup>9</sup>California serogroup, eastern equine encephalitis, St. Louis encephalitis, and western equine encephalitis viruses; *Borrelia burgdorferi*, Epstein-Barr virus, *Ehrlichia*, *Francisella tularensis*, and *Rickettsia*.

of illness, resulting in meningitis (approximately 50%), encephalitis (approximately 40%), or myelitis (approximately 10%) (*7,9*). The case-fatality ratio for the European and Siberian subtypes is approximately 1%–3%. The Far Eastern TBEV subtype typically causes a more severe monophasic illness with a case-fatality ratio of approximately 20% and neurologic sequelae in up to 80% of survivors (*7*).

For unvaccinated travelers to areas in which TBE is endemic, the estimated risk for TBE during TBEV-transmission season is approximately one case per 10,000 person-months (10). This estimate of risk varies according to the degree of unprotected outdoor exposure in forested areas. Cases generally occur during March and November (10). No specific antiviral treatment for TBE exists (8). The main preventive measure is avoiding tick bites\*\* by applying insect repellents to clothing and exposed skin; wearing long-sleeved shirts, long pants, socks, and boots; and tucking pant cuffs into socks.<sup>††</sup> No TBE vaccines are licensed or available in the United States, but two inactivated TBEV vaccines are licensed and available in Europe and Canada (7).

TBE should be suspected in a patient with evidence of meningitis or encephalitis who recently returned from a TBE-endemic country. Encephalitis or meningitis caused by TBE and other viruses cannot reliably be distinguished clinically. Health-care providers should contact their state or local health department for diagnostic assistance. TBEV testing can be performed at CDC's Special Pathogens Branch (telephone: 404-639-1115), and TBEV and other arboviral disease testing can be performed at CDC's Arboviral Diseases Branch (telephone: 970-221-6400).

#### What is already known on this topic?

Tick-borne encephalitis (TBE) is endemic in parts of Europe and Asia, and rare cases in travelers from North America to Europe have been reported.

#### What is added by this report?

A search of CDC laboratory records identified five cases of TBE in U.S. travelers during 2000–2009; four of the cases experienced a biphasic illness with a nonspecific febrile illness before onset of neurologic symptoms. This report notes for the first time TBE in a U. S. traveler returning from China.

#### What are the implications for public health practice?

Health-care providers should be aware of the risk for TBE, should counsel travelers about measures to reduce exposure to tick bites during travel, and should consider the diagnosis of TBE in travelers returning from TBE-endemic countries with meningitis or encephalitis.

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<sup>\*\*</sup> Recommendations regarding prevention of TBE in travelers are available at http://wwwn.cdc.gov/travel/yellowbook/2010/ chapter-5/tick-borne-encephalitis.aspx.

<sup>&</sup>lt;sup>††</sup> Updated recommendations regarding protection against tick bites are available at http://wwwn.cdc.gov/travel/yellowbook/2010/ chapter-2/protection-against-mosquitoes-ticks-insects-arthropods. aspx.

## Announcements

### Pre-Decision Briefs for Public Health Action in the Aftermath of the Earthquake in Haiti

As part of CDC efforts to assist the Haitian Ministry of Public Health and Population in the aftermath of the January 12, 2010, earthquake, and to prepare for possible outbreaks or epidemics of infectious disease, subject matter experts have prepared a series of pre-decision briefs for public health action. The briefs focus on specific high-priority infectious disease threats (i.e., acute watery diarrhea, bloody diarrhea, dengue fever, diphtheria, human immunodeficiency virus/acquired immunodeficiency syndrome, leptospirosis, malaria, measles, meningococcal disease, tetanus, tuberculosis, typhoid, and paratyphoid fever). These briefs have been tailored to the current situation in Haiti and are available at http://emergency.cdc.gov/disasters/earthquakes/haiti/ pre-decision\_briefs.asp.

The briefs provide key recommendations with relevant background information for decision makers in the Haiti Ministry of Public Health and Population, the U.S. government, and other organizations. Each of the briefs has been reviewed by subject matter experts from outside the agency, including representatives of the Haitian Ministry of Public Health and Population and the World Health Organization.

#### FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

## Percentage of Adults Aged ≥18 Years Who Were Current Cigarette Smokers,\* by Race/Ethnicity<sup>†</sup> — National Health Interview Survey, United States, 2004–2008<sup>§</sup>



- \* Current smokers have smoked at least 100 cigarettes in their lifetime and currently smoke every day or some days. Unknowns were not included in the denominators when calculating percentages.
- <sup>+</sup> Race refers to persons who indicated only a single race group and are not of Hispanic ethnicity. Persons of Hispanic ethnicity might be of any race or combination of races.
- <sup>§</sup> Estimates are age adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 18–24 years, 25–44 years, 45–64 years, and ≥65 years. Estimates are based on household interviews of a sample of the civilian, noninstitutionalized U.S. population.
- <sup>¶</sup> 95% confidence interval.
- \*\* All adults includes other races not shown separately and multiple races.

During 2004–2008, 20.5% of adults aged  $\geq$ 18 years were current cigarette smokers. American Indian / Alaska Native adults (32.7%) were most likely to currently smoke cigarettes, and Asian adults (10.4%) were least likely to be current smokers.

**SOURCE:** Barnes PM, Adams PF, Powell-Griner E. Health characteristics of the American Indian and Alaska Native adult population, United States, 2004–2008. National health statistics reports; no. 20. Hyattsville, MD: National Center for Health Statistics; 2010. Available at http://www. cdc.gov/nchs/products/nhsr.htm.

## Notifiable Diseases and Mortality Tables

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending March 20, 2010 (11th week)\*

	<b>C</b>	6	5-year	Total cases reported for previous years					States reporting cases		
Disease	week	2010	weekiy average <sup>†</sup>	2009	2008	2007	2006	2005	during current week (No.)		
Anthrax				1	_	1	1	_			
Botulism, total	_	8	2	101	145	144	165	135			
foodborne	_	_	0	11	17	32	20	19			
infant	_	7	2	66	109	85	97	85			
other (wound and unspecified)	_	1	0	24	19	27	48	31			
Brucellosis	3	14	2	113	80	131	121	120	AZ (2), CA (1)		
Chancroid	_	16	1	46	25	23	33	17			
Cholera	_	_	_	8	5	7	9	8			
Cyclosporiasis <sup>§</sup>	1	16	1	128	139	93	137	543	FL (1)		
Diphtheria	_	_	_	_	_	_	_	_			
Domestic arboviral diseases <sup>9</sup> , <sup>9</sup> :											
California serogroup virus disease	—	_	—	56	62	55	67	80			
Eastern equine encephalitis virus disease	—	_	—	4	4	4	8	21			
Powassan virus disease	_	_	_	6	2	7	1	1			
St. Louis encephalitis virus disease	_	_	0	12	13	9	10	13			
Western equine encephalitis virus disease	—	_	—	_	_	_	—	_			
<i>Haemophilus influenzae</i> , <sup>**</sup> invasive disease (age <5 yrs):											
serotype b	_	2	1	27	30	22	29	9			
nonserotype b	1	34	5	216	244	199	175	135	RI (1)		
unknown serotype	5	54	4	231	163	180	179	217	NY (1), NYC (1), OH (1), MO (1), SC (1)		
Hansen disease <sup>9</sup>	1	10	2	75	80	101	66	87	FL (1)		
Hantavirus pulmonary syndrome <sup>8</sup>	_	1	0	13	18	32	40	26			
Hemolytic uremic syndrome, postdiarrheal <sup>8</sup>	2	23	3	232	330	292	288	221	NC (1), CA (1)		
HIV infection, pediatric (age <13 yrs)	—	_	3	_	—	_	_	380			
Influenza-associated pediatric mortality <sup>9,99</sup>	1	42	4	360	90	77	43	45	MS (1)		
Listeriosis	10	98	10	801	759	808	884	896	NY (2), MO (1), VA (1), NC (1), FL (1), AL (1), WA (2), CA (1)		
Measles""	—	3	2	65	140	43	55	66			
Meningococcal disease, invasive***:											
A, C, Y, and W-135	7	50	10	289	330	325	318	297	NC (2), OK (5)		
serogroup B	—	22	5	148	188	167	193	156			
other serogroup	—	2	1	23	38	35	32	27			
unknown serogroup	9	85	17	477	616	550	651	765	NYC (1), TN (1), OK (2), CA (5)		
Mumps	31	601	36	1,745	454	800	6,584	314	NY (25), PA (1), OH (2), MI (1), TX (2)		
Novel influenza A virus infections	_	_	0	43,771	2	4	NN	NN			
Plague	—	_	0	8	3	7	17	8			
Poliomyelitis, paralytic	_	_	_	_	_	_	_	1			
Polio virus Infection, nonparalytic	—	_	—	—	—	_	NN	NN			
Psittacosis	—	1	0	9	8	12	21	16			
Q fever, total '	—	10	3	100	120	171	169	136			
acute	—	6	1	83	106	_	_	_			
chronic Delite house	—	4	0	17	14		_	_			
Rapies, numan	_	_	0	4	2	1	3	2			
Rubella Rubella conconital sundromo	_	1	0	3	16	12	11	11			
SADE Cav <sup>§</sup> ****	_	_	0	I	_	_	1	I			
SARS-COV /	_	_	_	_	_	_	_	_			
Strantococcal taxic chack sundroma <sup>§</sup>				140	157	122	125	120	NV (2)		
Surphilic congonital (ago <1 ur)	2	21	5	148	157	132	125	129	NY (2)		
Totanus	_	20	8	327	431	430	349	329			
Toxic shock sundrome (stanbulosocsal) <sup>§</sup>	1		1	1/	19	28	41	27			
	I	10	2	/4	20	92	101	90	CA (1)		
Tularemia	_		0	11	39 100	כ 1 ס קר	15	10			
Typhoid faver		2	U 7	90	123	13/	95 252	154	NY(1) MD(1) GA(1) GA(1)		
Vancomycin-intermediate Stanbylococcus aurous <sup>§</sup>	4	12	/	303	449	434	222	524	NT (1), MD (1), GA (1), CA (1) NV (2) MO (1)		
	3	12	I	/3	63	3/	0	2	NT (2), MU (1)		
Vibriosis (poncholera Vibrio species infections) <sup>§</sup>	1			717		Z	I NIN	5 NINI	NC (1)		
Viral Hemorrhadic Fever	I	25	3	/ I / NINI	DOC	549 NINI	ININ	ININ	IVC (1)		
Vallow fover	_	_	_	ININ	ININ	ININ	ININ	ININ			
	_	_	_	_	_	_	_	_			

See Table I footnotes on next page.

