



MMWRTM

Morbidity and Mortality Weekly Report

Weekly

July 14, 2006 / Vol. 55 / No. 27

Commemorating CDC's 60th Anniversary

This month marks the 60th anniversary of the establishment of CDC, which was founded as the Communicable Disease Center on July 1, 1946, in Atlanta, Georgia (1). To commemorate this anniversary, *MMWR* is departing from its usual report format to present a series of commentaries by past directors and the current director of CDC. The directors were invited to give their personal perspectives on the key public health achievements and challenges that occurred during their tenures.

Reports from *MMWR* and the media have provided contemporary accounts of the events that shaped CDC over the years. Other histories have been researched by CDC authors (2) or drawn from interviews with staff members and partners whose achievements contributed to the CDC public health legacy (3,4). The unique views provided by CDC directors might reinforce these perspectives or reveal something much different.

This week's issue of *MMWR* contains the first Director's Perspective, written by David J. Sencer, who served as director of CDC during 1966–1977. Commentaries by other CDC directors will be published in the months ahead.

References

1. CDC. Historical perspectives: history of CDC. *MMWR* 1996;45: 526–30.
2. Thacker SB, Dannenberg AL, Hamilton DH. Epidemic Intelligence Service of the Centers for Disease Control and Prevention: 50 years of training and service in applied epidemiology. *Am J Epidemiol* 2001;154:985–92.
3. Etheridge EW. Sentinel for health: a history of the Centers for Disease Control. Berkeley, CA: University of California Press; 1992.
4. McKenna M. Beating back the devil: on the frontlines with the disease detectives of the Epidemic Intelligence Service. New York, NY: Simon and Schuster; 2004.

CDC's 60th Anniversary

Director's Perspective — David J. Sencer, M.D., M.P.H., 1966–1977

Change, national and international, was the engine that thrust CDC into its third decade (1966–1975). Starting the decade as the Communicable Disease Center, it ended the decade as the Center for Disease Control as part of the Public Health Service (PHS) under the U.S. Department of Health, Education, and Welfare (HEW) (Box).

By 1965, CDC had become a national resource in communicable disease control, serving its primary constituency, state and local health departments, through technical assistance, loan of personnel, and grants in aid. By then, the Epidemic Intelligence Service (EIS) was firmly entrenched as the nation's major source of trained epidemiologists. CDC laboratories were recognized as gold standards in microbiology, clinical chemistry, and toxicology. Programs to assist states in the control of vaccine-preventable diseases, sexually transmitted diseases, and tuberculosis were functioning well. However, only 1 year later, events in the United States and abroad forever changed the scope of CDC's public health responsibilities. These events transformed CDC into a major contributor to global health programs and broadened its domestic responsibilities well beyond communicable disease.

Global Health

In 1966, CDC inherited one disease-eradication program that was faltering and initiated another that led to the first and only worldwide eradication of a disease. The first program targeted malaria. In 1966, malaria activities of the U.S.

INSIDE

749 [Varicella Outbreak Among Vaccinated Children — Nebraska, 2004](#)

753 [QuickStats](#)

The *MMWR* series of publications is published by the Coordinating Center for Health Information and Service, Centers for Disease Control and Prevention (CDC), U.S. Department of Health and Human Services, Atlanta, GA 30333.

Suggested Citation: Centers for Disease Control and Prevention. [Article title]. *MMWR* 2006;55:[inclusive page numbers].

Centers for Disease Control and Prevention

Julie L. Gerberding, MD, MPH
Director

Tanja Popovic, MD, PhD
(Acting) Chief Science Officer

James W. Stephens, PhD
(Acting) Associate Director for Science

Steven L. Solomon, MD
Director, Coordinating Center for Health Information and Service

Jay M. Bernhardt, PhD, MPH
Director, National Center for Health Marketing

Judith R. Aguilar
(Acting) Director, Division of Health Information Dissemination (Proposed)

Editorial and Production Staff

Frederic E. Shaw, MD, JD
(Acting) Editor, MMWR Series

Anne Schuchat, MD
Guest Editor, Director's Perspective Series

Suzanne M. Hewitt, MPA
Managing Editor, MMWR Series

Douglas W. Weatherwax
(Acting) Lead Technical Writer-Editor

Catherine H. Bricker, MS
Jude C. Rutledge
Writers-Editors

Beverly J. Holland
Lead Visual Information Specialist

Lynda G. Cupell
Malbea A. LaPete
Visual Information Specialists

Quang M. Doan, MBA
Erica R. Shaver
Information Technology Specialists

Editorial Board

William L. Roper, MD, MPH, Chapel Hill, NC, Chairman
Virginia A. Caine, MD, Indianapolis, IN
David W. Fleming, MD, Seattle, WA
William E. Halperin, MD, DrPH, MPH, Newark, NJ
Margaret A. Hamburg, MD, Washington, DC
King K. Holmes, MD, PhD, Seattle, WA
Deborah Holtzman, PhD, Atlanta, GA
John K. Iglehart, Bethesda, MD
Dennis G. Maki, MD, Madison, WI
Sue Mallonee, MPH, Oklahoma City, OK
Stanley A. Plotkin, MD, Doylestown, PA
Patricia Quinlisk, MD, MPH, Des Moines, IA
Patrick L. Remington, MD, MPH, Madison, WI
Barbara K. Rimer, DrPH, Chapel Hill, NC
John V. Rullan, MD, MPH, San Juan, PR
Anne Schuchat, MD, Atlanta, GA
Dixie E. Snider, MD, MPH, Atlanta, GA
John W. Ward, MD, Atlanta, GA

Agency for International Development (USAID), in support of the World Health Organization (WHO) Malaria Eradication Program, were falling short of their goals. The basic premise of the WHO program was that malaria could be eradicated by control of its mosquito vectors using indoor spraying with DDT. Obstacles to this goal included inadequate surveillance, lack of research, corruption and waning support in the countries involved, and insufficient training of health-care workers.

CDC spearheaded efforts to include more effective surveillance and research, improve training, and instill good management practices into country programs in cooperation with their national health authorities. Under the leadership of Donald Schliessmann and Robert Kaiser, CDC changed the focus of malaria activities from eradication to control of death and morbidity (1). Today, nearly 40 years later, CDC is recognized as a leading force in the global fight against the disease, focusing on evaluation of methodology, surveillance, and field research through its stations in Kenya and Guatemala, and collaborating with USAID and WHO on the President's Malaria Initiative and the Roll Back Malaria program.

The second global challenge was smallpox. CDC envisioned a smallpox eradication program, based on efforts begun by CDC's Alexander Langmuir and D.A. Henderson, for 20 countries in West and Central Africa. CDC agreed to a request from USAID to assist in a measles-control program in the area on the condition that the program be combined with smallpox eradication. This arrangement was supported by USAID, which agreed to fund the program. Henderson was assigned to WHO headquarters to head the global effort, and J. Donald Millar led CDC's efforts in West Africa.

To prepare for their field work, epidemiologists and operations officers were trained in smallpox epidemiology, clinical aspects, and vaccine properties; they also received French language instruction and lessons in motor vehicle repair. They embarked on a program that demonstrated that smallpox eradication was possible, but only if the standard approach was altered drastically. Although original plans had called for mass vaccination, CDC staff in Nigeria demonstrated that eradication was best achieved by surveillance and containment of local outbreaks (2). The last case of smallpox in West Africa was reported in 1970; the program was successful, under budget, and a year ahead of schedule. Technology and supplies were vital to the effort; however, more important was the ability of CDC staff members to establish collegial relations with their counterparts in the countries in which they worked, motivating them to assume responsibility and leadership. This ability has proven indispensable and remains a key to CDC's successful global activities (3).

BOX. Selected milestones and events in public health that occurred during CDC's 60-year history

1946	Communicable Disease Center established from the World War II agency, Malaria Control in War Areas.	1980	CDC name changed to Centers for Disease Control, reflecting new organization. Congress creates the Agency for Toxic Substances and Disease Registry, which becomes a "sister agency" to CDC. <i>MMWR</i> reports on Reye syndrome associated with aspirin use. Toxic shock syndrome associated with tampons.
1949	Last case of smallpox in the United States.	1981	First AIDS cases reported in <i>MMWR</i> .
1951	Epidemic Intelligence Service (EIS) founded.	1986	Office on Smoking and Health becomes part of CDC.
1953	First EIS assistance for environmental exposure (trichloroethylene) and occupational exposure (anthrax).	1987	National Center for Health Statistics added to CDC.
1955	Inactivated polio vaccine licensed; "Cutter incident" investigated.	1988	Center for Chronic Disease Prevention and Health Promotion established at CDC.
1957	Onset of "Asian flu" influenza pandemic.	1992	CDC name changed to Centers for Disease Control and Prevention. National Center for Injury Prevention and Control added to CDC.
1961	<i>MMWR</i> moved to CDC from National Office of Vital Statistics.	1993	Hantavirus pulmonary syndrome recognized in southwestern United States.
1962	First EIS assistance for chronic disease (leukemia cluster).	1994	Vaccines for Children Program established.
1964	Advisory Committee on Immunization Practices (ACIP) holds first meeting. First Surgeon General's Report on Smoking and Health.	1996	Prevention Effectiveness Program and Guide for Community Preventive Services initiated.
1966	Global smallpox eradication effort begins.	1997	Cardiac valvulopathy associated with fenfluramine (fen-phen). H5N1 avian influenza outbreak spreads to humans in Hong Kong.
1968	Onset of "Hong Kong flu" influenza pandemic.	1998	Cereal grain enriched with folic acid by federal mandate.
1970	CDC name changed to Center for Disease Control.	1999	West Nile virus identified in New York City.
1973	National Institute for Occupational Safety and Health becomes part of CDC. First EIS assistance for injury (homicide in Georgia). First Environmental Protection Agency standards to phase out lead from U.S. gasoline.	2001	CDC responds to World Trade Center and bioterrorist anthrax attacks. National Center on Birth Defects and Developmental Disabilities formed at CDC.
1975	First Field Epidemiology Training Program (Canada).	2003	Severe acute respiratory syndrome (SARS) coronavirus identified.
1976	Legionnaires disease investigated; etiologic agent identified. Guillain-Barré syndrome associated with swine influenza vaccine. Ebola virus identified in Zaire and Sudan.	2005	CDC responds to Hurricanes Katrina and Rita.
1977	Last case of endemic smallpox in world reported from Somalia.	2006	ACIP recommends 15th and 16th routine immunizations for children and adolescents (rotavirus and human papillomavirus vaccines, respectively).
1978	CDC opens maximum-containment laboratory. National health objectives for 1990 initiated at CDC.		
1979	Last case of endemic poliomyelitis caused by wild poliovirus in the United States.		

The expertise gained in Africa served as a major resource for WHO in the two countries that posed the greatest obstacle to global smallpox eradication, India and Bangladesh. In addition to full-time staff assigned to both countries, hundreds of CDC staff members served short-term assignments in India and Bangladesh. The last known case of naturally acquired smallpox in the world occurred in 1977 in Somalia (Figure).

A manmade disaster affecting an African nation's health led CDC into the new areas of disaster relief and nutritional health. In 1968, civil war in Nigeria caused a disastrous famine in parts of that country. The International Committee of the Red Cross and, ultimately, the U.S. Department of State, requested that CDC assist in determining the extent of the famine in eastern Nigeria. Epidemiologists and operations officers immersed themselves in surveillance and the design of programs to combat malnutrition. CDC's Karl Western was secretly airlifted by the Department of State into the secessionist state of Biafra to investigate the famine there; he found the highest recorded prevalence of severe malnutrition since

FIGURE. The last known case of smallpox in the world was in this man aged 23 years in Somalia in 1977



Photo/World Health Organization

the Netherlands Potato Famine of 1945 (4). CDC's experience in these two new areas of disaster and nutrition would later be put to use both domestically and globally. Such international activities are not without risk. Paul Schnitker, an EIS officer in the class of 1969 who was enroute to Nigeria to aid in the famine activities, was killed when his aircraft failed to land safely at Lagos.

Broadened Domestic Horizons

In contrast to its sudden and dramatic entrance into global health, CDC's venture into broader domestic activities was more gradual. In 1970, CDC's involvement in these activities led to its renaming as the Center for Disease Control. Many of the new programs were described by Langmuir, the "father of EIS," as the "EIS diaspora" (5).

Langmuir had long been concerned about overpopulation. He saw the CDC approach to communicable disease control as adaptable to evaluating family planning programs. CDC supported his decision to assign an EIS officer, Nicholas Wright, to evaluate the family planning program at Grady Memorial Hospital in Atlanta, Georgia. Investing even a single person's time in this field was initially controversial. However, from this small beginning, CDC's multidisciplinary reproductive health program grew to eventually encompass not only family planning but also maternal and child health.

An epidemiologic investigation of clusters of leukemia cases in the 1960s led to establishment of leukemia surveillance at CDC in 1966 (6). This and other early investigations of non-infectious disease clusters led to discovery of small clusters of birth defects; CDC's leukemia surveillance activities were broadened to include them. Birth defects surveillance and research led to recognition of the role of folic acid in the prevention of spina bifida and ultimately to the mandatory inclusion of folic acid in many of the nation's cereal grain products in 1998.

Experience with the famine in Biafra provided a basis for establishment of a CDC nutrition program. In 1969, Congress authorized a nutrition survey in 10 states to determine the true extent of malnutrition in the United States. The PHS-administered nutrition program requested assistance from CDC to analyze the data and write the required report to Congress. CDC agreed under the condition that it be allowed to assume responsibility for the entire public health nutrition program. This agreement inaugurated the first nutrition program at CDC. Staff members who had been in Nigeria during its civil war evaluated the 10-state survey data and wrote the report to Congress. The program has continued to grow with realization of the major role of nutrition in disease prevention.

