



MMWR™

Morbidity and Mortality Weekly Report

www.cdc.gov/mmwr

Weekly

November 28, 2008 / Vol. 57 / No. 47

World AIDS Day — December 1, 2008

December 1 is World AIDS Day. Begun in 1998, World AIDS Day draws attention to the current status of the human immunodeficiency virus/acquired immunodeficiency syndrome (HIV/AIDS) pandemic. According to the Joint United Nations Programme on HIV/AIDS, in 2007, approximately 33 million persons worldwide were living with HIV, 2.7 million were newly infected, and 2 million died from AIDS-related causes (1).

In 2006, an estimated 1.1 million persons in the United States were living with HIV (2), and 56,300 were newly infected (3). HIV infection in the United States disproportionately affects blacks, Hispanics, and men (of all races/ethnicities) who have sex with men (2–4). During 2006, the rates of new infections in the United States were estimated to be 83.8 per 100,000 population among blacks, 29.4 per 100,000 among Hispanics, and 11.5 per 100,000 among whites (3).

Information about World AIDS Day is available at <http://www.cdc.gov/features/worldaidsday>. Information about CDC's international HIV/AIDS program is available at <http://www.cdc.gov/globalaids>. Information about CDC's domestic HIV/AIDS program is available at <http://www.cdc.gov/hiv>.

References

1. Joint United Nations Programme on HIV/AIDS. Report on the global AIDS epidemic, 2008. Available at http://www.unaids.org/en/knowledgecentre/hivdata/globalreport/2008/2008_global_report.asp.
2. CDC. HIV prevalence estimates—United States, 2006. *MMWR* 2008;57:1073–6.
3. Hall HI, Song R, Rhodes P, et al; HIV Incidence Surveillance Group. Estimation of HIV incidence in the United States. *JAMA* 2008;300:520–9.
4. Hall HI, An Q, Hutchinson AB, Sansom S. Estimating the lifetime risk of a diagnosis of the HIV infection in 33 states, 2004–2005. *J Acquir Immune Defic Syndr* 2008;49:294–7.

Progress Toward Strengthening Blood Transfusion Services — 14 Countries, 2003–2007

Nearly all persons transfused with human immunodeficiency virus (HIV)-infected blood become infected (1–3), and blood transfusions are a substantial source of HIV transmission in sub-Saharan Africa, especially among women and children (4,5). Since 2004, the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) has provided technical and financial support to strengthen national blood transfusion services in 14 countries in Africa and the Caribbean with high prevalence of HIV infection.* PEPFAR has supported efforts to improve blood supply adequacy and safety by providing policy guidance, strengthening laboratory infrastructure, and enhancing blood donor recruitment and retention practices. To assess the progress made by these countries with PEPFAR support, CDC analyzed data collected by national blood transfusion services in the 14 countries during 2003–2007. This report summarizes the results of that analysis, which found that 1) national policies had been established in 12 of the 14 countries; 2) the number of whole blood units collected had increased in all 14 countries; 3) the percentage of collections from voluntary, non-remunerated donors† had increased; and 4) the percentage

* Botswana, Côte d'Ivoire, Ethiopia, Guyana, Haiti, Kenya, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Tanzania, Uganda, and Zambia. PEPFAR has directly funded national blood transfusion services in all 14 countries through CDC cooperative agreements.

† Persons who donate blood solely for altruistic reasons and who receive no compensation. Designation of voluntary, non-remunerated status was determined by blood center staff members based on national blood policy.

INSIDE

- 1277 Multistate Outbreak of *Salmonella* Infections Associated with Frozen Pot Pies — United States, 2007
- 1281 Notice to Readers
- 1282 QuickStats

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

Suggested Citation: Centers for Disease Control and Prevention. [Article title]. *MMWR* 2008;57:[inclusive page numbers].

Centers for Disease Control and Prevention

Julie L. Gerberding, MD, MPH
Director

Tanja Popovic, MD, PhD
Chief Science Officer

James W. Stephens, PhD
Associate Director for Science

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

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

Katherine L. Daniel, PhD
Deputy Director, National Center for Health Marketing

Editorial and Production Staff

Frederic E. Shaw, MD, JD
Editor, MMWR Series

Susan F. Davis, MD
(Acting) Assistant Editor, MMWR Series

Teresa F. Rutledge
Managing Editor, MMWR Series

Douglas W. Weatherwax
Lead Technical Writer-Editor

Donald G. Meadows, MA
Jude C. Rutledge
Writers-Editors

Martha F. Boyd
Lead Visual Information Specialist

Malbea A. LaPete
Stephen R. Spriggs
Visual Information Specialists

Kim L. Bright, MBA
Quang M. Doan, MBA
Phyllis H. King
Information Technology Specialists

Editorial Board

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

of collected blood units reactive for HIV had decreased in 13 of the 14 countries. Since the start of the PEPFAR initiative, progress toward improving safe and adequate supplies of blood has been made in the 14 countries with high prevalence of HIV infection.

Global Blood Safety

Globally, approximately 80 million units of blood are donated each year (6). Of this total, 2 million units are donated in sub-Saharan Africa, where the need for blood transfusions is great because of maternal morbidity, malnutrition, and a heavy burden of infectious diseases such as malaria. In 2004, blood collections in most of the 14 PEPFAR-supported countries did not satisfy clinical demand. Inadequacy of the blood supply in many African countries was compounded by inconsistent laboratory screening for HIV infection and collection of blood from donors at greater risk for HIV infection (6). Collections often were coordinated by hospital-based services that frequently relied on paid donors or replacement donors (e.g., family members of patients) who typically were at greater risk for HIV infection and, because of external pressures to donate, might not have revealed their behavioral risks for HIV during donor selection (4,7,8). HIV screening of donor blood in nonstandardized laboratories without quality assurance further increased the risk for transfusion-associated HIV transmission (4).

In resource-limited settings, blood is collected most commonly in whole blood units. The World Health Organization (WHO) estimates that resource-limited countries should begin to fulfill baseline clinical demand if 10–20 whole blood units per 1,000 population are collected each year (9). To improve blood supply adequacy and transfusion safety, WHO has recommended that resource-limited countries adopt comprehensive national policies for national blood transfusion services[§] (5).

PEPFAR Indicators

In 2006, a team of international blood safety experts developed a set of indicators to support routine monitoring and evaluation of PEPFAR projects. Indicator data related to blood supply adequacy and safety are compiled by staff members at regional centers where blood is collected, screened, and distributed. Collectively, these regional centers make up each national blood transfusion service. On a regular basis, data are

[§] Key elements of WHO recommendations are 1) establishment of a nationally coordinated blood transfusion service empowered by a legislative framework; 2) collection of blood exclusively from voluntary, non-remunerated donors; 3) implementation of universal, quality-assured HIV screening of donor blood; and 4) reduction of unnecessary blood transfusions.

transferred to national blood transfusion service headquarters; these data are aggregated quarterly and shared with CDC, which uses them for ongoing programmatic evaluation.

In 2008, national blood services in the 14 countries transferred data for the period 2003–2007[‡] to CDC, where the data were analyzed by country and by year. The four indicators analyzed for this report address key elements in the WHO recommendations: 1) status of national policies and legislative frameworks for national blood transfusion services; 2) percentage of blood collections from voluntary, non-remunerated donors; 3) number of whole blood units collected and number collected per 1,000 population^{**}; and 4) percentage of blood collections reactive for HIV.

In 2003, national policies to ensure the adequacy and safety of the blood supply were in place in six of the 14 countries, and national blood transfusion services were operating under a legislative framework in four of the 14 countries. By 2007, national policies had been established in six more countries and were in development in the two remaining countries; legislative frameworks to support the national policies had been enacted in one additional country and were in development in six other countries (Table 1). During 2003–2007, national blood transfusion services in all 14 countries had increased total collections of whole blood units and, in 11 countries, had increased collection rates per 1,000 population. In 2003, collections in South Africa were already within the WHO-recommended range of 10–20 whole blood units per 1,000 population. By 2007, the collection rate in Botswana also was within that range (Table 1).

In 2003, in five of the 14 countries, 100% of blood collections by national blood transfusion services were from voluntary, non-remunerated donors. By 2007, the number of countries meeting this criterion had increased to six. In addition, by 2007, the percentage of collections from such donors had increased in six other countries (Table 2). In 13 of the 14 countries, the percentage of collected blood units that were HIV reactive in 2007 had decreased from the first year of reporting (Table 2).

Reported by: *J Pitman, MPH, L Marum, MD, Global AIDS Program; S Basavaraju, MD, A McIntyre, PhD, EIS officers, CDC.*

Editorial Note: This report marks the first analysis of PEPFAR indicators to assess progress in blood supply adequacy and blood transfusion safety in the 14 resource-limited countries targeted by PEPFAR. By providing legislative authority to national blood transfusion services, governments have taken

action to improve blood supply adequacy, avert transfusion-transmitted HIV infections, and sustain blood safety programs. Increases in the number of whole blood units collected by national blood transfusion services in all 14 countries indicate improved adequacy of blood supplies. Increasing the amount of blood supplied to health-care facilities also reduces the need for hospitals to collect from replacement donors, which reduces the risk for HIV transmission (8).

In addition to implementing universal HIV screening of donated blood units, the risk for HIV transmission can be decreased further by restricting blood donations to volunteer, non-remunerated donors. Human error can occur during screening, laboratory false negatives for HIV can occur, and transmission from the donor can occur during the window period (i.e., the interval after infection during which an HIV test might be nonreactive because neither the p24 antigen nor antibodies are at detectable levels) (4). In certain countries, a decrease in the percentage of the population with HIV infection might have contributed to a decrease in the percentage of collected blood units reactive for HIV. However, the continued decrease in HIV reactivity among collected blood units in countries with high prevalence of HIV infection suggests that an improved process for selecting donors is in place. Since 2004, PEPFAR technical assistance has included training of blood donor recruiters and development of standardized behavioral risk questionnaires with more stringent criteria for excluding donors. These measures might have contributed to reductions in the percentage of collected blood units reactive for HIV even in countries where 100% of blood collections are from voluntary, non-remunerated donors. To improve safety further, national blood transfusion services are working to retain voluntary, non-remunerated donors through comprehensive behavioral and educational HIV prevention programs that encourage healthy lifestyles. One example is Club 25, in which participants pledge to donate blood 20 times by age 25 years or to make 25 lifetime donations.^{††}

The findings in this report are subject to at least two limitations. First, totals of whole blood unit collections did not include blood units collected outside of national blood transfusion service networks. These outside collections are not quantifiable; as a result, national estimates of blood unit collections per 1,000 population likely are underestimated. Second, national blood services have different algorithms for screening donor blood, which include combined p24 antigen and HIV antibody assays and, in certain countries, nucleic acid testing. Although these assays have comparable sensitivities and specificities, they differ in window periods before detection

[‡] Nigeria and Tanzania established their national blood transfusion services in 2004; the first year with 12 complete months of data available was 2005. In Ethiopia, data were available on blood collections and voluntary, non-remunerated donors beginning in 2003 and on HIV reactivity beginning in 2004.

^{**} Based on United Nations Population Division census estimates for 2003–2007.

^{††} Additional information available at <http://www.ifrc.org/youth/activities/club25/index.asp> and <http://africanclub25society.com/main.htm>.

TABLE 1. Status of national blood transfusion policies and legislative frameworks,* number of whole blood units collected, and number collected per 1,000 population — U.S. President's Emergency Plan for AIDS Relief, 14 countries, 2003–2007

Country	Established national policy		Enacted legislative framework		No. of whole blood units collected					No. of whole blood units collected per 1,000 population†				
	2003	2007	2003	2007	2003	2004	2005	2006	2007	2003	2004	2005	2006	2007
Botswana	Yes	Yes	No	No	11,583	13,210	20,643	21,061	22,230	6.4	7.3	11.2	11.2	11.6
Côte d'Ivoire	Yes	Yes	Yes	Yes	67,780	77,972	86,321	86,082	92,009	3.8	4.3	4.6	4.5	4.8
Ethiopia§	No	Yes	No	No	17,208	17,941	19,203	21,019	22,220	0.2	0.2	0.2	0.3	0.3
Guyana	Yes	Yes	No	In development	4,008	4,896	4,531	5,192	5,475	5.4	6.6	6.1	7.1	7.5
Haiti	No	Yes	No	In development	8,711	9,513	10,823	13,622	17,094	1.0	1.0	1.2	1.4	1.8
Kenya	Yes	Yes	Yes	Yes	40,857	47,661	80,762	113,080	123,787	1.2	1.4	2.3	3.1	3.3
Mozambique	No	In development	No	In development	67,105	69,648	76,667	72,170	79,925	3.4	3.5	3.8	3.5	3.8
Namibia	No	Yes	No	In development	17,860	19,154	19,133	18,422	18,309	9.1	9.6	9.5	9.0	8.9
Nigeria¶	No	Yes	No	Yes	—	—	1,266	5,519	16,987	—	—	<0.1	<0.1	0.1
Rwanda	No	Yes	No	No	30,786	28,777	37,893	38,539	32,543	3.5	3.2	4.1	4.1	3.3
South Africa**	Yes	Yes	Yes	Yes	809,322	813,239	805,923	822,950	821,258	17.3	17.2	16.9	17.2	17.0
Tanzania¶	No	Yes	No	In development	—	—	12,597	63,411	109,471	—	—	0.3	1.6	2.7
Uganda	Yes	Yes	Yes	Yes	102,703	106,996	115,988	122,442	133,585	3.8	3.8	4.0	4.1	4.3
Zambia	No	In development	No	In development	40,616	38,477	61,982	54,308	68,056	3.7	3.4	5.4	4.6	5.7

* As described in: World Health Organization. Aide-memoire for national blood programmes. Geneva, Switzerland: World Health Organization; 2002. Available at http://www.who.int/bloodsafety/transfusion_services/en/Blood_Safety_Eng.pdf.