## TABLE I. (Continued) Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending March 20, 2010 (11th week)\*

---: No reported cases. N: Not reportable. NN: Not Nationally Notifiable Cum: Cumulative year-to-date counts.

- \* Incidence data for reporting years 2009 and 2010 are provisional, whereas data for 2005 through 2008 are finalized.
- <sup>+</sup> 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.
- <sup>5</sup> Not reportable in all states. Data from states where the condition is not reportable are excluded from this table, except starting in 2007 for the domestic arboviral diseases and influenzaassociated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at http://www.cdc.gov/epo/dphsi/phs/infdis.htm.
- Includes both neuroinvasive and nonneuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II.
- \*\* Data for H. influenzae (all ages, all serotypes) are available in Table II.
- <sup>++</sup> 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.
- <sup>55</sup> Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. Since April 26, 2009, a total of 278 influenza-associated pediatric deaths associated with 2009 influenza A (H1N1) virus infection have been reported. Since August 30, 2009, a total of 268 influenza-associated pediatric deaths occurring during the 2009–10 influenza season have been reported. A total of 133 influenza-associated pediatric deaths occurring during the 2008-09 influenza season have been reported.
- <sup>¶¶</sup> No measles cases were reported for the current week.
  \*\*\* Data for meningococcal disease (all serogroups) are available in Table II.
- <sup>+++</sup> CDC discontinued reporting of individual confirmed and probable cases of 2009 pandemic influenza A (H1N1) virus infections on July 24, 2009. CDC will report the total number of 2009 pandemic influenza A (H1N1) hospitalizations and deaths weekly on the CDC H1N1 influenza website (http://www.cdc.gov/h1n1flu). In addition, three cases of novel influenza A virus infections, unrelated to the 2009 pandemic influenza A (H1N1) virus, were reported to CDC during 2009.
- <sup>§§§</sup> In 2009, 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.
- <sup>¶¶¶</sup> 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.
- <sup>++++</sup> There were no cases of Viral Hemorrhagic Fever during week one. See Table II for Dengue Hemorrhagic Fever.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals March 20, 2010, with historical data



\* No measles cases were reported for the current 4-week period yielding a ratio for week 11 of zero (0).

<sup>+</sup> 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.

Data Team and 122 Cities Mortality Data TeamPatsy A. Hall-BakerDeborah A. AdamsRosaline DharaWillie J. AndersonPearl C. SharpJose AponteMichael S. WodajoLenee BlantonVersite S. State

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

		Chlamydi	a trachomatis	infection		Cryptosporidiosis				
	Current	Previous 5	52 weeks	Cum	Cum	Current	Previous 5	2 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	10,590	23,056	27,380	191,473	268,515	59	117	263	864	889
New England	355	744	1,194	6,575	8,388	4	6	24	49	90
Connecticut Maine <sup>†</sup>	_	214 48	531	859 488	2,371	2	0	13	13	40 4
Massachusetts	243	378	767	4,111	4,116	_	2	15		29
New Hampshire		39	60	145	473	—	1	5	5	10
Vermont <sup>†</sup>	31	23	63	260	242	2	0 1	8	5 13	6
Mid. Atlantic	2,895	3,076	4,301	32,627	33,168	14	14	38	87	97
New Jersey	253	463	630	3,363	5,615	—	0	5	_	6
New York (Upstate)	737	619	2,170	6,216	5,744	4	3	16	15	29
Pennsylvania	612	820	1,018	9,024	9,116	10	9	19	66	43
E.N. Central	906	3,490	4,167	19,887	44,259	16	29	55	196	229
Illinois	_	1,019	1,428	146	13,317	_	3	8	19	24
Indiana Michigan	800	389	694 1 366	685 10 710	4,746		5	11	14	54
Ohio	97	609	986	5,543	10,789	10	7	16	63	56
Wisconsin	_	385	480	2,794	4,449	_	9	24	42	51
W.N. Central	487	1,300	1,715	10,943	15,537	2	19	61	107	84
lowa Kansas	10	167	252	1,010	2,205	1	4	13	28	20
Minnesota		266	337	1,337	3,224	_	5	34	35	13
Missouri	324	505	638	5,398	5,609	_	3	12	13	20
Nebraska <sup>†</sup> North Dakota	115	98 31	236	1,051	1,184	1	2	9	14	12
South Dakota		39	80		650	_	1	10	6	12
S. Atlantic	1,959	4,504	6,207	32,362	52,179	9	17	50	176	180
Delaware	105	87	180	914	1,069	_	0	2	1	_
District of Columbia Florida	156 565	120	178 1671	988 14 039	1,621		0	1 24	67	1
Georgia	2	640	1,134	233	8,891	2	5	31	79	76
Maryland <sup>†</sup>	—	454	1,031	3,295	4,294	_	1	5	6	7
North Carolina South Carolina <sup>†</sup>	525	618 528	1,265	5 894	9,027 5 171	2	0	8	3	22
Virginia <sup>†</sup>	517	620	926	6,249	5,234	_	1	7	9	8
West Virginia	89	67	137	750	879	—	0	2	4	1
E.S. Central	1,572	1,705	2,254	16,526	20,138	1	4	10	39	29
Alabama' Kentucky	3 318	454	629 642	3,421	5,379 2,711	1	1	5	11	8
Mississippi	573	468	839	4,190	5,512		O	3	4	4
Tennessee <sup>†</sup>	678	569	734	6,206	6,536	—	1	5	11	11
W.S. Central	572	3,052	5,786	29,425	35,119	4	8	39	49	43
Arkansas' Louisiana	261	269 496	416	3,054	3,467	_	0	5	9	4
Oklahoma	311	211	2,713	3,681	1,601	2	2	9	8	10
Texas <sup>†</sup>	—	2,011	3,214	19,768	23,146	2	6	29	25	24
Mountain	327	1,371	2,097	11,844	15,348	4	10	25	82	60
Colorado	141	359	689	3,962	2,990	2	2	10	22	14
Idaho <sup>†</sup>	—	49	184	318	827	2	2	7	19	6
Montana <sup>™</sup> Nevada <sup>†</sup>	23	54	79 479	564	739	_	1	4	12	4
New Mexico <sup>†</sup>		172	257	1,007	1,511	_	2	8	12	22
Utah	7	113	154	1,047	1,437	_	0	4	7	2
Wyoming	—	36	69	350	435	—	0	2	5	6
Pacific	1,517	3,463	4,818	31,284	44,379	5	13	26	79	77
California	1,234	2,623	3,910	24,863	34,708	5	7	17	49	40
Hawaii	_	120	147	1,065	1,294	_	0	1		
Oregon Washington		215	468	1,367 3 1 1 9	2,153		3	10 12	17	31
American Samoa	205	٦	ر ے ر م	5,110	5,042	 NI	۱ ۵	0	I Z NI	NI
C.N.M.I.	_			_	_				IN	IN
Guam		0	0				0	0		
Puerto Rico	172	126	331	1,274	1,663	N	0	0	N	N
U.S. Virgin Islands	_	10	21	52	83	_	0	0	_	_

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly. † Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