In 1972, CDC had another opportunity to consolidate PHS prevention activities into one agency. PHS wanted to recognize the role of health education in preventing disease. CDC proposed taking on that role through the transfer of HEW's Smoking and Health Program to CDC. This would provide a foundation on which to develop expertise in health communications regarding the major causes of death and disability. This approach was gradually adopted throughout CDC and provided the basis for the widespread recognition of the role of behavioral scientists in CDC's prevention mission (7).

The final building block in the consolidation of preventive health services was the addition of programs related to the environment. In the 1960s, epidemiologic investigations related to environmental contamination and toxicologic laboratory testing were conducted by CDC, but prevention programs related to environmental health were housed in other parts of PHS. In 1973, the National Institute for Occupational Safety and Health was transferred to CDC, as were community environmental activities relating to lead exposure and rat control. These programs benefited by being incorporated into an agency that considered surveillance, investigation, and corrective action as the foundation of successful prevention programs.

This brief historical comment does not give due attention to the many major outbreaks and investigations and to the evolution of public health science during the era described. Concern over hospital-acquired infections led to the major undertaking of the Study on the Efficacy of Nosocomial Infection Control (SENIC) to prove that reduction in such infections was not only life saving but cost effective (8), which provided a scientific foundation for 21st-century efforts such as the 100,000 Lives Campaign (9). Legionnaires disease put CDC on the front page of newspapers for weeks (10) and foreshadowed CDC's comprehensive response to emerging infections. The Tuskegee syphilis study led to the establishment of programs to protect human subjects in research (11) and a formal apology by the U.S. government in 1997. The swine flu vaccination program demonstrated the possibility of organizing and managing an immunization program involving procurement, distribution, liability issues, and adverse event surveillance while vaccinating 43 million persons in 2 months (12). Lessons learned by CDC during the 1976 swine flu vaccination program are being used to improve preparedness for pandemic influenza.

This third decade of CDC history might be summarized as establishing a firm foundation for what would become the nation's disease prevention agency.

References

- Scholten RG, Kaiser RL, Langmuir AD. An epidemiologic examination of the strategy of malaria eradication. *Int J Epidemiol* 1972;1:15–24.
- Foege WH, Millar JD, Lane JM. Selective epidemiologic control in smallpox eradication. *Am J Epidemiol* 1971;94:311–5.
- Millar JD, Foege WH. Status of eradication of smallpox (and control of measles) in West and Central Africa. *J Infect Dis* 1969;120:725–32.
- Kissinger HA. Nigerian relief status report: memorandum to the president. Washington, DC: US Department of State; January 19, 1970. Available at <http://www.state.gov/r/pa/ho/frus/nixon/e5/55092.htm>.
- Etheridge EW. Sentinel for health: a history of the Centers for Disease Control. Berkeley, CA: University of California Press; 1992:136.
- Heath CW Jr, Manning MD, Zerkowicz L. Case clusters in the occurrence of leukaemia and congenital malformations. *Lancet* 1964;18:136–7.
- Ogden HG. Health education: a federal overview. *Public Health Rep* 1976;91:199–205.
- Haley RW, Quade D, Freeman HE, Bennett JV. The SENIC Project. Study on the efficacy of nosocomial infection control (SENIC Project). Summary of study design. *Am J Epidemiol* 1980;111:472–85.
- Institute for Healthcare Improvement. 100,000 Lives Campaign. Cambridge, MA; 2006. Available at <http://www.ihc.org/ihc/programs/campaign>.
- McDade JE, Shepard CC, Fraser DW, Tsai TR, Redus MA, Dowdle WR. Legionnaires' disease: isolation of a bacterium and demonstration of its role in other respiratory disease. *N Engl J Med* 1977;297:1197–203.
- Katz J. The regulation of human experimentation in the United States—a personal odyssey. *IRB* 1987;9:1–6.
- Sencer DJ, Millar JD. Reflections on the 1976 swine flu vaccination program. *Emerg Infect Dis* 2006;12:29–33.

David J. Sencer, M.D., M.P.H., joined CDC in 1960 and was director of CDC during 1966–1977. His other positions included New York City Health Commissioner during 1982–1986. Currently, he is retired and living in Atlanta, Georgia.

Varicella Outbreak Among Vaccinated Children — Nebraska, 2004

On November 19, 2004, a school nurse notified the Nebraska Health and Human Services System (NHHSS) of a varicella outbreak in an elementary school (grades kindergarten through 7). In collaboration with local health department officials and CDC, NHHSS initiated a retrospective cohort study to determine the magnitude of the outbreak, assess vaccine coverage and effectiveness, and compare disease severity among vaccinated and unvaccinated students. This report summarizes the investigation and considers the suitability of school settings for case-based surveillance. The findings highlighted the importance of improving varicella vaccination coverage and implementing varicella vaccination school-entry requirements.

Questionnaires were sent to parents of all students at the elementary school to determine history of varicella disease, varicella vaccination status, and underlying medical conditions. School immunization records were reviewed to confirm vaccination status for all students. In addition to receiving the questionnaires, parents of ill students were interviewed by telephone to ascertain the extent and nature of the disease. Specimens from skin lesions were solicited and tested for varicella-zoster virus (VZV).

A case was defined as illness in a student with an acute generalized maculopapulovesicular rash without other apparent cause with onset during August 26–December 23, 2004 (i.e., during the fall school term). Cases were categorized as mild (<50 skin lesions), moderate (50–500 skin lesions), or severe (>500 skin lesions or any complications or hospitalization). No student with a history of varicella had the disease during the outbreak; therefore, students with a varicella history were excluded from vaccine effectiveness (VE) calculations (as were students whose parents did not return the questionnaire). VE was calculated as the proportional reduction in varicella attack rate between vaccinated and unvaccinated students using the following formula: $VE = (1 - \text{Relative Risk [RR]}) \times 100$.

The 283 students enrolled at the elementary school were divided into 15 classrooms. Parents of 19 (7%) of the 283 students did not return the questionnaire. Of the 264 respondents, 122 (46%) indicated that their child had a previous history of varicella. Of the remaining 142 students, 115 (81%) had been vaccinated. Illness in 33 students met the case definition. Specimens collected from skin lesions of seven students tested positive for VZV by polymerase chain reaction. The 33 patients ranged in age from 5 to 13 years (median: 8 years), and 20 (61%) were male. They represented all grades (kindergarten through 7) and 13 of 15 classrooms (Table).

Results were grouped by grade to clarify vaccination coverage and varicella attack rates in the school.

The outbreak started in late September and peaked in late October to early November (Figure). The index patient was an unvaccinated kindergarten student with rash onset on September 21. The child had a febrile illness and severe disease (i.e., >500 lesions and a secondary skin infection complication) and attended school for 2 days after rash onset. The source of the infection for the index case could not be identified. In nine of the 13 affected classrooms, the earliest rash onset was in an unvaccinated student. Three students became ill subsequent to illness onset in a sibling who attended the same school. Four secondary cases among nonstudent household members were identified (one child and three parents, all of whom were unvaccinated). All had rash onset within 2 weeks of exposure.

Attack rates for vaccinated and unvaccinated students were 13% (15 of 115 students) and 67% (18 of 27 students), respectively. VE was 81% (95% confidence interval [CI] = 66%–89%) for preventing varicella of any severity and 93% (95% CI = 82%–97%) for preventing moderate to severe disease. Vaccinated students were significantly more likely to have milder disease (67% versus 11%) and fewer days of rash (5 versus 7.3) and to miss fewer days of school (3 versus 5.2) than unvaccinated students ($p < 0.01$).

After recognition of the outbreak, all parents at the school were notified of its occurrence, and parents of infected children were asked to keep their children at home until the end of the infectious period (i.e., 4–5 days after rash onset or until lesions formed crusts); NHHSS did not legally have the option of excluding unvaccinated students from school during the outbreak. In addition, teachers were provided information regarding recognition of mild cases that typically occur in vaccinated

TABLE. Distribution of students,* by grade, varicella vaccination status, and varicella attack rate — Nebraska, 2004

Grade	Total no. of students	No. of students with history of varicella†	No. of cases§ (total no. of eligible students¶)			Vaccination coverage of eligible students %	Overall attack rate among eligible students %
			Unvaccinated	Vaccinated	Total		
Kindergarten	28	2	3 (3)	1 (23)	4 (26)	89	15
1	27	4	5 (6)	6 (17)	11 (23)	74	48
2	21	3	0 (0)	3 (18)	3 (18)	100	17
3	33	7	4 (5)	3 (21)	7 (26)	81	27
4	28	12	4 (5)	1 (11)	5 (16)	69	29
5	28	15	1 (4)	0 (9)	1 (13)	69	8
6	35	26	1 (1)	0 (8)	1 (9)	89	11
7	64	53	0 (3)	1 (8)	1 (11)	73	9
Total	264	122	18 (27)	15 (115)	33 (142)	81	23

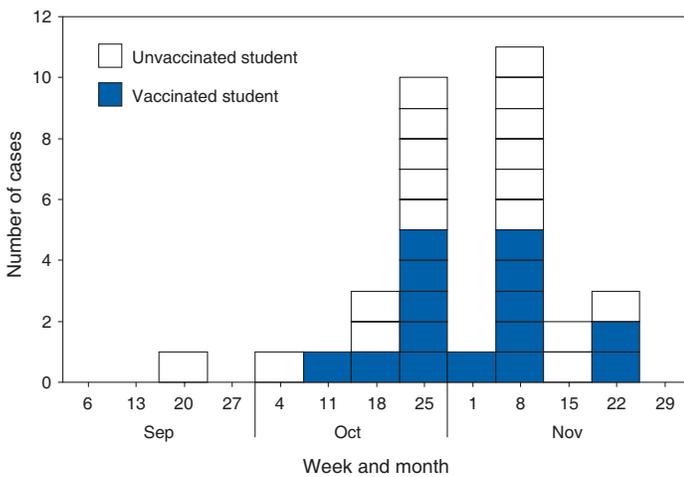
* Students whose parents responded to the questionnaire (N = 264); age range: 5–13 years.

† Excluded from analyses.

§ Acute generalized maculopapulovesicular rash illness without other apparent cause with onset during August 26–December 23, 2004.

¶ Students with no history of varicella.

FIGURE. Number of varicella cases,* by week of rash onset and vaccination status — Nebraska, 2004



* Acute generalized maculopapulovesicular rash illness without other apparent cause with onset during August 26–December 23, 2004 (N = 33).

children. Although school and public health officials recommended vaccination of exposed, susceptible students at the Nebraska elementary school after recognition of the outbreak, no parents of the susceptible students agreed to administration of varicella vaccine to their children during the outbreak.

Reported by: D Huebner, *Hershey Elementary School, Hershey; S Smith, West Central District Health Dept, North Platte; T Safranek, MD, A O'Keefe, MD, Nebraska Health and Human Svcs System. A Lopez, MHS, M Marin, MD, D Guris, MD, Div of Viral Diseases, National Center for Immunization and Respiratory Diseases (proposed); A Date, MD, EIS Officer, CDC.*

Editorial Note: Since licensure of varicella vaccine in the United States in 1995 and subsequent nationwide implementation of a varicella vaccination program, the country has experienced a dramatic decline in cases, hospitalizations, and deaths related to varicella (1,2). However, varicella outbreaks continue to occur among unvaccinated and vaccinated school children (3–6). This report corroborates the findings of other postlicensure studies, which indicated that the varicella vaccine is 80%–85% effective in preventing varicella of any severity and $\geq 95\%$ effective in preventing severe varicella disease and that disease is generally milder in vaccinated persons.

In 1999, the Advisory Committee on Immunization Practices (ACIP) recommended establishing a varicella vaccination school-entry requirement (7). In August 2004, Nebraska implemented the requirement, applicable that year to students entering kindergarten and 7th grade and all out-of-state transfers.* The requirement has been extended to successive grades

each subsequent year. In 2004, at the time of the outbreak, coverage in Nebraska was 82% among children aged 19–35 months. Some kindergartners and 7th graders at the outbreak school remained unvaccinated for religious reasons and were allowed to begin the 2004 fall term; Nebraska state law allows exceptions on religious and medical grounds.

No parents of susceptible students agreed to administration of varicella vaccine to their children during the outbreak, likely because of a widespread belief among the parents that the vaccine was ineffective; the outbreak coincided with introduction of the varicella vaccination requirement, and some vaccinated students were contracting varicella. This report refutes the misconception that vaccination was ineffective and underscores the importance of investigating such outbreaks and educating parents about the value of varicella vaccination.

The findings in this report are subject to at least three limitations. First, information on history of varicella was obtained from parents and therefore subject to recall bias and reporting errors. Second, reliance on school staff members to notify NHHSS of potential cases might have led to incomplete case ascertainment. Third, reliance on parents for reports of rash or physicians for diagnosis might have resulted in overestimation or underestimation of VE; inability of school staff members or parents to recognize mild cases of disease also might have led to an overestimation of VE.

In the United States, school-entry vaccination requirements have resulted in high and sustained vaccination coverage among school-aged children (8). By July 2006, the District of Columbia and all states except Idaho, Montana, Vermont, and Wyoming had implemented a varicella vaccination school-entry requirement. Varicella vaccination has reduced the risk for and severity of varicella disease among vaccinated students and warrants improving varicella vaccination coverage through broader school-entry requirements. In 2005, ACIP expanded its varicella vaccination school-entry requirement recommendations to include students from kindergarten through college (9). Gradually covering all grades through implementation of school-entry requirements will increase vaccination coverage and population immunity and continue to reduce varicella morbidity in schools and the community.