† Based on United Nations Population Division census estimates for 2003–2007.

‡ Ethiopia Red Cross Society is the designated national blood transfusion service.

¶ Nigeria and Tanzania established their national blood transfusion services in 2004. The first year with 12 complete months of data available was 2005.

** Includes data from South Africa National Blood Service and Western Province Blood Service.

TABLE 2: Estimated percentage of persons aged 15–49 years with human immunodeficiency virus (HIV) infection, percentage of blood collections reactive for HIV, and percentage of collections from voluntary, non-remunerated donors — U.S. President's Emergency Plan for AIDS Relief, 14 countries, 2003–2007

Country	% of persons with HIV infection*		% of blood collections reactive for HIV					% of blood collections received from voluntary, non-remunerated donors				
	2001	2007	2003	2004	2005	2006	2007	2003	2004	2005	2006	2007
Botswana	26.5	23.9	7.5	5.7	4.0	2.7	2.1	100	100	100	100	100
Côte d'Ivoire	6.0	3.9	1.6	1.4	1.5	1.4	1.2	100	100	100	100	100
Ethiopia†	2.4	2.1	—	3.6	3.4	2.5	3.0	38.8	27.5	23.2	28.1	28.4
Guyana	2.5	2.5	0.8	0.6	1.0	0.6	0.3	21.7	18.9	26.1	31.2	61.1
Haiti	2.2	2.2	1.7	1.8	1.6	1.9	1.4	5.2	5.4	14.9	27.4	51.9
Kenya	8.1	7.8§	1.5	1.7	1.9	2.5	1.2	99.0	95.3	97.6	98.9	99.5
Mozambique	10.3	12.5	8.6	6.9	6.4	8.3	7.2	58.0	58.3	59.6	52.0	72.3
Namibia	14.6	15.3	0.7	0.6	0.6	0.5	0.6	100	100	100	100	100
Nigeria¶	3.2	3.1	—	—	3.8	3.5	2.5	—	—	100	100	92.3
Rwanda	4.3	2.8	1.1	0.1	1.2	0.9	0.5	100	100	100	100	100
South Africa**	16.9	18.1	<0.1	<0.1	<0.1	<0.1	0.1	100	100	100	100	100
Tanzania¶	7.0	6.2	—	—	4.8	3.2	2.8	—	—	66.5	80.0	89.2
Uganda	7.9	5.4	2.0	1.9	1.6	1.5	1.3	95.5	96.3	99.0	99.9	100
Zambia	15.4	15.2	6.9	6.4	9.0	6.4	3.8	72.7	71.2	90.6	97.9	99.6

* Estimates from the Joint United Nations Programme on HIV/AIDS (UNAIDS), available at http://data.unaids.org/pub/globalreport/2008/jc1510_2008_global_report_pp211_234_en.pdf. Because UNAIDS methodology used to estimate 2003 prevalence was different from the methodology used for 2007, data are presented for 2001, the most recent pre-program year for which the same methodology was used as for 2007.

† Ethiopia Red Cross Society is the designated national blood transfusion service.

‡ Preliminary estimate.

¶ Nigeria and Tanzania established their national blood transfusion services in 2004. The first year with 12 complete months of data available was 2005.

** Includes data from South Africa National Blood Service and Western Province Blood Service. Autologous donations and collections from designated donors are reported as donations from voluntary, non-remunerated donors.

of recent HIV infection (10). Screening assays with shorter window periods might identify more reactive units, resulting in higher percentages of HIV reactivity; however, the differences in window periods are relatively small and likely to produce only minimal effects on the results of this analysis.

PEPFAR has supported efforts to address the WHO recommendations for national blood transfusion services, including

facilitation of technical meetings, publication of country-specific blood safety program policies and guidelines, and collaborations with ministries of health to enact appropriate legislation. National blood transfusion services and donor recruitment organizations have worked together to increase collections of blood from voluntary, non-remunerated donors. Other efforts have focused on supplying laboratory equipment

and providing training to standardize quality-assured HIV screening. National blood transfusion services now screen donor blood using combined p24 antigen and HIV antibody assays; Namibia and South Africa also screen using nucleic acid testing.

Substantial progress has occurred toward improving blood transfusion services in the 14 PEPFAR-supported countries with high prevalence of HIV infection. With reauthorization of PEPFAR by Congress in July 2008, national blood transfusion services in the supported countries will continue to work toward improving the adequacy and safety of blood supplies.

Acknowledgments

This report is based on contributions by national blood transfusion services in 14 PEPFAR-supported countries and their respective CDC Global AIDS Program country offices and PEPFAR-funded technical assistance partners.

References

1. Baggaley RF, Boily MC, White RG, Alary M. Risk of HIV-1 transmission for parenteral exposure and blood transfusion: a systematic review and meta-analysis. *AIDS* 2006;20:805–12.
2. Berglund O, Beckman S, Grillner L, et al. HIV transmission by blood transfusions in Stockholm 1979–1985: nearly uniform transmission from infected donors. *AIDS* 1988;2:51–4.
3. Colebunders R, Ryder R, Francis H, et al. Seroconversion rate, mortality, and clinical manifestations associated with the receipt of a human immunodeficiency virus-infected blood transfusion in Kinshasa, Zaire. *J Infect Dis* 1991;164:450–6.
4. McFarland W, Mvere D, Shandera W, Reingold A. Epidemiology and prevention of transfusion-associated human immunodeficiency virus in sub-Saharan Africa. *Vox Sang* 1997;72:85–92.
5. World Health Organization. Aide-memoire for national blood programmes. Geneva, Switzerland: World Health Organization; 2002. Available at http://www.who.int/bloodsafety/transfusion_services/en/Blood_Safety_Eng.pdf.
6. World Health Organization. Global database on blood safety: report 2001–2002. Available at http://www.who.int/bloodsafety/GDBS_Report_2001-2002.pdf.
7. van der Poel CL, Seifried E, Schaasberg WP. Paying for blood donations: still a risk? *Vox Sang* 2002;83:285–93.
8. Sarkodie F, Adarkwa M, Adu-Sarkodie Y, Candotti D, Acheampong JW, Allain JP. Screening for viral markers in volunteer and replacement blood donors in West Africa. *Vox Sang* 2001;80:142–7.
9. Tapko JB, Sam O, Diarra-Nama AJ. Status of blood safety in the WHO African region: report of the 2004 survey. Brazzaville, Republic of the Congo: World Health Organization, Regional Office for Africa; 2007. Available at http://www.afro.who.int/bls/pdf/blood_safety_report_07.pdf.
10. Ly TD, Ebel A, Faucher V, Fihman V, Laperche S. Could the new HIV combined p24 antigen and antibody assays replace p24 antigen specific assays? *J Virol Methods* 2007;143:86–94.

Multistate Outbreak of *Salmonella* Infections Associated with Frozen Pot Pies – United States, 2007

On June 6, 2007, a cluster of four human *Salmonella* serotype I 4,5,12:i:-* infections sharing a pulsed-field gel electrophoresis (PFGE) pattern was identified by the Pennsylvania Department of Health and reported to PulseNet.[†] Initial investigations conducted during June–September 2007 by state and local health departments in collaboration with CDC did not identify a source of infection. This report summarizes the results of subsequent investigations of the outbreak, which determined that 401 cases of salmonellosis occurred in 41 states during 2007, with 32% of ill persons hospitalized. A multistate case-control study conducted during October 3–13 indicated that illness was associated with consumption of Banquet[®] brand frozen, not-ready-to-eat pot pies (odds ratio = 23.6; *p* < 0.001). Further investigation determined that 77% of patients who ate these pies cooked them in microwave ovens and that consumer confusion regarding microwaving instructions might have resulted in a failure to cook the product properly. A voluntary recall was issued by the manufacturer (ConAgra Foods Inc., Omaha, Nebraska) on October 11, 2007, for all nine brands of pot pies produced at the implicated plant (plant A). The outbreak strain was isolated from 13 samples of unopened Banquet pot pies collected from the homes of patients. This outbreak highlights the need to cook not-ready-to-eat frozen foods thoroughly; these products should be clearly labeled as requiring complete cooking, and cooking instructions should be validated to account for variability in microwave wattage and common misconceptions among consumers regarding the nature of not-ready-to-eat foods.

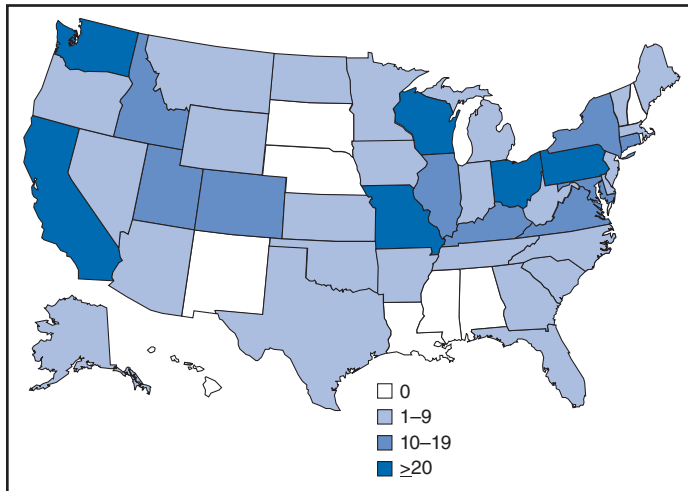
Epidemiologic Investigation

An outbreak case was defined as infection with a *Salmonella* strain with the specific outbreak PFGE pattern and illness onset during January 1–December 31, 2007. During this period, a total of 401 outbreak cases from 41 states were identified (Figure 1). The median age of patients was 20 years (range: 1 month–97 years); 50% of the patients were female. Date of illness onset, known for 336 patients, ranged from February 20 to December 11, 2007, with a peak in September. Of patients with available information, 144 (50%) of 289 had bloody diarrhea, and 108 (32%) of 338 were hospitalized.

*These four isolates were originally reported as serotype Typhimurium but later were determined to be serotype I 4,5,12:i:-.

[†]PulseNet is the national molecular subtyping network for foodborne infections.

FIGURE 1. Number of confirmed cases (N = 401) of infection with the outbreak strain* of *Salmonella* I 4,5,12:i:- — United States, 2007



* Defined by pulsed-field gel electrophoresis pattern.

Case-Control Study

State and local health departments in collaboration with the CDC began the outbreak investigation on June 26, 2007. Interviews conducted over several months revealed frequent consumption of various chicken and egg food items. On October 3, 2007, a case-control study was initiated to ascertain the specific source of infections. Cases included *Salmonella* infections with the outbreak PFGE pattern in a resident of a participating state aged ≥ 2 years with no ill contacts and illness onset during August 1–October 3. Households with persons that could serve as age-group and neighborhood-matched controls were identified by an Internet-based reverse-address telephone directory. Investigators sequentially called telephone numbers until one to three persons with no diarrhea during the previous 2 weeks in the same age group as the case-patient were willing to serve as controls (or had caregivers willing to respond on their behalf). The exposure periods queried were 1 week before illness onset for case-patients and 1 week before interview for controls. As part of this study, epidemiologists from the Minnesota Department of Health (MDH) interviewed four case-patients who resided in Minnesota using the Minnesota standardized foodborne illness report form, a routine MDH practice. By October 4, the Minnesota epidemiologists reported that all four case-patients had consumed Banquet pot pies during the week before illness onset. After MDH notified CDC's OutbreakNet team of this finding, specific questions regarding pot pie consumption were included in the case-control study.

Of 48 eligible case-patients, 35 were enrolled. Six of these 35 were excluded because of exposure to other persons with diarrhea. Of the remaining 29, at least one matched control was enrolled for 17 case-patients. Data collected on the 17 matched sets were analyzed using exact conditional logistic regression (1). Measures of association between exposures and illness were calculated, using maximum likelihood estimates when available and median unbiased estimates when maximum likelihood estimates did not exist in the presence of complete data separation (2).

