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Prenatal HIV Testing and Antiretroviral Prophylaxis at an Urban Hospital — Atlanta, Georgia, 1997–2000

In 1994, the U.S. Public Health Service (USPHS) recommended the use of zidovudine (ZDV) to reduce perinatal human immunodeficiency virus (HIV) transmission; in 1995, USPHS recommended universal prenatal HIV counseling and voluntary testing (1,2). Widespread implementation of these recommendations, together with increased use of antiretroviral therapy (ART) and scheduled cesarean delivery, has resulted in substantial declines in perinatal HIV transmission (3-5). However, perinatal HIV transmission continues to occur (3). To identify missed prevention opportunities, CDC analyzed the incidence of perinatal HIV infection among a cohort of HIV-exposed infants born during 1997-2000 at Grady Memorial Hospital (GMH) in Atlanta, Georgia. This report describes the results of that analysis and underscores the challenges to universal prevention of infant HIV infections. Efforts to reduce perinatal HIV transmission should focus on increasing prenatal care rates, promoting adherence to recommended treatment regimens during pregnancy, and increasing prenatal HIV testing, particularly in areas where missed opportunities for prevention of perinatal HIV transmission persist.

All children born to women identified as HIV infected and delivered at GMH during 1997–2000 were included in this analysis. The 2000 birth cohort was the most recent cohort for which complete data on perinatal HIV transmission were available. Women usually met with trained HIV counselors in groups of two to five women during their initial prenatal visits. Pregnant women were provided pretest counseling and asked to give written informed consent for HIV-antibody testing. Since September 1994, the rate of HIV-testing acceptance has been >90% among women registered for prenatal care at GMH; acceptance of maternal and infant ZDV among HIV-infected women also has been >90% (6). Since 1999, scheduled cesarean delivery has been recommended routinely

to HIV-infected pregnant women at GMH. The incidence of perinatal HIV transmission was calculated as the number of HIV-infected children divided by the total number of children born to HIV-infected mothers. Children exposed to HIV perinatally were followed at the GMH pediatric HIV clinic. A child with two positive HIV DNA polymerase chain reaction (PCR) tests was classified as HIV infected; a child with at least one negative DNA PCR test after age 2 months or a negative HIV-antibody test after age 18 months was classified as uninfected.

The risk for perinatal HIV transmission was 5% in 1997 and 8% in 1998. A low of 3% was reached among HIV-exposed infants born during 1999, coincident with an increased percentage of HIV-infected pregnant women receiving a scheduled cesarean delivery and combination ART and an increased percentage with HIV viral loads of ≤1,000 copies/mL during the peripartum period (Table). During 1999, dual- or triple-drug ART was administered to 29 (58%) of 50 pregnant HIV-positive women, compared with eight (16%) of 51 women during 1997 (p<0.001). The percentage of pregnant women receiving no ART did not change significantly during the study period (Table). The percentage of women with viral loads of ≤1,000 copies/mL near the time of

INSIDE

- 1248 Implementation of Named HIV Reporting New York City, 2001
- 1252 Incidence of Acute Hepatitis B United States, 1990–2002
- 1254 Update: Influenza-Associated Deaths Reported Among Children Aged <18 Years — United States, 2003–04 Influenza Season
- 1255 Update: Influenza Activity United States, December 14–20, 2003
- 1257 Notice to Readers

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Notifiable Disease Morbidity and 122 Cities Mortality Data

Robert F. Fagan Deborah A. Adams Judith Allen Felicia J. Connor Lateka Dammond Rosaline Dhara Donna Edwards Patsy A. Hall Pearl C. Sharp delivery increased from 10% in 1997 to 48% during 1999–2000 (p<0.001).

For all 54 exposed infants born in 1999 for whom information was available, maternal HIV testing had been performed in time (i.e., prenatally or at the time of delivery) for the infants to receive the recommended 6-week course of postnatal ZDV prophylaxis. Scheduled cesarean delivery rates increased from one (1%) of 114 women during 1997–1998 to 46 (37%) of 125 women during 1999–2000 (p<0.001).

During 1999-2000, nine HIV-infected infants were born at GMH. Neither of the mothers of the two infected infants born in 1999 had prenatal care, nor did they know their HIVinfection status during pregnancy. One of the mothers was an active cocaine user who went into labor after rupture of the fetal membranes. Both infected infants received ZDV prophylaxis postnatally (i.e., within 24 hours after birth) but not intrapartum. In 2000, seven HIV-infected infants were born. Three of the mothers had received some prenatal care, including two women who knew their HIV status and had been prescribed combination ART. However, either the prescriptions were unfilled or the medications were taken irregularly; both women received ZDV during the intrapartum period. The third mother, who had prenatal care, was first tested for HIV 3 days before delivery; the positive test result was returned during labor, and she was started on intravenous ZDV. Of the four mothers without any prenatal care, one knew her HIV status before pregnancy. Two of the four mothers were cocaine users, one of whom had a negative HIV test during the fourth month of her pregnancy performed outside the prenatal care setting but had an HIV-positive test during the first postpartum day because of a positive drug screen. In six of the seven transmission cases in 2000, the infant was started on postpartum ZDV prophylaxis within 24 hours of birth. The remaining infant, whose mother first tested positive postpartum, was started on ZDV on the fourth day after birth.

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Editorial Note: GMH serves an economically disadvantaged population with high rates of illicit drug use. Since 1987, GMH has offered voluntary HIV testing to pregnant women receiving prenatal care or going into labor, and efforts at GMH to prevent perinatal HIV transmission have been successful in lowering transmission rates among HIV-infected pregnant women (6). However, the findings in this report underscore the challenges to universal prevention of perinatal HIV transmission.

TABLE. Number and percentage of births by HIV-infected mothers, by year and selected characteristics — Grady Memorial Hospital, Atlanta, Georgia, 1997–2000

	19 (N =		199 (N =		19: (N =		20 (N =	
Characteristic	No.	(%)	No.	(%)	No.	(%)	No.	(%)
Transmission risk*	3	(5)	5	(8)	2	(3)	7	(10)
Maternal viral load near time								
of delivery (copies/mL)	(n	= 40)	(n = 48)		(n	= 55)	(n	= 59)
<400	2	(5)	2	(4)	19	(35)	16	(27)
400-1,000	2	(5)	7	(15)	8	(15)	12	(20)
1001–10,000	21	(52)	16	(33)	15	(27)	15	(25)
10,001–50,000	11	(28)	18	(38)	7	(13)	9	(15)
>50,000	4	(10)	5	(10)	6	(11)	7	(12)
Antiretroviral therapy								
Maternal (anytime during pregnancy)	(n	= 51)	(n :	= 53)	(n	= 50)	(n	= 64)
None	11	(22)	13	(25)	10	(20)	18	(28)
ZDV [†] mono	32	(63)	21	(40)	11	(22)	2	(3)
Dual	1	(2)	5	(9)	9	(18)	20	(31)
HAART [§]	7	(14)	14	(26)	20	(40)	24	(38)
Infant ZDV	(n	= 60)	(n :	= 57)	(n	= 54)	(n	= 64)
	55 [°]	(92)	55 [°]	(96)	54	(100)	62	(97)
Mode of delivery	(n	= 59)	(n :	= 55)	(n	= 59)	(n	= 66)
Vaginal	47	(80)	37	(67)	35	(59)	20	(30)
Scheduled cesarean	1	(2)	0	(0)	14	(24)	32	(48)
Emergency cesarean	9	(15)	16	(29)	9	(15)	13	(20)
Unknown cesarean	2	(3)	2	(4)	1	(2)	1	(2)

*Calculated as the number of HIV-infected children divided by the total number of children born to HIV-infected mothers.

^TZidovudine.

During 1997-2000, no cases of perinatal HIV transmission were identified among pregnant women who participated in the full program of prenatal care, HIV testing in pregnancy, and ART. Of the seven cases among women with perinatal transmission in 2000, at least four might have been prevented by using the full regimen of ART. Two of the four women received prenatal care and were aware of their HIV infections, one received prenatal care and was unaware of her infection, and one did not receive prenatal care but was aware of her infection. In 2001, the Georgia Division of Public Health initiated a program focused on further reducing perinatal HIV transmission among women living in Atlanta. Through collaborations with hospital staff and local county health departments, HIV-infected pregnant women are linked to community resources to support and facilitate their adherence to appropriate therapy and other prevention services.

Certain perinatal HIV infections might be attributed to inadequate prenatal care. However, HIV testing of pregnant women even as late as the time of labor allowed nearly all HIV-exposed infants to receive the recommended neonatal ZDV postexposure prophylaxis for 6 weeks, demonstrating the value of HIV testing during labor. In 2001, the U.S. Department of Health and Human Services revised its guidelines for routine, voluntary HIV testing of pregnant women (7), including rapid HIV testing at the time of labor for women whose HIV status is unknown. CDC is continuing to

promote these recommendations as part of a new initiative aimed at reducing barriers to early diagnosis of HIV infection and increasing access to medical care and ongoing prevention services (8).

Perinatal HIV transmission can be prevented (3–5); the perinatal HIV infections described in this report highlight missed opportunities for perinatal HIV prevention and the need for multiple prevention strategies to reach women at high risk for infection. Innovative approaches must be developed that address the needs of mothers who receive little or no prenatal care or who have not had HIV testing before labor (3). Routine prenatal HIV testing of all pregnant women affords the best opportunity for the prevention of perinatal HIV transmission (9). Repeat HIV testing during the third trimester of pregnancy (10) probably would have identified the risk status of two of the infants described in this report and resulted in appropriate peripartum antiretroviral prophylaxis.

Resident treatment programs for cocaine-addicted pregnant women, together with supervised antiretroviral therapy, if indicated, for homeless and addicted mothers late in pregnancy, might further prevent perinatal HIV infection. For pregnant women who receive prenatal care and know their HIV status, prevention programs should focus on promoting adherence to recommended treatment regimens and administering ART during pregnancy (4,5). Efforts to reduce perinatal HIV transmission should continue to focus on increasing prenatal care

[§]Highly active antiretroviral therapy.

rates and prenatal HIV testing, particularly in areas where missed opportunities for prevention of perinatal HIV transmission persist.

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Implementation of Named HIV Reporting — New York City, 2001

Since 1981, population-based surveillance data on acquired immunodeficiency syndrome (AIDS) have been used in New York City (NYC) to monitor the human immunodeficiency virus (HIV) epidemic. In June 2000, the NYC Department of Health and Mental Hygiene (NYCDOHMH) began tracking diagnoses of HIV (non-AIDS) in addition to AIDS diagnoses. This report describes epidemiologic data from the first full calendar year of named HIV reporting in NYC. The findings indicate that, compared with persons living with AIDS (PLWA), persons who had HIV diagnosed during 2001 were more likely to be female, non-Hispanic black, younger (i.e., aged <45 years), and residents of the Bronx or Brooklyn. These newly available data describe the NYC population with HIV infection more accurately than data on PLWA and can be used to redirect HIV-prevention efforts to better target persons at highest risk for acquiring HIV infection.

A New York State (NYS) law implemented on June 1, 2000, mandates that health-care providers report by name all persons with newly diagnosed HIV infection, HIV illness, or AIDS. The law also requires that laboratories report the results of selected HIV-related tests for all NYS residents, including positive Western blot (WB) tests, detectable HIV viral loads, and CD4 counts of <500 cells/µL. NYCDOHMH field staff review medical records to abstract additional data that are not reported routinely by laboratories (e.g., race/ ethnicity, transmission risk, and postal code of residence). Persons with HIV and AIDS also are identified through other mechanisms, including passive provider reporting; active surveillance by field staff in 73 acute-care hospitals, 500 clinics, and 1,500 private health-care providers' offices; and searches of public health registries (e.g., vital statistics, tuberculosis, and cryptosporidiosis). All previously unreported cases are entered into the HIV/AIDS Reporting System (HARS).

NYCDOHMH analyzed surveillance data related to HIV and AIDS cases reported through September 30, 2003. Patients were categorized as having had HIV diagnosed during or before 2001 on the basis of the date of the earliest known HIV diagnostic event (e.g., WB test or Provider Report Form). Persons with HIV diagnosed during 2001 were classified further as diagnosed concurrently with HIV and AIDS if an AIDS-defining event had occurred within 31 days of HIV diagnosis.

As of September 30, 2003, NYCDOHMH had received reports of 6,662 persons who had HIV diagnosed during 2001 (4,846 [73%] without AIDS and 1,816 [27%] with AIDS) (Table). An additional 3,275 persons with previously diagnosed HIV infection had AIDS diagnosed during 2001, for a total of 5,091 AIDS diagnoses during 2001. As of December 31, 2001, a total of 76,462 persons were reported to have had HIV or AIDS diagnosed and were known to be living with HIV in NYC (51,085 PLWA and 25,377 persons living with HIV [non-AIDS]).

Among the 6,662 persons who had HIV diagnosed during 2001, a total of 4,325 (65%) were male, and 2,337 (35%) were female (rate ratio [RR] = 2.1; 95% confidence interval [CI] = 2.0–2.2). Non-Hispanic blacks accounted for 54% (n = 3,572; rate: 182 per 100,000 population) of HIV diagnoses (RR = 5.0; 95% CI = 4.7–5.4 compared with non-Hispanic whites); Hispanics, 29% (n = 1,954; rate: 90 per 100,000 population; RR = 2.5; 95% CI = 2.3–2.7 compared with non-Hispanic whites); and non-Hispanic whites, 15% (n = 1,016; rate: 36 per 100,000 population). Of the 3,981 (60%) HIV-infected persons for whom transmission risk data were available, 1,534 (39%) were males who reported having

TABLE. Number, percentage, and rate* of persons with HIV diagnosed during 2001 and number and percentage of persons living with HIV/AIDS (PLWHA) diagnosed before 2001, by selected characteristics — New York City[†]

			Pers	ons with	HIV diag	nosed d	uring 200)1		PLWHA with HIV diagnosed before 2001					
	Wi	thout A	IDS		ncurrer sed wit			Total		With (non-A		With	AIDS	To	otal
Characteristic	No.	(%)	Rate	No.	(%)	Rate	No.	(%)	Rate	No.	(%)	No.	(%)	No.	(%)
Sex															
Male	3,062	(63.2)	80.7	1,263	(69.5)	33.3	4,325	(64.9)	114.0	14,067	(65.8)	34,994	(72.3)	49,061	(70.3)
Female	1,784	(36.8)	42.3	553	(30.5)	13.1	2,337	(35.1)	55.5	7,319	(34.2)	13,420	(27.7)	20,739	(29.7)
Race/Ethnicity															
Black, non-Hispanic	2,540	(52.4)	129.4	1,032	(56.8)	52.6	3,572	(53.6)	182.0	8,785	(41.1)	21,060	(43.5)	29,845	(42.8)
Hispanic	1,447	(29.9)	67.0	507	(27.9)	23.5	1,954	(29.3)	90.4	6,520	(30.5)	16,101	(33.3)	22,621	(32.4)
White, non-Hispanic	772	(15.9)	27.6	244	(13.4)	8.7	1,016	(15.3)	36.3	5,094	(23.8)	10,557	(21.8)	15,651	(22.4)
Asian/Pacific Islander	60	(1.2)	7.7	29	(1.6)	3.7	89	(1.3)	11.4	194	(0.9)	413	(0.9)	607	(0.9)
American Indian	6	(0.1)	34.6	2	(0.1)	11.5	8	(0.1)	46.2	16	(0.1)	24	(0)	40	(0.1)
Other/Unknown	21	(0.4)	7.4	2	(0.1)	0.7	23	(0.3)	8.1	777	(3.6)	259	(0.5)	1,036	(1.5)
Age group (yrs)¶															
≤12	75	(1.5)	4.9	5	(0.3)	0.3	80	(1.2)	5.2	1,234	(5.8)	490	(1.0)	1,724	(2.5)
13–24	450	(9.3)	37.1	77	(4.2)	6.4	527	(7.9)	43.5	1,024	(4.8)	798	(1.6)	1,822	(2.6)
25-44	3,103	(64.0)	117.9	1,066	(58.7)	40.5	4,169	(62.6)	158.4	13,043	(61.0)	26,076	(53.9)	39,119	(56.0)
45–64	1,158	(23.9)	68.3	616	(33.9)	36.3	1,774	(26.6)	104.6	5,796	(27.1)	19,823	(40.9)	25,619	(36.7)
≥65	60	(1.2)	6.4	52	(2.9)	5.5	112	(1.7)	11.9	289	(1.4)	1,227	(2.5)	1,516	(2.2)
Borough of residence															
Brooklyn	1,295	(26.7)	52.5	563	(31.0)	22.8	1,858	(27.9)	75.4	4,913	(23.0)	12,280	(25.4)	17,193	(24.6)
Manhattan	1,403	(29.0)	91.3	431	(23.7)	28.0	1,834	(27.5)	119.3	8,096	(37.9)	15,787	(32.6)	23,883	(34.2)
Bronx	1,258	(26.0)	94.4	407	(22.4)	30.5	1,665	(25.0)	124.9	4,472	(20.9)	10,110	(20.9)	14,582	(20.9)
Queens	574	(11.8)	25.7	301	(16.6)	13.5	875	(13.1)	39.2	2,441	(11.4)	6,933	(14.3)	9,374	(13.4)
Staten Island	67	(1.4)	15.1	51	(2.8)	11.5	118	(1.8)	26.6	471	(2.2)	907	(1.9)	1,378	(2.0)
Unknown	249	(5.1)	**	63	(3.5)	**	312	(4.7)	**	993	(4.6)	2,397	(5.0)	3,390	(4.9)
Transmission risk															
Men who have sex with men	1,178	(24.3)	**	356	(19.6)	**	1,534	(23.0)	**	5,582	(26.1)	12,740	(26.3)	18,322	(26.2)
Heterosexual ^{††}	945	(19.5)	**	392	(21.6)	**	1,337	(20.1)	**	3,585	(16.8)	9,305	(19.2)	12,890	(18.5)
Injection-drug use history	735	(15.2)	**	298	(16.4)	**	1,033	(15.5)	**	3,349	(15.7)	17,680	(36.5)	21,029	(30.1)
Perinatal	72	(1.5)	**	5	(0.3)	**	77	(1.2)	**	1,460	(6.8)	832	(1.7)	2,292	(3.3)
Transfusion history	0	(0)	**	0	(0)	**	0	(0)	**	94	(0.4)	297	(0.6)	391	(0.6)
Unknown/Under investigation§§	1,916	(39.5)	**	765	(42.1)	**	2,681	(40.2)	**	7,316	(34.2)	7,560	(15.6)	14,876	(21.3)
Clinical status as of 9/30/03															
HIV (non-AIDS)	3,991	(82.4)	49.8	0	(0)	0	3,991	(59.9)	49.8	16,231	(75.9)	48,414	(100.0)	16,231	(23.3)
AIDS	855	(17.6)	10.7	1,816	(100.0)	22.7	2,671	(40.1)	33.4	5,155	(24.1)	0	(0)	53,569	(76.7)
Total	4,846	(72.7)	60.5	1,816	(27.3)	22.7	6,662	(100.0)	83.2	21,386	(30.6)	48,414	(69.4)	69,800	(100.0)

^{*} Per 100,000 population based on 2000 U.S. census data

ss Includes persons with no risk data reported by health-care provider and/or for whom an expanded investigation has not been completed.

sex with other males, 1,337 (34%) had high-risk heterosexual contact*, and 1,033 (26%) reported injection-drug use.