To reduce additional virus transmission during outbreaks, in 2005, ACIP recommended a second dose of vaccine in outbreak settings for those who had received 1 dose of varicella vaccine (9). In addition, ACIP recently recommended a routine second dose of varicella vaccine for children aged 4–6 years.† During the 2004 Nebraska outbreak, because of the resistance by parents to vaccinating exposed susceptible students, NHHSS did not consider providing a second dose

* Available at http://www.sos.state.ne.us/business/regsearch/Rules/Health_and_Human_Services_System/Title-173/Chapter-4.pdf.

† Available at <http://www.cdc.gov/od/oc/media/pressrel/r060629-b.htm>.

for previously vaccinated students; 13% of vaccinated children acquired varicella. Varicella-zoster immune globulin was not administered to any students.

In 2002, the Council of State and Territorial Epidemiologists recommended that by 2005, all states should establish case-based varicella reporting by using either statewide surveillance or surveillance in sentinel sites (10). Case-based surveillance systems facilitate timely recognition and control of outbreaks such as the Nebraska outbreak and help define the impact of varicella vaccination on the epidemiology of varicella disease. As demonstrated in this outbreak, schools are an ideal setting for varicella sentinel surveillance because of their readily available vaccination records and populations that can be surveyed easily.

References

1. CDC. Decline in annual incidence of varicella—selected states, 1990–2001. *MMWR* 2003;52:884–5.
2. Seward JF, Watson BM, Peterson CL, et al. Varicella disease after introduction of varicella vaccine in the United States, 1995–2000. *JAMA* 2002;287:606–11.
3. Marin M, Nguyen HQ, Keen J, et al. Importance of catch-up vaccination: experience from a varicella outbreak, Maine, 2002–2003. *Pediatrics* 2005;115:900–5.
4. Brian R, Lee BR, Feaver SL, Miller CA, Hedberg CW, Ehresmann KR. An elementary school outbreak of varicella attributed to vaccine failure: policy implications. *J Infect Dis* 2004;190:477–83.
5. Renas R, Bies S, Bird C, et al. Outbreak of varicella among vaccinated children—Michigan, 2003. *MMWR* 2004;53:389–92.
6. Verstraeten T, Jumaan AO, Mullooly JP, et al. A retrospective cohort study of the association of varicella vaccine failure with asthma, steroid use, age at vaccination, and measles-mumps-rubella vaccination. *Pediatrics* 2003;112:e98–e103.
7. CDC. Prevention of varicella: updated recommendations of the Advisory Committee on Immunization Practices (ACIP). *MMWR* 1999;48 (No. RR-6).
8. Kolasa MS, Klemperer-Johnson S, Papania MJ. Progress toward implementation of a second-dose measles immunization requirement for all schoolchildren in the United States. *J Infect Dis* 2004;189 (Suppl 1):S98–103.
9. CDC. Prevention of varicella—provisional updated ACIP recommendations for varicella vaccine use. Atlanta, GA: US Department of Health and Human Services, CDC; 2005. Available at http://www.cdc.gov/nip/vaccine/varicella/varicella_acip_rec.pdf.
10. Council of State and Territorial Epidemiologists. Varicella surveillance. Atlanta, GA: Council of State and Territorial Epidemiologists, 2002 (Position statement no. ID-6). Available at <http://www.cste.org/position%20statements/02-id-06.pdf>.

Errata: Vol. 55, No. SS-6

In the *Surveillance Summary*, “Human Immunodeficiency Virus (HIV) Risk, Prevention, and Testing Behaviors — United States, National HIV Behavioral Surveillance System: Men Who Have Sex with Men, November 2003–April 2005,”

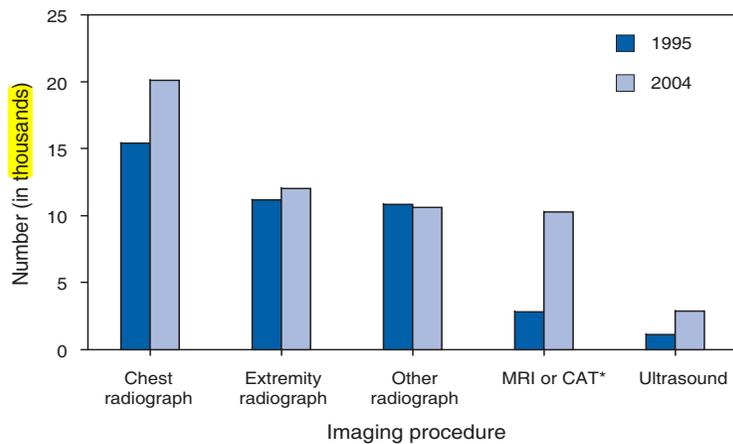
on page 1, in the “Results” section of the Abstract, the fifth sentence should read, “Unprotected anal intercourse was reported by 58% with a main male partner (someone with whom the participant had sex and to whom he felt most committed [e.g., a boyfriend, spouse, significant other, or life partner]) and by 36% with a casual male partner (someone with whom the participant had sex but who was not considered a main partner).”

On page 9, under the heading, “Use of HIV Prevention Services and Programs,” the second sentence should read, “Overall, 8,035 (80%) participants had received free condoms; 1,505 (15%) had engaged in an individual-level intervention, and 801 (8%) had engaged in a group-level intervention (Table 11).”

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Number of Emergency Department (ED) Visits with Diagnostic Imaging Performed — United States, 1995 and 2004



* Magnetic resonance imaging or computerized axial tomography.

Trends in the use of diagnostic imaging can be an important component of tracking ED use and cost. In 2004, more ED visits included imaging procedures than in 1995 (43% versus 38% of visits, respectively). During 1995–2004, the number of MRI or CAT scans nearly quadrupled, and the number of ultrasounds more than doubled. The overall number of ED visits increased by 14%.

SOURCE: CDC. National Hospital Ambulatory Medical Care Survey, 1995 and 2004. Available at <http://www.cdc.gov/nchs/nhamcs.htm>.

TABLE I. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending July 8, 2006 (27th Week)*

Disease	Current week	Cum 2006	5-year weekly average†	Total cases reported for previous years					States reporting cases during current week (No.)
				2005	2004	2003	2002	2001	
Anthrax	—	1	0	—	—	—	2	23	
Botulism:									
foodborne	—	3	1	19	16	20	28	39	
infant	—	35	1	90	87	76	69	97	
other (wound & unspecified)	1	27	0	33	30	33	21	19	CA (1)
Brucellosis	—	51	2	122	114	104	125	136	
Chancroid	—	19	1	17	30	54	67	38	
Cholera	—	2	0	8	5	2	2	3	
Cyclosporiasis§	2	39	10	734	171	75	156	147	RI (1), FL (1)
Diphtheria	—	—	0	—	—	1	1	2	
Domestic arboviral diseases§¶:									
California serogroup	—	—	3	78	112	108	164	128	
eastern equine	—	—	0	21	6	14	10	9	
Powassan	—	—	0	1	1	—	1	N	
St. Louis	—	1	0	10	12	41	28	79	
western equine	—	—	—	—	—	—	—	—	
Ehrlichiosis§:									
human granulocytic	2	84	17	790	537	362	511	261	NY (2)
human monocytic	1	83	10	522	338	321	216	142	NC (1)
human (other & unspecified)	—	27	3	122	59	44	23	6	
<i>Haemophilus influenzae</i> **,									
invasive disease (age <5 yrs):									
serotype b	—	4	0	9	19	32	34	—	
nonserotype b	—	44	2	135	135	117	144	—	
unknown serotype	2	98	2	217	177	227	153	—	CA (2)
Hansen disease§	1	31	2	88	105	95	96	79	NH (1)
Hantavirus pulmonary syndrome§	—	9	1	29	24	26	19	8	
Hemolytic uremic syndrome, postdiarrheal§	2	64	5	221	200	178	216	202	CA (2)
Hepatitis C viral, acute	2	403	32	771	713	1,102	1,835	3,976	DC (1), FL (1)
HIV infection, pediatric (age <13 yrs)§,††	—	52	6	380	436	504	420	543	
Influenza-associated pediatric mortality§,§§,¶¶	—	38	1	49	—	N	N	N	
Listeriosis	10	245	17	892	753	696	665	613	NY (2), PA (2), OH (2), IN (1), MO (1), ND (1), NC (1)
Measles	—***	22	2	66	37	56	44	116	
Meningococcal disease,††† invasive:									
A, C, Y, & W-135	—	130	4	297	—	—	—	—	
serogroup B	—	80	3	157	—	—	—	—	
other serogroup	—	12	0	27	—	—	—	—	
Mumps	13	5,155	4	314	258	231	270	266	OH (2), IA (3), MO (3), KS (4), CA (1)
Plague	—	1	0	8	3	1	2	2	
Poliomyelitis, paralytic	—	—	—	1	—	—	—	—	
Psittacosis§	—	9	0	19	12	12	18	25	
Q fever§	1	65	2	139	70	71	61	26	CA (1)
Rabies, human	—	1	0	2	7	2	3	1	
Rubella	—	4	0	11	10	7	18	23	
Rubella, congenital syndrome	—	1	—	1	—	1	1	3	
SARS-CoV§,§§	—	—	—	—	—	8	N	N	
Smallpox§	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome§	1	63	1	129	132	161	118	77	OH (1)
<i>Streptococcus pneumoniae</i> §									
invasive disease (age <5 yrs)	8	613	10	1,257	1,162	845	513	498	RI (1), NY (4), OH (3)
Syphilis, congenital (age <1 yr)	—	100	8	361	353	413	412	441	
Tetanus	1	10	0	27	34	20	25	37	MA (1)
Toxic-shock syndrome (other than streptococcal)§	1	49	2	96	95	133	109	127	GA (1)
Trichinellosis	—	7	0	19	5	6	14	22	
Tularemia§	—	29	5	154	134	129	90	129	
Typhoid fever	1	117	7	324	322	356	321	368	CA (1)
Vancomycin-intermediate <i>Staphylococcus aureus</i> §	—	2	—	2	—	N	N	N	
Vancomycin-resistant <i>Staphylococcus aureus</i> §	—	—	—	4	1	N	N	N	
Yellow fever	—	—	—	—	—	—	1	—	

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

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

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

§ Not notifiable in all states.

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

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

†† Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, STD and TB Prevention. Implementation of HIV reporting influences the number of cases reported. Data for HIV/AIDS are available in Table IV quarterly.

§§ Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases.

¶¶ A total of 37 cases were reported for the 2005-06 flu season (October 2, 2005 [week 40]–May 20, 2006 [week 20]).