					Dengue Vi	irus Infection				
			Dengue Feve				Dengue H	Hemorrhagic F	ever <sup>†</sup>	
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	_	0	4	11	NN	_	0	0	_	NN
New England	—	0	1	2	NN	—	0	0	—	NN
Connecticut Maino <sup>§</sup>	—	0	0		NN	—	0	0	—	NN
Massachusetts	_	0	0		NN	_	0	0	_	NN
New Hampshire	—	0	0	—	NN	_	0	0	_	NN
Rhode Island <sup>9</sup> Vermont <sup>§</sup>	_	0	0	_	NN	—	0	0	_	NN
Mid Atlantic	—	0	2		ININ	—	0	0	_	NIN
New Jersev	_	0	2	4	NN	_	0	0	_	NN
New York (Upstate)	_	0	0	—	NN	_	0	0	_	NN
New York City	—	0	0	_	NN	—	0	0	_	NN
Pennsylvania	_	0	2	4	ININ	—	0	0	_	ININ
E.N. Central Illinois	_	0	1	1			0	0	_	
Indiana	_	Ő	0	_	NN	_	õ	õ	_	NN
Michigan	—	0	0	_	NN	—	0	0	—	NN
Unio Wisconsin		0	0				0	0	_	
W.N. Control		0	õ		NN		ů O	0		NN
lowa	_	0	0	_	NN	_	0	0	_	NN
Kansas	—	0	0	_	NN	—	0	0	_	NN
Minnesota	—	0	0	—	NN	—	0	0	—	NN
Nebraska <sup>§</sup>	_	0	0	_	NN	_	0	0	_	NN
North Dakota	—	0	0	—	NN	—	0	0	_	NN
South Dakota	—	0	0	—	NN	—	0	0	—	NN
S. Atlantic	—	0	1	1	NN	—	0	0	—	NN
Delaware District of Columbia	_	0	0	_	NN	_	0	0	_	NN
Florida	_	0	0	_	NN	_	0	0	_	NN
Georgia	—	0	1	1	NN	—	0	0	_	NN
Maryland <sup>3</sup> North Carolina	_	0	0	_			0	0	_	
South Carolina <sup>§</sup>	_	Ő	0	_	NN	_	õ	õ	_	NN
Virginia <sup>§</sup>	—	0	0	—	NN	—	0	0	_	NN
west virginia	_	0	0	_	ININ	_	0	0	_	ININ
E.S. Central Alabama <sup>§</sup>	_	0	0	_	NN	_	0	0	_	NN NN
Kentucky	_	0	0	_	NN	_	Ő	0	_	NN
Mississippi	_	0	0	_	NN	—	0	0	_	NN
lennessee <sup>3</sup>	—	0	0	—	NN	—	0	0	—	NN
W.S. Central	_	0	0	_	NN		0	0	_	NN
Louisiana	_	0	0	_	NN	_	0	0	_	NN
Oklahoma	—	0	0	—	NN	—	0	0		NN
Texas <sup>9</sup>	—	0	0	—	NN	—	0	0	_	NN
Mountain	—	0	1	1	NN	—	0	0	—	NN
Colorado	_	0	0	_	NN	_	0	0	_	NN
Idaho <sup>§</sup>	—	0	0	—	NN	—	0	0	_	NN
Montana <sup>9</sup>	—	0	0	—	NN	—	0	0	—	NN
New Mexico <sup>§</sup>	_	0	1	1	NN	_	0	0	_	NN
Utah	—	0	0	—	NN	—	0	0	_	NN
Wyoming <sup>§</sup>	_	0	0	—	NN	—	0	0	_	NN
Pacific	—	0	2	2	NN	—	0	0	—	NN
California	_	0	0	_	NN	_	0	0	_	NN
Hawaii	_	Ő	0	_	NN	_	õ	õ	_	NN
Oregon	—	0	0	_	NN	—	0	0	—	NN
washington	—	0	2	2	NN	—	0	0	_	NN
American Samoa	_	0	0	_	NN	_	0	0		
Guam	_	0	0	_	NN	_	0	0	_	NN
Puerto Rico	—	0	0	—	NN	—	0	0	—	NN
U.S. Virgin Islands	_	0	0	_	NN	_	0	0	_	NN

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional. † DHF includes cases that meet criteria for dengue shock syndrome (DSS), a more severe form of DHF.

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

		Ehrlid	chia chaffee	ensis			Anaplasma	a phagocyte	ophilum			Unde	etermined		
	Current	Previous	52 weeks	Cum	Cum	Curront	Previous	52 weeks	Cum	Cum	Curront	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	2	11	58	22	30	_	13	66	8	17	_	2	13	2	3
New England	—	0	4	1	1	_	2	21	4	11	—	0	2	—	—
Connecticut Maine <sup>§</sup>	_	0	0	1	_	_	0	11	2	_	_	0	0	_	_
Massachusetts	_	Ő	0	_	_	_	Ő	0	_	_	_	0 0	õ	_	_
New Hampshire	—	0	1	—	_	—	0	3	_	1	—	0	1	—	—
Rhode Island <sup>3</sup> Vermont <sup>§</sup>	_	0	4	_	1	_	0	20		10	_	0	0	_	_
Mid Atlantic	_	2	17	3	4	_	3	22	1	_	_	0	2	_	_
New Jersey	_	0	1		_	_	0	0	_	_	_	0	0	_	_
New York (Upstate)	—	1	17	2	2	—	3	21	1	—	—	0	1	—	_
New York City Pennsylvania	_	0	3 1	1	1	_	0	1	_	_	_	0	2	_	_
EN Control	_	1	8		1	_	3	22	1	2	_	1	9	_	1
Illinois	_	0	4	_	_	_	0	1	_	_	_	0	1	_	_
Indiana	—	0	0	—	—	—	0	0	—	—	—	0	8	—	—
Michigan Obio	_	0	0	_	1	_	0	0	_	_	_	0	0	_	_
Wisconsin	_	0	5	_	_	_	3	22	1	2	_	0	3	_	1
W.N. Central	_	2	23	1	1	_	0	41	_	_	_	0	5	1	_
lowa	—	0	0	—	—	_	0	0	—	_	_	0	0	—	—
Kansas Minnosota	—	0	2	_	1	—	0	0	—	—	—	0	0	—	—
Minnesota Missouri	_	1	22	1	_	_	0	1	_	_	_	0	3	1	_
Nebraska <sup>§</sup>	—	0	1	—	—	—	0	1	—	—	—	0	0	—	—
North Dakota	—	0	0	_	—	—	0	0	—	—	—	0	0	—	—
South Dakota	2	0 4	19	16	20	_	0	2	2	3	_	0	2	1	_
S. Atlantic Delaware		- 0	2	10	20	_	0	1			_	0	0	_	_
District of Columbia	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Florida	—	0	1	1	2	_	0	1	1	1	_	0	0	_	_
Georgia Marvland <sup>§</sup>	_	1	2	3 4	3 4	_	0	1	_	1	_	0	1	_	_
North Carolina	2	0	4	7	9	_	0	1	1	1	_	0	0	_	_
South Carolina <sup>§</sup>	—	0	1		1	—	0	0	—	—	—	0	0	_	_
Virginias West Virginia	_	0	13	_	_	_	0	0	_	_	_	0	2	_	_
FS Central	_	1	11		2	_	0	1	_	1	_	0	5	_	2
Alabama§	_	0	3	_	_	_	0	1	_	_	_	0	0	_	_
Kentucky	—	0	2	—	—	—	0	0	—	—	—	0	1	—	—
Mississippi Tennessee <sup>§</sup>	_	0	10	_	2	_	0	0	_	1	_	0	5	_	2
W S Central	_	0	9	1	_	_	0	1	_	_	_	0	0	_	_
Arkansas§	_	0	5	_	_	_	0	0	_	_	_	0	0	_	_
Louisiana	—	0	0	_	—	_	0	0	—	—	_	0	0	_	—
Okianoma Texas <sup>§</sup>	_	0	8	1	_	_	0	1	_	_	_	0	0	_	_
Mountain	_	0	0	_	_	_	0	0	_	_	_	0	1	_	_
Arizona	_	0	0	_	_	_	0	0	_	_	_	0	1	_	_
Colorado	—	0	0	_	—	_	0	0	—	—	_	0	0	_	—
Idano <sup>s</sup> Montana <sup>§</sup>	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Nevada <sup>§</sup>	_	0	Ő	_	_	_	Ő	Ő	_	_	_	Ő	Ő	_	_
New Mexico <sup>§</sup>	_	0	0	_	_	_	0	0	—	—	—	0	0	_	_
Utan Wyoming§	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Pacific	_	0	1	_	1	_	0	0	_	_	_	0	0	_	_
Alaska	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
California	—	0	1	—	1	—	0	0	—	—	—	0	0	—	—
Oregon	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Washington	_	0	0	_	_	_	0	0	_	_	_	0	Ő	_	_
American Samoa	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
C.N.M.I.	_	_	_	_	_	—	_	_	—	-	_	_	_	—	—
Guam Puerto Rico	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
U.S. Virgin Islands	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_

#### TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional.

<sup>+</sup> Cumulative total *E. ewingii* cases reported as of this week = 0. <sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

#### TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

			Giardiasis	5				Gonorrhe	a		H	aemophilus i All ages	<i>nfluenzae,</i> , all seroty	invasive <sup>†</sup> pes	
	Current	Previous	52 weeks	Cum	Cum	Current	Previous 5	52 weeks	Cum	Cum	Current	Previous 5	2 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	234	329	596	2,827	3,218	2,357	5,476	6,891	43,449	65,221	22	54	141	531	743
New England	4	29	64	147	271	29	92	174	793	1,029	1	3	19	9	37
Connecticut Maine <sup>§</sup>	3	6 4	15	36	55 40	_	45	106	245 46	470	_	0	13	1	10
Massachusetts	_	12	36	_	109	22	39	81	411	444	_	1	8	_	19
New Hampshire	—	3	12	22	24	6	2	6	27	21	1	0	2	4	4
Vermont <sup>§</sup>	1	4	14	28	32	1	1	5	9	10	_	0	1	1	1
Mid. Atlantic	29	61	101	456	614	579	616	871	6,711	6,651	3	12	26	136	118
New Jersey		0	12	_	94	66	94	134	878	1,049	_	2	7	12	17
New York (Upstate) New York City	20	25 15	81 26	210 120	214 172	120 244	219	353 417	939 2.727	1,116	2	3	18	42 21	31 17
Pennsylvania	4	16	36	126	134	149	196	275	2,167	2,108	_	4	10	61	53
E.N. Central	21	45	75	412	495	190	1,072	1,357	5,528	13,698	2	10	29	69	179
Illinois		10	21	71	106	—	329	417	48	4,088	—	3	11	16	36
Michigan	N 6	13	25	118	129	165	256	209	3.077	3,544	1	0	5	12	5
Ohio	15	16	28	174	160	25	203	361	1,603	3,266	1	2	6	24	29
Wisconsin	_	8	17	49	100	_	90	146	573	1,180	_	2	21	13	92
W.N. Central	16	24	155	206	247	120	272	361	2,208	3,357	2	2	21	26	35
Kansas		3	14	39	28	5	41	85	319	613	_	0	2	4	6
Minnesota		0	135		1		41	64	203	512		0	17	3	7
Missouri Nebraska <sup>§</sup>	5	9	27	63 45	104	80 34	123	172	1,312	1,462	2	1	6	15	15
North Dakota		0	8		2		22	14	20	16	_	0	2	2	1
South Dakota	_	0	5	6	20	_	2	14	_	83	_	0	0	_	_
S. Atlantic	86	72	107	758	752	564	1,339	1,790	9,072	15,486	10	11	31	122	193
Delaware District of Columbia	_	1	3	9	4	27 48	18 46	37	207	196 659	_	0	1		1
Florida	42	36	59	357	391	159	408	476	3,855	4,535	3	4	10	40	63
Georgia Manulan d <sup>§</sup>	27	11	67	204	181	—	210	415	87	2,998	—	3	9	40	39
North Carolina	S N	5	0	58 N	58 N	_	216	377	933	3.009	3	0	17	8	24 20
South Carolina <sup>§</sup>	1	2	8	16	18	168	162	412	1,747	1,567	3	1	7	25	13
Virginia <sup>§</sup>	11	8	36	101	79	159	159	272	1,756	1,228	1	0	3		22
E Control	2	7	22	9 49	o 80	362	9 475	649	90 4 474	5 918	_	3	4 12	32	43
Alabama <sup>§</sup>	2	4	13	24	40	1	131	187	969	1,629	_	0	4	4	10
Kentucky	N	0	0	N	Ν	53	66	156	753	762	—	0	5	4	5
Mississippi Tennessee <sup>§</sup>	N	0	0 18	N 25	N 40	174	140	249	1,189	1,723	_	0	2	3 21	3
W.S. Control	5	7	10	64	73	178	897	1.552	7,776	10.138	3	2	10	32	31
Arkansas <sup>§</sup>	2	3	9	19	23	88	84	139	857	1,019	1	0	3	4	6
Louisiana	_	1	7	23	37		162	343	910	2,259	_	0	2	6	6
Oklahoma Texas <sup>§</sup>	3 N	3	10	22 N	13 N	90	64 562	613 951	960 5.049	562 6,298		1	2	20	18
Mountain	32	26	61	305	248	31	163	239	1,354	1,935	1	5	15	89	70
Arizona	3	4	11	33	28	_	57	93	349	575	_	1	9	35	30
Colorado	22	9	26	151	78	6	40	99	464	606	1	1	6	23	17
Montana <sup>§</sup>	2	2	10	21	23	1	1	6	25	18	_	0	1		1
Nevada <sup>§</sup>	3	1	10	12	6	23	27	94	328	441	—	0	2	4	4
New Mexico <sup>9</sup>	_	1	8 13	7	22	1	21	36 13	134	187	_	1	5	12	8
Wyoming§	_	1	5	11	12	_	1	7	7	10	_	0	2	5	
Pacific	39	51	156	430	438	304	531	627	5,533	7,009	_	2	9	16	37
Alaska		2	7	9	15	_	19	32	207	190	—	0	3	6	3
California Hawaii	29	33	60 2	303	318	268	439	548 24	4,704	5,828	_	0	4	_	10 12
Oregon	_	8	18	60	64	_	12	43	106	275	_	1	4	8	11
Washington	10	7	103	58	35	36	39	64	387	586	—	0	4	2	1
American Samoa	_	0	0	_	—	_	0	0	_	_	—	0	0	_	_
C.N.M.I. Guam	_			_	_	_			_	_	_			_	_
Puerto Rico	_	1	10	2	31	10	4	24	52	39	_	0	1	1	_
U.S. Virgin Islands	_	0	0	_	_	_	2	7	8	23	Ν	0	0	Ν	Ν

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

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 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).

							Hepatitis (	viral, acute	), by type						
			А					В					С		
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	25	36	58	256	401	24	58	101	465	794	10	17	40	116	170
New England	—	2	5	12	23	—	1	4	6	10	—	1	5	2	10
Connecticut Maine <sup>†</sup>	_	0	2	/	6 1	_	0	3	3	3	_	1	4		
Massachusetts	_	1	4	_	13	_	Ő	2	_	4	_	Ő	1	_	2
New Hampshire	_	0	1		1	_	0	1	_	1	_	0	0	_	_
Vermont <sup>†</sup>	_	0	4	4		_	0	0	_	_	_	0	0	_	1
Mid. Atlantic	2	4	10	32	56	3	5	16	39	85	_	2	7	12	17
New Jersey	_	0	5	2	16	—	1	6	4	22	—	0	1		1
New York (Upstate) New York City	1	1	3 5	13	17	1	1	6 5	15	15	_	0	4	10	
Pennsylvania	_	1	6	8	16	2	1	6	13	30	_	0	4	2	11
E.N. Central	4	4	19	29	68	2	7	15	63	120	1	4	12	26	35
Illinois Indiana	_	2	13 4	1	23	_	1	7	11	23	_	0	1		3
Michigan	2	1	4	11	18	2	2	6	22	31	1	3	10	21	19
Ohio	2	0	4	10	14	—	1	4	22	37	—	0	3	1	11
Wisconsin	1	0	2	2	17	1	0	4	20	10	1	0	2		1
lowa	_	0	3	4		_	0	3	4	9	_	0	4	_	1
Kansas	_	0	2	2	1	_	0	2	1	1	_	0	0	_	1
Minnesota Missouri	1	0	4	2	5	1	0	9	17	5 19	1	0	6		3
Nebraska <sup>†</sup>	_	Ő	3	_	5	_	0	2	7	6	_	0	1	_	1
North Dakota	_	0	1	—	-	_	0	0	_		_	0	1	1	_
South Dakota	5	8	14	61	88	7	15	32	139	1 249		3	12	24	38
Delaware		0	1	2		Ú	0	0	U	U	U	0	0	U	U
District of Columbia	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Fiorida Georgia		3 1	9	27	47	_	5	13	58 35	72 43	_	0	4	11	4
Maryland <sup>†</sup>	—	0	3	2	10	2	1	6	15	32	—	1	3	5	8
North Carolina	1	0	7	3	9		0	12	2	76	3	0	10	3	6
Virginia <sup>†</sup>	2	1	3	7	4	3	1	13	14	13	_	0	2	3	4
West Virginia	—	0	2	1	—	—	0	19	6	9	—	0	2	1	7
E.S. Central	2	1	3	9	9	3	7	13	65	85	2	2	5	20	27
Kentucky	1	0	2	2 4	1	2	2	5	24	25 18	1	1	2	17	3 13
Mississippi		0	1		4		1	2	3	5		0	0		
lennessee'	1	0	2	3	3	1	3	6	21	37	1	0	3	2	11
W.S. Central Arkansas <sup>†</sup>		0	2	52	57		9	4	40	105	_	0	0	°	1
Louisiana	_	Ő	1	1	2	_	0	4	10	12	_	Ő	1	_	2
Oklahoma Toyac <sup>†</sup>		0	3	1	1		2	8	8	19	—	0	4	2	1
Mountain	2	2	9	31	27	2	2	5	29 17	37	_	1	4	5	13
Arizona	2	1	5	20	12	_	0	3	5	17	_	0	0	_	_
Colorado	—	1	5	6	7	—	0	2	1	7	—	0	3		8
Montana <sup>†</sup>	_	0	1		2	_	0	2		_	_	0	2	3	_
Nevada <sup>†</sup>	_	0	2	2	_	1	0	3	8	5	—	0	1	_	_
New Mexico <sup>+</sup> Utab	_	0	1	1	3	_	0	1	1	4	_	0	1	2	5
Wyoming <sup>†</sup>	_	0	1	_	_	_	0	2	_	_	_	0	0	_	_
Pacific	4	5	16	42	76	5	6	25	59	62	2	1	6	14	13
Alaska California		0	1 15		2		0	1 17	1 /0	 50	1	0	2		Q
Hawaii		4	2		2	ر 	4 0	1	-+>	1		0	4	د 	o 
Oregon	—	0	2	2	5	_	1	4	5	5	_	0	3	5	2
washington	_	1	4	2	4	_	0	8	4	4	1	0	6	4	3
American Samoa C.N.M.I.	_			_	_	_			_	_	_			_	_
Guam	_	0	0			_	0	0			—	0	0	_	_
Puerto Rico	—	0	1	2	9	_	0	5	3	3	—	0	0	—	_
U > VILUULISIADOS			0									0			

#### TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional. † Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

		L	egionellos	is			Ly	me disease	5			N	Aalaria		
Descrite	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	15	56	164	327	360	63 15	385	2,053	1,225	1,758	13	22	73	210	197
Connecticut	_	2	5	8	5		/3	498 0	57	290	_	0	4	_	9
Maine <sup>†</sup>	—	0	3	—	_	15	11	76	41	21	_	0	1	_	
Massachusetts New Hampshire	_	1	9	1	7	_	30 19	335	3	170 76	_	0	3	1	8
Rhode Island <sup>†</sup>	_	0	4	3	_	_	1	28	4	2	_	0	1	_	_
Vermont <sup>†</sup>	_	0	1	1	1		5	42	9	21	_	0	1	_	1
Mid. Atlantic	4	16	69 13	68	96 14	17	205	1,138	704	864	2	7	13	55	36
New York (Upstate)	2	5	29	25	32	14	52	414	148	211	1	1	4	16	10
New York City	_	3	20	14	8	_	3	31		21	_	4	11	29	21
Pennsylvania	2	6	25	29	42	3	107	647	467	326	1	1	4	10	5
E.N. Central Illinois	_	10	39 10	55	/ 0 9	_	25	11		97	_	5	5	5	20 10
Indiana	_	1	5	4	9	_	1	7	6	4	_	0	4	1	5
Michigan	1	2	13	10	12	_	1	9	2	1	1	0	3	3	4
Wisconsin	_	1	5	2	11	_	20	205	41	88	_	0	1	°	_
W.N. Central	_	2	12	9	7	_	5	196	1	15	_	1	8	14	9
lowa	—	0	2		3	—	0	14	—	6	—	0	1	2	4
Kansas Minnesota	_	0	1	1 3	2	_	0	2 196	_	4	_	0	1	3	1
Missouri	_	1	5	3	1	_	Ő	1	_	_	_	0	1	2	3
Nebraska <sup>†</sup>	—	0	2	2	1	—	0	3	1	—	—	0	2	4	—
South Dakota	_	0	1	_	_	_	0	0	_	1	_	0	1	_	_
S. Atlantic	3	11	22	72	77	26	68	253	359	460	7	6	16	60	79
Delaware	—	0	5	3		2	13	65	100	85	—	0	1	1	1
District of Columbia Florida	- 1	0	2 10	30	1 30	_	0	5 11	1	2	6	0	1	1	4 20
Georgia	_	1	4	8	15	_	0	5	1	12	_	1	5	2	14
Maryland <sup>†</sup>	—	3	12	16	13	7	29	134	153	272	1	1	13	11	23
South Carolina <sup>†</sup>	_	0	2	1	12		1	3	9 4	8	_	0	3 1	2	1
Virginia <sup>†</sup>	2	1	6	13	5	16	11	79	70	63	_	1	5	10	5
West Virginia		0	2	1		_	0	33	10	9	_	0	2		
E.S. Central	2	2	12	20	18	_	1	4	6	3	_	0	3	3	8
Kentucky	_	1	3	5	7	_	0	1	1	_	_	0	3	2	_
Mississippi		0	2	2		—	0	0			—	0	1	—	
Tennessee	2	ו כ	9	10	8 11	_	1	4 20	5	3	1	0	20	31	5
Arkansas <sup>†</sup>	_	0	, 1	1		_	4 0	0	_	_	_	0	1	1	_
Louisiana	—	0	2	1	1	—	0	0	—	—		0	1		1
Oklahoma Texas <sup>†</sup>	_	0	2	10	1	_	0	0 29	1		1	0	1 29	2	
Mountain	_	3	8	19	25	_	1	4	4	3	_	0	6	7	3
Arizona	_	1	5	9	8	_	0	1	_	_	_	0	2	2	_
Colorado	—	0	4	2	2	_	0	1	1	1	_	0	3	_	1
Montana <sup>†</sup>	_	0	1	1	4	_	0	1			_	0	3	_	_
Nevada <sup>†</sup>	_	0	2	5	4	—	0	1	1	1	—	0	1	2	_
New Mexico <sup>†</sup>	_	0	2	1	6	_	0	1	1	1	_	0	0	3	2
Wyoming <sup>†</sup>	_	0	2	_	_	_	0	1	_	_	_	0	0	_	
Pacific	5	3	19	64	35	5	4	10	40	22	2	2	17	22	22
Alaska	_	0	0		1		0	1	1	2	1	0	1		1
Hawaii	4	3 0	0	62	28	S N	2	9	31 N	17 N	_	2	0	10	15
Oregon	—	0	2	_	3	_	1	4	8	3	_	0	2	_	2
Washington	1	0	4	2	2		0	3			1	0	4	6	3
American Samoa	N	0	0	N	N	N	U 	0	N	N	_	0	0	_	_
Guam	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Puerto Rico	—	0	1	—	—	N	0	0	Ν	Ν	—	0	1	1	1
U.S. Virgin Islands		0	0			N	0	0	N	N		0	0		_

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional.

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

#### TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

		Meningoco	occal diseas All groups	e, invasive	+			Pertussis				Rabi	es, animal		
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	16	16	33	159	241	46	272	1,475	1,491	2,542	28	62	139	383	724
New England	—	0	2	—	11	—	11	24	10	138	3	6	24	48	56
Maine <sup>§</sup>	_	0	1	_	1	_	1	10	2	25	1	1	4	19	21
Massachusetts	_	0	1	—	7	—	6	16	—	84	_	0	0	—	_
New Hampshire Bhode Island <sup>§</sup>	_	0	1	_	1	_	1	7	2	12	_	0	3	3	6
Vermont <sup>§</sup>	_	0	1	_	_	_	0	1	2	6	2	1	5	11	13
Mid. Atlantic	1	2	6	12	21	8	21	39	113	214	14	10	23	106	113
New Jersey	—	0	2		2		2	8	8	56		0	0		
New York City	1	0	2	2 5	5 4		0	11	40	12		0	8	23	57
Pennsylvania	_	1	3	5	12	3	9	29	59	115	_	0	16	_	56
E.N. Central	—	2	9	23	53	19	54	100	433	620	—	2	19	6	7
Illinois Indiana	_	1	4	5	11 12	_	11	29 15	46 19	150 86	_	1	9	1	1
Michigan	_	Ő	5	2	7	1	15	41	138	133	_	1	6	3	5
Ohio	—	1	3	7	13	18	19	49	225	226		0	5	2	
Wisconsin	_	0	6	3	10	_	31	12	5 122	25 427	N 1	0	0 18	N 20	N 51
lowa		0	2	1	1	_	3	10	24	38	_	0	3		6
Kansas	_	0	2	1	5	_	4	12	26	39	_	1	6	12	22
Minnesota	_	0	2	1	4	_	0 13	567	 57	204	_	0	11	8	5
Nebraska <sup>§</sup>	_	0	1	1	2	_	2	9	12	49	1	1	6	8	9
North Dakota	—	0	1	—	—	—	0	12		1	—	0	7	—	2
South Dakota		0	10			11	0 28	66	3 162	6 355		22	4	150	4
S. Atlantic Delaware		0	10	1	-		20	2		4	_	0	0		402
District of Columbia	_	0	0	_	_	_	0	1	1	3	_	0	0	_	_
Florida	_	1	4	16	18	3	7	29 11	42	82 63	_	0	8 72	29	156
Maryland <sup>§</sup>	_	0	1	1	1	_	3	8	28	22	6	7	15	67	57
North Carolina	2	0	10	2	9	_	0	21		117	Ν	0	4	Ν	N
South Carolina <sup>s</sup> Virginia <sup>§</sup>	_	0	2	3	3 4	5	4	18	36 16	32 29	_	10	26	50	89
West Virginia	_	0	2	1	_	2	0	5	4	3	1	2	6	13	12
E.S. Central	1	0	4	6	7	2	14	30	140	144	_	1	6	_	34
Alabama <sup>s</sup> Kentucky	_	0	2	1	1	1	5	19 15	39 48	24 71	_	0	0	_	 14
Mississippi	_	0	1	1	1	_	1	6	10	18	_	0	1	_	—
Tennessee§	1	0	2	2	4	1	4	9	43	31	—	0	4	—	20
W.S. Central	7	1	8	26	22	—	68	690	323	253	1	0	13	8	9
Louisiana	_	0	2	2	3	_	6 1	28	6	27		0	0	0	
Oklahoma	7	0	2	11	2	_	0	32	1	7	—	0	13	2	3
Texas <sup>9</sup>	_	1	7	8	9	1	58	662	305	198	_	0	1	_	
Mountain	_	0	4	12	19		10	39 16	27	238	N	0	0	o N	22 N
Colorado	_	Ő	3	3	6	_	4	10	19	63	_	0	0	_	_
Idaho <sup>§</sup>	—	0	1	1	4	1	1	19	39	19	—	0	1	1	
Nevada <sup>§</sup>	_	0	2	1	2	_	0	3	5	2	_	0	4	_	9
New Mexico <sup>§</sup>	_	0	1	2	1	_	1	6	23	25	_	0	2	2	7
Utah Wyoming§	_	0	1	_	1	_	2	11	7	86	_	0	2		6
Pacific	5	3	13	35	47	5	24	44	66	153	2	4	13	21	30
Alaska	_	0	2		2	_	0	4	5	20	_	0	2	7	10
California	5	2	10	25	25	—	11	25	8	60	2	4	11	13	20
Oregon	_	0	4	7	13	_	0 4	3 12	30	б 44	_	0	U 3	1	_
Washington	_	Õ	6	3	6	5	5	36	23	23	_	Õ	Õ		_
American Samoa	—	0	0	—	—	_	0	0	—	_	Ν	0	0	Ν	Ν
C.N.M.I.	_			_	_	_			_	—	_			_	—
Puerto Rico	_	0	0	_	_	_	0	1	_	_	_	1	3	13	11
U.S. Virgin Islands	_	0	0	_	_	_	0	0	_	_	Ν	0	0	Ν	Ν

C.N.M.I.: Commonwealth of Northern Mariana Islands. U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional.