Overall, 1,816 (27%) of the 6,662 persons with HIV diagnosed during 2001 also had AIDS. Among NYC residents, the rates of concurrent HIV and AIDS diagnoses were

highest among males and non-Hispanic blacks and varied significantly by neighborhood of residence (Figure). Persons with HIV and AIDS diagnosed concurrently were more likely to be male than female (odds ratio [OR] = 1.3; 95% CI = 1.2–1.5), non-Hispanic black than non-Hispanic white (OR = 1.3; 95% CI = 1.1–1.5), and residents of boroughs other than Manhattan (Table).

Compared with PLWA who had diagnoses before 2001, persons with HIV diagnosed during 2001 were more likely to be female (35% versus 28%), aged <45 years (72% versus 57%), non-Hispanic black (54% versus 44%), and residents of the Bronx (25% versus 21%) or Brooklyn (28% versus 25%).

Cohort includes persons reported as of September 30, 2003, by health-care providers and laboratories.

AIDS was diagnosed within 31 days of HIV diagnosis.

For persons with HIV diagnosed during 2001, age group reflects age at diagnosis. For PLWHA, age group reflects age as of December 31, 2000.

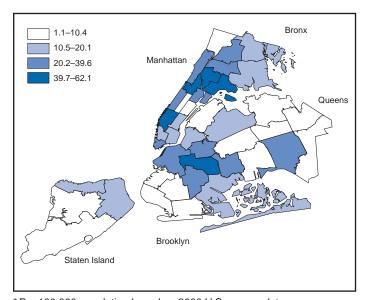
^{**} Denominator data not available for calculation of infection rates.

Includes persons with CDC-defined heterosexual transmission risk in addition to persons with probable heterosexual transmission. These include persons with a documented history of 1) sexual intercourse with an HIV-infected person of the opposite sex, an injection-drug user, a bisexual male, or a person with hemophilia/coagulation disorder, 2) heterosexual prostitution (e.g., sex work or exchange of sex for drugs), 3) sexual contact with a prostitute of the opposite sex, 4) multiple sex partners of the opposite sex, 5) sexually transmitted disease, 6) cocaine use, or 7) immigration from a country where heterosexual transmission of HIV predominates.

^{*}Includes persons with CDC-defined heterosexual transmission risk in addition to persons with probable heterosexual transmission. These include persons with a documented history of 1) sexual intercourse with an HIV-infected person of the opposite sex, an injection-drug user, a bisexual male, or a person with hemophilia/coagulation disorder, 2) heterosexual prostitution (e.g., sex work or exchange of sex for drugs), 3) sexual contact with a prostitute of the opposite sex, 4) multiple sex partners of the opposite sex, 5) sexually transmitted disease, 6) cocaine use, or 7) immigration from a country where heterosexual transmission of HIV predominates.

FIGURE. Rate* of concurrent HIV and AIDS diagnoses among persons with HIV diagnosed during 2001, by neighborhood†

— New York City



* Per 100,000 population based on 2000 U.S. census data.

As determined by the United Hospital Fund (http://www.ci.nyc.ny.us/html/doh/pdf/data/appb.pdf).

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Editorial Note: Surveillance data from the first full calendar year of named HIV reporting in NYC reflect trends in HIV transmission that would not be discernable by tracking AIDS cases alone and can be useful in guiding the distribution of HIV-treatment resources. Persons with newly diagnosed HIV infection are more likely to be female, non-Hispanic black, younger (i.e., aged <45 years), and residents of the Bronx or Brooklyn. These data can be used for prevention planning activities, policy-making, and allocation of HIV-prevention resources (e.g., the annual allocation of approximately \$45 million in federal, state, and local HIV-prevention funds and \$103 million in Ryan White treatment funds).

The proportion of persons in NYC with HIV and AIDS diagnosed concurrently (27%) is comparable to the estimated 26% concurrent HIV/AIDS diagnoses in 25 U.S. states with HIV reporting (1). Because earlier diagnosis leads to earlier initiation of treatment, delay in the progression of HIV disease, and limitation of the spread of HIV, persons in neighborhoods and risk groups with higher rates of concurrent HIV/AIDS diagnoses should be targeted for increased testing.

The findings in this report are subject to at least four limitations. First, the initiation of HIV reporting in NYC resulted in a large increase in the number of persons reported with

HIV and AIDS. Ascertaining transmission risk for a substantial proportion of these persons has not been possible; no transmission risk data were available for approximately 40% of those who received diagnoses during 2001. For this reason, available transmission risk data cannot be generalized to all persons with HIV infection. To address this limitation, in April 2002, NYCDOHMH, in collaboration with CDC, implemented a systematic sampling approach to obtain transmission risk data for a representative sample of persons reported with HIV, stratified by borough and sex, retroactive to June 2000 (2). Second, the completeness of HIV (non-AIDS) case reporting is not known. During 1993, completeness of AIDS case reporting in NYC was approximately 81%–87% (3), and AIDS surveillance data probably accurately reflect the actual burden of AIDS. However, surveillance data regarding HIV (non-AIDS) might underestimate the number of persons with HIV infection (non-AIDS) diagnosed. Third, persons with undiagnosed HIV cannot be detected by the HIV/AIDS surveillance system. An estimated 25% of persons living with HIV infection have never been tested, are unaware of their HIV-infection status, and are not counted by surveillance systems (4). Finally, the number of new HIV diagnoses in NYC during 2001 might be overestimated because of repeat WB testing among persons with HIV (non-AIDS) diagnosed before the start of HIV reporting. For this reason, the analysis was restricted to the first full calendar year of HIV reporting.

The addition of epidemiologic data related to persons with HIV (non-AIDS) to the HIV/AIDS surveillance system in NYC has resulted in a more complete and accurate characterization of the HIV epidemic. This new epidemiologic information, coupled with proven prevention strategies, will allow for more precise targeting of HIV-prevention resources in NYC.

Acknowledgments

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o·rig·i·nal: adj

(ə-'rij-ən-°l) 1 : being the first instance or source from which a copy, reproduction, or translation can be made;

see also MMWR.



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Incidence of Acute Hepatitis B — United States, 1990–2002

Hepatitis B virus (HBV) is a bloodborne and sexually transmitted virus that is acquired by percutaneous and mucosal exposure to blood or other body fluids of an infected person. Clinical manifestations of acute hepatitis B can be severe, and serious complications (i.e., cirrhosis and liver cancer) are more likely to develop in chronically infected persons. In the United States, approximately 1.2 million persons have chronic hepatitis B virus (HBV) infection and are sources for HBV transmission to others. However, since the late 1980s, the incidence of acute hepatitis B has declined steadily, especially among vaccinated children. To characterize the epidemiology of acute hepatitis B in the United States, CDC analyzed national notifiable disease surveillance data for 1990-2002. This report summarizes the results of that analysis, which indicated that, during 1990-2002, the incidence of reported acute hepatitis B declined 67%. This decline was greatest among children and adolescents, indicating the effect of routine childhood vaccination. The decline was lowest among adults, who accounted for the majority of cases; incidence increased among adults in some age groups. To reduce HBV transmission further in the United States, hepatitis B vaccination programs are needed that target men who have sex with men (MSM), injection-drug users (IDUs), and other adults at high risk.

CDC analyzed surveillance data for acute hepatitis B cases reported weekly from state health departments and the District of Columbia during 1990–2002. Data included each patient's county of residence, sex, race/ethnicity, and age. Clinical and risk factor data were available for approximately 35% of cases reported since 1990, including death from acute hepatitis B, reported injection-drug use, sex and number of sex partners, and exposure to a household or sex contact during incubation period. Acute hepatitis B incidence was calculated by using population denominators from the U.S. Census Bureau.

Summary of Incidence

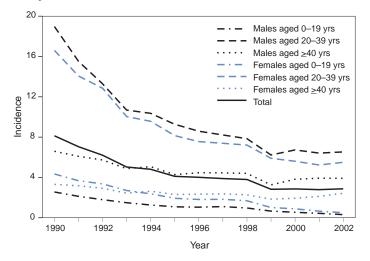
During 1990–2002, the incidence of acute hepatitis B declined 67%, from 8.5 per 100,000 population (21,102

total cases reported) to 2.8 per 100,000 population (8,064 total cases reported) (Figure). By region*, in 2002, incidence was highest in the South (3.6), followed by the Northeast (3.5), the West (2.3), and the Midwest (1.6). During 1990–2002, decreases in incidence were greatest in the West (78%), followed by the Midwest (72%), the South (59%), and the Northeast (52%); however, incidence in the Northeast has increased 41% since 1999.

The incidence of acute hepatitis B among men has been consistently higher than among women. In 1990, the incidence among men and women was 9.8 and 6.3, respectively; in 2002, the incidence was 3.7 and 2.2, respectively. Overall, incidence among women has declined more than among men; the male-to-female acute hepatitis B rate ratio was 1.5 in 1990, compared with 1.7 in 2002.

By age, the most significant decline (89%) in acute hepatitis B incidence during 1990–2002 occurred among persons aged 0–19 years, from 3.0 in 1990 to 0.3 in 2002. Among persons aged 20–39 and ≥40 years, acute hepatitis B incidence declined 67% and 39%, respectively; however, the majority of this decline occurred during 1990–1998. Since 1999, the incidence of acute hepatitis B has increased 5% among males aged 20–39 years and 20% and 31%, respectively, among males and females aged ≥40 years (Figure).

FIGURE. Incidence* of acute hepatitis B, by age group, sex, and year — United States, 1990–2002



^{*} Per 100,000 population.

^{*} Northeast=Connecticut, Maine, Massachusetts, New Hampshire, New Jersey, New York, Pennsylvania, Rhode Island, and Vermont; Midwest=Illinois, Indiana, Iowa, Kansas, Michigan, Minnesota, Missouri, Nebraska, North Dakota, Ohio, South Dakota, and Wisconsin; South=Alabama, Arkansas, Delaware, District of Columbia, Florida, Georgia, Kentucky, Louisiana, Maryland, Mississippi, North Carolina, Oklahoma, South Carolina, Tennessee, Texas, Virginia, and West Virginia; and West=Alaska, Arizona, California, Colorado, Hawaii, Idaho, Montana, Nevada, New Mexico, Oregon, Utah, Washington, and Wyoming.

Among 6,790 (32%) of the 21,102 cases reported in 1990 and 3,079 (38%) of the 8,064 cases reported in 2002 for which risk factor data were available, the proportion of persons who reported injection-drug use was similar (17% and 15%). However, the proportion of heterosexuals reporting multiple sex partners increased from 14% to 29%, as did the proportion of self-identified MSM, from 7% to 18%. During 1990–2002, the proportion of MSM reporting multiple sex partners was approximately 50%.

Examples of Local Trends

Data from two counties illustrate the changing epidemiology of acute hepatitis B in the United States. In both counties, overall incidence and incidence among children have declined. In Baltimore County (Baltimore, Maryland), acute hepatitis B incidence has been consistently higher than the national average. Since 1990, incidence has declined 26% overall; however, during 2000–2002, incidence increased 15%. In 2002, Baltimore County reported 50 acute hepatitis B cases (29 among men and 21 among women) for an overall incidence of 6.6; incidence for men and women was 8.1 and 5.3, respectively, with a male-to-female rate ratio of 1.5. Of the 38 persons with available risk factor data, 15 (40%) reported injection-drug use, eight (21%) reported having multiple heterosexual sex partners, and three (8%) reported both risk factors; six (16%) persons reported exposure to an HBV-infected household or sex contact, and three (8%) reported being an MSM.

Since 1990 in Mecklenburg County (Charlotte, North Carolina), reported acute hepatitis B incidence has been above the national average; however, during the same period, incidence has declined 82%. In 2002, Mecklenburg County reported 39 acute hepatitis B cases (28 among men and 11 among women) for an overall incidence of 5.6; incidence for men and women was 8.2 and 3.1, respectively, with a male-to-female rate ratio of 2.6. Risk factor data were available for all 39 cases; eight (21%) persons reported having multiple heterosexual sex partners, eight (21%) reported being MSM, and three (8%) reported both risk factors. Five (13%) persons reported exposure to an HBV-infected household or sex contact; no persons reported injection-drug use.

Reported by: State and local health depts. Maryland Dept of Health and Mental Hygiene. North Carolina Dept of Health and Human Svcs. J Miller, MPH, L Finelli, DrPH, BP Bell, MD, Div of Viral Hepatitis, National Center for Infectious Diseases, CDC.

Editorial Note: In 1991, a comprehensive strategy to eliminate HBV transmission was implemented in the United States and has reduced the incidence of acute hepatitis B among children. The strategy included universal infant vaccination,

universal screening of pregnant women, and postexposure prophylaxis of infants born to infected mothers to prevent perinatal HBV infection; since 1982, adolescents and adults at high risk have been recommended to receive HBV vaccine (*I*). In 1995, the strategy was expanded to include routine vaccination of all adolescents aged 11–12 years and, in 1999, to include all persons aged 0–18 years who had not been vaccinated previously (*2*). The incidence of acute hepatitis B has declined steadily during the preceding decade, in part because of successful vaccination and other prevention programs. The observed decline in the incidence of acute hepatitis B among children occurred coincident with an increase in hepatitis B vaccination coverage among children aged 19–35 months, from 16% in 1992 to 90% in 2000 (*3*).

Since 1999, after more than a decade of decline, hepatitis B incidence among men aged >19 years and women aged ≥40 years has increased. The most common risk factors reported among adults with acute hepatitis B continue to be multiple sex partners, MSM, and injection-drug use (4). Different highrisk behaviors accounted for the majority of transmissions in different locales.

Increases in sexually transmitted diseases (STD), including syphilis and human immunodeficiency virus (HIV) infection among MSM (5,6) have been attributed to increases in highrisk sexual behavior (e.g., unprotected anal intercourse with more than one partner and unsafe sex while under the influence of alcohol or recreational drugs) (5,6). Changes in patterns of sexual behavior also could be responsible for the increasing transmission of HBV among MSM.

In 1982, the Advisory Committee on Immunization Practices recommended hepatitis B vaccination for sexually active homosexual and bisexual men and IDUs and, in 1985, for heterosexuals with multiple sex partners or a recent STD (1). Trends in acute hepatitis B infection also reflect poor vaccination coverage among persons who engage in these behaviors. Of 3,432 young MSM in seven U.S. metropolitan areas, only 9% had received HBV vaccine (7). In a San Diego County, California, survey, only 6% of IDUs had completed the 3-dose HBV vaccine series (8).

Persons at high risk for HBV infection often seek health care in settings in which vaccination services could be provided. During 1996–1998, approximately half of persons reported with acute hepatitis B had been treated for an STD or incarcerated: 89% of IDUs, 35% of MSM, and 70% of persons with multiple sex partners (4,9). Both STD clinics and correctional facilities are settings in which hepatitis B vaccination services are recommended.

The findings in this report are subject to at least two limitations. First, the quality of surveillance data varies at local and

state levels. Second, national viral hepatitis case-reporting is incomplete; only approximately 35% of all reported cases contain risk factor data.