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

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

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Chlamydia [†]					Coccidioidomycosis					Cryptosporidiosis				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	6,717	18,721	35,170	464,613	495,257	12	126	1,643	3,678	2,059	28	69	860	1,224	1,144
New England	372	625	1,550	15,414	16,374	—	0	0	—	—	—	4	35	67	66
Connecticut	231	166	1,214	3,897	4,784	N	0	0	N	N	—	0	14	9	8
Maine	—	42	74	1,021	1,082	N	0	0	N	N	—	0	3	12	11
Massachusetts	71	276	432	7,269	7,335	—	0	0	—	—	—	2	15	28	26
New Hampshire	26	35	64	952	936	—	0	0	—	—	—	1	3	11	9
Rhode Island	44	66	99	1,734	1,722	—	0	0	—	—	—	0	6	3	1
Vermont [§]	—	18	43	541	515	N	0	0	N	N	—	0	5	4	11
Mid. Atlantic	699	2,298	3,696	58,474	60,452	—	0	0	—	—	6	11	597	181	155
New Jersey	66	357	500	8,473	9,992	N	0	0	N	N	—	0	8	6	11
New York (Upstate)	375	497	1,727	11,893	11,888	N	0	0	N	N	3	3	561	53	37
New York City	82	689	1,611	18,832	19,674	N	0	0	N	N	—	2	15	30	44
Pennsylvania	176	715	1,073	19,276	18,898	N	0	0	N	N	3	4	21	92	63
E.N. Central	981	3,141	12,578	75,019	82,635	1	0	3	23	5	8	14	162	268	251
Illinois	662	943	1,536	24,409	25,619	—	0	0	—	—	—	2	16	31	34
Indiana	—	393	552	8,306	10,202	N	0	0	N	N	2	1	13	27	14
Michigan	277	560	9,888	16,153	13,457	1	0	3	19	5	1	2	7	47	33
Ohio	18	798	1,445	16,636	22,992	—	0	1	4	—	5	5	109	103	75
Wisconsin	24	399	531	9,515	10,365	N	0	0	N	N	—	4	38	60	95
W.N. Central	367	1,127	1,438	28,795	30,232	—	0	12	—	3	2	9	52	210	179
Iowa	59	150	225	4,098	3,614	N	0	0	N	N	1	1	11	22	52
Kansas	30	154	269	4,050	3,747	N	0	0	N	N	—	1	5	27	14
Minnesota	—	233	307	5,523	6,345	—	0	12	—	3	—	3	22	80	41
Missouri	171	429	525	10,462	11,676	—	0	1	—	—	—	2	37	38	56
Nebraska [§]	80	96	176	2,583	2,661	N	0	1	N	N	—	1	4	15	4
North Dakota	2	33	57	751	801	N	0	0	N	N	1	0	4	5	—
South Dakota	25	52	117	1,328	1,388	N	0	0	N	N	—	0	4	23	12
S. Atlantic	1,596	3,321	4,905	88,615	92,608	—	0	1	2	—	9	14	54	300	215
Delaware	56	68	92	1,834	1,671	N	0	0	N	N	—	0	2	1	—
District of Columbia	—	57	101	1,237	1,982	—	0	0	—	—	—	0	3	8	2
Florida	580	898	1,089	24,040	22,480	N	0	0	N	N	7	6	28	128	97
Georgia	15	615	2,142	12,690	16,024	—	0	0	—	—	2	3	9	83	50
Maryland [§]	190	355	519	9,078	9,274	—	0	1	2	—	—	0	4	9	10
North Carolina	280	569	1,772	17,214	17,159	N	0	0	N	N	—	1	10	36	25
South Carolina [§]	120	286	1,306	8,763	10,454	N	0	0	N	N	—	0	4	16	10
Virginia [§]	321	427	840	11,998	12,217	N	0	0	N	N	—	1	8	17	17
West Virginia	34	57	227	1,761	1,347	N	0	0	N	N	—	0	3	2	4
E.S. Central	793	1,392	1,938	36,877	36,190	—	0	0	—	—	1	3	29	49	30
Alabama [§]	100	370	754	10,433	7,356	N	0	0	N	N	1	0	5	22	11
Kentucky	402	152	336	4,953	5,190	N	0	0	N	N	—	1	25	11	11
Mississippi	—	369	609	8,814	11,821	—	0	0	—	—	—	0	1	4	—
Tennessee [§]	291	488	614	12,677	11,823	N	0	0	N	N	—	1	4	12	8
W.S. Central	156	2,153	3,605	52,411	58,219	—	0	1	—	—	—	4	30	73	34
Arkansas	—	158	340	3,713	4,517	—	0	0	—	—	—	0	2	8	1
Louisiana	—	278	761	7,504	9,937	—	0	1	—	N	—	0	21	11	3
Oklahoma	156	234	2,159	6,075	5,446	N	0	0	N	N	—	1	10	18	14
Texas [§]	—	1,390	1,801	35,119	38,319	N	0	0	N	N	—	2	19	36	16
Mountain	298	1,083	1,839	24,607	32,697	—	92	452	2,409	1,278	1	2	9	44	62
Arizona	165	365	642	9,156	11,483	—	91	448	2,359	1,222	—	0	1	4	5
Colorado	—	208	482	2,970	7,611	N	0	0	N	N	—	1	3	16	19
Idaho [§]	—	52	218	1,576	1,335	N	0	0	N	N	—	0	2	5	5
Montana	32	39	195	1,141	1,192	N	0	0	N	N	1	0	2	8	11
Nevada [§]	—	85	432	1,795	3,737	—	1	4	20	37	—	0	1	3	8
New Mexico [§]	20	174	338	4,987	4,518	—	0	2	5	11	—	0	3	2	8
Utah	67	89	136	2,231	2,253	—	0	3	23	6	—	0	3	6	4
Wyoming	14	26	55	751	568	—	0	2	2	2	—	0	1	—	2
Pacific	1,455	3,232	5,079	84,401	85,850	11	34	1,179	1,244	773	1	3	52	32	152
Alaska	73	84	152	2,172	2,073	—	0	0	—	—	1	0	2	2	—
California	1,092	2,510	4,231	65,563	66,482	11	34	1,179	1,244	773	—	0	14	—	107
Hawaii	—	107	135	2,672	2,786	N	0	0	N	N	—	0	1	—	—
Oregon [§]	—	177	315	4,594	4,537	N	0	0	N	N	—	1	20	30	26
Washington	290	356	604	9,400	9,972	N	0	0	N	N	—	0	38	—	19
American Samoa	U	0	46	U	U	U	0	0	U	U	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	—	18	37	—	393	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	76	162	1,877	2,248	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	2	7	6	107	—	0	0	—	—	—	0	0	—	—

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

U: Unavailable. —: No reported cases. N: Not notifiable.

Cum: Cumulative year-to-date counts.

Med: Median.

Max: Maximum.