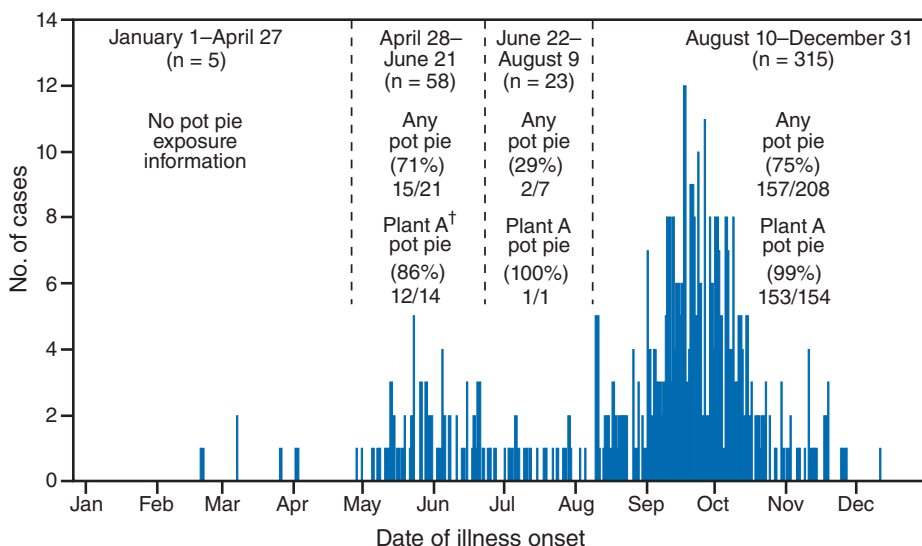
Case-patients were significantly more likely than controls to have eaten a Banquet pot pie (71% versus 0%, exact matched odds ratio [mOR] = 23.6 [median unbiased estimate], 95% confidence interval [CI] = 3.8–infinity). Banquet turkey pot pies were the only variety of Banquet pot pies associated with illness (29% exposure among case-patients versus 0% exposure among controls, mOR = 9.2 [median unbiased estimate], CI = 1.2–infinity). None of the remaining 67 exposures evaluated were associated with illness.

Pot Pie Consumption by Case-Patients

After the case-control study was completed, attempts were made to interview as many of the total 401 case-patients as possible using standardized forms focused on frozen food exposures. Of 236 case-patients for whom pot pie exposure information was collected, 174 (74%) reported consuming a frozen not-ready-to-eat pot pie during the week before illness onset. Most of these patients could name the brand or brands of pot pie consumed: 155 (92%) ate Banquet, three (2%) ate Banquet or another brand produced on the same production line at plant A, eight (5%) reported eating either Banquet or a non-recalled brand (i.e., a brand not recalled by the manufacturer), and three (2%) ate a non-recalled brand. A similar frequency of plant A pot pie consumption was observed among case-patients with illness onsets during April 28–June 21 as for those with onsets during August 10–December 31; exposure information was limited for other periods (Figure 2).

Banquet pot pie microwave instructions might have been confusing because different parts of the package recommended different preparation times. Furthermore, instructions for microwaving time varied by wattage. Of 133 patients interviewed, 102 (77%) cooked pot pies in a microwave. Of 78 patients who used a home microwave, only 23 (29%) reported knowing the wattage. Of eight patients who used a microwave outside the home, one (13%) knew the wattage. Forty-eight (68%) of 71 who responded did not let pies stand the full recommended time after microwaving, and 16 (19%) of 84 cooked more than one pie simultaneously, indicating that many patients did not follow microwaving instructions.

FIGURE 2. Number of confirmed cases (N = 401)* of infection with the outbreak strain of *Salmonella* I 4,5,12:i:-, by date of illness onset and percentage of patients interviewed who reported frozen pot pie consumption during four selected periods — United States, 2007



* Cases for which date of illness onset was reported (n = 336) or estimated as 3 days before the reported date of culture (n = 65).

† Includes pot pies reported as Banquet brand and/or another brand not produced in plant A.

Voluntary Recalls and Environmental Investigations

On October 8, 2007, plant A suspended production of pot pies. On October 9, CDC and the U.S. Department of Agriculture's Food Safety and Inspection Service posted recommendations advising consumers not to eat pot pies with a production code ending in "P9," signifying a poultry-containing pie produced in plant A, the only plant that produces Banquet pot pies. On October 10, the advisories were expanded to include pies with production codes ending in "Est1059," signifying a beef-containing pot pie produced in plant A, because many patients could not report the exact meat in the pot pies consumed and some reported potentially having consumed Banquet beef pot pies. On October 11, ConAgra Foods issued a voluntary recall of all nine brands of pot pies produced in plant A. Before resuming production of these products, the manufacturer amended labeling and instructions.[§]

[§] A label in large font on the front of the box that read "Ready in 4 Minutes" was changed to "Microwavable – Must be cooked thoroughly. See back for directions." On the back of the box, improvements to the microwave cooking instructions included statements 1) advising the consumer to cook only one pot pie at a time, 2) advising the consumer not to use less than a 1,100-watt microwave to cook the pot pies, and 3) indicating that internal temperature of the pies needs to reach 165°F (74°C) as measured by a food thermometer in several spots.

The outbreak strain was isolated from 13 unopened Banquet pot pies collected from the homes of patients. All pies that tested positive contained turkey, and all had production dates of July 13 or 31, 2007. Two of these pies underwent separate testing of the crust and filling. The filling tested positive and the crust tested negative for both pies.

Plant A produces approximately 1 million pot pies daily. Banquet pot pies are distributed nationally and account for approximately 75% of the national value-priced pot pie market.[¶] Plant A also is the sole producer of identical pot pies packaged under various store brands.

Reported by: S Meyer, MPH, K Smith, DVM, Minnesota Dept of Health. I Azzam, MD, R Sowadsky, MSPH, Nevada State Dept of Health. IT Williams, PhD, O Henao, PhD, T Nguyen, MPH, J Austin, S Van Duyne, MS, Div of Foodborne, Bacterial, and Mycotic Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases; R Mody, MD, EIS Officer, CDC.

Editorial Note: In this outbreak, 401 cases of *Salmonella* I 4,5,12:i:- infection were reported. However, for every reported case of *Salmonella* infection, an estimated 38 additional cases are not detected or reported (3). Therefore, many more persons might have been ill as a result of this outbreak. Consumption of Banquet pot pies was associated with illness, and testing of Banquet turkey pot pies collected from patients' homes yielded the outbreak strain. Mass food distribution can lead to widely distributed outbreaks, underscoring the importance of coupling laboratory-based surveillance of foodborne infections at the molecular subtype level with interviewing of patients to detect, solve, and truncate outbreaks.

The initial evidence that Banquet pot pies were the outbreak vehicle was acquired by MDH through the routine practice of combining data from PFGE subtyping of all *Salmonella* isolates and rapid interviewing of all patients. At MDH, these interviews used detailed food exposure questions to obtain open-ended histories, brand names, and purchase locations. Cross-referencing exposures identified in initial interviews and using an iterative approach to reinterview patients about suspicious exposures led to rapid identification of the possible outbreak vehicle.

[¶] Value-priced frozen pot pies typically cost approximately \$0.50, whereas premium frozen pot pies typically cost approximately \$3.50.

Frozen, not-ready-to-eat microwavable meals have been reported previously as vehicles in salmonellosis outbreaks. Raw chicken nuggets and chicken strips were associated with *Salmonella* infections in a 1998 Australian outbreak and in Canadian studies of sporadic infections performed in 2003 (4–7). Stuffed chicken products were implicated in five outbreaks in Minnesota during 1998, 2005, 2006, and 2008 (MDH, unpublished data, 2008). Consumer confusion regarding the raw or cooked nature of these products was documented in these reports; products were not clearly labeled as containing raw poultry ingredients, and they were breaded and prebrowned, leading to the perception that they were precooked (6,7; MDH, unpublished data, 2008).

This outbreak differs from previously reported outbreaks with frozen, not-ready-to-eat food vehicles in that all meat ingredients were intended to be precooked before leaving plant A. However, the pot pies associated with this outbreak had a raw flour crust and were not-ready-to-eat, which allows consumers to prepare the food item to the level of doneness they prefer but also requires consumers to ensure that minimum cooking temperatures are reached to control microbiologic hazards. Furthermore, because raw frozen poultry pastes used to make the liquid portion of the chicken and turkey pie fillings enter plant A, pies might have contained undercooked poultry or been cross-contaminated from these raw poultry pastes, which often harbor *Salmonella*. Despite an intensive investigation of plant A and its ingredient suppliers, the source of contamination remains unknown.

This outbreak identified labeling concerns. Specifically, recommended microwave cooking times on the pot pie packaging were based on wattage categories, but most patients were unaware of their microwave wattage. Because of the small size of the case control study, the investigation could not determine whether microwaving pot pies rather than cooking them in a conventional oven was a risk factor for illness. Twenty-three percent of case-patients who ate a pot pie reported cooking the pies in conventional ovens, so improper microwave cooking could not account for the entire outbreak. However, given the observed limited knowledge about microwave wattage and the frequency of deviating from microwaving instructions, microwaving likely did lead to inadequate cooking.

Inadequate microwave cooking was thought to be partly responsible for two previous outbreaks of *Salmonella* infections (8,9). Industry and regulators should consider examining the manufacturing processes for frozen not-ready-to-eat foods to determine the extent to which microwave cooking is safe for these products. Labeling and cooking instructions on not-ready-to-eat frozen foods should be clear to ensure that consumers are aware of health risks and to facilitate compliance with validated cooking methods. Clear and prominent listing of output wattage on microwave appliances might improve consumer adherence to manufacturer's cooking instructions. Consumers should follow cooking instructions specific for an oven's wattage.

Acknowledgments

This report is based, in part, on contributions by state and local health department officials; P White, DVM, Food Safety and Inspection Svc, US Dept of Agriculture; and M Hoekstra, PhD, and A Sheth, MD, Div of Foodborne, Bacterial, and Mycotic Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases, CDC.

References

1. Mehta CR, Patel NR. Exact logistic regression: theory and examples. *Stat Med* 1995;14:2143–60.
2. Heinze G. A comparative investigation of methods for logistic regression with separated or nearly separated data. *Stat Med* 2006;25:4216–26.
3. Voetsch AC, Van Gilder TJ, Angulo FJ, et al. FoodNet estimate of the burden of illness caused by nontyphoidal *Salmonella* infections in the United States. *Clin Infect Dis* 2004;38(Suppl 3):S127–34.
4. Bucher O, Holley RA, Ahmed R, et al. Occurrence and characterization of *Salmonella* from chicken nuggets, strips, and pelleted broiler feed. *J Food Prot* 2007;70:2251–8.
5. Currie A, MacDougall L, Aramini J, Gaulin C, Ahmed R, Isaacs S. Frozen chicken nuggets and strips and eggs are leading risk factors for *Salmonella* Heidelberg infections in Canada. *Epidemiol Infect* 2005;133:809–16.
6. Kenny B, Hall R, Cameron S. Consumer attitudes and behaviours—key risk factors in an outbreak of *Salmonella* Typhimurium phage type 12 infection sourced to chicken nuggets. *Aust N Z J Public Health* 1999;23:164–7.
7. MacDougall L, Fyfe M, McIntyre L, et al. Frozen chicken nuggets and strips—a newly identified risk factor for *Salmonella* Heidelberg infection in British Columbia, Canada. *J Food Prot* 2004;67:1111–5.
8. Evans MR, Parry SM, Ribeiro CD. *Salmonella* outbreak from microwave cooked food. *Epidemiol Infect* 1995;115:227–30.
9. Gessner BD, Beller M. Protective effect of conventional cooking versus use of microwave ovens in an outbreak of salmonellosis. *Am J Epidemiol* 1994;139:903–9.

*Notice to Readers***The Immunization Encounter:
Critical Issues**

CDC will present a webcast, The Immunization Encounter: Critical Issues, on December 18, 2008. The broadcast will occur during 12:00 noon–2:00 p.m. EST. The program will address issues related to the routine encounter at an immunization clinic. Topics include patient and parent communication and education, vaccine storage and handling, preparing for medical emergencies, screening for contraindications and precautions to vaccination, vaccine administration, records and documentation, the Vaccine Adverse Event Reporting System, and the Vaccine Injury Compensation Program. Continuing education credits will be offered.

Additional information about the program is available at <http://www2a.cdc.gov/phtn/imm-encounter2008/default.asp>. No registration is necessary to access the webcast via an Internet connection. The link to the webcast is available at <http://www2a.cdc.gov/phtn/webcast/imm-encounter2008>. The webcast will be accessible through an Internet connection until January 20, 2009, and will become available as a self-study DVD and Internet-based program in January 2009.