The decline in acute hepatitis B among children indicates that successful hepatitis B vaccination programs are possible. These programs must consider the local epidemiology of hepatitis B and identify ways to reach populations at high risk. Integration of hepatitis B vaccination into health-care programs that target persons at high risk is feasible and cost effective (8,10). Hepatitis B vaccination programs have been implemented in STD clinics, juvenile and adult detention facilities, HIV-counseling and -testing centers, and other sites.

No national adult hepatitis B program exists that is similar to those that have proven successful for children and adolescents. Components of a national adult vaccination program must include policies for vaccination, including methods for achieving higher vaccination rates among adults at greatest risk and appropriate resources to support implementation.

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Update: Influenza-Associated Deaths Reported Among Children Aged <18 Years — United States, 2003–04 Influenza Season

On December 19, this report was posted on the MMWR website (http://www.cdc.gov/mmwr).

Since October, 42 influenza-associated deaths among children aged <18 years have been reported to CDC. All patients had influenza virus infection detected by rapid antigen testing or other laboratory testing methods. This report describes preliminary findings based on data provided from multiple states, as of December 17, 2003. To improve surveillance, CDC has requested that all influenza-associated deaths of children aged <18 years be reported to CDC through state health departments.

Among the 42 reported deaths, 20 (48%) patients were male, and 21 (50%) were female; the sex of one patient was not reported. Twenty-three (55%) of the children were aged <5 years, and 13 (31%) were aged 6–23 months (Table 1). The median age was 4 years (range: 9 weeks–17 years). Seventeen (40%) of the children had underlying chronic medical conditions (Table 2); the previous medical status for four (10%) children was unknown. Among the 21 patients who had no underlying chronic medical condition, five had invasive bacterial co-infections, including three caused by methicillin-resistant *Staphylococcus aureus* (MRSA), one by *Streptococcus*

TABLE 1. Age distribution of 42 influenza-associated deaths reported among children aged <18 years — United States, 2003–04 influenza season*

Age	No.	(%)	
<6 mos	1	(2)	
6-23 mos	13	(31)	
2- 4 yrs	9	(21)	
5–11 yrs	9	(21)	
12–17 yrs	10	(24)	

^{*} Preliminary data as of December 17, 2003.

TABLE 2. Underlying chronic medical conditions reported in 17 influenza-associated deaths among children, aged <18 years — United States, 2003–04 influenza season*

Underlying chronic medical condition	No. children affected [†]
Autoimmune disorder (i.e., SLE§)	1
Cerebral palsy	2
Chromosomal abnormality	1
Endocrine disorder (i.e., hypothyroidism)	1
Genetic disorder (i.e., Huntington's disease)	1
GI [¶] disorder (i.e., gastroesophageal reflux disease	
or biliary atresia)	2
Developmental delay	2
Mental retardation	2
Pulmonary disease (i.e., asthma or reactive airway	
disease)	3
Organ transplant (i.e., heart)	1
Seizure disorder (e.g., epilepsy)	3
Others (e.g., Pierre Robin syndrome and Cornelia	
de Lange syndrome)	2

Preliminary data as of December 17, 2003.

Certain children had more than one condition.

[§]Systemic lupus erythematosus.

[¶]Gastrointestinal.

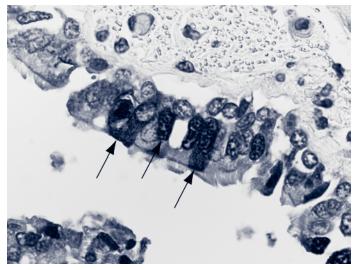
pneumoniae, and one by Group A streptococcus. Three children with underlying chronic medical conditions had invasive bacterial co-infections, including one caused by MRSA, one caused by *Streptococcus pneumoniae*, and one caused by *Neisseria menigitidis*.

Influenza vaccination status was available for only seven patients; five (aged 1 year, 14 months, 20 months, 3 years, and 8 years) were not vaccinated; two (aged 21 months and 5 years) received 1 dose of influenza vaccine; however, their previous vaccination history was unknown. Influenza A viruses were isolated from 11 (26%) patients; 29 (69%) infections were detected by rapid diagnostic testing or by direct fluorescent antibody testing of respiratory specimens. In two (5%) patients, evidence of influenza A virus infection was solely by immunohistochemical staining (IHC) of postmortem tissue specimens at CDC (Figure). Five cases that were positive by rapid antigen testing of respiratory specimens also were tested by IHC; all five also had influenza A viral antigens detected in bronchial epithelium tissues obtained at autopsy. CDC continues to work with state health departments to collect additional information on all cases.

Reported by: State and local health departments. Influenza Response Team, J Wright, DVM, A Likos, MD, N Bhat, MD, EIS officers, CDC.

Editorial Note: Influenza-associated deaths are not reportable conditions in the United States, and the average annual number of such deaths is unknown. However, cases of sudden death associated with influenza in previously healthy children in the United States have been reported (*I*; CDC, unpublished data, 2003). During 1990–1999, approximately

FIGURE. Influenza A viral antigens (dark areas indicated by arrows) demonstrated by immunohistochemical staining, in ciliated bronchial epithelial cells from a deceased child with influenza A virus infection



Photo/CDC

92 influenza-associated respiratory and circulatory deaths were estimated to have occurred annually among children aged <5 years (2). However, this estimate was based on mathematical modeling and not on counting fatalities associated with laboratory-confirmed influenza virus infection.

Among the 42 reported cases, laboratory-confirmed influenza virus infection was found in all of the children. Influenza can be confirmed by various methods, including commercially available rapid tests, viral culture, direct fluorescent antibody, reverse transcriptase polymerase chain reaction, IHC of tissues collected during autopsy (3), and paired serology.

CDC Request for Reports of Influenza-Associated Deaths Among Children

During the 2003–04 influenza season, CDC is requesting that all influenza-associated deaths among children aged <18 years be reported to CDC through state health departments. In addition, CDC is requesting submission of postmortem tissue specimens and autopsy reports where available. Influenza viral isolates in fatal cases also should be sent to CDC for antigenic characterization.

To report the influenza-associated death of a child aged <18 years, state health departments should contact CDC's Influenza Branch, telephone, 800-232-4636; e-mail, eocinfluenza@cdc.gov. Case-reporting and specimen-collection forms will be made available to state health departments and medical examiners via the *Epidemic Information Exchange*, available at http://www.cdc.gov/mmwr/epix/epix.html. When completed, the forms should be sent with a cover sheet headed ATTN: Fatal Case Reporting to CDC via fax, 888-232-1322.

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Update: Influenza Activity — United States, December 14–20, 2003

Influenza activity in the United States continued to increase during December 14–20, 2003*. The proportion of patient visits to sentinel providers for influenza-like illness (ILI)[†]

^{*} Provisional data reported as of December 29.

[†] Temperature of >100.0° F (>37.8° C) and cough and/or sore throat in the absence of a known cause other than influenza.

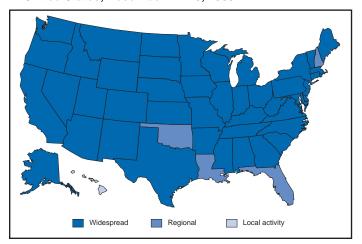
overall was 7.7%, which is above the national baseline of 2.5%. Influenza activity was reported as widespread by health departments in 45 states, New York City, and the District of Columbia; four states reported regional influenza activity; and one state reported local influenza activity (Figure 1).

Laboratory Surveillance

During the reporting week of December 14–20, World Health Organization (WHO) laboratories reported testing 3,693 specimens for influenza viruses; of which 1,297 (35.1%) were positive. Of these, 323 were influenza A (H3N2) viruses, 964 were influenza A viruses that were not subtyped, and 10 were influenza B viruses (Figure 2). Because data from the National Respiratory and Enteric Virus Surveillance System (NREVSS) laboratories for the week ending December 20

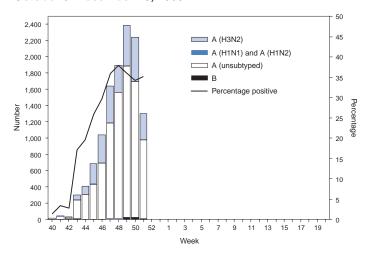
FIGURE 1. States in which estimated influenza activity levels have been reported by state epidemiologists, by level of activity*

— United States, December 14–20, 2003



^{*}Levels of activity are 1) no activity, 2) sporadic—small numbers of laboratory-confirmed influenza cases or a single influenza outbreak reported but no increase in cases of influenza-like illness (ILI), 3) local—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of a state, 4) regional—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least two but less than half the regions of a state, and 5) widespread—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of a state.

FIGURE 2. Number and percentage of specimens testing positive for influenza virus reported by World Health Organization and National Respiratory and Enteric Virus Surveillance System laboratories, by week — United States, October 5–December 20, 2003



were not available at the time of this report, numbers might change substantially next week.

Since September 28, WHO and NREVSS laboratories have tested 40,075 specimens for influenza viruses; of which 11,982 (29.9%) were positive. Of these, 11,902 (99.3%) were influenza A viruses, and 80 (0.7%) were influenza B viruses. Of the 11,902 influenza A viruses, 2,934 (24.7%) have been subtyped; 2,933 (99.9%) were influenza A (H3N2) viruses, and one (0.1%) was an influenza A (H1) virus. All 50 states have reported laboratory-confirmed influenza this season.

Antigenic Characterization

Of the 330 influenza viruses collected by U.S. laboratories since October 1 and characterized antigenically by CDC, 326 were influenza A (H3N2) viruses, two were influenza A (H1) viruses, and two were influenza B viruses. The hemagglutinin proteins of the influenza A (H1) viruses were similar antigenically to the hemagglutinin of the vaccine strain A/New Caledonia/20/99. Of the 326 influenza A (H3N2) isolates that have been characterized, 80 (25.0%) were similar antigenically to the vaccine strain A/Panama/2007/99 (H3N2), and 246 (75.0%) were similar to a drift variant, A/Fujian/411/2002 (H3N2)**. Both influenza B viruses characterized were similar antigenically to B/Sichuan/379/99.

Scalculated as the mean percentage of visits for ILI during noninfluenza weeks, plus two standard deviations. Wide variability in regional data precludes calculating region-specific baselines and makes it inappropriate to apply the national baseline to regional data.

Levels of activity are 1) no activity, 2) sporadic—small numbers of laboratory-confirmed influenza cases or a single influenza outbreak reported but no increase in cases of ILI, 3) local—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in a single region of a state, 4) regional—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least two but less than half the regions of a state, and 5) widespread—outbreaks of influenza or increases in ILI cases and recent laboratory-confirmed influenza in at least half the regions of a state.

^{**} Although vaccine effectiveness against A/Fujian/411/2002-like viruses might be less than that against A/Panama/2007/99-like viruses, the current U.S. vaccine probably will offer some cross-protective immunity against the A/Fujian/411/2002-like viruses and reduce the severity of disease.

Pneumonia and Influenza (P&I) Mortality Surveillance

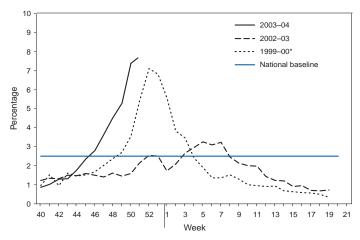
As of the week ending December 20, P&I accounted for 7.8% of all deaths reported through the 122 Cities Mortality Reporting System. The epidemic threshold^{††} for that week was 7.8%.

ILI Surveillance

During the reporting week of December 14–20, the weekly percentage of patient visits to approximately 1,000 U.S. sentinel providers nationwide for ILI increased to 7.7%, which is above the national baseline of 2.5% (Figure 3). The percentage of patient visits for ILI increased in five of the nine surveillance regions but has continued to decline in the West South Central region (6.8% for week 51 compared with 11.3% for week 47). On a regional level 55, the percentage of visits

§§ National and regional percentage of patient visits for ILI are weighted on the basis of state population.

FIGURE 3. Percentage of visits for influenza-like illness reported by Sentinel Provider Surveillance Network, by week — United States, 1999–00, 2002–03, and 2003–04 influenza seasons



^{*}The 1999–00 season was selected for comparison because it was the most recent influenza A (H3N2) season of moderate severity.

for ILI was highest in the East North Central region (9.6%), followed by Pacific region (9.0%), West North Central region (8.8%), South Atlantic region (7.9%), East South Central region (7.8%), West South Central region (6.8%), New England region (6.3%), Mid-Atlantic region (5.8%), and the Mountain region (4.4%).

Activity Reported by State and Territorial Epidemiologists

During the week ending December 20, influenza activity was reported as widespread in 45 states (Alabama, Alaska, Arizona, Arkansas, California, Colorado, Connecticut, Delaware, Georgia, Idaho, Illinois, Indiana, Iowa, Kansas, Kentucky, Maine, Maryland, Massachusetts, Michigan, Minnesota, Mississisppi, Missouri, Montana, Nebraska, Nevada, New Jersey, New Mexico, New York, North Carolina, North Dakota, Ohio, Oregon, Pennsylvania, Rhode Island, South Carolina, South Dakota, Tennessee, Texas, Utah, Vermont, Virginia, Washington, West Virginia, Wisconsin, and Wyoming), New York City, and the District of Columbia. Regional activity was reported in four states (Florida, Louisiana, New Hampshire, and Oklahoma), and Hawaii reported local activity.

Weekly updates on influenza activity will be published in *MMWR* during the influenza season. Additional information about influenza activity is available from CDC at http://www.cdc.gov/flu.

Notice to Readers

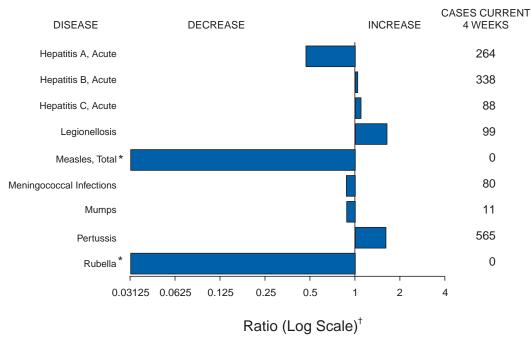
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^{††} The expected baseline proportion of P&I deaths reported by the 122 Cities Mortality Reporting System is projected by using a robust regression procedure that applies a periodic regression model to the observed percentage of deaths from P&I during the previous 5 years; the epidemic threshold is 1.645 standard deviations above the seasonal baseline percentage.

¹⁵ New England=Connecticut, Maine, Massachusetts, New Hampshire, Rhode Island, and Vermont; Mid-Atlantic=New Jersey, New York City, Pennsylvania, and Upstate New York; East North Central=Illinois, Indiana, Michigan, Ohio, and Wisconsin; West North Central=Iowa, Kansas, Minnesota, Missouri, Nebraska, North Dakota, and South Dakota; South Atlantic=Delaware, Florida, Georgia, Maryland, North Carolina, South Carolina, Virginia, Washington, D.C., and West Virginia; East South Central=Alabama, Kentucky, Mississippi, and Tennessee; West South Central=Arkansas, Louisiana, Oklahoma, and Texas; Mountain=Arizona, Colorado, Idaho, Montana, Nevada, New Mexico, Utah, and Wyoming; and Pacific=Alaska, California, Hawaii, Oregon, and Washington.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals December 20, 2003, with historical data



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Beyond Historical Limits

TABLE I. Summary of provisional cases of selected notifiable diseases, United States, cumulative, week ending December 20, 2003 (51st Week)*

		Cum. 2003	Cum. 2002		Cum. 2003	Cum. 2002
Anthrax		-	2	Hansen disease (leprosy)†	56	88
Botulism:		-	-	Hantavirus pulmonary syndrome†	17	17
	foodborne	17	27	Hemolytic uremic syndrome, postdiarrheal†	152	200
	infant	68	68	HIV infection, pediatric ^{†§}	204	158
	other (wound & unspecified)	31	19	Measles, total	41 [¶]	41**
Brucellosis†		85	122	Mumps	191	251
Chancroid		44	67	Plague	1	2
Cholera		1	2	Poliomyelitis, paralytic	-	-
Cyclosporiasis	s†	70	159	Psittacosis†	14	16
Diphtheria		1	1	Q fever [†]	70	58
Ehrlichiosis:		-	-	Rabies, human	3	3
	human granulocytic (HGE)†	354	337	Rubella	7	16
	human monocytic (HME)†	205	192	Rubella, congenital	-	1
	other and unspecified	42	23	SARS-associated coronavirus disease ^{††}	8	NA
Encephalitis/M	leningitis:	-	-	Streptococcal toxic-shock syndrome [†]	135	115
	California serogroup viral†	88	149	Tetanus	14	22
	eastern equine [†]	10	9	Toxic-shock syndrome	125	101
	Powassan [†]	-	1	Trichinosis	5	14
	St. Louis†	37	20	Tularemia [†]	78	75
	western equine†	5	-	Yellow fever	-	-

^{-:} No reported cases.

No measles or rubella cases were reported for the current 4-week period yielding a ratio for week 50 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.

^{*} Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

Not notifiable in all states.

Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention.

Last update November 30, 2003.

Of 41 cases reported, 30 were indigenous, and 11 were imported from another country.

Of 41 cases reported, 24 were indigenous, and 17 were imported from another country.

Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases (notifiable as of July 2003).