<sup>6</sup> Incidence data for reporting years 2009 and 2010 are provisional. <sup>†</sup> Data for meningococcal disease, invasive caused by serogroups A, C, Y, and W-135; serogroup B; other serogroup; and unknown serogroup are available in Table I. <sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

		S	almonello	sis		Shi	ga toxin-pr	oducing E	. coli (STEC)	)†		Sh	igellosis		
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	259	910	1,390	4,511	6,871	30	84	172	313	615	142	281	503	2,059	3,165
New England	3	31	91 55	112	668 429	_	3	30	9	86 67	_	4	27	16	82 43
Maine <sup>§</sup>	1	2	7	14	20	_	Ő	3			_	Ő	2	2	2
Massachusetts		20	47		161	—	2	7	_	10	—	3	27	_	31
New Hampshire Rhode Island <sup>§</sup>	1	3	44	21	29 19	_	0	3 26	4	9	_	0	4	3 1	4
Vermont <sup>§</sup>		1	5	5	10	_	0	3	_	_	_	Ő	1	1	1
Mid. Atlantic	27	98	208	553	746	3	7	22	34	57	16	47	86	335	619
New Jersey		17	47	51	134		1	5	1	15		6	27	27	209
New York (Upstate)	13	23	78 47	159	100		3 1	5	14	18		4	19	35 53	105
Pennsylvania	14	29	66	210	253	_	2	8	12	12	13	25	63	220	273
E.N. Central	17	91	159	469	961	3	13	36	39	117	2	37	75	231	719
Illinois	_	24	52	120	273	_	3	6	5	46	_	10	52	129	147
Michigan	2	9 17	24 34	35 108	82 170	1	3	8	2 17	13	1	4	5 10	32	78
Ohio	15	24	52	172	254	2	2	11	9	18	1	12	46	57	382
Wisconsin	_	11	30	34	182	_	4	21	6	28	_	5	26	12	90
W.N. Central	16	43	86	286	512	2	12	39	49	53	48	29	86	524	99
lowa Kansas	1	6	16	37	68 58	_	2	14	6 5	13	_	0	5 13	10	27
Minnesota	_	11	30	70	102	_	2	19	14	16	_	1	7	8	12
Missouri	13	12	30	94	77	_	2	10	17	14	48	23	72	470	16
Nebraska <sup>s</sup> North Dakota		5	12	30	135		1	6 3	6	_	_	0	3	4	
South Dakota	_	1	9	7	67	_	0	12	1	_	_	0	1	_	1
S. Atlantic	94	280	453	1,559	1,675	5	12	22	67	111	29	41	79	309	485
Delaware	1	2	9	12	5	—	0	2	—	2	1	3	10	24	5
District of Columbia		0 133	3	6 746	12 670		0	0	 27	30	1	0	1	2	5
Georgia	6	45	98	245	273	_	1	4	8	10	13	12	29	105	111
Maryland <sup>§</sup>	7	15	32	109	131		2	6	9	17	1	5	17	18	89
North Carolina South Carolina <sup>§</sup>	16	14	89 67	205	300	1	0	11	3	36	2	3	27	12	87
Virginia <sup>§</sup>	11	20	68	124	133	1	3	7	19	9	_	3	15	17	40
West Virginia	4	3	23	25	26	—	0	5	—	1	_	0	2	—	5
E.S. Central	9	52	113	239	392	3	4	10	17	29	1	12	46	69	178
Alabama <sup>9</sup> Kentucky	4	14	39 18	76 51	128	2	1	4	7	5	_	2	9 25	7	48
Mississippi	2	14	45	33	89	_	0	1	3	2	_	1	4	2	7
Tennessee§	2	14	33	79	100	1	1	8	6	14	1	5	16	26	102
W.S. Central	8	104	444	233	525	2	5	39	16	31	31	53	157	308	524
Arkansas <sup>9</sup>	5	10	25	31	73	1	1	4	5	5	—	5	15	10	46
Oklahoma	3	11	30	45	59	_	0	6	1	4	6	6	19	48	31
Texas <sup>§</sup>	_	58	425	89	317	1	4	39	7	22	25	37	139	237	396
Mountain	9	51	120	375	467	1	7	28	36	75	1	18	43	104	235
Arizona		20	57	123	176	1	1	5 11	8	5	1	13	37	61 22	160
Idaho <sup>§</sup>	_	3	10	24	30	_	1	7	7		_	0	1	3	
Montana <sup>§</sup>	_	2	7	21	22	_	0	7	3	1	—	0	4	2	2
Nevada <sup>9</sup> New Mexico <sup>§</sup>	1	3	11 27	25	26	_	0	3	1	1	_	1	7	3 10	22
Utah	_	5	14	22	61	_	1	11	5	5	_	0	4	3	5
Wyoming§	—	1	9	12	10	—	0	2	_	1	—	0	1	_	_
Pacific	76	123	345	685	925	11	9	73	46	56	14	22	61	163	224
Alaska		1	7	13	10 715		0	0		45	14	0	2	149	1
Hawaii		5	200		52		4	25	29	45	14	0	40	140	6
Oregon	_	8	19	44	76	_	1	11	4	2	_	1	4	6	10
Washington	16	12	133	71	72	8	2	48	13	7	_	2	19	9	21
American Samoa	—	1	1	1	—	—	0	0	—	—	_	0	0	—	3
Guam	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_
Puerto Rico	3	5	19	46	111	_	õ	õ	_	_	_	õ	2	_	2
U.S. Virgin Islands	_	0	0	_	_	_	0	0	_	_	_	0	0	_	_

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

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

U: Unavailable. —: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.
 \* Incidence data for reporting years 2009 and 2010 are provisional.
 † Includes *E. coli* 0157:H7; Shiga toxin-positive, serogroup non-O157; and Shiga toxin-positive, not serogrouped.
 § Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

				Spot	ted Fever Ricketts	iosis (including RM	SF) <sup>†</sup>			
			Confirmed					Probable		
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	1	2	9	15	7	1	17	73	52	146
New England	—	0	1	—	—	—	0	2	—	1
Maine <sup>§</sup>	_	0	0	_	_	_	0	2	_	1
Massachusetts	—	0	1	—	—	—	0	1	—	—
New Hampshire Bhode Island <sup>§</sup>	_	0	0	_	_	_	0	1	_	_
Vermont <sup>§</sup>	_	0	1	_	_	_	Ő	0	_	_
Mid. Atlantic	_	0	3	2	_	_	1	6	1	5
New Jersey	—	0	0	_	—	_	0	0	—	—
New York City	_	0	1	_	_	_	0	4	1	4
Pennsylvania	_	0	2	2	_	_	0	2	_	1
E.N. Central	—	0	2	_	1	_	1	7	—	7
Illinois Indiana	_	0	2	_	_	_	0	6	_	4
Michigan	—	0	1	—	1	—	0	1	—	—
Ohio Wisconsin	_	0	0	_	_	_	0	4	_	3
W.N. Control	_	0	2	_	1	_	2	27		
lowa	_	0	1	_	_	_	0	1		
Kansas	—	0	1	_	—	—	0	0	—	—
Minnesota Missouri	_	0	1	_	_	_	0	26	4	2
Nebraska <sup>§</sup>	—	0	2	—	1	—	0	1	_	_
North Dakota South Dakota	_	0	0	_	_	_	0	0	_	_
S Atlantic	1	1	8	8	А	1	5	25	29	115
Delaware	_	0	1	1	-	_	0	3	2	1
District of Columbia	1	0	0	1	—	—	0	0	—	1
Georgia		1	7	5	4	_	0	2	_	
Maryland <sup>§</sup>	—	0	1		—		0	3		8
North Carolina South Carolina <sup>§</sup>	_	0	1	1	_	1	2	24	23	91
Virginia <sup>§</sup>	_	0	1	_	_	_	Ő	5	2	8
West Virginia	—	0	0	_	—	—	0	1	—	1
E.S. Central	—	0	2	1	1	—	4	15	2	10
Kentucky	_	0	1	1	_	_	0	0	_	- 4
Mississippi	—	0	0	—	1	—	0	1		_
Vic Cantral	—	0	2		_	_	2	14	1	0
Arkansas <sup>§</sup>	_	0	3	_	_	_	0	25 14	4	4
Louisiana	—	0	0	_	_	_	0	1	—	_
Oklahoma Texas <sup>§</sup>	_	0	3	1	_	_	0	24 11	4	3
Mountain	_	0	2	3		_	0	6	12	2
Arizona	—	0	2	3	—	—	0	6	12	_
Colorado Idabo <sup>§</sup>	_	0	1	_	_	_	0	0	_	_
Montana <sup>§</sup>	_	0	1	_	_	_	0	2	_	_
Nevada <sup>§</sup>	—	0	0	—	—	—	0	0	—	1
Utah	_	0	0	_	_	_	0	0	_	1
Wyoming <sup>§</sup>	—	0	1	—	—	—	0	1	—	—
Pacific	—	0	1	_	—	—	0	0	—	—
Alaska California		0	0	_		_	0	0	_	_
Hawaii	—	0	0	_	_	_	0	õ	_	_
Oregon Washington	—	0	0	—	—	—	0	0	—	—
Amorican Samaa	_	U	0	_	_	—	U	0	_	_
C.N.M.I.	_			_	_	_			_	_
Guam	—	0	0	—	_	—	0	0	—	—
ruerto RICO U.S. Virgin Islands	_	0	0	_		_	U O	0	_	_
C.C. MILYINI JULIUJ		5	0				0	0		

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

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

U: Unavailable. ---: No reported cases. N: Not reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum.

\* Incidence data for reporting years 2009 and 2010 are provisional.