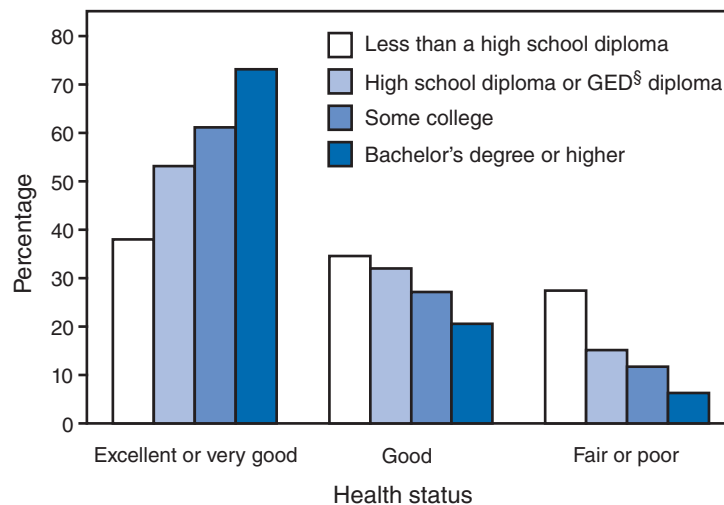
Erratum: Vol. 57, No. 45

In the report, “Cigarette Smoking Among Adults — United States, 2007,” an error occurred on page 1222. The last sentence of the second paragraph should read, “Among the estimated **90.7** million adults who had smoked at least 100 cigarettes during their lifetime (defined as ever smokers), 52.1% (47.3 million) were no longer smoking at the time of the interview.”

QuickStats

FROM THE NATIONAL CENTER FOR HEALTH STATISTICS

Health Status* Among Persons Aged ≥ 25 Years, by Education Level — National Health Interview Survey, United States, 2007[†]



* Health status data were obtained by asking respondents to assess their own health and that of family members living in the same household as excellent, very good, good, fair, or poor. Data are presented only for family members aged ≥ 25 years.

[†] Estimates are based on household interviews of a sample of the noninstitutionalized, U.S. civilian population. Denominators for each category exclude persons for whom data were missing. Estimates are age adjusted using the projected 2000 U.S. population as the standard population and using four age groups: 25–44 years, 45–64 years, 65–74 years, and ≥ 75 years.

[§] General Educational Development.

The percentage of adults aged ≥ 25 years whose health was reported as excellent or very good increased with increased levels of education. Persons with a bachelor's degree or higher (73.1%) were nearly twice as likely to be reported as being in excellent or very good health as persons with less than a high school diploma (37.9%). Persons with less than a high school diploma were most likely to be reported as being in fair or poor health.

SOURCES: National Health Interview Survey 2007 data. Available at <http://www.cdc.gov/nchs/nhis.htm>. Adams PF, Barnes PM, Vickerie JL. Summary health statistics for the U.S. population: National Health Interview Survey, 2007. Vital Health Stat 2008;10(238).

TABLE 1. Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending November 22, 2008 (47th week)*

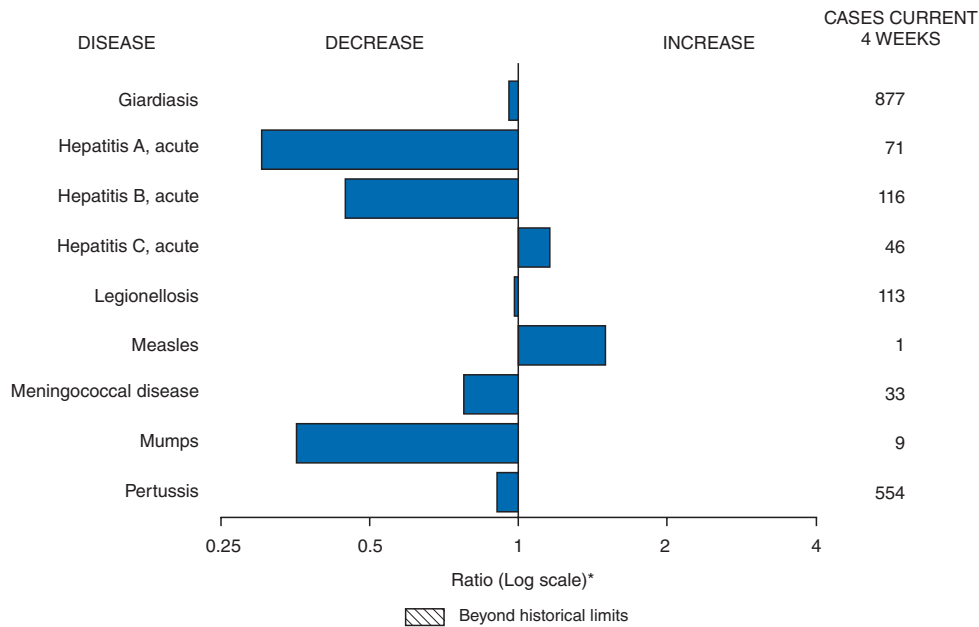
Disease	Current week	Cum 2008	5-year weekly average†	Total cases reported for previous years					States reporting cases during current week (No.)
				2007	2006	2005	2004	2003	
Anthrax	—	—	—	1	1	—	—	—	
Botulism:									
foodborne	1	12	1	32	20	19	16	20	AK (1)
infant	2	81	2	85	97	85	87	76	PA (1), OH (1)
other (wound & unspecified)	1	18	1	27	48	31	30	33	CA (1)
Brucellosis	1	81	2	131	121	120	114	104	PA (1)
Chancroid	—	29	1	23	33	17	30	54	
Cholera	—	2	0	7	9	8	6	2	
Cyclosporiasis§	—	118	1	93	137	543	160	75	
Diphtheria	—	—	—	—	—	—	—	1	
Domestic arboviral diseases§,¶:									
California serogroup	—	38	0	55	67	80	112	108	
eastern equine	—	2	0	4	8	21	6	14	
Powassan	—	1	0	7	1	1	1	—	
St. Louis	—	8	0	9	10	13	12	41	
western equine	—	—	—	—	—	—	—	—	
Ehrlichiosis/Anaplasmosis§,**:									
<i>Ehrlichia chaffeensis</i>	23	771	8	828	578	506	338	321	NY (1), MN (2), MO (1), FL (2), OK (17)
<i>Ehrlichia ewingii</i>	—	7	—	—	—	—	—	—	
<i>Anaplasma phagocytophilum</i>	26	396	11	834	646	786	537	362	NY (8), MN (17), OK (1)
undetermined	—	63	2	337	231	112	59	44	
<i>Haemophilus influenzae</i> ,††									
invasive disease (age <5 yrs):									
serotype b	—	24	0	22	29	9	19	32	
nonserotype b	—	144	2	199	175	135	135	117	
unknown serotype	2	169	4	180	179	217	177	227	MO (1), FL (1)
Hansen disease§	1	66	2	101	66	87	105	95	FL (1)
Hantavirus pulmonary syndrome§	—	14	1	32	40	26	24	26	
Hemolytic uremic syndrome, postdiarrheal§	5	196	3	292	288	221	200	178	NY (1), OH (1), OK (1), CA (2)
Hepatitis C viral, acute	23	735	17	849	766	652	720	1,102	NY (1), OH (17), IN (1), KY (1), TN (1), UT (1), CA (1)
HIV infection, pediatric (age <13 years)§§	—	—	4	—	—	380	436	504	
Influenza-associated pediatric mortality§,¶¶	—	90	0	77	43	45	—	N	
Listeriosis	7	571	14	808	884	896	753	696	OH (1), FL (2), CA (4)
Measles***	—	132	0	43	55	66	37	56	
Meningococcal disease, invasive†††:									
A, C, Y, & W-135	2	241	5	325	318	297	—	—	IN (1), CO (1)
serogroup B	1	136	3	167	193	156	—	—	MN (1)
other serogroup	—	30	1	35	32	27	—	—	
unknown serogroup	6	547	10	550	651	765	—	—	NY (1), PA (1), TN (1), CA (3)
Mumps	1	353	16	800	6,584	314	258	231	CA (1)
Novel influenza A virus infections	—	1	—	4	N	N	N	N	
Plague	—	1	0	7	17	8	3	1	
Poliomyelitis, paralytic	—	—	—	—	—	1	—	—	
Polio virus infection, nonparalytic§	—	—	—	—	N	N	N	N	
Psittacosis§	—	9	0	12	21	16	12	12	
Qfever§,§§§ total:	1	104	2	171	169	136	70	71	
acute	1	93	—	—	—	—	—	—	FL (1)
chronic	—	11	—	—	—	—	—	—	
Rabies, human	—	—	0	1	3	2	7	2	
Rubella¶¶¶	2	16	—	12	11	11	10	7	CA (2)
Rubella, congenital syndrome	—	—	—	—	1	1	—	1	
SARS-CoV§,****	—	—	—	—	—	—	—	8	
Smallpox§	—	—	—	—	—	—	—	—	
Streptococcal toxic-shock syndrome§	2	115	1	132	125	129	132	161	NY (1), NC (1)
Syphilis, congenital (age <1 yr)	—	194	8	430	349	329	353	413	
Tetanus	—	12	1	28	41	27	34	20	
Toxic-shock syndrome (staphylococcal)§	1	58	1	92	101	90	95	133	CA (1)
Trichinellosis	—	5	0	5	15	16	5	6	
Tularemia	1	91	2	137	95	154	134	129	NC (1)
Typhoid fever	2	359	4	434	353	324	322	356	GA (1), TX (1)
Vancomycin-intermediate <i>Staphylococcus aureus</i> §	2	29	0	37	6	2	—	N	NC (1), FL (1)
Vancomycin-resistant <i>Staphylococcus aureus</i> §	—	—	—	2	1	3	1	N	
Vibriosis (noncholera <i>Vibrio</i> species infections)§	6	405	4	447	N	N	N	N	MN (1), FL (2), CA (3)
Yellow fever	—	—	—	—	—	—	—	—	

See Table 1 footnotes on next page.

TABLE 1. (Continued) Provisional cases of infrequently reported notifiable diseases (<1,000 cases reported during the preceding year) — United States, week ending November 22, 2008 (47th week)*

—: No reported cases. N: Not notifiable. Cum: Cumulative year-to-date counts.
 * Incidence data for reporting year 2008 are provisional, whereas data for 2003, 2004, 2005, 2006, and 2007 are finalized.
 † Calculated by summing the incidence counts for the current week, the 2 weeks preceding the current week, and the 2 weeks following the current week, for a total of 5 preceding years. Additional information is available at <http://www.cdc.gov/epo/dphsi/phs/files/5yearweeklyaverage.pdf>.
 § Not notifiable in all states. Data from states where the condition is not notifiable are excluded from this table, except in 2007 and 2008 for the domestic arboviral diseases and influenza-associated pediatric mortality, and in 2003 for SARS-CoV. Reporting exceptions are available at <http://www.cdc.gov/epo/dphsi/phs/infdis.htm>.
 ¶ Includes both neuroinvasive and nonneuroinvasive. Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for West Nile virus are available in Table II.
 ** The names of the reporting categories changed in 2008 as a result of revisions to the case definitions. Cases reported prior to 2008 were reported in the categories: Ehrlichiosis, human monocytic (analogous to *E. chaffeensis*); Ehrlichiosis, human granulocytic (analogous to *Anaplasma phagocytophilum*), and Ehrlichiosis, unspecified, or other agent (which included cases unable to be clearly placed in other categories, as well as possible cases of *E. ewingii*).
 †† Data for *H. influenzae* (all ages, all serotypes) are available in Table II.
 §§ Updated monthly from reports to the Division of HIV/AIDS Prevention, National Center for HIV/AIDS, Viral Hepatitis, STD, and TB Prevention. Implementation of HIV reporting influences the number of cases reported. Updates of pediatric HIV data have been temporarily suspended until upgrading of the national HIV/AIDS surveillance data management system is completed. Data for HIV/AIDS, when available, are displayed in Table IV, which appears quarterly.
 ¶¶ Updated weekly from reports to the Influenza Division, National Center for Immunization and Respiratory Diseases. There are no reports of confirmed influenza-associated pediatric deaths for the current 2008-09 season.
 *** No measles cases were reported for the current week.
 ††† Data for meningococcal disease (all serogroups) are available in Table II.
 §§§ In 2008, Q fever acute and chronic reporting categories were recognized as a result of revisions to the Q fever case definition. Prior to that time, case counts were not differentiated with respect to acute and chronic Q fever cases.
 ¶¶¶ The two rubella cases reported for the current week were unknown.
 **** Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases.

FIGURE I. Selected notifiable disease reports, United States, comparison of provisional 4-week totals November 22, 2008, 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.