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002

	All	DS	Chla	Chlamydia [†]		Coccidiodomycosis		oridiosis	Encephalitis/Meningitis West Nile		
Reporting area	Cum. 2003§	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	
JNITED STATES	41,832	39,910	803,868	816,631	4,072	4,368	3,198	2,906	1,924	2,747	
NEW ENGLAND	1,436	1,548	26,129	27,405	-	-	165	190	7	27	
∕laine I.H.	52 36	28 38	1,652 1,037	1,742 1,534	N	N	20 11	12 29	-	-	
t.	16	12	1,026	915	-	-	32	33	-	-	
∕lass. ≀.l.	599 102	807 102	11,222 2,834	10,779 2,781	-	-	68 16	77 21	-	18	
Conn.	631	561	8,358	9,654	N	N	18	18	7	9	
IID. ATLANTIC	9,714	9,476	108,915	93,293	-		405	413	189	134	
lpstate N.Y. I.Y. City	1,007 5,201	1,306 5,345	19,784 33,531	16,422 31,911	N -	N	134 99	141 144	8 -	47 28	
l.J.	1,448	1,371	14,125	13,990	-	-	11	17	31	23	
^o a.	2,058	1,454	41,475	30,970	N	N	161	111	150	36	
E.N. CENTRAL Ohio	3,863 757	4,225 757	140,635 34,163	150,287 37,504	7	23	963 171	944 118	118 105	1,619 435	
nd.	514	483	16,064	17,001	N	N	105	60	1	18	
II. ∕Iich.	1,718 703	2,097 706	43,393 31,739	47,596 31,382	7	3 20	87 144	121 131	2 10	554 561	
Vis.	171	182	15,276	16,804	-	-	456	514	-	51	
V.N. CENTRAL	768	764	45,367	46,345	1	1	570	412	475	192	
∕linn. owa	162 82	149 81	9,209 3,344	10,008 5,726	N N	N N	150 121	197 47	49 78	17 -	
Лo.	365	383	17,489	15,900	-	-	49	40	34	107	
N. Dak. S. Dak.	2 14	3 10	1,294 2,539	1,187 2,157	N -	N -	15 44	24 36	9 65	14	
lebr.¶	52	66	4,659	4,676	1	1	19	52	153	35	
ans.	91	72	6,833	6,691	N	N	172	16	87	19	
S. ATLANTIC Del.	11,498 202	11,861 194	150,538 2,961	155,003 2,612	5 N	4 N	393 4	325 3	196 12	71	
∕ld.	1,441	1,836	16,438	16,448	5	4	25	19	51	21	
).C. /a.	863 856	769 811	3,016 16,415	3,262 18,176	-	-	13 45	5 30	22	-	
V. Va.	86	79	2,504	2,429	N	N	4	3	1	2	
I.C. 5.C. [¶]	1,060 756	953 815	25,201 15,984	24,516 14,274	N	N	51 9	36 6	5 3	- 1	
.о. За.	1,825	1,543	28,998	32,360	-	-	127	121	51	21	
la.	4,409	4,861	39,021	40,926	N	N	115	102	51	26	
E.S. CENTRAL (y.	1,879 200	1,919 301	50,191 7,875	51,099 8,597	N N	N N	115 24	127 10	44 11	278 42	
enn.	800	762	19,817	15,760	N	N	39	60	17	10	
∖la. ⁄liss.	441 438	421 435	11,871 10,628	15,394 11,348	- N	- N	42 10	47 10	16	34 192	
V.S. CENTRAL	4,566	3,850	101,176	105,422	4	12	93	64	506	421	
rk.	172	240	7,554	7,277	-	-	19	8	22	13	
.a. Okla.	610 202	898 180	17,599 10,739	18,384 10,780	N N	N N	3 20	10 16	49 31	204	
ex.	3,582	2,532	65,284	68,981	4	12	51	30	404	204	
MOUNTAIN	1,461	1,365	43,068	50,919	2,492	2,871	133	156	385	5	
font. daho	13 24	11 31	2,080 2,375	2,354 2,473	N N	N N	18 27	6 29	216	1 1	
Vyo.	7	8	934	925	1	1	5	9	96	-	
Colo. I. Mex.	343 102	307 88	10,031 6,690	13,859 7,304	N 9	N 8	34 14	57 20	- 68	-	
riz.	646	552	12,107	14,687	2,428	2,807	6	17	2	3	
Itah Iev.	72 254	63 305	3,419 5,432	3,505 5,812	19 35	11 44	21 8	14 4	1 2	-	
ACIFIC	6,647	4,902	137,849	136,858	1,562	1,456	361	275	4	-	
Vash.	491	441	16,295	14,632	1,562 N	1,436 N	59	36	-	-	
reg.	242	310	7,047	6,758	1 562	1 156	38	39 107	4	-	
Calif. Jaska	5,802 15	3,994 30	107,473 3,583	107,309 3,697	1,562 -	1,456 -	263 1	197 1	-	-	
lawaii	97	127	3,451	4,462	-	-	-	2	-	-	
lam R.	6 1,025	2 1,136	- 1,761	610 2,464	- N	- N	- N	- N	-	-	
<u>/.l.</u>	33	70	208	125	-	-	-	-	-	-	
mer. Samoa	U 2	U U	U	U U	U	U U	U	U U	U	U U	

N: Not notifiable.

N: Not notifiable. U: Unavailable. -: No reported cases. C.N.M.I.: Commonwealth of Northern Mariana Islands.

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

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

§ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update November 30, 2003.

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

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

(51st Week)*		Escher	richia coli, Ente	rohemorrhagio	: (EHEC)					
			Shiga toxi	n positive,	Shiga toxi	n positive,				
		7:H7	 	non-O157	not sero	<u> </u>		rdiasis		orrhea
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	2,511	3,735	266	184	129	53	17,789	20,390	307,915	345,354
NEW ENGLAND	162	263	55	47	17	7	1,417	1,732	6,920	7,634
Maine N.H.	10 12	39 35	3 2	8 -	1 -	-	179 22	208 43	170 76	140 119
Vt. Mass.	18 69	14 118	- 8	1 20	-	1	119 747	145 920	90	97
R.I.	4	12	-	1	16 -	6	114	156	2,979 908	3,200 888
Conn.	49	45	42	17	-	-	236	260	2,697	3,190
MID. ATLANTIC Upstate N.Y.	234 95	415 174	19 11	1 -	37 19	8 1	3,514 1,070	4,138 1,221	41,901 7,835	41,726 8,456
N.Y. City N.J.	5 22	19 63	- 1	-	-	- 1	1,110 367	1,410 468	13,249 7,762	12,502 7,794
Pa.	112	159	7	1	18	6	967	1,039	13,055	12,974
E.N. CENTRAL	556	845	28	31	23	6	2,920	3,559	63,477	73,425
Ohio Ind.	133 89	154 78	16 -	11 1	22	5 -	888	956 -	18,793 6,443	21,652 7,354
III. Mich.	114 90	191 134	2	6 3	-	- 1	745 744	1,011 907	19,616 13,674	23,755 14,415
Wis.	130	288	10	10	1	-	543	685	4,951	6,249
W.N. CENTRAL Minn.	435 133	514 162	55 23	31 26	20 1	7	2,026 789	2,102 816	16,118 2,634	17,798 3,020
Iowa	103	120	-	-	-	-	267	306	775	1,367
Mo. N. Dak.	88 13	69 18	18 4	-	1 8	2	492 38	494 31	8,315 72	8,825 71
S. Dak.	28	40	4 5	2	-	-	84	81	222	262
Nebr. Kans.	39 31	73 32	1	3 -	10	5	136 220	186 188	1,581 2,519	1,534 2,719
S. ATLANTIC	151	459	73	36	11	1	2,775	2,925	74,983	87,582
Del. Md.	11 14	10 28	N -	N -	N -	N -	51 116	54 115	1,108 7,875	1,552 9,191
D.C. Va.	1 38	3 67	- 11	10	-	-	56 358	46 328	2,388 7,535	2,633 10,207
W. Va.	5	9	-	-	-	1	49	59	828	962
N.C. S.C.	4 4	226 5	31 -	-	-	-	N 136	N 142	14,585 8,612	15,445 9,118
Ga. Fla.	31 43	46 65	6 25	8 18	- 11	-	929 1,080	901 1,280	14,659 17,393	17,601 20,873
E.S. CENTRAL	82	110	2	-	7	10	342	391	24,963	29,589
Ky. Tenn.	28 35	30 49	2	-	7	10	N 178	N 186	3,531 8,270	3,716 9,201
Ala.	14	20	-	-	-	-	164	205	7,692	9,998
Miss.	5	11	-	-	-	-	-	-	5,470	6,674
W.S. CENTRAL Ark.	94 12	111 12	4 -	2	9 -	9	286 139	255 173	41,754 3,882	47,313 4,561
La. Okla.	3 29	4 23	-	-	-	-	14 133	6 73	10,370 4,435	11,358 4,627
Tex.	50	72	4	2	9	9	-	3	23,067	26,767
MOUNTAIN Mont.	326 17	337 31	26	29	5	5	1,564 113	1,697 93	9,422 104	11,215 118
Idaho	84	43	16	18	-	-	202	132	69	93
Wyo. Colo.	4 71	15 98	1 3	2 6	- 5	- 5	23 418	29 564	43 2,408	63 3,467
N. Mex.	11	13	5	3	-	- N	50	151 242	1,061	1,442 3,708
Ariz. Utah	40 76	34 75	N -	N -	N -	- -	255 364	327	3,334 356	372
Nev.	23	28	1	-	-	-	139	159	2,047	1,952
PACIFIC Wash.	471 113	681 148	4 1	7 -	-	-	2,945 353	3,591 442	28,377 2,684	29,072 2,852
Oreg. Calif.	103 242	206 282	3	7	-	-	392 2,023	443 2,504	941 23,382	892 23,985
Alaska	4	8	-	-	-	-	85	112	542	618
Hawaii Guam	9 N	37 N	-	-	-	-	92	90 7	828	725 45
P.R.	-	1	-	-	36	-	132	85	188	332
V.I. Amer. Samoa	U	Ū	U	U	U	Ū	U	U	55 U	31 U
C.N.M.I.	-	U	-	U	-	U	-	U	-	U

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

(51st Week)*				Haemophilus	influenzae, inv	/asive [†]			Нер	atitis
	All	ages				years			→ '	te), by type
	All sei	rotypes	Serot	ype b	Non-sei	rotype b	Unknown	serotype		A
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	1,644	1,629	20	32	90	137	183	149	7,046	8,574
NEW ENGLAND	120	124	1	-	5	12	5	2	336	292
Maine N.H.	4 11	2 11	- 1	-	-	-	1	-	19 11	8 11
Vt.	10	7	-	-		-	-	-	6	4
Mass. R.I.	54 9	46 10	-	-	5	5	3 1	2	203 15	144 32
Conn.	32	48	-	-	-	7	-	-	82	93
MID. ATLANTIC Upstate N.Y.	367 134	303 117	-	4 2	3 3	16 4	52 13	25 8	1,737 146	1,099 177
N.Y. City	62	69	-	-	-	-	11	10	439	441
N.J. Pa.	64 107	56 61	-	2	-	12	10 18	7	157 995	186 295
E.N. CENTRAL	236	314	4	4	13	14	33	44	687	1,021
Ohio Ind.	72 50	81 42	- 1	2	1 8	1 8	12	10	167 75	297 48
III.	69	120	-	-	-	-	15	21	196	262
Mich. Wis.	23 22	17 54	3	2	4	5	1 5	- 13	204 45	218 196
W.N. CENTRAL	124	72	2	1	7	3	17	6	195	289
Minn.	53	47 1	2	1	7	3	2	4	45	47
Iowa Mo.	43	13	-	-	-	-	14	2	36 72	65 84
N. Dak. S. Dak.	3 1	4 1	-	-	-	-	-	-	1	3 3
Nebr.	3	1	-	-	-	-	-	-	13	17
Kans. S. ATLANTIC	21	5	-	-	- 47	- 47	1	-	28	70
Del.	387	359 -	3 -	5 -	17 -	17 -	21	27 -	1,762 8	2,376 15
Md. D.C.	92	95	1	2	7	4	1	1	176 43	299 80
Va.	55	32	-	-	-	-	6	5	108	150
W. Va. N.C.	17 41	18 31	-	-	3	1 3	2	1 -	15 124	23 203
S.C.	5	14 81	-	-	-	-	1	2	39	65
Ga. Fla.	64 113	88	2	3	7	9	5 6	12 6	846 403	498 1,043
E.S. CENTRAL	79	69	1	1	2	5	11	13	253	264
Ky. Tenn.	6 51	8 35	-	-	2	1 1	7	2 7	32 190	43 119
Ala.	20	16	1	1	-	3	3	1	15	39
Miss.	2	10	-	-	-	-	1	3	16	63
W.S. CENTRAL Ark.	69 7	58 1	2	2	9 1	11 -	5	3	382 19	1,031 71
La. Okla.	12 47	9 46	-	-	- 8	- 11	5	3	58 23	89 48
Tex.	3	2	2	2	-	-	-	-	282	823
MOUNTAIN	158	189	4	7	19	40	23	17	472	544
Mont. Idaho	6	2	-	-	-	-	2	1	8 18	13 30
Wyo. Colo.	2 37	2 35	-	-	-	-	- 7	- 4	1 68	3 73
N. Mex.	17	27	-	-	4	6	1	1	22	29
Ariz. Utah	72 14	93 18	4	5 1	6 5	28 4	8 5	7 1	257 47	291 54
Nev.	10	12	-	1	4	2	-	3	51	51
PACIFIC	104	141	3	8	15	19	16	12	1,222	1,658
Wash. Oreg.	11 48	4 55	-	2	7	2	3 6	3	65 60	147 63
Calif. Alaska	20 3	43 2	3	6	8	17	4 2	4 2	1,076 9	1,411 12
Hawaii	22	37	-	-	-	-	1	3	12	25
Guam	-	-	-	-	-	-	-	-	-	1
P.R. V.I.	-	1 -	-	-	-	-	-	-	52	228
Amer. Samoa	U	U	U	U U	U	U	U	U	U	U
C.N.M.I. N: Not notifiable.	U: Unavailable.	U : No ron	orted cases.	U	-	U	-	U	-	U

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

† Non-serotype b: nontypeable and type other than b; Unknown serotype: type unknown or not reported. Previously, cases reported without type information were counted as non-serotype b.

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

(51st Week)*			l ====4=\ b==4=						<u> </u>		
		epatitis (vira B	l, acute), by ty	rpe C	Legior	nellosis	Liste	Listeriosis		disease	
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	
UNITED STATES	6,613	7,275	1,809	1,772	1,961	1,261	606	640	17,573	21,730	
NEW ENGLAND Maine N.H.	241 1 11	305 13 22	11 2 -	20 - -	103 2 6	116 5 7	49 7 3	62 5 4	3,388 222 95	7,059 102 250	
Vt. Mass. R.I. Conn.	4 185 18 22	7 165 30 68	9 - - U	13 6 1 U	6 44 17 28	35 45 9 15	1 15 1 22	3 34 1 15	43 1,140 581 1,307	37 1,805 346 4,519	
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	864 129 278 182 275	1,510 121 723 331 335	158 40 - - 118	110 47 - 5 58	556 155 59 73 269	360 108 63 33 156	114 34 21 15 44	190 57 39 37 57	11,356 4,419 5 2,049 4,883	11,199 4,868 59 2,340 3,932	
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	414 152 38 1 192 31	689 105 59 158 318 49	153 12 9 17 115	116 2 - 24 86 4	395 226 29 3 119 18	292 122 21 28 84 37	70 25 10 8 19 8	91 26 12 23 22 8	797 71 23 33 12 658	1,263 81 20 47 26 1,089	
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak. Nebr.	345 37 13 243 2 2 2	234 36 20 118 5 2	272 9 1 259 - - 3	630 2 1 611 - 1 15	67 5 10 33 1 2	67 17 13 19 1 4	23 11 1 5 -	20 3 3 10 1 1	469 343 50 65 - 1	465 367 42 40 1 2	
Kans. S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla.	19 2,067 10 133 12 189 38 160 149 758 618	23 1,723 13 129 21 196 18 225 122 475 524	163 18 - 11 9 13 24 10 78	- 211 - 14 - 15 3 26 5 64 84	11 514 28 130 19 93 21 39 7 32 145	223 10 56 6 30 - 13 10 19 79	2 136 N 28 - 12 7 18 5 34 32	1 83 N 20 - 7 - 8 8 8 14 26	8 1,281 191 648 14 159 27 147 15 17 63	7 1,394 192 728 23 204 17 127 24 2	
E.S. CENTRAL Ky. Tenn. Ala. Miss.	428 73 206 61 88	381 53 137 101 90	85 20 19 7 39	137 4 30 11 92	95 43 34 13 5	49 22 19 8	31 9 8 12 2	21 4 12 4	63 61 15 17 5 24	73 23 27 11 12	
W.S. CENTRAL Ark. La. Okla. Tex.	830 59 113 41 617	1,024 112 132 79 701	783 3 116 2 662	378 11 98 5 264	63 2 1 7 53	35 - 4 3 28	42 1 3 3 35	38 - 5 9 24	80 - 6 - 74	141 3 5 - 133	
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	590 16 8 31 79 33 275 64 84	605 10 7 17 77 146 228 51 69	56 4 1 - 17 - 7 - 27	57 1 1 5 6 3 7 4 30	77 4 4 2 15 3 11 27 11	54 3 2 2 9 2 14 16 6	30 2 2 - 10 2 10	30 - 2 - 7 3 14 3 1	19 3 2 4 1 3 3	17 - 4 2 1 1 3 5	
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	834 75 109 615 11 24	804 72 126 584 11	128 16 16 85 1	113 25 13 74 - 1	91 10 N 80 - 1	65 5 N 57 2 1	111 8 5 93 - 5	105 8 9 80 - 8	122 3 18 98 3 N	119 11 12 93 3 N	
Guam P.R. V.I.	- 85 -	1 191 -	- - -	- - -	- - -	- - -	- - -	2	N ₋	N -	
Amer. Samoa C.N.M.I.	U -	U U	U -	U U	U -	U U	U -	U U	U -	U U	