<sup>+</sup> Illnesses with similar clinical presentation that result from Spotted fever group rickettsia infections are reported as Spotted fever rickettsioses. Rocky Mountain spotted fever (RMSF) caused by *Rickettsia rickettsii*, is the most common and well-known spotted fever. <sup>§</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

#### TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending March 20, 2010, and March 21, 2009 (11th week)\*

				Streptocod	cus pneumo	<i>niae</i> ,† invasi	ve disease								
			All ages					Age <5			Sy	/philis, prim	ary and se	condary	
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current .	Previous	52 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	174	55	362	3,158	939	28	46	120	498	632	81	259	344	1,834	3,053
New England	6	1	50	98	18	—	1	23	8	16	—	6	21	73	77
Connecticut Maine <sup>§</sup>	2	0	50 4	23	3	_	0	22	3	_	_	1	9	11	17
Massachusetts	_	Ő	1		1	_	Ő	5	_	12	_	5	12	46	48
New Hampshire	1	0	6	34	5	—	0	2	3	2	—	0	1	2	7
Khode Island <sup>3</sup> Vermont <sup>§</sup>	3	0	5	15 26	5	_	0	1		2	_	0	5	2	4
Mid. Atlantic	9	4	25	169	43	2	5	43	58	53	27	33	50	339	410
New Jersey	_	0	4	15	_	_	1	4	9	12	2	3	13	40	58
New York (Upstate)	3	2	18	47	17	2	2	19	34	30	3	2	11	16	21
Pennsylvania	6	2	19	107	24	_	0	23	15	5	6	20	39 14	214 69	259
F N Central	22	13	64	452	190	5	7	13	73	115	1	25	52	111	282
Illinois	_	0	0	_	_	_	0	4	_	14	_	11	36	7	149
Indiana		5	17	100	68	1	1	4	13	20	_	2	9	7	32
Ohio	10	8	26 18	148	113	4	2	5 7	24 27	20 45	1	4	13	40 51	43 43
Wisconsin	_	0	20	91	_	_	1	3	9	16	_	0	3	_	15
W.N. Central	3	3	40	196	45	1	3	13	41	39	_	5	12	31	71
lowa	—	0	0	_		—	0	0	_	_	—	0	2	_	8
Kansas Minnesota	_	1	5 35	19 97	23	_	0	2	4	8 10	_	0	3	1 0	3
Missouri	1	1	8	34	19	1	Ő	5	15	16	_	3	8	20	40
Nebraska <sup>§</sup>	2	0	7	42	_	—	0	2	4	1	_	0	2	1	1
North Dakota South Dakota	_	0	3		3	_	0	3	1		_	0	1	_	1
S Atlantic	83	26	118	951	475	13	10	23	138	182	25	64	161	462	613
Delaware	_	0	3	7	5	_	0	2	_	_	_	0	3	1	7
District of Columbia	1	0	3	10		_	0	1	3		1	3	8	21	42
Florida	60 8	14	91 17	515	291	7	3	19	68 35	68 54	5	19 14	32	159	246
Maryland <sup>§</sup>	9	0	25	120	2	5	1	7	15	21	_	6	12	41	58
North Carolina	_	0	0		_	_	0	0	_		15	10	31	121	104
South Carolina <sup>9</sup> Virginia <sup>§</sup>	4	0	24	132	_	_	1	4	14	17		2	6 15	29 57	15 57
West Virginia	1	1	19	33	27	_	0	3	3	4	—	0	2		2
E.S. Central	9	4	49	311	95	1	2	9	32	41	11	20	38	153	258
Alabama <sup>§</sup>	—	0	0			—	0	0	_	_	_	6	18	30	106
Kentucky Mississinni	1	1	5	14	28	_	0	2	2	4	2	1	13	22 30	12
Tennessee§	8	2	43	274	64	1	2	7	25	31	3	8	14	71	103
W.S. Central	10	1	56	367	32	—	6	36	60	86	8	48	74	320	610
Arkansas <sup>§</sup>	8	1	8	45	13	—	0	4	8	10	8	6	16	56	32
Oklahoma	_	0	8	23 16	19	_	0	2	16	15	_	1	27	64 8	216
Texas <sup>§</sup>	2	Ő	49	283	_	_	4	32	29	49	_	31	46	192	340
Mountain	30	2	67	546	39	6	5	13	75	88	2	7	18	50	105
Arizona	13	0	40	276	—	4	2	6	34	43	_	3	9	13	44
Loiorado Idaho <sup>§</sup>	15	0	20	151	_		0	4	19	16		0	5	24	25
Montana§	_	Ő	1	4	_	_	Ő	ō	_	_	_	0	1	_	_
Nevada <sup>§</sup>	1	1	4	24	9	—	0	2	3	1	—	1	10	10	19
New Mexico <sup>3</sup>	_	0	8	43 41	25	_	0	4	7	5 21	_	0	4	3	4
Wyoming <sup>§</sup>	1	0	2	4	5	_	0	1	_		_	0	1	_	_
Pacific	2	0	15	68	2	_	0	7	13	12	7	43	61	295	627
Alaska	_	0	10	32	—	—	0	5	10	7	_	0	0	_	
California Hawaii		0	10	36	2	_	0	2	3	5	6	39	55	267	5/0
Oregon	_	Ő	0	_	_	_	Ő	0	_	_	_	1	5	6	8
Washington	—	0	0	—	—	—	0	0	—	—	1	2	7	17	37
American Samoa	_	0	0	_	_	_	0	0	_	—	_	0	0	_	_
C.N.M.I. Guam	_			_	_	_			_	_	_			_	_
Puerto Rico	_	Ő	Ő	_	_	_	Ő	Ő	_	_	6	3	17	48	40
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 reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional. \* Includes drug resistant and susceptible cases of invasive *Streptococcus pneumoniae* disease among children <5 years and among all ages. Case definition: Isolation of *S. pneumoniae* from a normally sterile body site (e.g., blood or cerebrospinal fluid). § Contains data reported through the National Electronic Disease Surveillance System (NEDSS).

TABLE II. (Continued) Provisional cases of selected notifiable diseases	, United States, weeks end	ling March 6, 2010, and March	7, 2009 (9th week)*
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									V	Vest Nile viru	ıs disease†				
		Varice	ella (chicker	npox)			Ne	uroinvasive	2			Nonne	uroinvasiv	e§	
	Current	Previous	52 weeks	Cum	Cum	Current	Previous	52 weeks	Cum	Cum	Current	Previous 5	2 weeks	Cum	Cum
Reporting area	week	Med	Max	2010	2009	week	Med	Max	2010	2009	week	Med	Max	2010	2009
United States	219	285	639	3,032	5,549	_	1	46	2	_	_	0	49	_	_
New England	5	14	33	118	189	_	0	0	_	_	_	0	0	_	_
Connecticut Maino <sup>¶</sup>	1	8	23	43	108	—	0	0	—	—	—	0	0	—	—
Massachusetts	_	0	2	50	_	_	0	0	_	_	_	0	0	_	_
New Hampshire	4	3	10	32	52	—	0	0	_	—	—	0	0	—	_
Rhode Island <sup>1**</sup> Vermont <sup>¶**</sup>	_	0	1	1 12	4 25	_	0	0	_	_	_	0	0	_	_
Mid. Atlantic	22	24	55	227	467	_	0	2	_	_	_	0	1	_	_
New Jersey	N	0	0	N	N	_	Ő	1	_	_	_	Ő	Ö	_	_
New York (Upstate)	N	0	0	N	N	_	0	1	_	_	_	0	1	_	_
Pennsylvania	22	24	55	227	467	_	0	0	_	_	_	0	0	_	_
E.N. Central	68	111	205	1,264	2,091	_	0	4	_	_	_	0	3	_	_
Illinois	9	27	56	299	532	—	0	3	—	—	—	0	0	—	—
Michigan	26	36	35 84	380	617	_	0	1	_	_	_	0	0	_	_
Ohio	33	29	85	354	657	_	0	0	_	_	_	0	2	_	_
Wisconsin	_	8	57	69	163	—	0	1	—	—	—	0	0	—	—
W.N. Central	1 N	10	41	87 N	361 N	_	0	5	_	_	_	0	11	_	_
Kansas**	_	2	19	1	80	_	0	1	_	_	_	0	2	_	_
Minnesota	_	0	0			—	0	1	—	—	—	0	1	—	—
Missouri Nebraska <sup>¶</sup> **	1 N	6 0	31	76 N	250 N	_	0	2	_	_	_	0	1	_	_
North Dakota	_	0	26	8	26	_	0	0	_	_	_	0	1	_	_
South Dakota	_	0	2	2	5	_	0	3	_	-	_	0	2	_	_
S. Atlantic	52	25	95	428	630	_	0	4	_	-	_	0	1	_	_
District of Columbia	_	0	3		8	_	0	0	_	_	_	0	0	_	_
Florida	25	14	61	226	368	—	0	1	—	—	—	0	1	—	—
Georgia Marvland¶	N N	0	0	N N	N N	_	0	1	_	_	_	0	0	_	_
North Carolina	N	0	0	N	N	_	0	Ő	_	_	_	Ő	0	_	_
South Carolina <sup>¶</sup> **		0	33	42	116	—	0	2	—	—	—	0	0	—	—
West Virginia	18	8	32	67 91	28 108	_	0	0	_	_	_	0	0	_	_
E.S. Central	_	7	29	58	142	_	0	6	2	_	_	0	4	_	_
Alabama <sup>¶</sup> **	_	7	27	58	141	_	0	0	_	_	_	0	0	_	_
Kentucky Mississippi	N	0	0	N	N 1	_	0	1	2	_	_	0	0	_	_
Tennessee	Ν	0	ō	N	N	_	0	2	_	_	_	0	1	_	_
W.S. Central	68	68	261	568	1,128	—	0	19	—	—	_	0	6	—	—
Arkansas <sup>1</sup> **	_	0	23	16 18	40	_	0	1	_	_	_	0	0	_	_
Oklahoma	N	0	0	N	N	_	0	2	_	_	_	0	2	_	_
Texas <sup>¶</sup> **	68	67	245	534	1,073	—	0	16	—	—	—	0	4	—	—
Mountain	3	21	62	278	500	—	0	12	—	—	—	0	17	—	—
Colorado**	_	8	22	102	185	_	0	7	_	_	_	0	14	_	_
Idaho¶	N	0	0	N	Ν	—	0	3	_	—	-	0	5	_	_
Montana <sup>1**</sup> Nevada <sup>¶</sup>	1 N	0	17	63 N	70 N	_	0	1	_	_	_	0	1	_	_
New Mexico <sup>¶**</sup>	_	Ő	12	20	66	_	0	2	_	_	_	0	1	_	_
Utah Wuxamina¶**	2	8	32	92	179	—	0	1	—	—	—	0	1	—	—
wyoming " Pacific	_	0	5	1	41	_	0	12	_	_	_	0	12	_	_
Alaska	_	0	4	4	25	_	0	0	_	_	_	0	0	_	_
California	—	0	0	—		—	0	8	—	—	—	0	6	—	—
Hawaii	N	0	4	N	16 N	_	0	0	_	_	_	0	0 4	_	_
Washington	N	0	Ő	N	N	_	0	6	_	_	_	0	3	_	_
American Samoa	Ν	0	0	Ν	Ν	—	0	0	_	—	—	0	0	_	—
C.N.M.I.	_	_	_	_	-	_	_		_	-	_			_	_
Puerto Rico	4	5	26	 52	118	_	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 reportable. NN: Not Nationally Notifiable. Cum: Cumulative year-to-date counts. Med: Median. Max: Maximum. \* Incidence data for reporting years 2009 and 2010 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly. <sup>†</sup> 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. <sup>§</sup> Not reportable in all states. Data from states where the condition is not reportable are excluded from this table, except starting 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. <sup>¶</sup> Contains data reported through the National Electronic Disease Surveillance System (NEDSS). \*\*Contains data that was reported via Health Level Seven (HL7) messages.