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

† Chlamydia refers to genital infections caused by *Chlamydia trachomatis*.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Giardiasis					Gonorrhea					Haemophilus influenzae, invasive All ages, all serotypes				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	136	320	1,029	7,048	8,297	2,480	6,462	14,136	156,620	165,130	28	37	142	1,030	1,328
New England	3	25	75	510	726	55	100	288	2,616	3,092	1	2	19	76	94
Connecticut	—	0	37	119	158	34	40	241	927	1,286	—	0	9	21	28
Maine	—	3	11	48	85	—	2	6	58	69	—	0	2	8	6
Massachusetts	3	10	34	232	315	12	46	75	1,241	1,373	1	1	4	35	45
New Hampshire	—	0	3	10	39	3	4	9	114	79	—	0	1	2	4
Rhode Island	—	0	25	42	53	6	8	19	250	258	—	0	7	2	7
Vermont†	—	3	9	59	76	—	1	4	26	27	—	0	2	8	4
Mid. Atlantic	39	63	254	1,238	1,545	172	647	1,014	15,131	16,654	4	7	30	193	248
New Jersey	—	7	18	97	203	4	107	150	2,399	2,860	—	2	4	26	46
New York (Upstate)	35	23	227	520	516	81	125	455	3,077	3,219	4	2	27	68	74
New York City	—	15	32	312	436	25	177	402	4,215	5,075	—	1	4	15	44
Pennsylvania	4	16	29	309	390	62	212	391	5,440	5,500	—	3	8	84	84
E.N. Central	11	52	110	1,060	1,447	340	1,292	7,047	29,987	32,389	4	5	14	146	233
Illinois	—	12	32	195	368	208	380	567	9,139	9,941	—	1	6	32	72
Indiana	N	0	0	N	N	—	155	228	3,471	4,062	2	1	7	37	41
Michigan	1	14	29	301	349	125	235	5,880	6,625	5,065	—	0	3	14	13
Ohio	10	16	34	351	312	4	395	681	7,639	10,505	2	1	6	48	80
Wisconsin	—	13	40	213	418	3	123	172	3,113	2,816	—	0	4	15	27
W.N. Central	8	35	260	841	932	137	359	461	8,814	9,423	—	2	15	61	57
Iowa	1	5	14	109	121	8	32	54	823	785	—	0	0	—	—
Kansas	2	4	9	78	93	11	48	124	1,124	1,294	—	0	3	11	6
Minnesota	—	4	238	344	420	—	62	94	1,331	1,766	—	0	9	27	21
Missouri	4	10	32	230	189	84	180	240	4,666	4,717	—	0	7	17	20
Nebraska†	1	2	6	43	58	28	21	56	636	619	—	0	2	5	9
North Dakota	—	0	7	5	3	—	2	7	44	46	—	0	3	1	1
South Dakota	—	1	7	32	48	6	6	13	190	196	—	0	0	—	—
S. Atlantic	24	50	95	1,058	1,260	1,054	1,479	2,334	37,744	39,300	13	9	24	277	318
Delaware	—	1	3	13	29	26	24	44	755	408	—	0	1	1	—
District of Columbia	1	1	5	36	22	—	36	66	779	1,035	—	0	1	2	4
Florida	16	19	39	459	433	286	418	520	11,334	9,906	3	3	9	96	79
Georgia	4	12	26	202	347	9	291	1,014	5,660	7,217	2	2	6	48	71
Maryland†	1	4	10	83	89	83	129	231	3,473	3,441	2	1	5	35	41
North Carolina	N	0	0	N	N	540	274	766	8,187	8,100	6	0	9	29	52
South Carolina†	1	1	7	53	70	54	128	748	3,855	4,620	—	1	3	22	21
Virginia†	1	10	50	201	254	51	139	288	3,260	4,222	—	1	8	33	31
West Virginia	—	0	6	11	16	5	16	42	441	351	—	0	4	11	19
E.S. Central	3	8	18	190	177	341	547	723	14,604	13,737	—	2	6	61	75
Alabama†	—	4	14	94	79	52	180	327	4,796	4,174	—	0	4	16	15
Kentucky	N	0	0	N	N	132	55	116	1,701	1,668	—	0	1	2	9
Mississippi	—	0	0	—	—	—	137	203	3,287	3,630	—	0	1	3	—
Tennessee†	3	4	12	96	98	157	182	279	4,820	4,265	—	1	4	40	51
W.S. Central	4	6	31	123	117	39	891	1,430	22,172	23,123	1	1	15	46	79
Arkansas	2	2	6	37	38	—	80	186	2,049	2,337	—	0	2	4	7
Louisiana	—	2	6	35	21	—	163	461	4,528	5,288	—	0	2	9	30
Oklahoma	2	2	24	51	58	39	86	764	2,203	2,232	1	1	14	33	40
Texas†	N	0	0	N	N	—	531	734	13,392	13,266	—	0	1	—	2
Mountain	10	30	57	614	611	48	223	552	5,218	6,937	—	3	8	109	149
Arizona	—	2	36	33	72	30	90	201	2,151	2,553	—	1	7	42	77
Colorado	—	9	33	220	213	—	52	90	879	1,609	—	1	4	34	31
Idaho†	2	3	11	73	62	—	3	10	91	55	—	0	1	3	3
Montana	2	1	7	33	20	3	2	14	75	73	—	0	0	—	—
Nevada†	—	2	6	28	44	—	36	194	634	1,476	—	0	1	—	13
New Mexico†	—	1	6	23	33	3	30	64	901	793	—	0	4	16	16
Utah	3	7	19	194	154	12	17	23	419	348	—	0	4	13	5
Wyoming	3	0	2	10	13	—	2	6	68	30	—	0	2	1	4
Pacific	34	61	202	1,414	1,482	294	806	959	20,334	20,475	5	2	20	61	75
Alaska	1	1	7	21	43	6	11	23	278	285	—	0	19	5	5
California	25	43	105	1,043	1,122	221	662	828	16,668	17,054	5	0	9	15	30
Hawaii	1	1	3	28	35	5	19	36	484	515	—	0	1	9	6
Oregon†	—	8	21	165	164	—	28	58	693	792	—	0	6	30	34
Washington	7	8	90	157	118	62	74	142	2,211	1,829	—	0	4	2	—
American Samoa	U	0	0	U	U	U	0	2	U	U	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	—	0	3	—	3	—	1	15	—	56	—	0	2	—	2
Puerto Rico	—	3	20	20	93	—	5	16	127	210	—	0	1	—	2
U.S. Virgin Islands	—	0	0	—	—	—	0	2	4	51	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Hepatitis (viral, acute), by type										Legionellosis				
	A					B									
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
	Med	Max				Med	Max				Med	Max			
United States	32	76	245	1,696	1,938	38	88	597	1,942	2,679	34	41	127	726	693
New England	—	5	22	97	217	—	2	9	36	74	3	2	12	29	34
Connecticut	—	1	3	19	26	—	0	3	—	28	2	0	8	13	7
Maine	—	0	2	4	1	—	0	2	11	5	—	0	1	3	2
Massachusetts	—	3	14	47	133	—	1	5	14	24	—	1	6	10	17
New Hampshire	—	1	7	15	48	—	0	3	7	14	—	0	1	1	4
Rhode Island	—	0	4	5	5	—	0	2	4	1	1	0	10	1	3
Vermont†	—	0	2	7	4	—	0	1	—	2	—	0	3	1	1
Mid. Atlantic	2	9	24	150	323	1	9	55	179	351	12	13	53	198	205
New Jersey	—	2	9	30	58	—	3	10	45	128	—	1	13	7	37
New York (Upstate)	—	1	14	41	52	—	1	43	30	31	8	5	29	86	45
New York City	—	3	10	51	162	—	1	5	24	74	—	1	20	19	34
Pennsylvania	2	1	6	28	51	1	3	9	80	118	4	5	17	86	89
E.N. Central	3	7	15	147	173	5	8	24	169	292	11	8	25	156	133
Illinois	—	2	11	24	54	—	1	6	6	89	—	1	5	14	20
Indiana	—	0	5	18	9	—	0	17	23	15	2	0	6	10	10
Michigan	—	2	8	54	58	2	3	7	70	98	1	2	7	37	34
Ohio	3	1	4	39	27	3	2	8	65	71	8	3	19	76	57
Wisconsin	—	1	5	12	25	—	0	6	5	19	—	0	5	19	12
W.N. Central	—	2	30	76	49	—	4	22	77	137	—	1	12	20	25
Iowa	—	0	2	4	13	—	0	3	5	14	—	0	1	1	3
Kansas	—	0	5	21	8	—	0	2	6	19	—	0	1	1	2
Minnesota	—	0	29	6	3	—	0	13	6	11	—	0	10	—	1
Missouri	—	1	4	29	22	—	3	7	54	74	—	0	3	11	11
Nebraska†	—	0	3	9	3	—	0	2	6	16	—	0	2	3	2
North Dakota	—	0	2	—	—	—	0	0	—	—	—	0	1	—	1
South Dakota	—	0	3	7	—	—	0	1	—	3	—	0	6	4	5
S. Atlantic	3	11	34	241	303	16	23	66	583	769	2	9	19	170	160
Delaware	—	0	2	9	4	—	1	4	19	18	—	0	2	3	8
District of Columbia	—	0	2	2	2	—	0	2	4	5	—	0	2	6	2
Florida	1	5	18	88	100	6	8	19	217	266	2	3	8	75	47
Georgia	1	1	6	27	65	6	3	9	84	122	—	0	4	8	14
Maryland†	—	1	6	30	27	—	2	9	81	85	—	1	6	28	42
North Carolina	1	0	20	46	39	4	0	23	90	86	—	0	5	19	14
South Carolina†	—	1	3	10	16	—	2	7	35	84	—	0	2	2	8
Virginia†	—	1	11	25	47	—	1	18	20	83	—	1	7	25	20
West Virginia	—	0	3	4	3	—	0	18	33	20	—	0	3	4	5
E.S. Central	—	3	15	58	122	—	6	18	166	198	1	2	9	41	36
Alabama†	—	0	9	7	14	—	1	7	56	48	—	0	1	7	9
Kentucky	—	0	5	23	10	—	1	5	38	40	—	0	4	10	10
Mississippi	—	0	2	3	11	—	0	3	5	33	—	0	1	1	1
Tennessee†	—	1	7	25	87	—	2	12	67	77	1	1	7	23	16
W.S. Central	—	7	77	107	208	—	14	315	310	263	—	1	32	14	14
Arkansas	—	0	9	29	8	—	1	4	21	36	—	0	3	—	4
Louisiana	—	0	4	4	35	—	0	3	11	44	—	0	1	6	—
Oklahoma	—	0	2	4	3	—	0	17	13	26	—	0	3	1	2
Texas†	—	5	73	70	162	—	11	295	265	157	—	0	26	7	8
Mountain	—	6	18	124	158	1	6	39	140	277	1	1	7	44	55
Arizona	—	2	16	64	79	—	4	27	86	173	—	0	3	14	12
Colorado	—	1	4	24	19	—	1	5	20	30	—	0	1	3	15
Idaho†	—	0	2	6	18	—	0	2	5	6	—	0	2	7	3
Montana	—	0	2	5	7	—	0	7	—	3	—	0	1	3	4
Nevada†	—	0	2	6	8	—	1	4	13	28	—	0	2	3	10
New Mexico†	—	0	3	10	13	—	0	3	2	12	—	0	1	1	2
Utah	—	0	2	8	13	1	0	4	14	24	1	0	2	12	6
Wyoming	—	0	1	1	1	—	0	1	—	1	—	0	1	1	3
Pacific	24	19	163	696	385	15	10	61	282	318	4	2	9	54	31
Alaska	—	0	1	—	3	1	0	1	2	7	—	0	1	—	—
California	24	15	162	636	319	14	7	41	223	216	4	2	9	54	30
Hawaii	—	0	2	8	15	—	0	1	4	2	—	0	1	—	1
Oregon†	—	0	5	26	24	—	1	6	32	55	N	0	0	N	N
Washington	—	1	13	26	24	—	0	18	21	38	—	0	0	—	—
American Samoa	U	0	0	U	1	U	0	0	U	—	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	2	—	0	2	—	16	—	0	0	—	—
Puerto Rico	—	0	3	9	44	2	1	8	17	22	—	0	1	1	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Lyme disease					Malaria				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max		
United States	310	229	2,153	4,002	7,103	13	24	125	531	625
New England	129	37	780	582	1,189	4	1	12	35	28
Connecticut	124	8	753	444	94	2	0	10	10	—
Maine	—	2	26	39	74	—	0	1	3	2
Massachusetts	—	3	205	26	958	—	0	3	15	20
New Hampshire	5	5	21	63	52	2	0	1	6	3
Rhode Island	—	0	12	—	3	—	0	8	—	2
Vermont†	—	1	5	10	8	—	0	1	1	1
Mid. Atlantic	166	147	1,176	2,396	3,965	6	5	15	79	174
New Jersey	—	21	271	472	1,796	—	1	7	13	40
New York (Upstate)	152	74	1,150	1,172	675	5	1	11	17	24
New York City	—	1	33	1	157	—	2	8	36	90
Pennsylvania	14	35	376	751	1,337	1	1	2	13	20
E.N. Central	1	11	160	239	863	1	2	8	48	72
Illinois	—	0	13	—	66	—	1	5	12	39
Indiana	—	0	4	5	10	—	0	3	6	3
Michigan	1	1	7	14	7	—	0	2	8	14
Ohio	—	1	5	17	23	1	0	3	17	11
Wisconsin	—	10	145	203	757	—	0	3	5	5
W.N. Central	—	9	98	119	162	—	0	32	23	27
Iowa	—	1	8	19	44	—	0	1	1	4
Kansas	—	0	2	3	2	—	0	1	—	2
Minnesota	—	6	96	83	110	—	0	30	14	11
Missouri	—	0	3	7	6	—	0	2	3	10
Nebraska†	—	0	2	6	—	—	0	2	3	—
North Dakota	—	0	3	—	—	—	0	1	1	—
South Dakota	—	0	1	1	—	—	0	1	1	—
S. Atlantic	11	28	124	532	818	1	7	16	163	125
Delaware	5	8	37	219	320	1	0	1	5	2
District of Columbia	1	0	2	9	4	—	0	2	2	3
Florida	—	1	5	14	12	—	1	6	26	20
Georgia	—	0	1	—	2	—	1	6	50	26
Maryland†	1	14	87	222	389	—	1	9	35	44
North Carolina	4	0	5	15	24	—	0	8	13	15
South Carolina†	—	0	3	5	8	—	0	2	4	3
Virginia†	—	3	22	48	57	—	1	9	27	11
West Virginia	—	0	44	—	2	—	0	2	1	1
E.S. Central	—	0	4	3	13	—	0	3	12	12
Alabama†	—	0	1	—	—	—	0	2	7	3
Kentucky	—	0	2	—	1	—	0	2	1	4
Mississippi	—	0	0	—	—	—	0	1	2	—
Tennessee†	—	0	4	3	12	—	0	2	2	5
W.S. Central	—	0	5	3	44	1	2	31	33	45
Arkansas	—	0	1	—	2	—	0	2	1	3
Louisiana	—	0	0	—	3	—	0	1	—	2
Oklahoma	—	0	0	—	—	1	0	6	3	2
Texas†	—	0	5	3	39	—	1	29	29	38
Mountain	1	0	4	6	7	—	1	9	22	28
Arizona	—	0	4	2	—	—	0	9	4	5
Colorado	—	0	1	1	—	—	0	2	9	15
Idaho†	—	0	1	—	1	—	0	0	—	—
Montana	—	0	0	—	—	—	0	1	1	—
Nevada†	—	0	1	—	2	—	0	1	—	2
New Mexico†	—	0	1	—	1	—	0	1	1	1
Utah	1	0	1	3	1	—	0	2	7	4
Wyoming	—	0	1	—	2	—	0	1	—	1
Pacific	2	3	14	122	42	—	4	12	116	114
Alaska	—	0	1	—	2	—	0	4	14	3
California	2	3	14	121	26	—	3	10	81	86
Hawaii	N	0	0	N	N	—	0	1	1	10
Oregon†	—	0	2	1	12	—	0	2	6	4
Washington	—	0	3	—	2	—	0	5	14	11
American Samoa	U	0	0	U	U	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	—	—	0	0	—	—
Puerto Rico	N	0	0	N	N	—	0	1	—	2
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Meningococcal disease, invasive										Pertussis				
	All serogroups					Serogroup unknown									
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	11	20	85	663	764	11	13	58	441	464	69	310	2,877	5,962	10,623