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

(51st Week)*										
	Ma	laria		gococcal ease	Pert	ussis	Rabies	s, animal		Mountain ed fever
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	1,139	1,369	1,520	1,734	7,906	8,694	5,375	7,541	951	1,000
NEW ENGLAND	43	83	71	93	1,203	881	553	897	1	7
Maine N.H.	4 4	6 7	6 3	6 14	12 60	17 61	67 13	60 48	-	-
Vt.	2 11	4 33	3 44	4	69 1,017	167 591	38 207	89 299	- 1	3
Mass. R.I.	3	11	2	48 5	20	16	59	75	-	4
Conn.	19	22	13	16	25	29	169	326	-	-
MID. ATLANTIC Upstate N.Y.	286 58	368 46	193 53	214 55	1,157 755	535 365	923 417	1,336 693	39 2	59 -
N.Y. City N.J.	143 42	230 43	38 27	37 28	107	22 5	6 62	21 188	14 12	10 16
Pa.	43	49	75	94	295	143	438	434	11	33
E.N. CENTRAL	86	160	208	259	729	993	163	162	17	32
Ohio Ind.	23 3	24 14	56 43	74 32	314 70	434 152	53 32	39 31	11 1	13 4
III. Mich.	26 24	62 45	43 45	57 45	130	168 60	24 47	31 46	- 5	12 3
Wis.	10	15	21	51	215	179	7	15	-	-
W.N. CENTRAL Minn.	51 24	58 17	130	149	509	739 368	576	469	71	104
Iowa	6	4	26 26	35 28	146 143	142	41 104	38 79	2 2	3
Mo. N. Dak.	6 1	16 1	55 1	50 3	149 6	144 8	55 54	50 57	55 -	96
S. Dak.	3	2	1	2	5	7	67	93	5	1
Nebr. Kans.	11	5 13	7 14	23 8	15 45	8 62	100 155	- 152	4 3	4 -
S. ATLANTIC	320	321	257	282	676	414	2,400	2,619	605	475
Del. Md.	3 75	5 107	9 27	7 9	8 85	4 67	63 256	53 391	1 106	1 40
D.C. Va.	15 40	21 32	- 24	42	3 90	2 140	477	- 577	1 30	2 40
W. Va.	4	3	6	4	26	32	81	169	5	2
N.C. S.C.	25 4	22 8	36 21	32 33	137 184	45 45	751 238	697 147	321 43	285 72
Ga. Fla.	67 87	51 72	33 101	31 124	32 111	28 51	346 188	406 179	83 15	19 14
E.S. CENTRAL	22	20	86	97	143	257	171	213	110	133
Ky.	9	7	19	17	45	97	37	26	3	5
Tenn. Ala.	7 3	3 5	30 15	38 22	75 17	114 37	100 33	108 75	66 12	85 16
Miss.	3	5	22	20	6	9	1	4	29	27
W.S. CENTRAL Ark.	77 4	84 3	182 17	213 24	688 37	1,620 488	221 25	1,243 99	97 44	171 97
La.	4	4	35	46	6	7	-	-	-	-
Okla. Tex.	4 65	10 67	21 109	22 121	92 553	35 1,090	196 -	120 1,024	42 11	61 13
MOUNTAIN	52	52	78	93	906	1,487	167	310	10	14
Mont. Idaho	1	2	6 9	3 5	5 75	9 151	21 15	19 38	1 2	1 -
Wyo. Colo.	2	- 25	2 22	-	130 340	11 458	6	18 59	2 2	5 2
N. Mex.	22 3	3	11	26 4	67	198	38 5	10	1	1
Ariz. Utah	16 6	13 6	15 5	30 5	126 128	507 105	63 14	142 13	2	-
Nev.	2	3	8	20	35	48	5	11	-	5
PACIFIC Wash.	202 30	223 24	315 39	334 63	1,895 703	1,768 484	201	292	1	5
Oreg.	12	12	61	46	439	188	7	14	- -	3
Calif. Alaska	152 1	177 2	202 3	212 4	735 7	1,062 5	186 8	252 26	1 -	2
Hawaii	7	8	10	9	11	29	- -	-	-	-
Guam P.R.	1	- 1	- 5	1 7	- 1	2 3	- 68	- 86	- N	- N
V.I. Amer. Samoa	- U	- U	- U	- U	- U	- U	U	- U	- U	- U
C.N.M.I.	-	Ü	-	Ü	-	Ü	-	Ü	-	Ü

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

(51st Week)*	<u></u>									
					Streptococo	al disease		ptococcus pne esistant,	<i>umoniae</i> , inv I	asive
	Salmo	onellosis	Shige	ellosis	invasive,			iges	Age <	5 years
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	39,845	42,832	21,273	21,990	5,044	4,471	2,039	2,415	454	382
NEW ENGLAND	2,038	2,175	328	345	360	318	42	118	9	4
Maine N.H.	136 100	142 138	7 5	10 13	28 21	20 35	-	-	- N	- N
Vt.	73	75	8	1	19	10	8	5	5	2
Mass. R.I.	1,211 129	1,207 171	221 21	202 17	174 16	106 15	N 10	N 16	N 4	N 2
Conn.	389	442	66	102	102	132	24	97	Ū	Ū
MID. ATLANTIC	4,469	5,734	2,245	1,835	880	704	128	123	101	85
Upstate N.Y. N.Y. City	1,148 1,244	1,515 1,375	585 400	354 497	349 125	282 155	72 U	92 U	77 U	71 U
N.J.	573	1,040	280	615	148	145	N	N	N	N
Pa.	1,504	1,804	980	369	258	122	56	31	24	14
E.N. CENTRAL Ohio	5,158 1,317	5,460 1,381	1,694 299	2,255 652	1,007 285	972 212	440 286	261 94	178 98	159 31
Ind. III.	565 1,644	556 1 770	179 863	115	105	52 279	154	165	49	66
Mich.	776	1,770 861	233	1,105 194	182 350	305	N	2 N	N	N
Wis.	856	892	120	189	85	124	N	N	31	62
W.N. CENTRAL Minn.	2,521 569	2,606 577	812 107	1,085 213	324 161	256 129	168	433 292	63 53	63 59
Iowa	390	500	88	122	N	N	N	N	N	N
Mo. N. Dak.	963 40	822 41	370 6	210 18	72 15	46 3	15 3	5 1	3 7	1 3
S. Dak.	118	114	17	157	21	14	1	1	-	-
Nebr. Kans.	152 289	201 351	106 118	273 92	25 30	26 38	149	26 108	N N	N N
S. ATLANTIC	10,980	11,344	7,082	7,569	894	704	1,026	1,105	18	36
Del.	99	101	157	402	7	2	1	3	N	N
Md. D.C.	848 51	925 76	581 73	1,213 63	268 16	122 9	3	-	7	26 3
Va. W. Va.	1,068 124	1,214 152	426	996 12	97 36	73 19	N 80	N 46	N 11	N 7
N.C.	1,392	1,574	985	550	103	113	N	N	U	U
S.C. Ga.	810 2,176	841 1,926	509 1,593	134 1,782	37 120	38 128	141 238	193 274	N N	N N
Fla.	4,412	4,535	2,758	2,417	210	200	563	589	N	N
E.S. CENTRAL	2,654	3,272	935	1,535	206	114	143	134	-	-
Ky. Tenn.	396 741	395 857	128 391	200 168	45 161	22 92	20 123	18 116	N N	N N
Ala. Miss.	531 986	859 1,161	249 167	823 344	-	-	-	-	N	N
W.S. CENTRAL	4,712	4,618	4,475	3,274	340	293	60	- 191	- 79	30
Ark.	782	1,050	98	196	5	8	8	12	-	-
La. Okla.	538 465	785 510	303 834	499 587	1 90	1 48	52 N	179 N	11 45	10 8
Tex.	2,927	2,273	3,240	1,992	244	236	N	N	23	12
MOUNTAIN	2,224	2,329	1,226	1,067	439	560	29	50	6	5
Mont. Idaho	111 172	89 169	2 35	4 17	2 19	11	N	N	N	N
Wyo. Colo.	77 443	106 593	8 277	8 210	2	7 122	10	14	-	-
N. Mex.	270	327	250	243	126 114	110	19	35	-	-
Ariz. Utah	745 230	653 178	536 52	497 35	163 11	279 31	-	-	N 6	N 5
Nev.	176	214	66	53	2	-	-	1	-	-
PACIFIC	5,089	5,294	2,476	3,025	594	550	3	-	-	-
Wash. Oreg.	556 421	506 335	154 212	179 108	70 N	60 N	N	- N	N N	N N
Calif.	3,793	4,106	2,055	2,662	399	383	Ň	N	N	N
Alaska Hawaii	96 223	83 264	10 45	5 71	125	107	3	-	N -	N -
Guam	_	42	-	37	-	-	-	4	-	-
P.R. V.I.	350	567	8	31	N	N	N	N	N	N
Amer. Samoa	Ū	U	U	U	Ū	U	U	Ü	U	Ü
C.N.M.I.	-	U	-	U	-	U	-	U	-	U

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 20, 2003, and December 21, 2002 (51st Week)*

Reporting area UNITED STATES	Primary & Cum. 2003		Cong	onital					Varicella
UNITED STATES		C		enitai	Tube	rculosis	Typhoid fever		(Chickenpox)
UNITED STATES		Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003
	6,574	6,686	359	430	11,121	12,872	304	315	13,086
NEW ENGLAND	196	147	1	1	310	424	23	13	1,843
Maine N.H.	7 14	2 8	1 -	-	5 7	20 18	2	-	780 -
Vt. Mass.	1 129	2 98	-	- 1	7 209	7 233	- 12	7	907 151
R.I.	20 25	10 27	-	-	32 50	49 97	2 7	, - 6	5
Conn. MID. ATLANTIC	25 848	727	64	66	2,117	2,163	7 58	77	38
Upstate N.Y.	47	35	17	4	275	303	11	9	N
N.Y. City N.J.	483 162	425 164	32 15	26 35	1,100 426	1,037 496	25 16	41 18	-
Pa.	156	103	-	1	316	327	6	9	38
E.N. CENTRAL Ohio	846 197	1,205 158	69 3	72 3	1,150 200	1,300 234	23 2	34 7	6,047 1,220
Ind.	55	61	12	4	128	122	4	2	-
III. Mich.	335 247	470 486	20 34	39 26	557 213	602 271	7 10	17 4	3,978
Wis.	12	30	-	-	52	71	-	4	849
W.N. CENTRAL Minn.	143 42	123 59	4	2 1	473 193	513 223	4	10 4	77 N
Iowa	7	4	-	-	25	33	2	-	N
Mo. N. Dak.	55 2	34	4	1 -	109 4	126 6	1 -	2	- 77
S. Dak. Nebr.	2 12	6	-	-	20 27	13 25	- 1	4	-
Kans.	23	20	-	-	95	87	-	-	-
S. ATLANTIC Del.	1,756 6	1,758	71	90	2,308 23	2,711 21	53	44	2,082
Md.	300	11 223	11	15	233	274	9	11	28
D.C. Va.	52 75	56 69	- 1	1 1	- 255	- 278	- 12	7	31 503
W. Va.	2	2	-	-	21	28	-	-	1,260
N.C. S.C.	148 94	279 134	19 7	20 13	354 161	416 147	9	2	N 260
Ga. Fla.	468 611	379 605	11 22	13 27	372 889	515 1,032	8 15	5 19	- N
E.S. CENTRAL	313	447	10	31	663	750	7	4	2
Ky.	33	88	1	3	125	132	1	4	N
Tenn. Ala.	134 114	165 149	2 5	11 10	201 236	288 209	3 3	-	N -
Miss.	32	45	2	7	101	121	-	-	2
W.S. CENTRAL Ark.	913 54	837 34	69 2	89 11	1,500 105	1,808 119	32	30	2,280
La.	168	148	-	2	-	-	- 1	2	14
Okla. Tex.	64 627	71 584	1 66	76	145 1,250	168 1,521	31	28	N 2,266
MOUNTAIN	299	326	25	21	348	426	6	10	717
Mont. Idaho	- 15	8	-	-	5 8	12 14	1	-	N N
Wyo. Colo.	- 24	64	3	2	4 64	3 95	3	- 5	106
N. Mex.	63	36	4	-	6	34	-	1	4
Ariz. Utah	176 10	196 7	18 -	19 -	200 39	223 31	2	2	4 603
Nev.	11	15	-	-	22	14	-	2	-
PACIFIC Wash.	1,260 77	1,116 66	46	58 2	2,252 240	2,777 242	98 4	93 6	- -
Oreg.	43	26	-	-	100	109	5	2	-
Calif. Alaska	1,138 -	1,014	46	55 -	1,789 54	2,232 49	88	80	-
Hawaii	2	10	-	1	69	145	1	5	-
Guam P.R.	- 183	6 277	- 1	23	- 86	65 104	-	-	423
V.I.	1	1	-	-	-	-	-	-	-
Amer. Samoa C.N.M.I.	U -	U U	U -	U U	U -	U U	U -	U U	U -

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE III. Deaths in 122 U.S. cities.* week ending December 20, 2003 (51st Week)