#### TABLE III. Deaths in 122 U.S. cities,\* week ending March 20, 2010 (11th week)

		All ca	uses, by a	ge (years)						All ca	uses, by a	ge (years	;)		
Reporting area	All Ages	≥65	45-64	25–44	1–24	<1	P&I <sup>†</sup> Total	Reporting area	All Ages	≥65	45-64	25–44	1–24	<1	P&I <sup>†</sup> Total
New England	561	410	112	18	6	14	61	S. Atlantic	1,188	781	290	76	14	27	80
Boston, MA	141	98	32	7	2	2	15	Atlanta, GA	112	70	29	7	2	4	11
Bridgeport, CT	34	28	4	1	—	1	6	Baltimore, MD	129	79	33	12	3	2	10
Cambridge, MA	16	13	2	_	—	—	2	Charlotte, NC	108	67	32	6	1	2	9
Fall River, MA	33	27	5	1	_	_	2	Jacksonville, FL	176	115	49	8	3	1	18
Hartford, CI	49	2/	15	3	1	3	5	Miami, FL	90	55	25	8	1	1	4
	50 12	25	5	_	_	_	5	Richmond VA	63	35	21	2		2	2
New Redford MA	12	13	6	_	_	_	2	Savannah GA	61	47	11	2	1	_	3
New Haven, CT	25	21	1	1	1	1	4	St. Petersburg, FL	54	42	6	4	_	2	2
Providence, RI	57	43	11	2	_	1	4	Tampa, FL	239	165	49	15	2	8	13
Somerville, MA	4	2	2	_	_	_	_	Washington, D.C.	53	28	15	6	_	4	1
Springfield, MA	39	26	5	2	2	4	4	Wilmington, DE	21	16	5	—	_	—	4
Waterbury, CT	29	22	7	_	—	—	4	E.S. Central	890	572	230	57	15	16	75
Worcester, MA	73	59	11	1		2	9	Birmingham, AL	172	108	43	9	5	7	15
Mid. Atlantic	1,898	1,302	444	88	37	26	86	Chattanooga, IN	63	44	18	1	_	_	5
Albany, NY	45	33	5	1	2	4	—	Knoxville, IN	105	6/	34	3	1		6
Allentown, PA Buffalo, NV	18	55	5 16	3	1	_	7	Lexington, Kr Memobis TN	89 155	103	19	10	2	2	16
Camden NI	35	22	8	2	_	2	_	Mobile Al	110	82	22	12	3	_	9
Elizabeth, NJ	13	6	4	1	2	_	1	Montgomery, Al	30	20	8	1	1	_	4
Erie, PA	47	36	7	3	1	_	4	Nashville, TN	157	92	51	12		2	9
Jersey City, NJ	39	25	11	3	_	_	2	W.S. Central	1,263	788	335	71	28	41	86
New York City, NY	1,028	723	227	43	22	13	39	Austin, TX	112	75	24	6	4	3	10
Newark, NJ	38	18	15	4	1	—	4	Baton Rouge, LA	55	37	11	4	1	2	1
Paterson, NJ	6	4	2	—	—	—	1	Corpus Christi, TX	74	46	18	6	4	—	4
Philadelphia, PA	254	158	68	19	6	3	10	Dallas, TX	206	121	56	10	10	9	10
Pittsburgh, PA <sup>9</sup>	34	20	12	1	—	_	3	El Paso, TX	48	33	12	3			3
Reading, PA	43	25	14	2	_	2	5	Fort Worth, IX	100	102	0	U	0	0	0
Schopostady NV	83 24	60 17	19	5	_	I	0	Houston, IX	180	102	10	9	I	11	18
Scranton PA	24	19	3	_	_	_	_	New Orleans LA	03	50	19	-4 U	<u> </u>	4 U	-4 U
Svracuse, NY	55	42	12	1	_	_	2	San Antonio, TX	302	183	83	19	6	11	23
Trenton, NJ	19	10	7		1	1	1	Shreveport, LA	73	53	15	2	2	1	23
Utica, NY	7	6	1	_	_	_	_	Tulsa, OK	142	100	34	8	_	_	11
Yonkers, NY	14	11	2	_	1	_	_	Mountain	1,114	764	240	60	27	21	91
E.N. Central	2,101	1,406	494	112	52	37	144	Albuquerque, NM	133	89	27	7	9	1	15
Akron, OH	46	27	13	2	1	3	5	Boise, ID	39	32	5	—	1	1	3
Canton, OH	45	36	8	1	_	_	5	Colorado Springs, CO	73	50	15	7	_	1	2
Chicago, IL	290	171	83	21	11	4	7	Denver, CO	97	75	14	3	2	3	12
	114	162	52	12	2	3	13	Las vegas, inv	218	150	48	2	2	/	22
	233	180	76	13	י ז	9	38	Phoenix A7	196	112	61	14	4	4	10
Davton, OH	138	100	25	9	1	2	12	Pueblo, CO	33	22	11		_	_	3
Detroit, MI	150	84	42	9	13	2	4	Salt Lake City, UT	140	97	27	8	5	3	11
Evansville, IN	34	30	3	_	1	_	3	Tucson, AZ	159	119	27	8	3	1	10
Fort Wayne, IN	84	56	19	7	2	—	2	Pacific	1,768	1,283	363	65	36	20	198
Gary, IN	14	9	3	—	—	2	3	Berkeley, CA	16	12	3	—	1	—	4
Grand Rapids, MI	44	36	6	1	1	_	4	Fresno, CA	131	103	23	2	1	2	21
Indianapolis, IN	188	116	45	16	6	5	14	Glendale, CA	40	32	7	_	_	1	9
Lansing, Mi	39 120	30	8	1		_	4	Honolulu, Hi	/3	50	13	4		1	5
Peoria II	120	30	24 Q	4	5 1	_	2	Long Beach, CA	270	102	56	12	2	7	31
Rockford II	49 54	44	6	3	_	1	4	Pasadena, CA	34	25	4	3	1	1	6
South Bend, IN	9	9	_	_	_	_	_	Portland, OR	99	62	26	5	4	2	2
Toledo, OH	100	68	22	5	3	2	2	Sacramento, CA	231	171	46	8	6	_	35
Youngstown, OH	71	60	8	1	1	1	4	San Diego, CA	156	119	28	5	2	2	15
W.N. Central	623	413	156	29	16	9	52	San Francisco, CA	102	72	22	5	_	2	12
Des Moines, IA	91	57	26	5	2	1	8	San Jose, CA	199	142	50	4	2	1	23
Duluth, MN	39	27	9	1	2	—	1	Santa Cruz, CA	37	29	7	1	—	—	1
Kansas City, KS	36	26	8	2			_	Seattle, WA	132	92	28	6	5	1	6
Kansas City, MO	115	72	31	6	4	2	9	Spokane, WA	63	43	15	3	2	—	4
Lincoln, NE	47	36	11			_	9	Tacoma, WA	116	81	23	6	6		15
Minneapolis, MiN	/2	3/	25	5	1	4	/	Total"	11,406	7,719	2,004	5/6	231	211	8/3
St Louis MO	90 ۲	50	10		∠ 1	_	0 1								
St. Paul, MN	58	43	10	4	1	_	6								
Wichita, KS	93	64	19	5	3	2	3								

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

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

<sup>¶</sup> Total includes unknown ages.

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