Notifiable Disease Data Team and 122 Cities Mortality Data Team
 Patsy A. Hall
 Deborah A. Adams Rosaline Dhara
 Willie J. Anderson Michael S. Wodajo
 Lenee Blanton Pearl C. Sharp

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Chlamydia†					Coccidioidomycosis					Cryptosporidiosis				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 week		Cum 2008	Cum 2007
		Med	Max				Med	Max				Med	Max		
United States	9,661	21,213	28,892	970,335	986,853	231	122	341	6,029	6,818	51	98	426	6,778	10,536
New England	523	706	1,516	33,231	31,920	—	0	1	1	2	1	5	39	285	320
Connecticut	133	215	1,093	10,241	9,521	N	0	0	N	N	—	0	37	37	42
Maine§	—	51	72	2,289	2,287	N	0	0	N	N	—	1	6	42	50
Massachusetts	337	327	624	15,703	14,427	N	0	0	N	N	—	1	9	91	128
New Hampshire	21	41	64	1,908	1,866	—	0	1	1	2	—	1	4	53	46
Rhode Island§	—	53	104	2,379	2,862	—	0	0	—	—	—	0	2	7	11
Vermont§	32	15	52	711	957	N	0	0	N	N	1	1	7	55	43
Mid. Atlantic	1,234	2,793	4,951	132,731	129,447	—	0	0	—	—	6	12	34	661	1,313
New Jersey	—	414	537	18,663	19,475	N	0	0	N	N	—	0	2	26	64
New York (Upstate)	669	542	2,177	24,600	24,932	N	0	0	N	N	5	4	17	247	230
New York City	—	975	3,413	51,231	46,731	N	0	0	N	N	—	2	6	96	95
Pennsylvania	565	823	1,049	38,237	38,309	N	0	0	N	N	1	5	15	292	924
E.N. Central	861	3,479	4,373	156,008	161,418	—	1	3	38	32	16	25	122	1,820	1,789
Illinois	—	1,062	1,711	44,449	48,199	N	0	0	N	N	—	2	7	104	192
Indiana	273	375	668	18,409	18,989	N	0	0	N	N	4	3	41	177	92
Michigan	567	834	1,226	39,981	33,403	—	0	3	29	21	2	5	13	238	191
Ohio	21	828	1,261	38,490	42,951	—	0	1	9	11	10	6	59	658	543
Wisconsin	—	332	612	14,679	17,876	N	0	0	N	N	—	8	46	643	771
W.N. Central	676	1,259	1,700	58,601	57,295	—	0	77	2	8	—	16	71	891	1,537
Iowa	152	165	240	8,182	7,936	N	0	0	N	N	—	4	30	266	604
Kansas	317	178	529	8,443	7,385	N	0	0	N	N	—	1	8	80	140
Minnesota	—	263	373	11,834	12,300	—	0	77	—	—	—	5	15	211	264
Missouri	150	478	566	21,957	21,119	—	0	1	2	8	—	3	13	152	174
Nebraska§	—	89	252	4,067	4,683	N	0	0	N	N	—	2	8	106	164
North Dakota	—	33	65	1,483	1,556	N	0	0	N	N	—	0	51	7	25
South Dakota	57	55	85	2,635	2,316	N	0	0	N	N	—	1	9	69	166
S. Atlantic	1,292	3,593	7,609	168,092	192,448	—	0	1	4	5	19	18	46	884	1,186
Delaware	88	67	150	3,363	3,126	—	0	1	1	—	—	0	2	10	20
District of Columbia	—	128	210	6,078	5,425	—	0	0	—	2	—	0	2	8	3
Florida	1,196	1,359	1,570	62,799	51,614	N	0	0	N	N	7	7	35	422	624
Georgia	8	231	1,338	16,714	38,508	N	0	0	N	N	6	4	13	210	219
Maryland§	—	444	699	19,841	20,405	—	0	1	3	3	2	0	4	36	34
North Carolina	—	1	4,783	5,901	24,526	N	0	0	N	N	4	0	16	67	112
South Carolina§	—	465	3,047	23,407	23,752	N	0	0	N	N	—	1	4	45	81
Virginia§	—	616	1,059	27,334	22,207	N	0	0	N	N	—	1	4	67	82
West Virginia	—	57	96	2,655	2,885	N	0	0	N	N	—	0	3	19	11
E.S. Central	890	1,566	2,394	73,770	74,456	—	0	0	—	—	—	3	9	151	596
Alabama§	—	457	589	18,978	22,851	N	0	0	N	N	—	1	6	62	116
Kentucky	373	236	370	11,104	7,626	N	0	0	N	N	—	0	4	31	247
Mississippi	—	378	1,048	18,421	19,393	N	0	0	N	N	—	0	2	16	101
Tennessee§	517	527	790	25,267	24,586	N	0	0	N	N	—	1	6	42	132
W.S. Central	304	2,758	4,426	123,071	112,228	—	0	1	3	2	2	5	130	1,225	421
Arkansas§	304	276	455	12,851	8,898	N	0	0	N	N	—	0	6	37	58
Louisiana	—	400	775	18,991	17,792	—	0	1	3	2	—	1	5	52	59
Oklahoma	—	195	392	7,668	11,416	N	0	0	N	N	2	1	16	125	115
Texas§	—	1,892	3,923	83,561	74,122	N	0	0	N	N	—	2	117	1,011	189
Mountain	1,146	1,252	1,811	57,765	66,607	118	86	170	3,949	4,288	2	9	37	493	2,874
Arizona	300	470	651	21,536	22,514	115	86	168	3,871	4,147	—	1	9	86	48
Colorado	588	206	482	9,846	15,651	N	0	0	N	N	—	1	12	108	205
Idaho§	243	63	314	3,676	3,267	N	0	0	N	N	2	1	14	62	456
Montana§	—	58	363	2,414	2,300	N	0	0	N	N	—	1	6	39	64
Nevada§	—	179	416	8,242	8,707	3	1	6	44	60	—	0	1	1	36
New Mexico§	—	133	561	5,859	8,174	—	0	3	27	20	—	1	23	145	120
Utah	—	113	253	4,840	4,910	—	0	3	5	58	—	0	6	35	1,891
Wyoming§	15	30	58	1,352	1,084	—	0	1	2	3	—	0	4	17	54
Pacific	2,735	3,697	4,676	167,066	161,034	113	32	217	2,032	2,481	5	8	29	368	500
Alaska	79	88	129	4,013	4,399	N	0	0	N	N	—	0	1	3	3
California	1,756	2,878	4,115	131,652	125,977	113	32	217	2,032	2,481	5	5	14	225	258
Hawaii	—	103	153	4,597	5,154	N	0	0	N	N	—	0	1	2	6
Oregon§	631	188	402	9,400	8,573	N	0	0	N	N	—	1	4	50	123
Washington	269	372	634	17,404	16,931	N	0	0	N	N	—	2	16	88	110
American Samoa	—	0	20	73	95	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	5	24	123	760	—	0	0	—	—	—	0	0	—	—
Puerto Rico	97	121	612	6,350	6,522	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	12	23	502	147	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional. Data for HIV/AIDS, AIDS, and TB, when available, are displayed in Table IV, which appears quarterly.

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Giardiasis					Gonorrhea					Haemophilus influenzae, invasive All ages, all serotypes†				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
		Med	Max				Med	Max				Med	Max		
United States	246	308	1,158	15,374	16,743	1,975	5,923	8,913	266,830	318,094	25	48	173	2,267	2,160
New England	7	24	49	1,150	1,349	84	102	227	4,732	5,026	1	3	12	136	161
Connecticut	—	6	11	278	336	34	51	199	2,321	1,935	1	0	9	40	43
Maine§	5	3	12	165	178	—	1	6	84	113	—	0	2	16	12
Massachusetts	—	9	17	343	563	48	38	90	1,928	2,421	—	1	5	57	79
New Hampshire	—	2	11	134	32	1	2	6	93	133	—	0	1	9	16
Rhode Island§	—	1	8	76	79	—	6	13	280	368	—	0	1	6	8
Vermont§	2	3	13	154	161	1	0	5	26	56	—	0	3	8	3
Mid. Atlantic	49	59	131	2,889	2,904	235	625	1,028	29,591	32,854	5	10	31	439	417
New Jersey	—	7	14	302	372	—	100	168	4,537	5,505	—	1	7	70	63
New York (Upstate)	26	23	111	1,091	1,058	130	121	545	5,460	6,236	2	3	22	134	120
New York City	4	15	27	729	780	—	175	636	9,514	9,618	—	1	6	73	92
Pennsylvania	19	15	45	767	694	105	225	394	10,080	11,495	3	4	8	162	142
E.N. Central	17	46	78	2,227	2,635	337	1,231	1,647	55,425	65,587	2	7	28	329	328
Illinois	—	10	22	492	818	—	370	589	15,413	18,117	—	2	7	102	102
Indiana	N	0	0	N	N	118	149	284	7,397	8,123	1	1	20	66	54
Michigan	2	11	21	514	560	214	327	657	14,958	13,921	—	0	3	17	26
Ohio	15	17	31	816	741	5	301	531	13,665	19,223	1	2	6	120	94
Wisconsin	—	9	23	405	516	—	90	175	3,992	6,203	—	1	2	24	52
W.N. Central	31	26	621	1,792	1,367	163	317	425	14,820	17,728	3	3	24	178	127
Iowa	1	6	17	295	281	18	28	48	1,410	1,761	—	0	1	2	1
Kansas	—	3	11	150	168	85	41	130	2,097	2,086	—	0	3	14	11
Minnesota	22	0	575	612	168	—	57	92	2,582	3,158	—	0	21	54	56
Missouri	4	8	22	417	482	53	149	203	7,164	9,065	2	1	6	69	38
Nebraska§	4	4	10	190	148	—	25	47	1,158	1,318	1	0	2	27	16
North Dakota	—	0	36	21	23	—	2	6	91	108	—	0	3	12	5
South Dakota	—	1	10	107	97	7	7	15	318	232	—	0	0	—	—
S. Atlantic	67	54	87	2,534	2,772	391	1,186	3,072	56,531	74,875	9	11	29	605	542
Delaware	—	1	3	38	39	17	20	44	936	1,187	—	0	2	7	8
District of Columbia	—	1	5	51	69	—	47	104	2,305	2,154	—	0	1	9	3
Florida	57	22	52	1,195	1,155	373	449	549	20,805	20,960	5	3	10	164	147
Georgia	—	9	27	511	624	1	105	560	6,340	15,866	—	2	9	133	109
Maryland§	4	5	12	229	246	—	117	206	5,346	6,053	1	2	6	86	79
North Carolina	N	0	0	N	N	—	0	1,949	2,638	12,954	3	1	9	69	51
South Carolina§	3	2	6	110	111	—	187	832	8,434	9,203	—	1	7	46	47
Virginia§	3	9	39	348	482	—	173	486	9,107	5,636	—	1	6	73	73
West Virginia	—	1	5	52	46	—	14	26	620	862	—	0	3	18	25
E.S. Central	3	9	21	427	522	276	552	945	26,287	28,991	1	2	8	117	129
Alabama§	1	5	12	239	241	—	177	287	7,510	9,783	—	0	2	18	27
Kentucky	N	0	0	N	N	124	90	153	4,208	2,993	—	0	1	2	9
Mississippi	N	0	0	N	N	—	131	401	6,557	7,451	—	0	2	13	9
Tennessee§	2	4	13	188	281	152	163	296	8,012	8,764	1	2	6	84	84
W.S. Central	13	7	41	393	397	64	952	1,355	42,165	46,602	—	2	29	96	92
Arkansas§	4	3	8	129	142	64	86	167	4,176	3,802	—	0	3	9	9
Louisiana	—	2	9	115	130	—	170	317	8,149	10,220	—	0	2	8	8
Oklahoma	9	3	35	149	125	—	67	124	2,903	4,425	—	1	21	71	65
Texas§	N	0	0	N	N	—	633	1,102	26,937	28,155	—	0	3	8	10
Mountain	21	28	60	1,343	1,684	136	211	338	9,624	12,533	4	5	14	255	230
Arizona	—	2	8	121	185	39	66	109	3,030	4,603	2	2	11	103	81
Colorado	10	11	27	521	526	84	58	100	2,809	3,049	2	1	4	52	53
Idaho§	3	4	19	181	180	13	3	13	165	240	—	0	4	12	7
Montana§	—	1	9	75	102	—	2	48	95	109	—	0	1	2	2
Nevada§	4	1	8	87	134	—	40	130	1,901	2,151	—	0	2	14	11
New Mexico§	—	1	7	80	111	—	24	104	1,094	1,597	—	0	4	33	39
Utah	4	5	22	256	404	—	11	36	418	713	—	1	6	36	32
Wyoming§	—	0	3	22	42	—	2	9	112	71	—	0	2	3	5
Pacific	38	54	185	2,619	3,113	289	604	746	27,655	33,898	—	2	7	112	134
Alaska	2	2	10	93	73	8	10	24	455	509	—	0	2	16	15
California	35	35	91	1,710	2,078	229	511	657	22,993	28,329	—	0	3	25	45
Hawaii	—	1	5	39	72	—	11	22	511	603	—	0	2	18	11
Oregon§	—	8	18	404	431	16	23	48	1,106	1,094	—	1	4	50	61
Washington	1	8	87	373	459	36	55	90	2,590	3,363	—	0	3	3	2
American Samoa	—	0	0	—	—	—	0	1	3	3	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	2	—	1	15	73	118	—	0	1	—	1
Puerto Rico	—	2	10	117	355	3	5	25	253	284	—	0	0	—	2
U.S. Virgin Islands	—	0	0	—	—	—	2	6	93	38	N	0	0	N	N

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

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

* Incidence data for reporting year 2008 are provisional.