TABLE III. Deaths	is in 122 U.S. cities,* week ending December All causes, by age (years)), 2003 (: 	51st Week)	1	All causes, by age (years)						
	AII						P&I†		All		Τ	1			P&I [†]	
Reporting Area	Ages	<u>></u> 65	45-64	25-44	1-24	<1	Total	Reporting Area	Ages	<u>≥</u> 65	45-64	25-44	1-24	<1	Total	
NEW ENGLAND	591	433	109	28	10	11	63	S. ATLANTIC	1,309	832	323	91	40	23	86	
Boston, Mass.	170 38	133 31	23 5	4	4 1	6 1	28 4	Atlanta, Ga.	181 334	115 202	42 88	18 21	5 17	1 6	9 24	
Bridgeport, Conn. Cambridge, Mass.	36 15	9	5	1	-	-	-	Baltimore, Md. Charlotte, N.C.	131	85	29	11	3	3	12	
Fall River, Mass.	22	19	1	2	_	_	4	Jacksonville, Fla.	175	116	42	10	5	2	8	
Hartford, Conn.	65	40	17	5	3	-	7	Miami, Fla.	43	28	13	1	-	1	1	
Lowell, Mass.	44	35	5	4	-	-	4	Norfolk, Va.	74	41	23	6	3	1	6	
Lynn, Mass.	21	15	6	-	-	-	1	Richmond, Va.	69	47	15	4	1	2	8	
New Bedford, Mass. New Haven, Conn.	34 U	24 U	8 U	2 U	U	U	1 U	Savannah, Ga.	U	U	U	U 3	U 2	U	U 4	
Providence, R.I.	U	U	U	U	U	U	U	St. Petersburg, Fla. Tampa, Fla.	76 199	55 128	16 47	13	4	7	13	
Somerville, Mass.	10	5	4	1	-	-	-	Washington, D.C.	Ü	U	Ü	Ü	Ü	Ú	Ü	
Springfield, Mass.	56	35	14	4	-	3	7	Wilmington, Del.	27	15	8	4	-	-	1	
Waterbury, Conn.	49	35	13	-	-	1	4	E.S. CENTRAL	1,036	693	226	70	25	21	76	
Worcester, Mass.	67	52	8	5	2	-	3	Birmingham, Ala.	208	143	43	9	7	5	18	
MID. ATLANTIC	2,189	1,520	449	121	47	48	141	Chattanooga, Tenn.	90	57	24	4	3	2	11	
Albany, N.Y.	49	39	7	1	1	1	5	Knoxville, Tenn.	140	94	29	10	4	3	9	
Allentown, Pa.	29	24	4	-	1	-	2	Lexington, Ky.	41	30	8	3	-	-	4	
Buffalo, N.Y.	102 U	69 U	23	6 U	1 U	3 U	8 U	Memphis, Tenn.	218	147	46	15	4 4	6 2	7 2	
Camden, N.J. Elizabeth, N.J.	24	14	U 7	2	1	-	-	Mobile, Ala. Montgomery, Ala.	89 54	57 40	21 8	5 5	1	-	5	
Erie, Pa.	44	35	9	-	-	_	2	Nashville, Tenn.	196	125	47	19	2	3	20	
Jersey City, N.J.	U	U	U	U	U	U	U	W.S. CENTRAL	1,132	785	207	87	20	33	85	
New York City, N.Y.	1,021	726	200	62	13	16	51	Austin, Tex.	1,132	95	12	11	3	4	11	
Newark, N.J.	67	37	18	7	3	2	5	Baton Rouge, La.	U	Ü	Ü	Ü	Ŭ	Ü	Ü	
Paterson, N.J. Philadelphia, Pa.	29 327	19 187	7 78	2 24	1 20	- 18	1 16	Corpus Christi, Tex.	61	44	9	3	3	2	8	
Pittsburgh, Pa.§	35	30	4	-	-	1	4	Dallas, Tex.	256	161	54	26	7	8	24	
Reading, Pa.	25	20	5	-	-		2	El Paso, Tex.	122	90	24	6	-	2	3	
Rochester, N.Y.	169	133	31	3	1	1	20	Ft. Worth, Tex. Houston. Tex.	132 U	91 U	26 U	10 U	2 U	3 U	7 U	
Schenectady, N.Y.	23	15	7	1	-	-	4	Little Rock, Ark.	90	63	19	4	1	3	3	
Scranton, Pa.	38	29	6	3	-	-	- 40	New Orleans, La.	43	26	11	6	-	-	-	
Syracuse, N.Y. Trenton, N.J.	109 39	74 25	21 9	5 3	3 2	6	10 3	San Antonio, Tex.	229	162	38	15	4	10	22	
Utica, N.Y.	28	20	8	-	-		5	Shreveport, La.	74	53	14	6		1	7	
Yonkers, N.Y.	31	24	5	2	-	-	3	Tulsa, Okla.	U	U	U	U	U	U	U	
E.N. CENTRAL	2,156	1,498	454	109	48	45	149	MOUNTAIN	921	645	177	60	25	14	79	
Akron, Ohio	57	39	14	3	-	1	5	Albuquerque, N.M. Boise, Idaho	150 51	108 39	26 7	8 4	6 1	2	13 2	
Canton, Ohio	51	39	8	3	-	. 1	11	Colo. Springs, Colo.	69	49	12	5	1	2	8	
Chicago, III.	389 91	250	93	22 7	12 6	10 1	30	Denver, Colo.	106	67	26	7	4	2	16	
Cincinnati, Ohio Cleveland, Ohio	215	53 169	24 35	6	3	2	4 8	Las Vegas, Nev.	283	180	69	26	6	2	15	
Columbus, Ohio	218	153	42	11	4	8	13	Ogden, Utah	37	30	5	-	-	2	5	
Dayton, Ohio	168	124	33	7	4	-	15	Phoenix, Ariz.	U 44	U 30	U	U	U 2	U 1	Ũ	
Detroit, Mich.	167	99	48	14	4	2	12	Pueblo, Colo. Salt Lake City, Utah	44 U	U	10 U	1 U	Ü	U	6 U	
Evansville, Ind.	52	39	9	2	1	1	4	Tucson, Ariz.	181	142	22	9	5	3	14	
Fort Wayne, Ind. Garv. Ind.	73 16	58 9	8 6	5	1 -	1 1	6	PACIFIC	1,208	909	203	56	28	12	125	
Grand Rapids, Mich.	53	34	13	4	2	-	1	Berkeley, Calif.	25	18	6	-	-	1	3	
Indianapolis, Ind.	235	159	48	16	6	6	13	Fresno, Calif.	100	79	15	6	-	-	10	
Lansing, Mich.	U	U	U	U	U	U	U	Glendale, Calif.	U	U	U	U	U	U	U	
Milwaukee, Wis.	105	79	21	2	2	1	9	Honolulu, Hawaii	80	67	7	3	1	2	4	
Peoria, III.	65	45	14	1	2	3	2	Long Beach, Calif.	81	53	22	5	-	1 U	11	
Rockford, III. South Bend. Ind.	61 54	42 40	15 9	4 1	-	4	4 6	Los Angeles, Calif. Pasadena, Calif.	U 37	U 28	U 8	U 1	U	0	U 5	
Toledo, Ohio	86	67	14	i	1	3	6	Portland, Oreg.	121	91	20	6	3	1	8	
Youngstown, Ohio	U	U	U	U	U	U	Ú	Sacramento, Calif.	U	U	Ú	U	U	U	U	
W.N. CENTRAL	649	472	112	36	20	9	66	San Diego, Calif.	183	137	29	9	7	1	23	
Des Moines, Iowa	142	107	26	6	2	1	16	San Francisco, Calif.	U 106	U 150	U	U	U 10	U	U	
Duluth, Minn.	26	18	6	1	1	-	3	San Jose, Calif. Santa Cruz, Calif.	196 41	150 36	26 4	6 1	10	4	24 3	
Kansas City, Kans.	28	11	9	5	1	2	1_	Seattle, Wash.	127	36 87	27	6	5	2	9	
Kansas City, Mo.	98	68	18	7	3	2	7	Spokane, Wash.	91	73	14	4	-	-	13	
Lincoln, Nebr. Minneapolis, Minn.	39 71	34 50	5 14	4	2	- 1	4 5	Tacoma, Wash.	126	90	25	9	2	-	12	
Omaha, Nebr.	105	82	14	4	4	1	21	TOTAL	11,191¶	7,787	2,260	658	263	216	870	
St. Louis, Mo.	U	Ü	Ü	Ü	Ū	Ü	Ü		,	. ,. 0.	_,_00	300	_50		0.0	
St. Paul, Minn.	66	51	9	5	1	-	3									
Wichita, Kans.	74	51	11	4	6	2	6									

U: Unavailable. -: No reported cases.

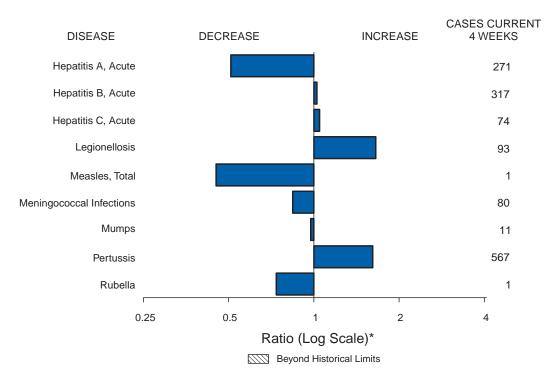
^{*} Mortality data in this table are voluntarily reported from 122 cities in the United States, most of which have populations of ≥100,000. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

† 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.

† Total includes unknown ages.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals December 27, 2003, with historical data



^{*} 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.

TABLE I. Summary of provisional cases of selected notifiable diseases, United States, cumulative, week ending December 27, 2003 (52nd Week)*

		Cum. 2003	Cum. 2002		Cum. 2003	Cum. 2002
Anthrax		-	2	Hansen disease (leprosy)†	61	96
Botulism:		-	-	Hantavirus pulmonary syndrome†	17	19
	foodborne	17	28	Hemolytic uremic syndrome, postdiarrheal†	157	218
	infant	69	69	HIV infection, pediatric ^{†§}	204	159
	other (wound & unspecified)	31	21	Measles, total	42¶	44**
Brucellosis†		89	125	Mumps	194	270
Chancroid		44	67	Plague	1	2
Cholera		1	2	Poliomyelitis, paralytic	-	-
Cyclosporiasis	s†	71	160	Psittacosis [†]	15	19
Diphtheria		1	1	Q fever [†]	74	61
Ehrlichiosis:		-	-	Rabies, human	3	3
	human granulocytic (HGE)†	357	511	Rubella	8	18
	human monocytic (HME)†	205	216	Rubella, congenital	-	1
	other and unspecified	42	23	SARS-associated coronavirus disease ^{††}	8	NA
Encephalitis/M	leningitis:	-	-	Streptococcal toxic-shock syndrome [†]	136	121
	California serogroup viral†	88	157	Tetanus	14	25
	eastern equine [†]	10	9	Toxic-shock syndrome	126	110
	Powassan [†]	-	1	Trichinosis	6	14
	St. Louis†	37	28	Tularemia [†]	82	90
	western equine [†]	5	-	Yellow fever	-	1

^{-:} No reported cases.

^{*} Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

Not notifiable in all states.

Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention.

Last update November 30, 2003.

Of 42 cases reported, 30 were indigenous, and 12 were imported from another country.

^{**} Of 44 cases reported, 26 were indigenous, and 18 were imported from another country.

Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases (notifiable as of July 2003).

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

	All	DS	Chla	mydia†	Coccidio	domycosis	Cryptosp	oridiosis		is/Meningitis st Nile
Reporting area	Cum. 2003§	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	41,832	40,326	815,580	834,423	4,235	4,969	3,230	3,016	1,918	2,838
NEW ENGLAND	1,436	1,548	26,417	27,870	-		165	193	7	29
Maine N.H.	52 36	28 38	1,652 1,037	1,805 1,557	N -	N -	20 11	12 31	-	-
Vt.	16	12	1,026	954	-	-	32	33	-	- 10
Mass. R.I.	599 102	807 102	11,437 2,907	10,914 2,832	-	-	68 16	77 21	-	18 1
Conn.	631	561	8,358	9,808	N	N	18	19	7	10
MID. ATLANTIC Upstate N.Y.	9,714 1,007	9,477 1,306	110,239 20,119	97,078 18,060	N	N	412 135	428 153	190 8	138 51
N.Y. City	5,201	5,345	33,905	33,063	-	-	104	147	-	28
N.J. Pa.	1,448 2,058	1,371 1,455	14,125 42,090	14,164 31,791	- N	N	11 162	17 111	31 151	23 36
E.N. CENTRAL	3,863	4,225	143,019	152,505	7	23	969	960	120	1,628
Ohio Ind.	757 514	757 483	35,073 16,332	38,032 17,100	- N	- N	171 105	119 70	106 1	439 19
III.	1,718	2,097	44,516	48,101	-	3	90	121	2	554
Mich. Wis.	703 171	706 182	31,822 15,276	32,272 17,000	7	20	147 456	135 515	11 -	565 51
W.N. CENTRAL	768	782	45,516	47,517	2	2	572	447	462	200
Minn. Iowa	162 82	162 81	9,209 3,344	10,107 6,195	N N	N N	151 121	206 49	49 78	17
Mo.	365	383	17,489	16,181	-	-	49	41	34	113
N. Dak. S. Dak.	2 14	3 10	1,354 2,539	1,256 2,215	N -	N -	15 44	41 42	9 65	2 14
Nebr.¶	52	71	4,748	4,779	2	2	20	52	140	35
Kans.	91	72 11.055	6,833	6,784	N 5	N 4	172 403	16 343	87 199	19 103
S. ATLANTIC Del.	11,498 202	11,955 194	151,430 2,992	158,923 2,649	N	N	4	4	12	-
Md. D.C.	1,441 863	1,836 769	16,568 3,072	16,891 3,305	5	4	25 13	19 5	51	21
Va.	856	811	16,415	18,518	-		45	35	22	29
W. Va. N.C.	86 1,060	83 1,041	2,538 25,201	2,464 24,726	N N	N N	4 51	3 40	1 5	3
S.C.¶	756 1,825	815	16,020 29,115	14,314	-	-	10 128	8 123	3 51	1
Ga. Fla.	4,409	1,543 4,863	39,509	33,998 42,058	N	N	123	106	51 54	21 28
E.S. CENTRAL	1,879	1,930	50,938	52,209	N	N	115	128	44	279
Ky. Tenn.	200 800	301 772	7,906 20,055	8,756 16,042	N N	N N	24 39	10 61	11 17	42 11
Ala. Miss.	441 438	421 436	11,871 11,106	15,611 11,800	- N	- N	42 10	47 10	16	34 192
W.S. CENTRAL	4,566	4,138	101,691	106,079	4	14	94	68	506	455
Ark.	172	240	7,617	7,312	-	-	19	8	22	33
La. Okla.	610 202	1,163 202	17,945 10,845	18,442 10,804	N N	N N	3 21	10 16	49 31	204 14
Tex.	3,582	2,533	65,284	69,521	4	14	51	34	404	204
MOUNTAIN Mont.	1,461 13	1,368 11	43,601 2,235	51,684 2,475	2,546 N	3,198 N	133 18	160 6	386 216	6 1
daho	24	31	2,375	2,503	N	N	27	29	-	1
Wyo. Colo.	7 343	11 307	947 10,031	944 14,028	1 N	1 N	5 34	9 57	96 -	-
N. Mex.	102	88	6,690	7,417	9	9	14	20	68	-
Ariz. Utah	646 72	552 63	12,257 3,634	14,841 3,540	2,482 19	3,133 11	6 21	19 16	3 1	-
Nev.	254	305	5,432	5,936	35	44	8	4	2	-
PACIFIC Wash.	6,647 491	4,903 441	142,729 16,652	140,558 14,934	1,670 N	1,727 N	367 59	289 46	4	-
Oreg.	242	310	7,254	7,009	-	-	38	40	4	-
Calif. Alaska	5,802 15	3,995 30	111,727 3,645	110,288 3,806	1,670 -	1,727 -	269 1	200 1	-	-
Hawaii	97	127	3,451	4,521	-	-	-	2	-	-
Guam P.R.	6 1,025	2 1,136	1,852	613 2,479	- N	- N	- N	- N	-	-
V.I.	33	76	208	125	-	-	-	-	-	-
Amer. Samoa C.N.M.I.	U 2	U U	U -	U U	U -	U U	U -	U U	U -	U U

N: Not notifiable.

N: Not notifiable. U: Unavailable. -: No reported cases. C.N.M.I.: Commonwealth of Northern Mariana Islands.

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

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

§ Updated monthly from reports to the Division of HIV/AIDS Prevention — Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention. Last update November 30, 2003.