New England	2	1	3	28	49	2	0	2	21	18	1	29	83	616	626
Connecticut	—	0	2	8	10	—	0	2	2	1	—	1	5	22	37
Maine	—	0	1	3	2	—	0	1	3	2	—	1	5	23	16
Massachusetts	—	0	2	12	23	—	0	2	12	5	—	23	43	435	471
New Hampshire	2	0	2	4	8	2	0	2	4	8	1	2	36	77	29
Rhode Island	—	0	1	—	2	—	0	0	—	—	—	0	17	—	12
Vermont†	—	0	1	1	4	—	0	0	—	2	—	1	10	59	61
Mid. Atlantic	2	3	13	95	94	2	2	11	72	73	8	29	137	832	703
New Jersey	—	0	2	10	24	—	0	2	10	24	—	4	13	122	96
New York (Upstate)	2	0	7	24	26	2	0	5	5	10	4	12	123	317	264
New York City	—	0	5	27	13	—	0	5	27	13	—	2	6	28	43
Pennsylvania	—	1	5	34	31	—	1	5	30	26	4	11	26	365	300
E.N. Central	1	3	11	73	95	1	1	6	52	80	19	48	133	748	2,003
Illinois	—	0	4	17	22	—	0	4	17	22	—	9	35	39	469
Indiana	1	0	5	14	13	1	0	2	6	6	10	4	75	118	146
Michigan	—	1	3	15	16	—	0	3	8	10	3	6	23	189	119
Ohio	—	1	5	27	28	—	0	4	21	26	6	16	30	306	689
Wisconsin	—	0	2	—	16	—	0	2	—	16	—	10	41	96	580
W.N. Central	—	1	4	39	47	—	0	3	14	19	6	55	552	655	1,416
Iowa	—	0	2	9	12	—	0	1	3	1	—	12	63	138	386
Kansas	—	0	1	2	8	—	0	1	2	8	5	11	28	171	139
Minnesota	—	0	2	10	6	—	0	1	3	1	—	0	485	101	339
Missouri	—	0	2	11	15	—	0	1	2	6	1	10	42	174	225
Nebraska†	—	0	2	5	4	—	0	1	3	3	—	4	15	58	145
North Dakota	—	0	1	—	—	—	0	1	1	—	—	0	26	4	66
South Dakota	—	0	1	1	2	—	0	0	—	—	—	1	8	9	116
S. Atlantic	2	3	14	112	142	2	1	7	47	57	7	23	92	498	701
Delaware	—	0	1	4	2	—	0	1	4	2	—	0	1	3	13
District of Columbia	—	0	1	—	4	—	0	1	—	3	—	0	3	3	4
Florida	1	1	6	45	54	1	1	5	18	17	4	4	14	111	88
Georgia	—	0	3	9	13	—	0	3	9	13	—	0	3	8	27
Maryland†	—	0	2	7	14	—	0	1	2	1	—	3	9	71	123
North Carolina	1	0	11	20	20	1	0	3	5	4	—	0	21	101	41
South Carolina†	—	0	2	11	12	—	0	1	4	8	—	4	22	72	232
Virginia†	—	0	4	13	18	—	0	3	5	7	3	2	73	109	142
West Virginia	—	0	2	3	5	—	0	0	—	2	—	0	9	20	31
E.S. Central	2	1	4	24	36	2	1	4	20	27	5	7	22	132	290
Alabama†	—	0	1	4	4	—	0	1	4	3	—	1	7	31	37
Kentucky	—	0	2	7	13	—	0	2	7	13	1	2	10	22	81
Mississippi	—	0	1	1	4	—	0	1	1	4	—	1	4	15	36
Tennessee†	2	0	2	12	15	2	0	2	8	7	4	2	10	64	136
W.S. Central	—	1	23	57	79	—	1	6	25	19	—	26	360	308	1,116
Arkansas	—	0	3	6	9	—	0	2	4	2	—	3	21	39	165
Louisiana	—	0	4	24	25	—	0	3	13	4	—	0	3	8	30
Oklahoma	—	0	4	8	13	—	0	0	—	2	—	0	124	10	—
Texas†	—	1	16	19	32	—	0	4	8	11	—	22	215	251	921
Mountain	—	1	4	37	61	—	0	4	17	16	17	66	230	1,558	2,228
Arizona	—	0	4	11	28	—	0	4	11	9	—	13	177	266	577
Colorado	—	0	2	14	13	—	0	1	2	—	—	23	40	524	736
Idaho†	—	0	2	1	3	—	0	2	1	3	—	2	13	44	104
Montana	—	0	1	3	—	—	0	1	1	—	3	3	19	64	426
Nevada†	—	0	2	2	6	—	0	1	—	1	—	0	9	35	33
New Mexico†	—	0	1	1	3	—	0	1	—	2	—	2	6	35	121
Utah	—	0	1	3	8	—	0	1	—	1	7	16	39	549	210
Wyoming	—	0	2	2	—	—	0	2	2	—	7	1	5	41	21
Pacific	2	5	29	198	161	2	5	25	173	155	6	58	1,334	615	1,540
Alaska	—	0	1	1	1	—	0	1	1	1	1	2	15	37	23
California	2	3	14	127	103	2	3	14	127	103	—	25	1,136	264	619
Hawaii	—	0	1	4	9	—	0	1	4	4	—	2	10	37	91
Oregon†	—	1	7	42	29	—	1	4	31	29	—	3	16	73	491
Washington	—	0	25	24	19	—	0	11	10	18	5	10	195	204	316
American Samoa	U	0	0	—	—	U	0	0	U	U	U	0	0	U	U
C.N.M.I.	U	0	0	—	—	U	0	0	U	U	U	0	0	U	U
Guam	—	0	1	—	—	—	0	1	—	—	—	0	0	—	2
Puerto Rico	—	0	1	4	6	—	0	1	4	6	—	0	1	—	4
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Rabies, animal					Rocky Mountain spotted fever					Salmonellosis				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	42	105	156	2,741	3,153	45	35	246	665	544	424	719	2,291	15,148	17,222
New England	8	12	26	300	377	—	0	2	1	3	11	34	191	806	1,020
Connecticut	4	3	13	79	83	—	0	0	—	—	—	1	183	183	200
Maine	—	1	5	40	32	N	0	0	N	N	—	2	7	41	96
Massachusetts	4	4	17	136	214	—	0	2	1	2	8	19	40	475	558
New Hampshire	—	0	3	9	9	—	0	1	—	—	1	2	10	53	83
Rhode Island	—	0	4	1	11	—	0	2	—	1	2	0	17	40	39
Vermont†	—	1	7	35	28	—	0	0	—	—	—	1	10	14	44
Mid. Atlantic	9	18	46	521	463	1	1	7	19	40	33	76	272	1,686	2,162
New Jersey	N	0	0	N	N	—	0	3	1	11	—	13	41	275	418
New York (Upstate)	9	11	24	247	243	—	0	1	1	1	16	23	233	442	504
New York City	—	0	3	1	16	—	0	1	4	5	—	21	44	389	527
Pennsylvania	—	8	35	273	204	1	1	5	13	23	17	27	61	580	713
E.N. Central	—	2	12	50	102	6	0	7	18	19	38	95	219	2,061	2,545
Illinois	—	0	4	10	17	—	0	4	1	7	—	26	53	473	961
Indiana	—	0	3	4	4	—	0	1	3	—	17	11	69	272	196
Michigan	—	1	5	24	11	—	0	1	—	2	1	17	35	398	432
Ohio	—	0	6	12	70	6	0	3	13	9	20	23	52	563	548
Wisconsin	N	0	0	N	N	—	0	1	1	1	—	15	44	355	408
W.N. Central	2	5	18	137	182	2	2	12	82	73	13	44	94	1,093	1,113
Iowa	—	0	3	19	—	—	0	2	—	1	3	7	18	169	185
Kansas	—	1	5	39	53	—	0	1	2	3	—	7	17	154	161
Minnesota	—	1	6	23	35	—	0	1	1	—	—	10	59	289	249
Missouri	2	1	6	22	32	1	2	12	73	65	9	15	40	335	328
Nebraska†	—	0	0	—	—	1	0	2	6	—	1	4	12	91	95
North Dakota	—	0	7	13	13	—	0	1	—	—	—	0	46	4	14
South Dakota	—	1	4	21	49	—	0	1	—	4	—	3	8	51	81
S. Atlantic	12	36	112	993	1,190	31	18	94	432	285	165	199	514	3,814	4,467
Delaware	—	0	0	—	—	—	0	2	6	4	1	2	9	42	49
District of Columbia	—	0	0	—	—	—	0	1	—	1	—	1	7	30	20
Florida	—	0	93	93	201	—	0	3	12	9	95	95	230	1,726	1,644
Georgia	—	4	9	98	155	1	0	5	10	55	41	25	87	526	656
Maryland†	—	7	14	154	183	—	1	6	18	29	7	11	39	221	324
North Carolina	12	8	20	211	264	30	9	87	357	146	14	28	114	574	605
South Carolina†	—	3	11	74	111	—	1	6	6	23	—	19	73	324	685
Virginia†	—	10	27	309	254	—	2	10	22	15	7	20	66	327	413
West Virginia	—	1	13	54	22	—	0	2	1	3	—	3	19	44	71
E.S. Central	3	5	16	184	78	2	5	24	72	78	21	50	115	913	1,044
Alabama†	3	1	7	46	45	—	0	9	19	16	10	14	41	353	256
Kentucky	—	0	5	7	7	—	0	1	—	—	3	8	27	170	162
Mississippi	—	0	2	4	—	—	0	3	—	2	—	10	62	123	264
Tennessee†	—	2	11	127	26	2	3	18	53	60	8	14	41	267	362
W.S. Central	3	14	34	392	543	—	1	161	27	23	26	80	922	1,425	1,589
Arkansas	—	0	3	19	20	—	0	32	18	12	15	14	43	365	302
Louisiana	—	0	0	—	—	—	0	1	—	5	—	9	43	170	372
Oklahoma	3	1	9	37	54	—	0	154	6	5	11	7	48	170	169
Texas†	—	12	29	336	469	—	0	8	3	1	—	45	839	720	746
Mountain	—	3	16	70	133	2	0	6	11	21	14	47	110	979	1,016
Arizona	—	2	11	58	102	—	0	6	2	12	—	12	67	197	287
Colorado	—	0	2	—	11	—	0	1	—	2	—	12	45	342	234
Idaho†	—	0	12	—	—	—	0	2	—	1	—	2	9	67	82
Montana	—	0	3	7	—	2	0	0	2	1	4	2	16	70	42
Nevada†	—	0	2	—	4	—	0	0	—	—	—	3	8	48	93
New Mexico†	—	0	1	—	4	—	0	1	2	3	—	4	13	75	117
Utah	—	0	5	3	—	—	0	2	3	—	10	5	30	147	131
Wyoming	—	0	2	2	12	—	0	1	2	2	—	1	12	33	30
Pacific	5	3	15	94	85	1	0	1	3	2	103	107	426	2,371	2,266
Alaska	—	0	4	13	1	—	0	0	—	—	—	1	7	40	23
California	5	3	15	79	82	1	0	1	3	—	87	85	292	1,818	1,695
Hawaii	—	0	0	—	—	—	0	0	—	—	1	5	15	110	135
Oregon†	—	0	1	2	2	—	0	1	—	2	—	7	25	182	202
Washington	U	0	0	U	U	N	0	0	N	N	15	9	124	221	211
American Samoa	U	0	0	U	U	U	0	0	U	U	U	0	2	U	1
C.N.M.I.	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	—	—	0	0	—	—	—	0	3	—	24
Puerto Rico	—	2	6	55	41	N	0	0	N	N	5	8	35	81	272
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	Shiga toxin-producing <i>E. coli</i> (STEC) [†]					Shigellosis					Streptococcal disease, invasive, group A				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	23	52	297	744	996	114	234	1,013	4,542	6,313	48	85	283	2,860	2,806
New England	1	3	22	59	87	1	5	31	121	130	1	5	12	126	167
Connecticut	—	0	21	21	23	—	0	25	25	24	U	0	3	U	66
Maine	—	0	5	—	14	—	0	3	2	6	—	0	2	10	7
Massachusetts	1	1	7	31	33	—	4	11	82	81	—	3	6	76	69
New Hampshire	—	0	2	5	8	1	0	4	5	4	1	0	9	28	9
Rhode Island	—	0	2	2	2	—	0	6	5	9	—	0	3	4	7
Vermont [§]	—	0	2	2	7	—	0	4	2	6	—	0	2	8	9
Mid. Atlantic	5	5	107	52	122	4	16	72	327	598	14	14	43	529	604
New Jersey	—	0	7	—	28	—	4	15	97	171	—	2	6	56	125
New York (Upstate)	—	1	103	19	48	4	4	60	110	143	12	4	32	205	178
New York City	—	0	3	10	7	—	4	14	78	243	—	2	10	67	119
Pennsylvania	—	1	8	—	39	—	2	48	42	41	2	5	13	201	182
E.N. Central	8	10	38	166	194	8	20	96	427	456	6	16	42	546	605
Illinois	—	1	10	19	52	—	7	26	118	115	—	4	10	111	205
Indiana	3	1	6	25	24	5	2	56	73	41	1	1	11	78	58
Michigan	—	1	8	28	35	1	3	10	86	132	—	3	11	146	151
Ohio	5	3	14	58	45	2	3	11	88	39	5	4	19	175	125
Wisconsin	—	2	15	36	38	—	3	10	62	129	—	1	4	36	66
W.N. Central	1	8	35	119	141	8	42	78	672	556	1	5	57	219	169
Iowa	1	1	10	45	36	—	1	7	25	41	N	0	0	N	N
Kansas	—	0	4	—	15	2	4	20	50	40	—	1	5	39	27
Minnesota	—	3	19	66	19	—	2	8	44	31	—	0	52	106	60
Missouri	4	2	7	67	38	6	21	70	446	384	1	1	5	42	44
Nebraska [§]	1	1	5	18	22	—	2	11	39	41	—	0	4	19	17
North Dakota	—	0	15	—	1	—	0	2	4	2	—	0	5	7	5
South Dakota	—	0	3	6	10	—	2	17	64	17	—	0	3	6	16
S. Atlantic	3	7	39	133	148	60	51	122	1,215	940	20	21	41	665	539
Delaware	—	0	2	1	—	1	0	2	2	6	—	0	2	7	1
District of Columbia	—	0	1	—	—	—	0	2	6	8	—	0	2	9	7
Florida	1	2	29	42	58	23	26	66	581	461	6	5	12	150	141
Georgia	1	1	6	28	17	35	14	34	408	239	1	4	12	131	109
Maryland [§]	1	1	5	13	22	—	2	8	38	32	1	3	12	118	108
North Carolina	2	1	11	35	19	—	1	22	92	88	12	0	26	105	80
South Carolina [§]	—	0	2	4	3	—	2	9	59	53	—	0	6	43	27
Virginia [§]	—	0	8	—	28	1	2	9	29	53	—	2	11	83	51
West Virginia	—	0	2	—	1	—	0	1	—	—	—	0	6	19	15
E.S. Central	—	2	11	42	50	5	14	35	322	746	1	3	11	129	116
Alabama [§]	1	0	3	8	12	1	3	14	93	154	N	0	0	N	N
Kentucky	—	1	8	16	14	—	7	23	145	122	—	0	5	28	25
Mississippi	—	0	2	—	2	—	1	6	28	46	—	0	0	—	—
Tennessee [§]	—	1	4	25	22	4	3	11	56	424	1	3	9	101	91
W.S. Central	1	1	52	9	45	5	31	596	428	1,746	2	7	58	218	178
Arkansas	—	0	1	3	7	1	1	7	41	31	—	0	5	18	10
Louisiana	—	0	2	—	13	—	2	11	44	70	—	0	2	7	4
Oklahoma	1	0	8	6	11	4	5	286	53	393	2	2	14	66	71
Texas [§]	—	1	44	32	14	—	26	308	290	1,252	—	4	43	127	93
Mountain	—	4	15	68	108	4	19	47	292	316	—	10	78	377	372
Arizona	—	0	4	16	13	—	8	29	131	169	—	3	57	180	165
Colorado	—	1	6	30	27	—	3	18	63	43	—	3	8	92	120
Idaho [§]	—	1	7	18	17	—	0	4	6	5	—	0	2	8	2
Montana	—	0	2	—	5	1	0	1	4	5	—	0	0	—	—
Nevada [§]	—	0	3	7	12	—	1	8	26	28	—	0	6	—	1
New Mexico [§]	—	0	3	4	12	—	2	9	33	47	—	1	7	44	48
Utah	—	1	7	23	20	3	1	4	28	19	—	1	6	50	34
Wyoming	—	0	3	6	2	—	0	1	1	—	—	0	1	3	2
Pacific	4	7	55	96	101	19	40	148	738	825	3	2	9	51	56
Alaska	—	0	2	—	5	—	0	2	7	10	—	0	0	—	—
California	3	4	18	63	44	17	32	104	576	713	—	0	0	—	—
Hawaii	—	0	4	5	3	—	0	4	19	14	3	2	9	51	56
Oregon [§]	—	1	47	26	33	—	1	31	66	42	N	0	0	N	N
Washington	1	2	32	28	16	2	2	43	70	46	N	0	0	N	N
American Samoa	U	0	0	U	U	U	0	2	U	3	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	—	—	0	3	—	9	—	0	0	—	—
Puerto Rico	—	0	1	—	—	—	0	2	4	2	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