† Data for *H. influenzae* (age <5 yrs for serotype b, nonserotype b, and unknown serotype) are available in Table I.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Hepatitis (viral, acute), by type†										Legionellosis				
	A					B									
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
	Med	Max				Med	Max				Med	Max			
United States	14	48	171	2,202	2,589	32	68	259	3,059	3,907	31	46	139	2,482	2,370
New England	—	2	7	100	124	—	1	7	51	115	1	2	16	119	141
Connecticut	—	0	4	26	25	—	0	7	19	36	1	0	5	38	38
Maine§	—	0	2	10	4	—	0	2	10	13	—	0	2	9	7
Massachusetts	—	0	5	38	62	—	0	1	9	41	—	0	3	13	41
New Hampshire	—	0	2	12	12	—	0	1	7	5	—	0	5	24	8
Rhode Island§	—	0	2	12	13	—	0	1	4	15	—	0	14	30	38
Vermont§	—	0	1	2	8	—	0	1	2	5	—	0	1	5	9
Mid. Atlantic	4	6	12	267	418	3	9	15	383	509	13	14	58	851	766
New Jersey	—	1	4	51	119	—	2	7	111	144	—	1	7	77	105
New York (Upstate)	2	1	6	59	68	1	1	4	59	81	9	5	19	307	208
New York City	—	2	6	94	146	—	1	6	79	113	—	2	12	105	173
Pennsylvania	2	1	6	63	85	2	3	7	134	171	4	6	33	362	280
E.N. Central	1	6	16	286	313	3	7	12	347	418	4	10	39	524	538
Illinois	—	1	10	85	109	—	1	5	78	125	—	1	7	66	105
Indiana	—	0	4	21	27	2	1	6	42	53	—	1	7	48	56
Michigan	1	2	7	109	89	—	2	6	115	107	—	2	16	141	155
Ohio	—	1	4	45	59	1	2	8	106	113	4	4	18	252	190
Wisconsin	—	0	2	26	29	—	0	1	6	20	—	0	3	17	32
W.N. Central	—	5	29	239	155	1	2	9	90	104	1	2	9	114	106
Iowa	—	1	7	104	43	—	0	2	14	24	—	0	2	15	11
Kansas	—	0	3	14	10	—	0	3	7	8	—	0	1	2	9
Minnesota	—	0	23	36	62	—	0	5	10	17	—	0	4	21	26
Missouri	—	1	3	41	19	1	1	4	51	37	1	1	5	54	43
Nebraska§	—	0	5	40	15	—	0	2	7	11	—	0	4	20	13
North Dakota	—	0	2	—	—	—	0	1	1	—	—	0	2	—	—
South Dakota	—	0	1	4	6	—	0	0	—	7	—	0	1	2	4
S. Atlantic	4	7	15	353	441	9	16	60	779	898	8	8	28	418	389
Delaware	—	0	1	7	7	—	0	3	9	14	—	0	2	11	11
District of Columbia	U	0	0	U	U	U	0	0	U	U	—	0	1	13	15
Florida	2	2	8	139	138	8	6	12	300	308	2	3	7	134	131
Georgia	1	1	4	45	63	—	3	6	128	137	—	1	4	32	37
Maryland§	—	1	3	37	71	—	2	4	72	107	2	2	10	109	76
North Carolina	1	0	9	59	57	1	0	17	74	120	3	0	7	36	42
South Carolina§	—	0	3	16	17	—	1	6	54	58	—	0	2	11	17
Virginia§	—	1	5	45	79	—	2	16	94	115	1	1	6	52	47
West Virginia	—	0	2	5	9	—	1	30	48	39	—	0	3	20	13
E.S. Central	—	1	9	75	98	2	7	13	329	342	—	2	10	103	92
Alabama§	—	0	4	12	20	1	2	6	93	119	—	0	2	15	10
Kentucky	—	0	3	29	19	1	2	5	78	68	—	1	4	52	46
Mississippi	—	0	2	5	8	—	0	3	39	37	—	0	1	1	—
Tennessee§	—	0	6	29	51	—	3	8	119	118	—	1	5	35	36
W.S. Central	1	5	55	184	239	12	12	131	575	847	—	1	23	70	122
Arkansas§	—	0	1	5	12	—	0	4	30	67	—	0	2	11	15
Louisiana	—	0	1	10	27	—	1	4	73	92	—	0	2	9	5
Oklahoma	—	0	3	7	10	3	2	22	105	122	—	0	6	10	5
Texas§	1	4	53	162	190	9	7	107	367	566	—	1	18	40	97
Mountain	1	4	12	195	211	—	4	10	172	193	1	2	6	72	103
Arizona	—	2	11	99	139	—	1	5	59	76	—	0	2	17	36
Colorado	—	0	3	35	24	—	0	3	30	34	—	0	2	10	21
Idaho§	—	0	3	18	8	—	0	2	8	12	—	0	1	3	6
Montana§	—	0	1	1	9	—	0	1	2	—	—	0	1	4	3
Nevada§	1	0	3	9	11	—	1	3	32	44	—	0	2	10	9
New Mexico§	—	0	3	17	11	—	0	2	9	12	—	0	1	6	10
Utah	—	0	2	13	6	—	0	5	28	10	1	0	2	22	15
Wyoming§	—	0	1	3	3	—	0	1	4	5	—	0	0	—	3
Pacific	3	11	51	503	590	2	7	30	333	481	3	4	18	211	113
Alaska	—	0	1	3	4	—	0	2	9	9	—	0	1	2	—
California	3	9	42	411	508	2	5	19	237	353	3	3	14	169	83
Hawaii	—	0	2	17	7	—	0	1	7	16	—	0	1	8	2
Oregon§	—	0	3	26	27	—	1	3	38	54	—	0	2	15	11
Washington	—	1	7	46	44	—	1	9	42	49	—	0	3	17	17
American Samoa	—	0	0	—	—	—	0	0	—	14	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	1	—	2	—	0	0	—	—
Puerto Rico	—	0	4	17	58	—	0	5	38	79	—	0	1	1	4
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional.

† Data for acute hepatitis C, viral are available in Table I.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Lyme disease					Malaria					Meningococcal disease, invasive† All serotypes				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
		Med	Max				Med	Max				Med	Max		
United States	400	336	1,433	23,645	25,012	7	22	136	951	1,165	9	18	53	954	960
New England	15	48	257	3,480	7,575	—	0	35	33	55	—	0	3	22	42
Connecticut	—	0	35	—	2,985	—	0	27	11	3	—	0	1	1	6
Maine§	10	2	73	807	473	—	0	0	—	8	—	0	1	6	7
Massachusetts	—	13	114	1,039	2,937	—	0	2	14	31	—	0	3	15	19
New Hampshire	—	11	137	1,307	871	—	0	1	4	9	—	0	0	—	3
Rhode Island§	—	0	2	—	177	—	0	8	—	—	—	0	0	—	3
Vermont§	5	2	40	327	132	—	0	1	4	4	—	0	1	—	4
Mid. Atlantic	261	170	1,010	13,807	10,309	1	4	14	224	359	2	2	6	109	120
New Jersey	—	31	209	2,636	2,998	—	0	2	—	66	—	0	2	10	18
New York (Upstate)	232	53	453	4,715	3,079	—	0	8	28	66	1	0	3	29	35
New York City	—	0	7	28	401	—	3	10	157	187	—	0	2	25	20
Pennsylvania	29	59	529	6,428	3,831	1	1	3	39	40	1	1	5	45	47
E.N. Central	1	9	130	1,067	2,057	1	2	7	115	123	1	3	9	158	153
Illinois	—	0	9	75	149	—	1	6	48	57	—	1	4	54	56
Indiana	—	0	8	38	45	—	0	2	5	9	1	0	4	24	26
Michigan	1	1	11	90	51	1	0	2	16	18	—	0	3	28	25
Ohio	—	1	5	45	32	—	0	3	28	22	—	1	4	38	34
Wisconsin	—	7	116	819	1,780	—	0	3	18	17	—	0	2	14	12
W.N. Central	81	8	740	1,179	587	—	1	9	63	48	1	2	8	88	64
Iowa	—	1	8	82	121	—	0	3	8	3	—	0	3	18	14
Kansas	—	0	1	5	8	—	0	2	9	3	—	0	1	5	5
Minnesota	81	2	731	1,035	438	—	0	8	24	24	1	0	7	23	18
Missouri	—	0	4	41	10	—	0	4	14	8	—	0	3	25	17
Nebraska§	—	0	2	12	7	—	0	2	8	7	—	0	1	12	5
North Dakota	—	0	9	1	3	—	0	2	—	2	—	0	1	3	2
South Dakota	—	0	1	3	—	—	0	0	—	1	—	0	1	2	3
S. Atlantic	33	66	185	3,681	4,233	3	5	15	246	238	—	3	10	142	158
Delaware	2	12	37	702	672	—	0	1	2	4	—	0	1	2	1
District of Columbia	—	2	11	147	115	—	0	2	4	2	—	0	0	—	—
Florida	1	1	10	101	25	1	1	7	53	50	—	1	3	48	60
Georgia	—	0	3	22	10	—	1	5	48	37	—	0	2	16	23
Maryland§	21	30	124	1,842	2,441	1	1	6	63	64	—	0	4	17	19
North Carolina	1	0	7	43	43	1	0	7	27	20	—	0	4	12	18
South Carolina§	—	0	2	22	29	—	0	1	9	6	—	0	3	21	16
Virginia§	8	11	68	734	825	—	1	7	40	54	—	0	2	21	19
West Virginia	—	1	11	68	73	—	0	0	—	1	—	0	1	5	2
E.S. Central	—	1	3	43	51	—	0	2	17	33	1	1	6	50	48
Alabama§	—	0	3	10	13	—	0	1	4	6	—	0	2	10	9
Kentucky	—	0	1	3	6	—	0	1	4	8	—	0	2	8	11
Mississippi	—	0	1	1	1	—	0	1	1	2	—	0	2	11	11
Tennessee§	—	0	3	29	31	—	0	2	8	17	1	0	3	21	17
W.S. Central	1	2	11	97	74	1	1	64	73	85	—	2	13	100	93
Arkansas§	—	0	0	—	1	—	0	0	—	2	—	0	2	7	9
Louisiana	—	0	1	3	2	—	0	1	3	14	—	0	3	22	25
Oklahoma	—	0	1	—	—	—	0	4	2	5	—	0	5	17	16
Texas§	1	2	10	94	71	1	1	60	68	64	—	1	7	54	43
Mountain	—	0	4	40	42	—	1	3	29	61	1	1	4	51	62
Arizona	—	0	2	8	2	—	0	2	14	12	—	0	2	10	12
Colorado	—	0	2	7	—	—	0	1	4	23	1	0	1	14	21
Idaho§	—	0	2	9	9	—	0	1	3	4	—	0	2	4	6
Montana§	—	0	1	4	4	—	0	0	—	3	—	0	1	5	2
Nevada§	—	0	2	4	12	—	0	3	3	3	—	0	1	4	5
New Mexico§	—	0	2	6	5	—	0	1	2	5	—	0	1	7	2
Utah	—	0	0	—	7	—	0	1	3	11	—	0	1	5	12
Wyoming§	—	0	1	2	3	—	0	0	—	—	—	0	1	2	2
Pacific	8	5	10	251	84	1	3	10	151	163	3	5	19	234	220
Alaska	—	0	2	5	9	—	0	2	6	2	—	0	2	5	1
California	8	3	10	191	66	1	2	8	113	117	3	3	19	167	160
Hawaii	N	0	0	N	N	—	0	1	3	2	—	0	1	5	10
Oregon§	—	0	5	45	6	—	0	2	4	17	—	1	3	33	28
Washington	—	0	7	10	3	—	0	3	25	25	—	0	5	24	21
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	2	3	1	—	0	0	—	—
Puerto Rico	N	0	0	N	N	—	0	1	1	3	—	0	1	3	8
U.S. Virgin Islands	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional.