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

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

Reporting area UNITED STATES NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	O1! Cum. 2003 2,544 162 10 12 18 69 4 49 246 103 6 22 115 556 133 89	3,840 265 39 35 14 120 45 426 183 19 63 161 855		n positive, o non-O157 Cum. 2002 195 51 10 - 1 21 1 18 2	Shiga toxir not seros Cum. 2003 129 17 1 - 16 - 37		Cum. 2003 18,059 1,429 179 22 121 757 114	Cum. 2002 21,206 1,769 213 46 145 935 170	Gor Cum. 2003 311,922 6,980 170 76 90 3,008	351,815 7,743 142 120 98 3,242
UNITED STATES NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	Cum. 2003 2,544 162 10 12 18 69 4 49 246 103 6 22 115 556 133	Cum. 2002 3,840 265 39 35 14 120 12 45 426 183 19 63 161	serogroup Cum. 2003 271 56 4 2 - 42 19 11 - 1	non-O157 Cum. 2002 195 51 10 - 1 21 18 2 1	not seros Cum. 2003 129 17 1 16 37	rouped Cum. 2002 61 7 - 1 6	Cum. 2003 18,059 1,429 179 22 121 757 114	Cum. 2002 21,206 1,769 213 46 145 935	Cum. 2003 311,922 6,980 170 76 90	Cum. 2002 351,815 7,743 142 120 98
UNITED STATES NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	2,544 162 10 12 18 69 4 49 246 103 6 222 115 5566 133	3,840 265 39 35 14 120 12 45 426 183 19 63 161	2003 271 56 4 2 - 8 - 42 19 11 - 1	2002 195 51 10 - 1 21 1 18 2 1	2003 129 17 1 - - 16 - - 37	2002 61 7 - 1 6	2003 18,059 1,429 179 22 121 757 114	2002 21,206 1,769 213 46 145 935	2003 311,922 6,980 170 76 90	351,815 7,743 142 120 98
UNITED STATES NEW ENGLAND Maine N.H. Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	162 10 12 18 69 4 49 246 103 6 22 115 556 133	265 39 35 14 120 12 45 426 183 19 63 161	56 4 2 - 8 - 42 19 11	51 10 - 1 21 1 18 2	17 1 - - 16 - - 37	7 - 1 6	1,429 179 22 121 757 114	1,769 213 46 145 935	6,980 170 76 90	7,743 142 120 98
Maine N.H. Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	10 12 18 69 4 49 246 103 6 22 115 556 133	39 35 14 120 12 45 426 183 19 63 161	4 2 - 8 - 42 19 11 -	10 - 1 21 1 18 2 1	1 - - 16 - - 37	- - 1 6	179 22 121 757 114	213 46 145 935	170 76 90	142 120 98
N.H. Vt. Mass. R.J. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	12 18 69 4 49 246 103 6 22 115 556 133	35 14 120 12 45 426 183 19 63 161	2 8 42 19 11	1 21 1 18 2 1	- 16 - - 37	1 6	22 121 757 114	46 145 935	76 90	120 98
Vt. Mass. R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	18 69 4 49 246 103 6 22 115 556 133	14 120 12 45 426 183 19 63 161	- 8 - 42 19 11 - 1	21 1 18 2 1	16 - - 37	6	121 757 114	145 935	90	98
R.I. Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	4 49 246 103 6 22 115 556 133	12 45 426 183 19 63 161	- 42 19 11 - 1	1 18 2 1	- - 37	-	114		3,008	2 7/17
Conn. MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	49 246 103 6 22 115 556 133	45 426 183 19 63 161	42 19 11 - 1	18 2 1	- 37			170	939	3,242 900
Upstate N.Y. N.Y. City N.J. Pa. E.N. CENTRAL Ohio	103 6 22 115 556 133	183 19 63 161	11 - 1	1			236	260	2,697	3,241
N.Y. City N.J. Pa. E.N. CENTRAL Ohio	6 22 115 556 133	19 63 161	- 1			9	3,602	4,304	42,320	43,029
N.J. Pa. E.N. CENTRAL Ohio	22 115 556 133	63 161			19 -	1 -	1,124 1,124	1,347 1,417	7,996 13,324	9,114 12,727
E.N. CENTRAL Ohio	556 133			-	-	1	367	474	7,762	7,894
Ohio	133	გეე		1	18	7	987	1,066	13,238	13,294
Land	89	154	28 16	31 11	23 22	6 5	2,944 901	3,597 972	64,520 19,096	74,540 22,008
Ind.		87	-	1	-	-	- 750	-	6,536 20.133	7,395
III. Mich.	114 90	191 134	2	6 3	-	1	752 748	1,011 923	13,804	24,026 14,770
Wis.	130	289	10	10	1	-	543	691	4,951	6,341
W.N. CENTRAL	436	521	57	34 29	20	12	2,037	2,321	16,172	18,124
Minn. Iowa	133 104	163 121	23	-	1 -	-	796 270	982 314	2,634 775	3,049 1,480
Mo. N. Dak.	89 13	70 20	20 4	-	1 8	- 4	498 38	512 47	8,315 75	8,952 72
S. Dak.	28	41	4	2	-	-	84	83	222	263
Nebr. Kans.	38 31	74 32	5 1	3	- 10	8	131 220	191 192	1,632 2,519	1,564 2,744
S. ATLANTIC	154	488	75	39	11	3	2,826	3,076	75,434	89,450
Del.	11	10	Ň	N	N	Ň	54	54	1,115	1,576
Md. D.C.	14 1	29 3	-	-	-	-	117 58	118 47	7,938 2,423	9,355 2,669
Va.	38	70	11	11	-	-	358	386	7,535	10,462
W. Va. N.C.	6 4	9 244	- 31	-	-	3	53 N	78 N	844 14,585	974 15,531
S.C.	4	7	-	-	-	-	141	149	8,632	9,152
Ga. Fla.	31 45	47 69	6 27	8 20	- 11	-	929 1,116	926 1,318	14,720 17,642	18,383 21,348
E.S. CENTRAL	83	113	2	-	7	10	342	396	25,353	30,113
Ky.	28	30	2	-	7	10	N	N	3,547	3,772
Tenn. Ala.	35 14	52 20	-	-	- -	-	178 164	191 205	8,405 7,692	9,348 10,118
Miss.	6	11	-	-	-	-	-	-	5,709	6,875
W.S. CENTRAL	94	115	4	2	9	9	288	269	41,963	47,620
Ark. La.	12 3	12 4	-	-	-	-	140 14	175 6	3,884 10,528	4,584 11,387
Okla.	29 50	25	- 4	2	- 9	9	134	85	4,484	4,661
Tex.		74					1 572	3 1.750	23,067	26,988
MOUNTAIN Mont.	328 17	347 31	26	29 -	5 -	5	1,573 113	1,750 94	9,517 112	11,375 123
Idaho	86	45 15	16	18	-	-	206	137	69 45	94
Wyo. Colo.	4 71	15 98	1 3	2 6	5	5	23 418	29 571	45 2,408	65 3,511
N. Mex.	11 40	14	5 N	3	-	- N	50	153	1,061	1,462 3,758
Ariz. Utah	40 76	39 77	-	N -	N -	IN -	256 368	269 335	3,393 382	3,758 374
Nev.	23	28	1	-	-	-	139	162	2,047	1,988
PACIFIC Wash.	485 115	710 166	4 1	7	-	-	3,018 355	3,724 510	29,663 2,724	29,821 2,925
Oreg.	103	206	3	7	-	-	394	447	960	909
Calif. Alaska	254 4	293 8	-	-	-	-	2,092 85	2,561 115	24,602 549	24,606 641
Hawaii	9	37	-	-	-	-	92	91	828	740
Guam	N	N	-	-	-	-	-	7	-	45
P.R. V.I.	-	1 -	-	-	36	-	143	86	193 55	334 31
Amer. Samoa C.N.M.I.	U	U U	U	U U	U	U U	U	U U	Ü	Ü

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

				Haemophilus	influenzae, inv	/asive [†]			Нер	atitis
	All a	ages			Age <	5 years			(viral, acu	te), by type
	All ser	otypes	Sero	type b	Non-sei	rotype b	Unknown	serotype		A
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	1,673	1,743	20	34	90	144	187	153	7,160	8,795
NEW ENGLAND	124	135	1	-	5	12	7	2	340	295
Maine N.H.	4 11	2 14	- 1	-	-	-	1	-	21 11	8 12
Vt.	11	7	-	-	Ē	-	1	-	6	4
Mass. R.I.	57 9	46 16	-	-	5	5	4 1	2	205 15	144 34
Conn.	32	50	-	-	-	7	-	-	82	93
MID. ATLANTIC Upstate N.Y.	374 137	326 134	-	4 2	3 3	17 4	51 14	26 9	1,760 148	1,121 189
N.Y. City	62	70	-	-	-	-	11	10	441	445
N.J. Pa.	64 111	58 64	-	2	-	13	10 16	7	157 1,014	188 299
E.N. CENTRAL	239	319	4	4	13	15	34	44	695	1,030
Ohio Ind.	74 50	82 44	- 1	2	1 8	1 9	13	10	170 75	301 51
III.	69	120	-	-	-	-	15	21	201	262
Mich. Wis.	24 22	18 55	3 -	2	4	5	1 5	13	204 45	220 196
W.N. CENTRAL	125	81	2	1	7	3	17	7	198	299
Minn. Iowa	53	52 1	2	1	7	3	2	4	45 39	53 66
Mo.	44	13	-	-	-	-	14	2	72	84
N. Dak. S. Dak.	3 1	7 1	-	-	-	-	-	1 -	1 -	4 3
Nebr. Kans.	3 21	2 5	-	-	-	-	- 1	-	13 28	19 70
S. ATLANTIC	398	385	3	5	- 17	- 17	22	29	1,786	2,422
Del.	-	-	-	-	-	-	-	-	8	15
Md. D.C.	95 -	98	1 -	2	7	4	1 -	1 -	178 43	300 81
Va.	55	41 20	-	-	-	- 1	6	5	108	163
W. Va. N.C.	17 41	33	-	-	3	3	2	1 -	16 124	24 209
S.C. Ga.	5 65	15 84	-	-	-	-	1 5	2 13	41 858	65 509
Fla.	120	94	2	3	7	9	7	7	410	1,056
E.S. CENTRAL	81 6	74	1	1	2 2	5	11	13	253 32	273
Ky. Tenn.	53	10 38	-	-	-	1 1	7	2 7	190	47 124
Ala. Miss.	20 2	16 10	1	1	-	3	3 1	1 3	15 16	39 63
W.S. CENTRAL	69	76	2	4	9	12	5	3	382	1,070
Ark.	7	5	-	-	1	-	-	-	19	74
La. Okla.	12 47	11 53	-	-	8	12	5	3	58 23	89 52
Tex.	3	7	2	4	-	-	-	-	282	855
MOUNTAIN Mont.	159	199	4	7	19 -	42	24	17 -	482 8	569 13
Idaho	7	2	-	-	-	-	3	1	18	31
Wyo. Colo.	2 37	2 35	-	-	-	-	7	4	2 68	3 74
N. Mex. Ariz.	17 72	27 101	- 4	- 5	4 6	6 30	1 8	1 7	23 263	32 306
Utah	14	20	-	1	5	4	5	1	49	56
Nev.	10	12	-	1	4	2	-	3	51	54
PACIFIC Wash.	104 11	148 5	3 -	8 2	15 7	21 3	16 3	12 -	1,264 65	1,716 162
Oreg. Calif.	48 20	57 44	3	- 6	- 8	17	6	3 4	60 1,118	65 1,452
Alaska	3	2	-	-	-	-	2	2	9	12
Hawaii	22	40	-	-	-	1	1	3	12	25
Guam P.R.	-	2	-	-	-	-	-	- 1	- 57	1 239
V.I.	-	-	-	-	-	-	-	-	-	-
Amer. Samoa C.N.M.I.	U -	U U	U -	U U	U -	U U	U -	U U	U -	U U
N: Not notifiable.	U: Unavailable.	-: No ren	orted cases.							

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

† Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

† Non-serotype b: nontypeable and type other than b; Unknown serotype: type unknown or not reported. Previously, cases reported without type information were counted as non-serotype b.

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

(52nd Week)*	1 0	anatitia (vira	L couto) by ty	no.	T					
		B	l, acute), by ty	pe C	Legior	nellosis	Lister	iosis	Lyme	disease
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002
UNITED STATES	6,711	8,064	1,805	1,835	1,987	1,316	616	665	17,970	23,763
NEW ENGLAND Maine N.H.	243 1 11	319 14 25 7	11 2 -	22 - - 15	103 2 6 6	123 6 7	49 7 3 1	64 5 4 3	3,424 227 95	7,807 219 261
Vt. Mass. R.I. Conn.	4 187 18 22	169 36 68	9 - - U	6 1 U	44 17 28	35 45 11 19	15 1 22	34 2 16	43 1,171 581 1,307	37 1,807 852 4,631
MID. ATLANTIC Upstate N.Y. N.Y. City N.J. Pa.	871 130 280 182 279	1,559 140 733 344 342	164 41 - - 123	119 56 - 5 58	569 160 60 73 276	377 118 66 35 158	116 35 21 15 45	194 59 39 37 59	11,700 4,550 5 2,049 5,096	11,873 5,476 59 2,349 3,989
E.N. CENTRAL Ohio Ind. III. Mich. Wis.	419 157 38 1 192 31	756 110 85 185 327 49	155 12 9 18 116	118 2 1 24 87 4	396 226 29 3 120 18	296 123 22 28 85 38	72 26 10 8 20 8	91 26 12 23 22 8	797 71 23 33 12 658	1,266 82 21 47 26 1,090
W.N. CENTRAL Minn. Iowa Mo. N. Dak. S. Dak.	356 39 13 253 2	257 52 20 119 8 3	273 11 1 258	643 14 1 612 -	68 5 10 34 1 2	71 18 13 19 1	23 11 1 5	22 4 3 10 1	475 346 53 65	966 867 42 41 1
Nebr. Kans.	28 19	31 24	3 -	15 -	5 11	16 -	4 2	2 1	2 8	6 7
S. ATLANTIC Del. Md. D.C. Va. W. Va. N.C. S.C. Ga. Fla.	2,119 11 134 12 189 38 160 154 785 636	1,811 14 131 22 224 25 233 135 484 543	166 - 18 - 11 9 13 24 10 81	215 - 14 - 15 4 29 5 64 84	519 28 133 19 93 21 39 7 32	234 10 56 6 35 - 13 10 19	141 N 28 - 12 7 18 5 34 37	90 N 21 - 10 1 8 8 14 28	1,289 191 649 13 159 27 147 15 17	1,486 194 738 25 259 26 137 26 2
E.S. CENTRAL Ky. Tenn. Ala. Miss.	429 73 207 61 88	405 67 145 101 92	85 20 19 7 39	140 5 31 11 93	95 43 34 13 5	50 22 20 8	31 9 8 12 2	21 4 12 4 1	61 15 17 5 24	76 25 28 11 12
W.S. CENTRAL Ark. La. Okla. Tex.	830 59 113 41 617	1,473 118 135 110 1,110	767 3 116 2 646	405 12 99 21 273	63 2 1 7 53	37 - 4 5 28	42 1 3 3 35	38 - 5 9 24	80 - 6 - 74	147 3 5 - 139
MOUNTAIN Mont. Idaho Wyo. Colo. N. Mex. Ariz. Utah Nev.	599 16 8 31 79 34 282 65 84	635 10 7 17 79 146 252 53 71	56 4 1 - 17 - 7 - 27	58 1 1 5 6 3 7 4 31	80 4 7 2 15 3 11 27	57 4 3 2 9 2 15 16 6	30 2 2 - 10 2 10 - 4	34 - 2 - 7 3 18 3	19 3 2 4 1 3 3 3	19 4 2 1 1 4 5 2
PACIFIC Wash. Oreg. Calif. Alaska Hawaii	845 77 114 619 11 24	849 83 128 614 12	128 16 16 85 1	115 27 13 74 - 1	94 10 N 83 - 1	71 8 N 60 2	112 8 5 94 - 5	111 11 9 83 - 8	125 3 18 101 3 N	123 11 12 97 3 N
Guam P.R. V.I.	86	1 211	- -	- - -	- - -	1	-	2	N N	N N
Amer. Samoa C.N.M.I.	U -	U U	U -	U U	U -	U U	U -	U U	U -	U U

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

(52nd Week)*									Rocky Mountain			
	Ma	laria		gococcal ease	Pert	ussis	Rabies	s, animal		Mountain ed fever		
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002		
UNITED STATES	1,155	1,430	1,550	1,814	8,067	9,771	5,451	7,689	957	1,104		
NEW ENGLAND	43	85	71	95	1,205	925	559	917	1	10		
Maine N.H.	4 4	6 8	6 3	7 14	12 60	21 78	68 13	64 50	-	-		
Vt.	2	4	3	4	71	172	38	89	- 1	-		
Mass. R.I.	11 3	33 12	44 2	48 6	1,017 20	602 22	211 60	303 80	-	3 4		
Conn.	19	22	13	16	25	30	169	331	-	3		
MID. ATLANTIC Upstate N.Y.	289 59	375 52	193 53	222 60	1,245 811	694 442	931 425	1,348 701	39 2	59 -		
N.Y. City N.J.	144 42	230 43	38 27	37 29	107	24 34	6 62	21 188	14 12	10 16		
Pa.	44	50	75	96	327	194	438	438	11	33		
E.N. CENTRAL	88	163	210	265	732	1,097	164	163	17	33		
Ohio Ind.	23 3	24 15	57 43	74 37	317 70	441 183	53 32	39 31	11 1	13 5		
III. Mich.	27 25	62 46	43 46	57 45	130	231 62	24 48	31 46	5	12 3		
Wis.	10	16	21	52	215	180	7	16	-	-		
W.N. CENTRAL Minn.	52 25	73 31	131 26	154 36	541 146	822 429	576 41	485 47	71 2	105 1		
Iowa	6	4	27	29	151	157	104	79	2	3		
Mo. N. Dak.	6 1	16 1	55 1	52 4	173 6	147 9	55 54	50 59	55 -	96		
S. Dak.	3	2	1 7	2	5 15	8	67	96	5	1		
Nebr. Kans.	11	13	14	23 8	45	63	100 155	154	4 3	4 -		
S. ATLANTIC	324	334	260	297	694	453	2,452	2,660	608	494		
Del. Md.	3 76	5 109	9 27	7 9	8 86	4 68	64 256	55 396	1 106	1 43		
D.C. Va.	15 40	22 36	24	- 46	3 90	2 168	- 477	- 592	1 30	2 43		
W. Va.	4	3	6	5	27	35	81	172	5	2		
N.C. S.C.	25 4	22 9	36 22	35 34	137 192	46 48	751 246	702 151	321 44	294 75		
Ga. Fla.	67 90	52 76	30 106	32 129	32 119	29 53	388 189	411 181	82 18	19 15		
E.S. CENTRAL	22	22	87	98	144	273	173	216	110	134		
Ky.	9	8	20	18	45	103	39	28	3	5		
Tenn. Ala.	7 3	4 5	30 15	38 22	76 17	124 37	100 33	108 76	66 12	85 16		
Miss.	3	5	22	20	6	9	1	4	29	28		
W.S. CENTRAL Ark.	77 4	87 3	185 17	229 26	696 37	1,870 488	222 25	1,295 131	97 44	249 125		
La. Okla.	4 4	4 11	35 21	48 25	6 92	7 135	197	126	42	111		
Tex.	65	69	112	130	561	1,240	197	1,038	11	13		
MOUNTAIN	53	57	79	95	915	1,717	169	311	10	15		
Mont. Idaho	1	2	6 9	3 5	5 82	10 151	21 15	19 38	1 2	1 -		
Wyo. Colo.	2 22	- 25	2 22	- 26	130 340	11 465	6 38	18 59	2 2	5 2		
N. Mex.	3	3	11	4	69	200	5	10	1	1		
Ariz. Utah	17 6	17 6	15 6	32 5	126 128	717 115	65 14	143 13	2	1 -		
Nev.	2	4	8	20	35	48	5	11	-	5		
PACIFIC Wash.	207 30	234 26	334 40	359 76	1,895 703	1,920 575	205	294	4	5		
Oreg.	12	12	62	46	439	188	7	14	- A	3		
Calif. Alaska	157 1	185 2	219 3	224 4	735 7	1,120 7	190 8	253 27	4 -	2		
Hawaii	7	9	10	9	11	30	-	-	-	-		
Guam P.R.	1	1	5	1 7	1	2 3	68	- 87	- N	N		
V.I. Amer. Samoa	U	U	- U	Ū	U	U	U	Ū	U	Ū		
C.N.M.I.	-	Ū	-	Ü	-	Ü	-	Ü	-	Ü		

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (*Continued*) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