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

† Includes *E. coli* O157:H7; Shiga toxin positive, serogroup non-O157; and Shiga toxin positive, not serogrouped.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	<i>Streptococcus pneumoniae</i> , invasive disease Drug resistant, all ages					Syphilis, primary and secondary					Varicella (chickenpox)				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max				Med	Max		
United States	26	51	334	1,580	1,649	57	167	334	4,070	4,239	207	805	3,204	26,229	16,236
New England	—	1	24	15	152	6	4	17	104	108	29	43	144	916	3,431
Connecticut	U	0	7	U	63	3	0	11	22	23	U	5	58	U	964
Maine	N	0	0	N	N	—	0	2	8	1	—	5	20	151	208
Massachusetts	—	0	6	—	67	3	2	5	63	73	—	14	54	92	1,530
New Hampshire	—	0	0	—	—	—	0	2	6	6	29	5	19	215	192
Rhode Island	—	0	11	6	14	—	0	6	3	5	—	0	0	—	—
Vermont†	—	0	2	9	8	—	0	1	2	—	—	11	50	458	537
Mid. Atlantic	3	3	15	97	148	5	21	35	562	515	16	103	183	2,994	3,016
New Jersey	N	0	0	N	N	—	2	7	80	73	—	0	0	—	—
New York (Upstate)	3	1	10	36	60	2	2	14	79	35	—	0	0	—	—
New York City	U	0	0	U	U	2	10	23	280	319	—	0	0	—	—
Pennsylvania	—	2	9	61	88	1	5	9	123	88	16	103	183	2,994	3,016
E.N. Central	10	11	41	384	398	8	18	38	435	453	69	213	576	9,670	3,697
Illinois	—	1	3	12	15	5	9	23	214	252	—	1	5	12	55
Indiana	2	2	21	103	120	—	1	4	31	36	N	0	347	N	70
Michigan	—	0	4	15	28	2	2	19	55	40	8	102	174	2,946	2,349
Ohio	8	6	32	254	235	1	4	11	112	108	61	82	420	6,292	935
Wisconsin	N	0	0	N	N	—	1	3	23	17	—	10	41	420	288
W.N. Central	—	1	191	29	27	5	4	9	124	142	15	22	84	980	232
Iowa	N	0	0	N	N	—	0	3	9	4	N	0	0	N	N
Kansas	N	0	0	N	N	—	0	2	12	11	—	0	0	—	—
Minnesota	—	0	191	—	—	—	1	3	16	45	—	0	0	—	—
Missouri	—	1	3	29	22	5	3	8	86	79	15	16	82	923	147
Nebraska†	—	0	0	—	2	—	0	1	1	3	—	0	0	—	—
North Dakota	—	0	1	—	—	—	0	1	—	—	—	0	25	25	10
South Dakota	—	0	0	—	3	—	0	1	—	—	—	1	12	32	75
S. Atlantic	11	24	53	816	672	21	43	186	973	982	24	90	860	2,779	1,243
Delaware	—	0	2	—	1	—	0	2	13	6	—	1	5	43	22
District of Columbia	—	0	3	19	12	—	2	9	54	59	—	0	5	21	19
Florida	5	13	36	440	355	9	14	29	367	370	—	0	0	—	—
Georgia	6	7	29	279	223	1	8	147	122	164	—	0	0	—	—
Maryland†	—	0	0	—	—	4	5	19	161	159	—	0	0	—	—
North Carolina	N	0	0	N	N	3	5	17	149	119	—	0	0	—	—
South Carolina†	—	0	0	—	—	1	1	7	38	31	—	17	53	723	339
Virginia†	N	0	0	N	N	3	2	12	68	72	12	26	812	1,021	217
West Virginia	—	1	14	78	81	—	0	1	1	2	12	25	70	971	646
E.S. Central	—	3	13	119	120	5	11	20	315	238	—	0	70	47	1
Alabama†	N	0	0	N	N	—	3	12	124	87	—	0	70	47	1
Kentucky	—	0	5	23	22	—	1	8	33	19	N	0	0	N	N
Mississippi	—	0	0	—	1	—	0	6	31	28	—	0	0	—	—
Tennessee†	—	2	13	96	97	5	4	11	127	104	N	0	0	N	N
W.S. Central	1	1	9	59	94	—	24	39	646	655	52	206	1,757	7,070	2,897
Arkansas	1	0	3	11	12	—	0	6	36	30	3	5	110	515	—
Louisiana	—	1	7	48	82	—	4	17	75	141	—	0	17	90	108
Oklahoma	N	0	0	N	N	—	1	6	36	21	—	0	0	—	—
Texas†	N	0	0	N	N	—	17	29	499	463	49	202	1,647	6,465	2,789
Mountain	1	1	27	61	38	—	7	17	196	220	2	52	138	1,773	1,719
Arizona	N	0	0	N	N	—	4	13	94	71	—	0	0	—	—
Colorado	N	0	0	N	N	—	1	3	20	25	—	33	76	939	1,166
Idaho†	N	0	0	N	N	—	0	1	2	18	—	0	0	—	—
Montana	—	0	1	—	—	—	0	1	1	5	—	0	0	—	—
Nevada†	—	0	27	4	2	—	1	12	43	65	—	0	2	4	—
New Mexico†	—	0	1	1	—	—	1	5	34	29	—	3	34	280	149
Utah	—	0	8	26	16	—	0	1	2	7	2	10	55	522	359
Wyoming	1	0	3	30	20	—	0	0	—	—	—	0	8	28	45
Pacific	—	0	0	—	—	7	32	49	715	926	—	0	0	—	—
Alaska	—	0	0	—	—	—	0	4	5	4	—	0	0	—	—
California	N	0	0	N	N	—	27	42	589	839	—	0	0	—	—
Hawaii	—	0	0	—	—	—	0	2	11	3	N	0	0	N	N
Oregon†	N	0	0	N	N	—	0	6	9	16	N	0	0	N	N
Washington	N	0	0	N	N	7	2	11	101	64	N	0	0	N	N
American Samoa	—	0	0	—	—	U	0	0	U	U	U	0	0	U	U
C.N.M.I.	—	0	0	—	—	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	—	—	0	0	—	3	—	2	12	—	371
Puerto Rico	N	0	0	N	N	—	3	16	54	110	7	8	47	178	429
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending July 8, 2006, and July 9, 2005 (27th Week)*

Reporting area	West Nile virus disease [†]									
	Neuroinvasive					Non-neuroinvasive				
	Current week	Previous 52 weeks		Cum 2006	Cum 2005	Current week	Previous 52 weeks		Cum 2006	Cum 2005
		Med	Max				Med	Max		
United States	—	0	155	4	36	—	0	203	1	100
New England	—	0	3	—	—	—	0	2	—	—
Connecticut	—	0	2	—	—	—	0	1	—	—
Maine	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	0	3	—	—	—	0	1	—	—
New Hampshire	—	0	0	—	—	—	0	0	—	—
Rhode Island	—	0	1	—	—	—	0	0	—	—
Vermont [§]	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	—	0	10	—	1	—	0	4	—	1
New Jersey	—	0	1	—	—	—	0	2	—	—
New York (Upstate)	—	0	7	—	—	—	0	2	—	—
New York City	—	0	2	—	—	—	0	2	—	—
Pennsylvania	—	0	3	—	1	—	0	2	—	1
E.N. Central	—	0	39	—	3	—	0	18	—	1
Illinois	—	0	25	—	1	—	0	16	—	—
Indiana	—	0	2	—	1	—	0	1	—	—
Michigan	—	0	14	—	—	—	0	3	—	—
Ohio	—	0	9	—	1	—	0	4	—	—
Wisconsin	—	0	3	—	—	—	0	2	—	1
W.N. Central	—	0	26	—	3	—	0	80	1	14
Iowa	—	0	3	—	—	—	0	5	1	—
Kansas	—	0	3	—	—	N	0	0	N	N
Minnesota	—	0	5	—	1	—	0	5	—	2
Missouri	—	0	4	—	1	—	0	3	—	—
Nebraska [§]	—	0	9	—	—	—	0	24	—	1
North Dakota	—	0	4	—	—	—	0	15	—	2
South Dakota	—	0	7	—	1	—	0	33	—	9
S. Atlantic	—	0	6	—	1	—	0	4	—	2
Delaware	—	0	1	—	—	—	0	0	—	—
District of Columbia	—	0	1	—	—	—	0	1	—	—
Florida	—	0	2	—	1	—	0	4	—	1
Georgia	—	0	3	—	—	—	0	3	—	1
Maryland [§]	—	0	2	—	—	—	0	1	—	—
North Carolina	—	0	1	—	—	—	0	1	—	—
South Carolina [§]	—	0	1	—	—	—	0	0	—	—
Virginia [§]	—	0	0	—	—	—	0	1	—	—
West Virginia	—	0	0	—	—	N	0	0	N	N
E.S. Central	—	0	10	1	1	—	0	5	—	3
Alabama [§]	—	0	1	—	—	—	0	2	—	—
Kentucky	—	0	1	—	—	—	0	0	—	—
Mississippi	—	0	9	1	1	—	0	5	—	3
Tennessee [§]	—	0	3	—	—	—	0	1	—	—
W.S. Central	—	0	32	2	8	—	0	22	—	6
Arkansas	—	0	3	—	—	—	0	2	—	2
Louisiana	—	0	20	—	—	—	0	9	—	2
Oklahoma	—	0	6	—	—	—	0	3	—	—
Texas [§]	—	0	16	2	8	—	0	13	—	2
Mountain	—	0	16	1	4	—	0	39	—	17
Arizona	—	0	8	—	3	—	0	8	—	4
Colorado	—	0	5	1	—	—	0	13	—	10
Idaho [§]	—	0	2	—	—	—	0	3	—	—
Montana	—	0	3	—	—	—	0	9	—	—
Nevada [§]	—	0	3	—	—	—	0	8	—	1
New Mexico [§]	—	0	3	—	1	—	0	4	—	2
Utah	—	0	6	—	—	—	0	8	—	—
Wyoming	—	0	2	—	—	—	0	1	—	—
Pacific	—	0	50	—	15	—	0	90	—	56
Alaska	—	0	0	—	—	—	0	0	—	—
California	—	0	50	—	15	—	0	89	—	55
Hawaii	—	0	0	—	—	—	0	0	—	—
Oregon [§]	—	0	1	—	—	—	0	2	—	1
Washington	—	0	0	—	—	—	0	0	—	—
American Samoa	U	0	0	U	U	U	0	0	U	U
C.N.M.I.	U	0	0	U	U	U	0	0	U	U
Guam	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—

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

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

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

[†] Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Infectious Diseases (ArboNet Surveillance).

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

TABLE III. Deaths in 122 U.S. cities,* week ending July 8, 2006 (27th Week)

Reporting Area	All causes, by age (years)							Reporting Area	All causes, by age (years)						
	All Ages	≥65	45-64	25-44	1-24	<1	P&I [†] Total		All Ages	≥65	45-64	25-44	1-24	<1	P&I [†] Total
New England	441	318	92	12	14	5	46	S. Atlantic	965	569	270	81	28	17	45
Boston, MA	124	87	24	5	6	2	17	Atlanta, GA	123	73	35	13	2	—	5
Bridgeport, CT	18	15	3	—	—	—	1	Baltimore, MD	106	50	42	11	1	2	11
Cambridge, MA	10	7	2	1	—	—	1	Charlotte, NC	68	42	23	3	—	—	2
Fall River, MA	22	19	3	—	—	—	4	Jacksonville, FL	122	68	33	13	8	—	7
Hartford, CT	40	26	9	2	2	1	6	Miami, FL	124	76	27	11	6	4	5
Lowell, MA	19	13	6	—	—	—	1	Norfolk, VA	28	19	4	3	2	—	—
Lynn, MA	12	8	3	1	—	—	2	Richmond, VA	37	15	14	3	1	4	—
New Bedford, MA	17	13	4	—	—	—	—	Savannah, GA	33	25	6	2	—	—	1
New Haven, CT	U	U	U	U	U	U	U	St. Petersburg, FL	50	35	13	1	1	—	3
Providence, RI	46	33	10	—	2	1	5	Tampa, FL	142	93	32	10	3	4	5
Somerville, MA	—	—	—	—	—	—	—	Washington, D.C.	122	70	37	8	4	3	4
Springfield, MA	40	25	10	2	3	—	2	Wilmington, DE	10	3	4	3	—	—	2
Waterbury, CT	22	16	5	—	1	—	2	E.S. Central	758	471	198	45	20	23	52
Worcester, MA	71	56	13	1	—	1	5	Birmingham, AL	147	92	39	9	3	4	13
Mid. Atlantic	1,890	1,278	418	121	36	36	98	Chattanooga, TN	66	39	23	2	—	2	5
Albany, NY	45	31	10	3	—	1	3	Knoxville, TN	72	51	16	4	—	1	2
Allentown, PA	18	15	3	—	—	—	—	Lexington, KY	70	41	17	5	1	6	3
Buffalo, NY	95	63	19	6	4	3	3	Memphis, TN	149	86	39	13	7	3	10
Camden, NJ	29	12	9	6	2	—	2	Mobile, AL	75	52	16	4	2	1	4
Elizabeth, NJ	13	9	4	—	—	—	—	Montgomery, AL	75	50	21	1	2	1	6
Erie, PA	35	25	7	2	1	—	1	Nashville, TN	104	60	27	7	5	5	9
Jersey City, NJ	28	19	9	—	—	—	—	W.S. Central	1,147	706	312	69	39	20	63
New York City, NY	890	613	206	49	13	8	48	Austin, TX	72	37	29	2	3	1	8
Newark, NJ	43	22	9	8	2	2	3	Baton Rouge, LA	44	30	12	1	1	—	—
Paterson, NJ	19	7	6	3	1	2	—	Corpus Christi, TX	51	22	18	7	3	1	3
Philadelphia, PA	295	188	66	22	6	13	13	Dallas, TX	136	82	33	9	6	6	7
Pittsburgh, PA [‡]	30	18	7	2	2	1	—	El Paso, TX	64	40	17	2	3	2	4
Reading, PA	28	26	2	—	—	—	1	Fort Worth, TX	94	66	22	4	1	1	7
Rochester, NY	127	88	23	10	3	3	13	Houston, TX	285	162	85	22	9	7	4
Schenectady, NY	17	13	2	1	1	—	—	Little Rock, AR	63	42	15	1	4	—	2
Scranton, PA	34	27	5	1	—	1	1	New Orleans, LA [¶]	U	U	U	U	U	U	U
Syracuse, NY	78	56	18	2	—	2	8	San Antonio, TX	237	147	62	19	8	1	19
Trenton, NJ	35	25	6	3	1	—	—	Shreveport, LA	27	19	6	1	1	—	3
Utica, NY	15	10	4	1	—	—	2	Tulsa, OK	74	59	13	1	—	1	6
Yonkers, NY	16	11	3	2	—	—	—	Mountain	859	535	206	63	31	22	47
E.N. Central	1,584	973	419	116	43	33	75	Albuquerque, NM	72	44	15	10	3	—	6
Akron, OH	47	31	10	2	1	3	1	Boise, ID	49	31	12	3	1	2	3
Canton, OH	35	25	8	1	—	1	2	Colorado Springs, CO	35	27	5	2	—	1	—
Chicago, IL	234	118	72	31	10	3	15	Denver, CO	77	41	19	6	4	7	5
Cincinnati, OH	55	33	12	3	4	3	4	Las Vegas, NV	247	151	70	13	8	5	10
Cleveland, OH	200	142	44	8	—	6	3	Ogden, UT	22	15	5	1	1	—	2
Columbus, OH	167	96	47	19	1	4	13	Phoenix, AZ	123	69	30	14	6	2	8
Dayton, OH	88	53	25	7	3	—	4	Pueblo, CO	33	23	7	2	1	—	1
Detroit, MI	150	73	55	12	9	1	4	Salt Lake City, UT	82	54	19	5	2	2	3
Evansville, IN	44	28	11	3	—	2	—	Tucson, AZ	119	80	24	7	5	3	9
Fort Wayne, IN	31	15	13	2	—	1	2	Pacific	1,120	804	208	66	29	13	79
Gary, IN	18	11	5	2	—	—	—	Berkeley, CA	6	4	2	—	—	—	—
Grand Rapids, MI	48	35	7	5	—	1	4	Fresno, CA	75	54	15	3	1	2	3
Indianapolis, IN	151	90	42	9	7	3	13	Glendale, CA	11	8	3	—	—	—	2
Lansing, MI	30	23	5	1	—	1	—	Honolulu, HI	53	32	14	5	2	—	—
Milwaukee, WI	54	35	16	—	1	2	1	Long Beach, CA	51	36	10	2	2	1	3
Peoria, IL	51	28	16	5	2	—	1	Los Angeles, CA	206	151	39	8	7	1	13
Rockford, IL	39	29	7	1	1	1	4	Pasadena, CA	11	9	1	—	—	1	—
South Bend, IN	19	15	1	2	1	—	1	Portland, OR	63	46	10	4	2	1	4
Toledo, OH	69	51	11	3	3	1	1	Sacramento, CA	146	103	32	8	2	1	13
Youngstown, OH	54	42	12	—	—	—	2	San Diego, CA	117	88	13	10	4	2	16
W.N. Central	470	294	116	30	13	15	27	San Francisco, CA	U	U	U	U	U	U	U
Des Moines, IA	115	77	31	4	1	2	11	San Jose, CA	132	93	20	15	4	—	11
Duluth, MN	18	15	2	1	—	—	2	Santa Cruz, CA	26	19	4	2	—	1	3
Kansas City, KS	15	8	3	4	—	—	—	Seattle, WA	91	59	21	5	3	3	1
Kansas City, MO	58	39	13	—	2	4	2	Spokane, WA	43	35	7	—	1	—	4
Lincoln, NE	22	14	5	1	2	—	—	Tacoma, WA	89	67	17	4	1	—	6
Minneapolis, MN	54	23	16	9	3	3	4	Total	9,234**	5,948	2,239	603	253	184	532
Omaha, NE	41	27	14	—	—	—	1								
St. Louis, MO	56	22	16	7	4	5	6								
St. Paul, MN	36	28	6	2	—	—	—								
Wichita, KS	55	41	10	2	1	1	1								

U: Unavailable. —: No reported cases.