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Pertussis					Rabies, animal					Rocky Mountain spotted fever				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
		Med	Max				Med	Max				Med	Max		
United States	153	164	849	7,925	8,795	13	95	151	4,305	5,594	53	37	195	2,146	1,887
New England	—	14	49	564	1,377	4	7	20	338	495	—	0	1	2	8
Connecticut	—	0	4	34	82	1	4	17	187	208	—	0	0	—	—
Maine†	—	0	5	37	75	2	1	5	54	80	N	0	0	N	N
Massachusetts	—	10	33	420	1,060	N	0	0	N	N	—	0	1	1	7
New Hampshire	—	0	4	32	76	—	1	3	35	51	—	0	1	1	1
Rhode Island†	—	0	25	29	29	N	0	0	N	N	—	0	0	—	—
Vermont†	—	0	6	12	55	1	1	6	62	156	—	0	0	—	—
Mid. Atlantic	21	19	43	912	1,152	3	22	50	1,182	939	—	2	5	76	74
New Jersey	—	1	9	48	202	—	0	0	—	—	—	0	2	12	29
New York (Upstate)	6	7	24	396	499	3	9	20	464	488	—	0	2	16	6
New York City	—	1	6	46	137	—	0	2	13	42	—	0	2	24	24
Pennsylvania	15	9	23	422	314	—	14	35	705	409	—	0	2	24	15
E.N. Central	32	22	189	1,288	1,419	2	3	28	243	401	1	1	13	127	58
Illinois	—	3	18	213	178	—	1	21	103	113	—	0	10	84	38
Indiana	3	1	15	95	53	—	0	2	10	12	1	0	3	8	5
Michigan	6	5	14	240	273	—	1	8	71	200	—	0	1	3	4
Ohio	23	8	176	676	593	2	1	7	59	76	—	0	4	31	10
Wisconsin	—	1	7	64	322	N	0	0	N	N	—	0	1	1	1
W.N. Central	38	14	142	937	669	1	3	12	175	244	2	5	36	494	358
Iowa	—	1	9	70	138	—	0	5	27	30	—	0	2	6	16
Kansas	1	1	13	57	97	—	0	7	—	99	—	0	0	—	12
Minnesota	—	2	131	223	210	—	0	10	61	32	1	0	4	1	1
Missouri	25	5	46	355	92	1	0	9	51	38	1	4	35	464	310
Nebraska†	12	2	33	213	68	—	0	0	—	—	—	0	4	20	14
North Dakota	—	0	5	1	7	—	0	8	24	21	—	0	0	—	—
South Dakota	—	0	3	18	57	—	0	2	12	24	—	0	1	3	5
S. Atlantic	13	14	50	767	868	—	37	101	1,858	2,043	27	12	70	826	891
Delaware	—	0	3	16	11	—	0	0	—	—	—	0	4	29	16
District of Columbia	—	0	1	5	9	—	0	0	—	—	—	0	2	7	3
Florida	11	4	20	266	197	—	0	77	133	128	1	0	3	18	15
Georgia	—	1	6	59	33	—	6	42	288	272	—	1	8	72	58
Maryland†	1	2	9	108	111	—	8	17	386	398	2	1	7	66	61
North Carolina	—	0	38	79	288	—	9	16	424	450	24	1	55	438	563
South Carolina†	1	2	22	98	71	—	0	0	—	46	—	1	9	50	61
Virginia†	—	3	10	130	118	—	12	24	554	673	—	1	15	139	109
West Virginia	—	0	2	6	30	—	1	9	73	76	—	0	1	7	5
E.S. Central	1	7	15	298	436	—	3	7	165	147	3	3	23	303	270
Alabama†	—	1	5	44	85	—	0	0	—	—	—	1	8	86	93
Kentucky	1	1	8	91	28	—	0	4	45	18	—	0	1	1	5
Mississippi	—	2	6	88	246	—	0	1	2	2	—	0	1	6	20
Tennessee†	—	1	6	75	77	—	2	6	118	127	3	2	19	210	152
W.S. Central	33	26	198	1,387	981	—	1	40	85	1,002	18	2	153	280	190
Arkansas†	18	1	11	68	159	—	1	6	47	30	8	0	14	65	100
Louisiana	—	1	7	69	20	—	0	0	—	6	—	0	1	5	4
Oklahoma	—	0	26	53	23	—	0	32	36	45	10	0	132	168	48
Texas†	15	21	179	1,197	779	—	0	12	2	921	—	1	8	42	38
Mountain	5	15	37	704	1,001	—	1	8	75	93	2	0	3	34	35
Arizona	—	3	10	186	199	N	0	0	N	N	2	0	2	15	9
Colorado	4	3	13	140	272	—	0	0	—	—	—	0	1	1	3
Idaho†	—	0	5	29	41	—	0	1	—	12	—	0	1	1	4
Montana†	—	1	11	77	44	—	0	2	8	20	—	0	1	3	1
Nevada†	1	0	7	19	37	—	0	4	5	13	—	0	2	2	—
New Mexico†	—	1	5	48	71	—	0	3	25	14	—	0	1	2	5
Utah	—	5	27	189	314	—	0	6	13	16	—	0	0	—	—
Wyoming†	—	0	2	16	23	—	0	3	24	18	—	0	2	10	13
Pacific	10	22	303	1,068	892	3	3	13	184	230	—	0	1	4	3
Alaska	7	2	19	202	86	—	0	4	14	42	N	0	0	N	N
California	—	7	129	328	412	3	3	12	157	176	—	0	1	1	1
Hawaii	—	0	2	11	18	—	0	0	—	—	N	0	0	N	N
Oregon†	—	3	9	156	112	—	0	4	13	12	—	0	1	3	2
Washington	3	5	169	371	264	—	0	0	—	—	—	0	0	N	N
American Samoa	—	0	0	—	—	N	0	0	N	N	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	N	0	0	N	N
Puerto Rico	—	0	0	—	—	—	1	5	59	47	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	N	0	0	N	N	N	0	0	N	N

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

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

* Incidence data for reporting year 2008 are provisional.

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Salmonellosis					Shiga toxin-producing <i>E. coli</i> (STEC)†					Shigellosis				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
		Med	Max				Med	Max				Med	Max		
United States	602	850	2,110	40,375	42,509	54	85	249	4,669	4,444	369	420	1,227	17,705	16,625
New England	1	19	471	1,607	2,150	—	3	53	214	301	—	2	37	151	233
Connecticut	—	0	442	442	431	—	0	50	50	71	—	0	36	36	44
Maine§	1	3	8	134	128	—	0	3	22	39	—	0	6	21	14
Massachusetts	—	14	52	741	1,248	—	1	11	80	136	—	2	5	78	145
New Hampshire	—	2	10	126	160	—	0	3	30	34	—	0	1	3	5
Rhode Island§	—	1	8	92	104	—	0	3	8	7	—	0	1	10	22
Vermont§	—	1	7	72	79	—	0	3	24	14	—	0	1	3	3
Mid. Atlantic	28	86	169	4,609	5,538	5	6	192	569	489	10	41	96	2,090	732
New Jersey	—	14	30	585	1,157	—	0	4	26	111	—	9	38	708	166
New York (Upstate)	12	25	73	1,270	1,319	5	2	188	398	189	4	10	35	537	149
New York City	2	22	53	1,175	1,227	—	1	5	55	47	1	12	35	650	254
Pennsylvania	14	27	78	1,579	1,835	—	1	8	90	142	5	3	65	195	163
E.N. Central	28	87	180	4,314	5,506	6	10	66	797	694	82	70	145	3,352	2,664
Illinois	—	22	67	1,021	1,848	—	1	8	81	129	—	16	29	704	656
Indiana	—	9	53	566	617	4	1	14	88	95	—	11	83	565	142
Michigan	3	17	38	810	885	—	2	39	201	114	2	2	8	130	79
Ohio	25	24	65	1,192	1,230	2	3	17	187	151	80	27	76	1,568	1,135
Wisconsin	—	15	50	725	926	—	4	18	240	205	—	9	39	385	652
W.N. Central	22	49	134	2,557	2,618	9	13	59	753	734	2	16	39	801	1,730
Iowa	—	8	15	376	448	—	2	20	192	172	—	3	11	144	93
Kansas	—	7	31	438	387	—	0	7	49	50	—	1	5	56	24
Minnesota	7	13	70	666	629	4	3	21	189	219	—	5	25	279	223
Missouri	11	13	51	695	707	2	2	9	135	149	2	4	14	197	1,238
Nebraska§	4	4	13	212	251	3	1	29	142	89	—	0	3	12	27
North Dakota	—	0	35	42	42	—	0	20	3	8	—	0	15	37	4
South Dakota	—	2	11	128	154	—	1	4	43	47	—	0	9	76	121
S. Atlantic	230	260	456	11,003	11,095	5	14	50	725	632	58	57	149	2,760	4,168
Delaware	—	3	9	141	134	—	0	1	10	15	—	0	1	7	10
District of Columbia	—	1	4	46	55	—	0	1	11	—	—	0	3	13	18
Florida	144	102	174	4,750	4,407	—	2	18	138	135	19	15	75	748	2,045
Georgia	14	40	86	2,057	1,862	—	1	7	85	91	15	21	48	999	1,470
Maryland§	13	12	35	686	847	1	2	9	113	78	4	1	5	78	103
North Carolina	39	22	228	1,277	1,468	1	1	12	101	131	13	2	27	212	94
South Carolina§	7	20	55	994	1,051	—	1	4	39	14	1	9	32	495	178
Virginia§	13	18	49	907	1,088	3	3	25	199	150	6	4	13	192	171
West Virginia	—	3	25	145	183	—	0	3	29	18	—	0	61	16	79
E.S. Central	19	55	136	3,103	3,194	2	5	21	261	307	14	39	95	1,718	2,673
Alabama§	10	15	47	873	879	—	1	17	57	63	1	8	24	364	667
Kentucky	5	9	18	441	532	2	1	7	95	121	—	4	24	247	466
Mississippi	—	13	57	964	999	—	0	2	6	7	—	6	51	288	1,245
Tennessee§	4	15	55	825	784	—	2	7	103	116	13	17	43	819	295
W.S. Central	104	104	894	5,271	4,704	5	6	26	290	243	110	88	748	4,149	2,117
Arkansas§	8	12	40	723	772	—	1	3	41	42	16	10	27	526	81
Louisiana	—	16	49	905	916	—	0	1	2	10	—	10	25	546	473
Oklahoma	14	15	72	757	593	4	0	19	50	16	7	3	32	163	123
Texas§	82	45	794	2,886	2,423	1	4	11	197	175	87	58	702	2,914	1,440
Mountain	54	56	109	2,897	2,521	4	9	36	533	559	32	18	54	1,073	889
Arizona	17	19	46	1,018	917	1	1	5	64	103	24	9	35	576	510
Colorado	17	12	43	651	530	1	3	17	187	151	1	2	9	117	112
Idaho§	9	3	14	172	140	1	2	15	135	124	1	0	2	14	13
Montana§	—	2	10	106	97	—	0	3	31	—	—	0	1	8	24
Nevada§	3	3	9	167	240	1	0	2	10	30	3	4	13	214	62
New Mexico§	—	6	33	452	269	—	1	6	47	39	—	1	9	102	101
Utah	8	5	17	290	260	—	1	6	54	93	3	1	4	37	35
Wyoming§	—	1	4	41	68	—	0	2	5	19	—	0	1	5	32
Pacific	116	111	399	5,014	5,183	18	8	50	527	485	61	29	82	1,611	1,419
Alaska	—	1	4	49	84	—	0	1	7	4	—	0	1	1	8
California	109	78	286	3,669	3,917	10	5	39	280	249	61	26	74	1,390	1,138
Hawaii	—	5	15	238	281	—	0	5	13	30	—	1	3	40	66
Oregon§	—	6	20	376	304	—	1	8	62	74	—	2	10	86	71
Washington	7	13	103	682	597	8	2	16	165	128	—	2	13	94	136
American Samoa	—	0	1	2	—	—	0	0	—	—	—	0	1	1	5
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	2	13	15	—	0	0	—	—	—	0	3	15	16
Puerto Rico	—	10	41	449	834	—	0	1	2	1	—	0	4	17	24
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional.