(52nd Week)*	<u></u>						Streptococcus pneumoniae, invasive					
					Streptococo	al dispase		eptococcus pne esistant,	<i>umoniae</i> , inv I	asive		
	Salmo	onellosis	Shig	ellosis	invasive,			ages	Age <	5 years		
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002		
UNITED STATES	40,369	44,264	21,475	23,541	5,085	4,720	2,073	2,655	461	427		
NEW ENGLAND	2,045	2,234	331	353	360	334	43	136	9	7		
Maine N.H.	137 100	147 142	7 5	10 15	28 21	20 36	-	-	- N	- N		
Vt.	73	77	8	1	19	10	9	5	5	2		
Mass.	1,217	1,222	224	203	174	112	N	N	N	N		
R.I. Conn.	129 389	189 457	21 66	20 104	16 102	23 133	10 24	27 104	4 U	5 U		
MID. ATLANTIC	4,539	5,884	2,264	1,908	892	745	134	139	105	95		
Upstate N.Y.	1,168	1,614	592	405	353	313	75	106	79	80		
N.Y. City N.J.	1,269 573	1,396 1,044	409 280	506 617	128 148	157 146	U N	U N	U N	U N		
Pa.	1,529	1,830	983	380	263	129	59	33	26	15		
E.N. CENTRAL Ohio	5,202	5,568	1,714 300	2,294	1,011	998	440 286	301	178 98	172		
Ind.	1,324 565	1,425 599	179	661 138	286 105	212 68	200 154	107 192	98 49	31 79		
III.	1,665	1,770	881	1,105	182	279		2	-	-		
Mich. Wis.	792 856	875 899	234 120	200 190	353 85	312 127	N N	N N	N 31	N 62		
W.N. CENTRAL	2,542	2,659	800	1,111	324	282	168	518	64	75		
Minn.	571	591	108	222	161	147		373	53	70		
Iowa Mo.	396 978	507 830	93 372	122 217	N 72	N 47	N 15	N 5	N 3	N 1		
N. Dak.	43	55	6	22	15	5	3	2	8	4		
S. Dak. Nebr.	118 147	121 203	17 86	157 279	21 25	14 28	1	1 26	N	N		
Kans.	289	352	118	92	30	41	149	111	Ň	N		
S. ATLANTIC	11,178	11,725	7,148	8,380	907	741	1,052	1,162	18	39		
Del. Md.	99 858	103 938	157 583	418 1,233	7 269	3 125	1	3	N	N 26		
D.C.	52	82	73	68	10	10	1	-	7	4		
Va. W. Va.	1,068 134	1,277 173	426 1	1,061 13	97 36	82 22	N 80	N 60	N 11	N 9		
N.C.	1,392	1,655	985	1,074	103	122	N	N	U	U		
S.C. Ga.	822 2,186	895 1,952	514 1,598	148 1,826	37 122	42 133	142 238	201 289	N N	N N		
Fla.	4,567	4,650	2,811	2,539	226	202	590	609	N	N		
E.S. CENTRAL	2,658	3,331	936	1,573	207	119	144	151	-			
Ky. Tenn.	397 744	415 886	128 392	210 180	45 162	24 95	21 123	19 132	N N	N N		
Ala.	531	864	249	836	-	-	-	-	N	N		
Miss.	986	1,166	167	347	-	-	-	-	-	-		
W.S. CENTRAL Ark.	4,716 782	4,718 1,074	4,484 99	3,494 199	340 5	322 12	60 8	197 15	81 -	34		
La.	538	792	303	508	1	1	52	182	11	11		
Okla. Tex.	471 2,925	527 2,325	840 3,242	718 2,069	90 244	56 253	N N	N N	47 23	11 12		
MOUNTAIN	2,256	2,558	1,257	1,270	440	603	29	51	6	5		
Mont.	112	91	2	4	2	-	-	- N	- N	- N		
Idaho Wyo.	180 77	184 107	36 8	22 8	19 2	11 7	N 10	N 14	N -	N -		
Colo.	443	607	277	213	126	125	- 10	-	-	-		
N. Mex. Ariz.	274 764	338 829	252 563	250 685	115 163	114 314	19 -	36	N	N		
Utah	230	185	53	35	11	32	-	-	6	5		
Nev. PACIFIC	176 5 222	217 5 597	66 2.541	53 3 159	2	- E76	-	1	-	-		
Wash.	5,233 569	5,587 656	2,541 157	3,158 230	604 70	576 60	3	-	N	N		
Oreg.	423	342	213	109	N	N	N	N	N	N		
Calif. Alaska	3,921 97	4,235 86	2,116 10	2,742 5	409 -	406	N -	N -	N N	N N		
Hawaii	223	268	45	72	125	110	3	-	-	-		
Guam P.R.	364	46 616	- 8	37 31	- N	- N	- N	4 N	- N	- N		
V.I.	-	-	-	-	-	-	-	-	-	-		
Amer. Samoa C.N.M.I.	U	U U	U	U U	U	U U	U	U U	U	U U		
O.IN.IVI.I.	-	U	<u> </u>	U		U		U		<u> </u>		

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending December 27, 2003, and December 28, 2002 (52nd Week)*

(52nd Week)*	<u> </u>	Syn	hilis						Varicella
	Primary &		Cong	enital	Tube	rculosis	Typho	id fever	(Chickenpox)
Reporting area	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003	Cum. 2002	Cum. 2003
UNITED STATES	6,693	6,859	361	439	11,339	13,971	310	321	13,246
NEW ENGLAND	200	152	1	1	329	459	24	13	1,843
Maine N.H.	7 14	2 8	1 -	-	5 7	20 18	2	-	780 -
Vt. Mass.	1 129	2 99	-	- 1	7 228	8 260	13	7	907 151
R.I.	24 25	13	-	-	32 50	49	2 7	- 6	5
Conn. MID. ATLANTIC	25 859	28 752	64	68	2,138	104 2,316	7 61	80	39
Upstate N.Y.	47	43	17	4	281	350	11	10	N
N.Y. City N.J.	495 162	435 169	32 15	26 37	1,100 426	1,084 529	25 16	42 19	-
Pa.	155	105	-	1	331	353	9	9	39
E.N. CENTRAL Ohio	872 202	1,216 159	70 3	74 3	1,166 208	1,457 257	23 2	34 7	6,161 1,228
Ind.	56	62	12	4	129	128	4	2	-
III. Mich.	353 249	479 486	21 34	41 26	557 220	679 315	7 10	17 4	4,084
Wis.	12	30	-	-	52	78	-	4	849
W.N. CENTRAL Minn.	143 42	127 59	4	2 1	477 197	533 237	4	10 4	78 N
Iowa	7	8	-	-	25	34	2	-	N
Mo. N. Dak.	55 2	34	4	1 -	109 4	126 6	1 -	2	- 78
S. Dak. Nebr.	2 12	- 6	-	-	20	13 27	- 1	4	-
Kans.	23	20	-	-	27 95	90	-	-	-
S. ATLANTIC	1,781	1,839	71	93	2,326	2,869	54	45	2,091
Del. Md.	6 300	11 228	- 11	16	23 239	23 306	10	- 11	28
D.C. Va.	53 75	58 71	- 1	1 1	- 255	- 315	- 12	- 8	31 503
W. Va.	2	2	-	-	21	30	-	-	1,262
N.C. S.C.	148 94	279 134	19 7	20 13	354 170	434 148	9	2	N 267
Ga.	482	439	11	13	375	527	8	5	-
Fla.	621 314	617 454	22 10	29 31	889	1,086 798	15 7	19 4	N
E.S. CENTRAL Ky.	33	88	1	3	670 130	146	1	4	2 N
Tenn. Ala.	135 114	168 149	2 5	11 10	201 238	308 210	3 3	-	N
Miss.	32	49	2	7	101	134	-	-	2
W.S. CENTRAL Ark.	920 54	847 34	69 2	90 11	1,505 110	1,875 135	32	30	2,289
La.	174	152	-	-	-	-	-	-	14
Okla. Tex.	65 627	72 589	1 66	2 77	145 1,250	190 1,550	1 31	2 28	N 2,275
MOUNTAIN	304	330	26	21	354	475	6	11	743
Mont. Idaho	15	8	-	-	5 8	12 14	- 1	-	N N
Wyo.	-	-	-	-	4	3	-	-	106
Colo. N. Mex.	24 63	64 39	3 4	2	64 6	104 34	3	5 2	4
Ariz.	180	197	19	19	206	263	2	-	4
Utah Nev.	11 11	7 15	-	-	39 22	31 14	-	2 2	629
PACIFIC	1,300	1,142	46	59	2,374	3,189	99	94	-
Wash. Oreg.	81 45	70 28	-	2	240 101	252 111	4 5	7 2	-
Calif.	1,172	1,033	46	56	1,909	2,629	89	80	-
Alaska Hawaii	2	11	-	1	55 69	49 148	1	5	-
Guam	5	6	-	-		65	-	-	5
P.R. V.I.	190 1	282 1	1 -	23	86 -	129	-	-	433
Amer. Samoa	Ú	Ú U	U	U U	U	U U	U	U U	U
C.N.M.I.	-	U		U		U		U	-

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

* Incidence data for reporting years 2002 and 2003 are provisional and cumulative (year-to-date).

TABLE III. Deaths in 122 U.S. cities.* week ending December 27, 2003 (52nd Week)

TABLE III. Deaths in 122 U.S. cities,* week ending December 27, 2003 (52nd Week) All causes, by age (years) All causes, by age (years)															
		All c	auses, b	y age (ye	ars)					All	causes, k	y age (y	ears)		
Reporting Area	All Ages	<u>></u> 65	45-64	25-44	1-24	<1	P&I [†] Total	Reporting Area	All Ages	<u>≥</u> 65	45-64	25-44	1-24	<1	P&I [†] Total
NEW ENGLAND	457	338	79	27	9	4	53	S. ATLANTIC	728	479	167	53	15	13	54
Boston, Mass. Bridgeport, Conn.	120 28	76 22	22 2	14 4	7	1	13 3	Atlanta, Ga. Baltimore, Md.	U 126	U 74	U 32	U 15	U 1	U 3	U 11
Cambridge, Mass.	17	14	3	-	_		1	Charlotte, N.C.	59	42	11	3	2	1	11
Fall River, Mass.	U	U	U	U	U	U	U	Jacksonville, Fla.	85	58	18	6	2	1	10
Hartford, Conn.	U	U	U	U	U	U	U	Miami, Fla.	U	U	U	U	U	U	U
Lowell, Mass. Lynn, Mass.	26 7	26 5	1	- 1	-	-	3	Norfolk, Va. Richmond, Va.	20 49	13 35	6 8	1	- 1	1 4	1 5
New Bedford, Mass.	19	19	-	-	_	-	1	Savannah, Ga.	63	37	18	5	2	1	-
New Haven, Conn.	39	30	8	-	-	1	10	St. Petersburg, Fla.	52	35	10	3	2	2	1
Providence, R.I.	51	33	14	2 1	1	1	4	Tampa, Fla.	160	118	31	10	1	-	10
Somerville, Mass. Springfield, Mass.	8 48	6 39	1 8	-	-	1	8	Washington, D.C. Wilmington, Del.	100 14	56 11	30 3	10	4	-	5
Waterbury, Conn.	37	30	5	1	1	-	6	E.S. CENTRAL	705	488	143	43	23	8	57
Worcester, Mass.	57	38	15	4	-	-	4	Birmingham, Ala.	126	89	26	43 5	23 5	1	12
MID. ATLANTIC	1,876	1,390	329	115	29	12	120	Chattanooga, Tenn.	84	61	11	8	3	1	4
Albany, N.Y.	52	36	12	3	1	-	3	Knoxville, Tenn.	65	44	18	3	-	-	-
Allentown, Pa. Buffalo, N.Y.	26 110	24 75	2 25	7	2	- 1	4 8	Lexington, Ky. Memphis, Tenn.	41 194	27 119	9 49	2 15	3 8	3	4 16
Camden, N.J.	19	11	4	3	-	1	2	Mobile, Ala.	67	52	9	3	1	2	10
Elizabeth, N.J.	19	12	3	-	4	-	-	Montgomery, Ala.	42	31	7	2	2	-	6
Erie, Pa.	54 36	41 28	10 3	3 3	2	-	1 -	Nashville, Tenn.	86	65	14	5	1	1	5
Jersey City, N.J. New York City, N.Y.	732	∠o 515	139	59	12	6	36	W.S. CENTRAL	1,098	696	253	87	35	27	88
Newark, N.J.	58	25	22	6	4	1	4	Austin, Tex. Baton Rouge, La.	60 51	36 35	17 5	5 9	1 2	1	2 2
Paterson, N.J.	U	U	U	U	U	U	U	Corpus Christi, Tex.	Ü	U	Ü	Ü	Ú	U	Ú
Philadelphia, Pa. Pittsburgh, Pa.§	347 31	277 24	49 5	18	3	2	17 2	Dallas, Tex.	148	88	35	15	8	2	12
Reading, Pa.	24	23	1	-	_	-	1	El Paso, Tex.	55	39	10	1	4	1	6
Rochester, N.Y.	126	101	17	7	-	1	12	Ft. Worth, Tex. Houston, Tex.	97 393	68 227	18 105	7 30	2 13	2 18	11 26
Schenectady, N.Y.	24	24	-	-	-	-	7	Little Rock, Ark.	35	20	10	4	-	1	6
Scranton, Pa. Syracuse, N.Y.	30 139	27 108	2 27	4	1	-	16	New Orleans, La.	U	U	U	U	U	U	U
Trenton, N.J.	25	19	5	1	-	-	3	San Antonio, Tex.	210 49	147 36	45 8	13 3	3 2	2	17 6
Utica, N.Y.	24	20	3	1			4	Shreveport, La. Tulsa, Okla.	49 U	U	Ů	U	Ú	U	Ü
Yonkers, N.Y.	U	U	U	U	U	U	U	MOUNTAIN	698	491	130	53	18	6	76
E.N. CENTRAL Akron, Ohio	1,674 U	1,187 U	323 U	94 U	31 U	37 U	140 U	Albuquerque, N.M.	97	68	19	7	3	-	11
Canton, Ohio	51	37	8	3	2	1	6	Boise, Idaho	37	28	4	4	-	1	3
Chicago, III.	410	270	90	28	8	12	25	Colo. Springs, Colo. Denver, Colo.	50 106	38 70	10 21	1 8	1 5	2	4 12
Cincinnati, Ohio	46 193	19 147	12 35	13 6	1 2	1 3	- 16	Las Vegas, Nev.	239	166	48	21	4	-	18
Cleveland, Ohio Columbus, Ohio	183	125	35 37	9	5	3 7	18	Ogden, Utah	20	16	3	1		-	4
Dayton, Ohio	102	80	15	4	2	1	11	Phoenix, Ariz. Pueblo, Colo.	U 24	U 18	U 6	U	U	U	U 5
Detroit, Mich.	U	U	U	U	U	U	U	Salt Lake City, Utah	125	87	19	11	5	3	19
Evansville, Ind. Fort Wayne, Ind.	39 66	28 47	9 14	1 4	-	1 1	3 13	Tucson, Ariz.	U	U	U	U	U	U	U
Gary, Ind.	Ü	Ü	Ü	Ü	U	Ü	Ü	PACIFIC	1,583	1,140	310	79	35	18	193
Grand Rapids, Mich.	51	33	12	1	5	-	2	Berkeley, Calif.	8	5		3	-	-	2
Indianapolis, Ind. Lansing, Mich.	131 66	87 52	28 10	8 1	2 1	6 2	14 4	Fresno, Calif. Glendale, Calif.	85 17	63 12	14 2	5 1	2 1	1 1	13 2
Milwaukee, Wis.	86	52 57	17	9	1	2	7	Honolulu, Hawaii	59	43	8	3	3	2	2
Peoria, III.	43	36	7	-	-	-	4	Long Beach, Calif.	68	51	12	2	2	1	16
Rockford, III.	42	32	9	1	-	-	1	Los Angeles, Calif.	335	235	72	17	8	3	47
South Bend, Ind. Toledo, Ohio	48 67	39 55	5 10	4 1	1	-	6 8	Pasadena, Calif. Portland, Oreg.	U 164	U 114	U 42	U 4	U 2	U 1	U 7
Youngstown, Ohio	50	43	5	1	1	-	2	Sacramento, Calif.	231	175	43	9	3	1	26
W.N. CENTRAL	426	270	91	41	14	10	51	San Diego, Calif. San Francisco, Calif.	108 U	78 U	20 U	6 U	3 U	1 U	11 U
Des Moines, Iowa	U	U	ñ	U	U	U	U	San Jose, Calif.	190	141	26	12	6	5	20
Duluth, Minn. Kansas City, Kans.	19 40	10 25	5 10	2 3	1 2	1 -	1 5	Santa Cruz, Calif.	29	21	6	1	-	1	5
Kansas City, Mo.	84	54	18	8	2	2	5	Seattle, Wash.	129	82	36	8	2	1	19
Lincoln, Nebr.	16	12	2	1	-	1	2	Spokane, Wash. Tacoma, Wash.	47 113	35 85	11 18	1 7	3	-	8 15
Minneapolis, Minn.	44	27	10	4	1	2	3	· ·						405	
Omaha, Nebr. St. Louis, Mo.	75 U	42 U	14 U	15 U	3 U	1 U	20 U	TOTAL	9,245¶	6,479	1,825	592	209	135	832
St. Paul, Minn.	52	33	13	2	1	3	4								
Wichita, Kans.	96	67	19	6	4	-	11								

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.

† Total includes unknown ages.

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