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

† Pneumonia and influenza.

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

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

** Total includes unknown ages.

TABLE IV. Provisional cases of selected notifiable diseases, United States, quarter ending July 1, 2006 (26th Week)

Reporting area	AIDS*					HIV/AIDS*					Tuberculosis†				
	Current quarter	Previous 4 quarters		Cum 2006	Cum 2005	Current quarter	Previous 4 quarters		Cum 2006	Cum 2005	Current quarter	Previous 4 quarters		Cum 2006	Cum 2005
		Min	Max				Min	Max				Min	Max		
United States	10,200 [§]	9,886	11,014	20,086	20,473	20,896 [§]	14,939	20,896	35,835	31,669	2,478	2,478	3,589	4,967	6,234
New England	319	273	451	592	743	904	385	904	1,289	2,471	74	61	167	135	181
Connecticut	89	61	250	150	301	242	161	496	403	1,617	10	10	35	29	39
Maine†	31	3	31	54	11	449	3	449	472	15	3	3	5	6	8
Massachusetts†	160	121	181	281	341	170	128	188	298	369	53	32	113	85	102
New Hampshire	14	6	19	33	19	19	8	26	45	398	5	0	5	7	3
Rhode Island†	20	2	44	64	68	22	2	43	65	69	3	3	12	6	27
Vermont†	2	0	4	6	3	2	0	4	6	3	—	0	3	2	2
Mid. Atlantic	3,144	1,223	3,144	4,367	4,250	3,890	2,551	4,347	6,441	6,281	501	467	605	968	981
New Jersey	573	60	573	633	576	772	202	772	974	1,012	122	91	124	213	241
New York (Upstate)	1,101	73	1,101	1,174	850	780	98	1,029	878	943	63	50	110	113	124
New York City	901	901	1,319	1,813	2,173	1,420	1,356	1,740	2,776	3,374	259	223	269	501	492
Pennsylvania	395	176	562	571	650	918	878	1,095	1,813	952	57	57	102	141	124
E.N. Central	948	892	1,189	1,840	1,879	2,936	1,221	2,936	4,157	2,461	282	219	371	501	636
Illinois†	453	241	525	694	945	2,078	272	2,078	2,350	978	120	91	153	211	300
Indiana	107	73	111	201	225	188	125	188	317	297	39	28	40	67	68
Michigan	163	118	382	361	322	229	90	483	473	489	44	30	93	74	102
Ohio	191	191	277	462	303	377	377	403	780	571	68	51	83	122	126
Wisconsin	34	5	88	122	83	64	4	173	237	126	11	11	19	27	40
W.N. Central	318	203	318	534	463	397	346	399	784	757	122	91	142	213	234
Iowa	23	19	23	42	50	23	21	50	55	56	5	5	19	14	23
Kansas	30	16	57	87	60	66	20	83	149	88	21	11	27	48	35
Minnesota	48	48	69	117	123	110	90	116	226	189	60	34	60	94	90
Missouri	167	49	167	216	199	147	118	196	289	355	30	15	38	45	50
Nebraska	42	14	42	61	16	39	6	51	45	38	6	1	13	7	27
North Dakota	2	0	4	2	5	2	1	2	3	6	—	0	4	—	2
South Dakota	6	3	6	9	10	10	4	10	17	25	—	0	5	5	7
S. Atlantic	2,676	2,676	3,753	6,429	6,345	4,042	4,042	5,471	9,181	9,485	491	491	839	1,053	1,279
Delaware†	38	29	43	67	98	43	34	46	77	99	5	3	7	8	16
District of Columbia†	187	6	267	454	466	195	9	273	468	490	19	10	19	37	28
Florida	1,049	1,049	1,547	2,596	2,626	1,653	1,653	2,095	3,748	4,015	170	170	354	393	459
Georgia	381	381	695	848	1,049	847	847	2,228	1,716	2,156	40	40	132	161	286
Maryland†	388	229	559	882	807	386	233	559	872	803	47	47	79	126	137
North Carolina	230	113	554	784	522	356	356	890	1,246	903	88	57	126	145	101
South Carolina	205	122	207	412	353	210	142	267	432	442	33	7	58	40	106
Virginia	149	110	208	259	306	327	248	343	575	527	83	49	131	132	134
West Virginia	16	15	24	39	35	25	22	27	47	50	6	5	7	11	12
E.S. Central	398	398	488	848	1,065	704	686	779	1,432	1,582	126	126	211	252	358
Alabama	102	100	137	217	281	169	169	182	351	354	44	44	52	96	120
Kentucky	51	51	69	104	128	145	145	190	295	359	23	13	43	36	56
Mississippi	91	55	102	179	230	167	110	167	304	302	—	0	36	—	37
Tennessee	154	154	235	348	426	223	223	259	482	567	59	59	84	120	145
W.S. Central	1,143	904	1,333	2,047	2,160	1,797	1,775	2,122	3,576	3,718	214	214	455	648	885
Arkansas	39	39	99	84	74	62	62	182	155	122	26	19	35	45	49
Louisiana	223	81	320	304	433	337	214	337	551	624	—	0	—	—	—
Oklahoma	42	42	63	87	166	64	54	101	118	201	26	26	55	81	71
Texas	839	663	963	1,572	1,487	1,334	1,263	1,588	2,752	2,771	162	162	392	522	765
Mountain	357	357	397	739	769	689	611	689	1,300	1,186	118	61	193	179	247
Arizona	149	137	180	286	317	277	277	332	556	494	90	25	115	115	109
Colorado	85	85	111	196	160	151	113	151	264	250	2	2	34	16	40
Idaho	4	4	10	13	9	11	4	20	31	20	—	0	7	—	10
Montana†	0	0	12	0	4	4	0	12	4	6	—	0	2	—	6
Nevada	77	60	80	157	176	159	90	159	277	256	5	5	32	13	56
New Mexico	27	25	42	57	69	46	34	53	90	94	9	7	19	16	13
Utah	12	11	22	26	32	40	33	49	73	56	11	4	12	17	13
Wyoming	2	1	3	3	2	1	1	4	5	10	1	0	1	2	—
Pacific	688	688	1,571	2,259	2,260	4,483	1,177	4,483	5,964	2,149	550	468	851	1,018	1,433
Alaska	17	3	17	27	14	21	9	21	31	21	10	10	19	29	30
California†	506	506	1,344	1,850	1,827	588	588	1,279	1,867	1,761	427	386	705	813	1,186
Hawaii†	22	19	30	47	60	24	19	29	50	61	43	18	43	61	55
Oregon†	43	29	89	132	133	79	31	88	167	132	—	0	28	—	54
Washington†	97	97	139	200	226	3,771	78	3,771	3,849	174	70	45	77	115	108
American Samoa	U	0	0	U	U	—	0	0	—	—	U	0	2	U	U
C.N.M.I.	2	0	2	2	0	1	0	1	1	0	—	0	0	—	U
Guam	1	0	1	1	0	0	0	1	0	3	—	0	14	—	41
Puerto Rico	196	196	280	415	529	513	478	755	1,006	1,344	62	17	62	79	53
U.S. Virgin Islands	9	0	9	12	10	17	0	17	18	13	—	0	0	—	—

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

U: Unavailable. —: No reported cases.

N: Not notifiable.

Cum: Cumulative year-to-date counts.

Min: Minimum.

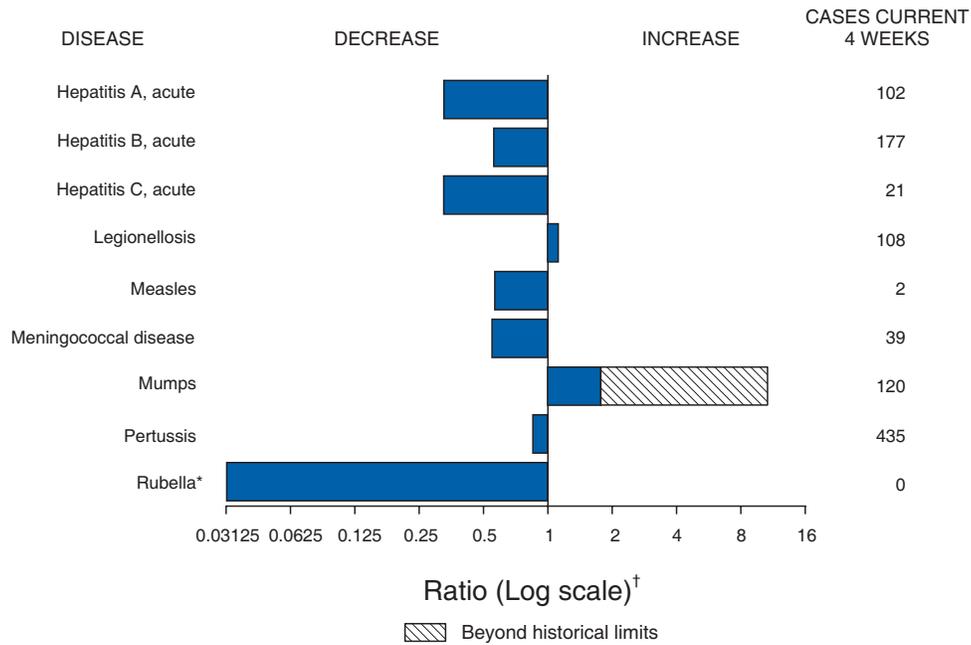
Max: Maximum.

* AIDS and HIV/AIDS are not mutually exclusive. Persons with AIDS have met the case definition for AIDS regardless of whether they received an HIV diagnosis before the onset of AIDS. HIV/AIDS includes persons with an HIV infection and includes persons with a diagnosis of HIV infection only, a diagnosis of HIV and later developed AIDS, or concurrent diagnoses of HIV and AIDS. Updated quarterly from reports to the Division of HIV/AIDS Prevention, National Center for HIV, STD, and TB Prevention. Last update was March 31, 2006.

† Methods other than confidential, name-based reporting for HIV diagnoses without AIDS are used in these areas.

§ Total for the United States includes case without a reported area of residence at diagnosis.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals July 8, 2006, with historical data



* No rubella cases were reported for the current 4-week period yielding a ratio for week 27 of zero (0).

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

Notifiable Disease Morbidity and 122 Cities Mortality Data Team

Patsy A. Hall

Deborah A. Adams

Rosaline Dhara

Willie J. Anderson

Vernitta Love

Lenee Blanton

Pearl C. Sharp

The *Morbidity and Mortality Weekly Report (MMWR)* Series is prepared by the Centers for Disease Control and Prevention (CDC) and is available free of charge in electronic format. To receive an electronic copy each week, send an e-mail message to listserv@listserv.cdc.gov. The body content should read *SUBscribe mmwr-toc*. Electronic copy also is available from CDC's Internet server at <http://www.cdc.gov/mmwr> or from CDC's file transfer protocol server at <ftp://ftp.cdc.gov/pub/publications/mmwr>. Paper copy subscriptions are available through the Superintendent of Documents, U.S. Government Printing Office, Washington, DC 20402; telephone 202-512-1800.

Data in the weekly *MMWR* are provisional, based on weekly reports to CDC by state health departments. The reporting week concludes at close of business on Friday; compiled data on a national basis are officially released to the public on the following Friday. Data are compiled in the National Center for Public Health Informatics, Division of Integrated Surveillance Systems and Services. Address all inquiries about the *MMWR* Series, including material to be considered for publication, to Editor, *MMWR* Series, Mailstop E-90, CDC, 1600 Clifton Rd., N.E., Atlanta, GA 30333 or to www.mmwrq@cdc.gov.

All material in the *MMWR* Series is in the public domain and may be used and reprinted without permission; citation as to source, however, is appreciated.

Use of trade names and commercial sources is for identification only and does not imply endorsement by the U.S. Department of Health and Human Services.

References to non-CDC sites on the Internet are provided as a service to *MMWR* readers and do not constitute or imply endorsement of these organizations or their programs by CDC or the U.S. Department of Health and Human Services. CDC is not responsible for the content of these sites. URL addresses listed in *MMWR* were current as of the date of publication.