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	Streptococcal diseases, invasive, group A				<i>Streptococcus pneumoniae</i> , invasive disease, nondrug resistant† Age <5 years					
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
		Med	Max				Med	Max		
United States	42	96	259	4,666	4,687	21	34	166	1,459	1,616
New England	—	6	31	315	355	—	1	14	71	115
Connecticut	—	0	26	96	109	—	0	11	11	13
Maine§	—	0	3	25	26	—	0	1	2	3
Massachusetts	—	3	8	138	170	—	0	5	39	78
New Hampshire	—	0	2	26	26	—	0	1	11	11
Rhode Island§	—	0	9	18	8	—	0	2	7	8
Vermont§	—	0	2	12	16	—	0	1	1	2
Mid. Atlantic	5	18	43	909	863	1	4	19	190	284
New Jersey	—	3	11	137	157	—	1	6	56	60
New York (Upstate)	2	6	17	294	259	1	2	14	93	92
New York City	—	4	10	170	211	—	0	8	41	132
Pennsylvania	3	6	16	308	236	N	0	0	N	N
E.N. Central	4	19	42	848	879	1	6	23	240	278
Illinois	—	4	16	222	264	—	1	5	48	75
Indiana	3	2	11	122	105	1	0	14	36	18
Michigan	—	3	10	159	187	—	1	5	68	72
Ohio	1	5	14	243	206	—	1	5	54	56
Wisconsin	—	2	10	102	117	—	1	3	34	57
W.N. Central	12	5	39	357	310	7	2	16	134	91
Iowa	—	0	0	—	—	—	0	0	—	—
Kansas	—	0	5	36	30	—	0	3	18	1
Minnesota	12	0	35	166	149	7	0	13	60	48
Missouri	—	2	10	83	79	—	1	2	31	24
Nebraska§	—	1	3	39	23	—	0	2	8	17
North Dakota	—	0	5	12	18	—	0	2	8	1
South Dakota	—	0	2	21	11	—	0	1	9	—
S. Atlantic	13	21	37	1,006	1,145	5	6	16	270	293
Delaware	—	0	2	8	10	—	0	0	—	—
District of Columbia	—	0	4	26	17	—	0	1	2	2
Florida	7	5	10	246	290	2	1	4	61	60
Georgia	2	5	14	218	229	—	1	5	62	71
Maryland§	2	4	8	167	191	3	1	5	52	60
North Carolina	1	2	10	126	150	N	0	0	N	N
South Carolina§	—	1	5	62	91	—	1	4	47	51
Virginia§	1	3	12	121	141	—	1	6	38	42
West Virginia	—	0	3	32	26	—	0	1	8	7
E.S. Central	—	4	9	160	196	1	2	11	93	91
Alabama§	N	0	0	N	N	N	0	0	N	N
Kentucky	—	1	3	38	37	N	0	0	N	N
Mississippi	N	0	0	N	N	—	0	3	20	6
Tennessee§	—	3	6	122	159	1	2	9	73	85
W.S. Central	4	9	85	419	280	3	5	66	242	230
Arkansas§	—	0	2	5	17	—	0	2	6	14
Louisiana	—	0	2	16	16	—	0	2	10	35
Oklahoma	2	2	19	104	63	—	1	7	59	50
Texas§	2	6	65	294	184	3	3	58	167	131
Mountain	4	11	22	498	525	3	4	12	204	221
Arizona	2	4	9	187	196	3	2	8	103	109
Colorado	2	3	8	137	131	—	1	4	55	43
Idaho§	—	0	2	15	17	—	0	1	5	2
Montana§	N	0	0	N	N	—	0	1	4	1
Nevada§	—	0	1	12	2	N	0	0	N	N
New Mexico§	—	2	8	90	96	—	0	3	17	38
Utah	—	1	5	51	78	—	0	3	19	28
Wyoming§	—	0	2	6	5	—	0	1	1	—
Pacific	—	3	10	154	134	—	0	2	15	13
Alaska	—	1	4	36	25	N	0	0	N	N
California	—	0	0	—	—	N	0	0	N	N
Hawaii	—	2	10	118	109	—	0	2	15	13
Oregon§	N	0	0	N	N	N	0	0	N	N
Washington	N	0	0	N	N	N	0	0	N	N
American Samoa	—	0	12	30	4	N	0	0	N	N
C.N.M.I.	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	14	—	0	0	—	—
Puerto Rico	N	0	0	N	N	N	0	0	N	N
U.S. Virgin Islands	—	0	0	—	—	N	0	0	N	N

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

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

* Incidence data for reporting year 2008 are provisional.

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	<i>Streptococcus pneumoniae</i> , invasive disease, drug resistant†										Syphilis, primary and secondary				
	A					B					Previous 52 weeks				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Med	Max	Cum 2008	Cum 2007
United States	48	55	307	2,518	2,687	6	9	43	380	468	83	239	351	10,658	10,069
New England	—	1	49	100	104	—	0	8	13	13	3	6	13	280	246
Connecticut	—	0	48	55	55	—	0	7	5	4	1	0	6	30	32
Maine§	—	0	2	16	11	—	0	1	2	2	—	0	2	10	9
Massachusetts	—	0	0	—	2	—	0	0	—	2	2	4	11	201	146
New Hampshire	—	0	0	—	—	—	0	0	—	—	—	0	2	19	26
Rhode Island§	—	0	3	16	19	—	0	1	4	3	—	0	5	13	30
Vermont§	—	0	2	13	17	—	0	1	2	2	—	0	5	7	3
Mid. Atlantic	3	4	13	213	144	—	0	2	20	27	11	32	51	1,513	1,379
New Jersey	—	0	0	—	—	—	0	0	—	—	—	4	10	188	200
New York (Upstate)	1	1	6	57	49	—	0	2	6	10	1	3	13	121	124
New York City	—	1	5	64	—	—	0	0	—	—	—	21	37	971	812
Pennsylvania	2	2	9	92	95	—	0	2	14	17	10	5	12	233	243
E.N. Central	15	13	64	624	700	—	2	14	87	111	20	19	33	911	797
Illinois	—	0	17	71	182	—	0	6	14	41	—	5	14	228	413
Indiana	7	2	39	187	150	—	0	11	21	24	—	2	10	124	50
Michigan	—	0	3	14	3	—	0	1	2	2	19	3	17	201	101
Ohio	8	8	17	352	365	—	1	4	50	44	1	6	15	307	177
Wisconsin	—	0	0	—	—	—	0	0	—	—	—	1	4	51	56
W.N. Central	—	3	115	141	182	—	0	9	10	40	—	8	15	351	323
Iowa	—	0	0	—	—	—	0	0	—	—	—	0	2	15	17
Kansas	—	1	5	58	83	—	0	1	4	9	—	0	5	27	21
Minnesota	—	0	114	—	25	—	0	9	—	24	—	2	5	96	53
Missouri	—	2	8	77	58	—	0	1	3	3	—	5	10	204	221
Nebraska§	—	0	0	—	2	—	0	0	—	—	—	0	2	8	4
North Dakota	—	0	0	—	—	—	0	0	—	—	—	0	1	—	—
South Dakota	—	0	2	6	14	—	0	1	3	4	—	0	1	1	7
S. Atlantic	28	21	53	1,081	1,172	6	4	10	187	214	27	50	215	2,384	2,314
Delaware	—	0	1	3	11	—	0	0	—	2	1	0	4	15	15
District of Columbia	—	0	3	15	19	—	0	1	1	1	—	2	8	116	165
Florida	21	13	30	637	638	3	3	6	119	114	14	20	36	912	799
Georgia	7	7	23	340	438	3	1	5	56	89	—	11	175	500	450
Maryland§	—	0	2	4	1	—	0	1	1	—	—	6	14	283	298
North Carolina	N	0	0	N	N	N	0	0	N	N	12	5	19	250	292
South Carolina§	—	0	0	—	—	—	0	0	—	—	—	1	5	76	86
Virginia§	N	0	0	N	N	N	0	0	N	N	—	4	17	230	203
West Virginia	—	1	9	82	65	—	0	2	10	8	—	0	1	2	6
E.S. Central	2	5	15	249	245	—	1	4	43	36	10	21	36	1,009	821
Alabama§	N	0	0	N	N	N	0	0	N	N	—	8	17	392	341
Kentucky	1	1	6	71	24	—	0	2	12	3	2	1	7	77	53
Mississippi	—	0	3	4	54	—	0	1	1	—	—	3	19	158	106
Tennessee§	1	3	13	174	167	—	0	3	30	33	8	8	18	382	321
W.S. Central	—	2	7	74	82	—	0	2	12	11	4	41	61	1,868	1,697
Arkansas§	—	0	2	15	6	—	0	1	3	2	4	2	19	158	112
Louisiana	—	1	7	59	76	—	0	2	9	9	—	11	30	524	468
Oklahoma	N	0	0	N	N	N	0	0	N	N	—	1	5	54	58
Texas§	—	0	0	—	—	—	0	0	—	—	—	24	48	1,132	1,059
Mountain	—	1	7	34	55	—	0	2	6	13	2	9	22	405	470
Arizona	—	0	0	—	—	—	0	0	—	—	1	5	17	200	260
Colorado	—	0	0	—	—	—	0	0	—	—	1	2	7	92	47
Idaho§	N	0	0	N	N	N	0	0	N	N	—	0	2	6	1
Montana§	—	0	0	—	—	—	0	0	—	—	—	0	3	—	5
Nevada§	N	0	0	N	N	N	0	0	N	N	—	1	6	68	98
New Mexico§	—	0	1	2	—	—	0	0	—	—	—	1	4	36	38
Utah	—	0	7	30	39	—	0	2	6	11	—	0	2	—	17
Wyoming§	—	0	1	2	16	—	0	1	—	2	—	0	1	3	4
Pacific	—	0	1	2	3	—	0	1	2	3	6	44	65	1,937	2,022
Alaska	N	0	0	N	N	N	0	0	N	N	—	0	1	1	7
California	N	0	0	N	N	N	0	0	N	N	4	39	59	1,745	1,858
Hawaii	—	0	1	2	3	—	0	1	2	3	—	0	2	16	8
Oregon§	N	0	0	N	N	N	0	0	N	N	—	0	3	23	16
Washington	N	0	0	N	N	N	0	0	N	N	2	3	9	152	133
American Samoa	N	0	0	N	N	N	0	0	N	N	—	0	0	—	4
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	0	0	—	—	—	0	0	—	—	8	3	11	151	147
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional.

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

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

TABLE II. (Continued) Provisional cases of selected notifiable diseases, United States, weeks ending November 22, 2008, and November 24, 2007 (47th week)*

Reporting area	West Nile virus disease†														
	Varicella (chickenpox)					Neuroinvasive					Nonneuroinvasive§				
	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007	Current week	Previous 52 weeks		Cum 2008	Cum 2007
	Med	Max				Med	Max				Med	Max			
United States	383	530	1,660	23,761	35,102	—	1	80	623	1,222	—	2	84	710	2,397
New England	6	11	68	464	2,288	—	0	2	6	5	—	0	1	3	6
Connecticut	—	0	38	—	1,301	—	0	2	5	2	—	0	1	3	2
Maine¶	—	0	14	—	312	—	0	0	—	—	—	0	0	—	—
Massachusetts	—	0	1	1	—	—	0	0	—	3	—	0	0	—	3
New Hampshire	—	6	13	226	337	—	0	0	—	—	—	0	0	—	—
Rhode Island¶	—	0	0	—	—	—	0	1	1	—	—	0	0	—	1
Vermont¶	6	6	17	237	338	—	0	0	—	—	—	0	0	—	—
Mid. Atlantic	49	48	80	2,067	4,367	—	0	8	45	22	—	0	5	19	11
New Jersey	N	0	0	N	N	—	0	1	3	1	—	0	1	4	—
New York (Upstate)	N	0	0	N	N	—	0	5	23	3	—	0	2	7	1
New York City	N	0	0	N	N	—	0	2	8	13	—	0	2	6	5
Pennsylvania	49	48	80	2,067	4,367	—	0	2	11	5	—	0	1	2	5
E.N. Central	114	134	336	5,941	9,974	—	0	7	43	112	—	0	5	22	65
Illinois	—	14	63	978	1,035	—	0	4	11	62	—	0	2	8	38
Indiana	—	0	222	—	222	—	0	1	2	14	—	0	1	1	10
Michigan	22	59	154	2,498	3,679	—	0	4	11	16	—	0	2	6	1
Ohio	92	48	128	2,096	4,069	—	0	3	16	13	—	0	2	3	10
Wisconsin	—	3	38	369	969	—	0	1	3	7	—	0	1	4	6
W.N. Central	38	20	145	1,092	1,427	—	0	6	45	249	—	0	23	171	739
Iowa	N	0	0	N	N	—	0	3	5	12	—	0	1	4	18
Kansas	1	6	40	392	511	—	0	2	8	14	—	0	4	29	26
Minnesota	—	0	0	—	—	—	0	2	3	44	—	0	6	18	57
Missouri	37	10	51	631	835	—	0	3	11	61	—	0	1	7	16
Nebraska¶	N	0	0	N	N	—	0	1	5	21	—	0	8	44	142
North Dakota	—	0	140	49	—	—	0	2	2	49	—	0	12	41	320
South Dakota	—	0	5	20	81	—	0	5	11	48	—	0	6	28	160
S. Atlantic	61	91	173	4,165	4,686	—	0	3	13	43	—	0	3	13	39
Delaware	—	1	5	44	46	—	0	0	—	1	—	0	1	1	—
District of Columbia	—	0	3	22	28	—	0	0	—	—	—	0	0	—	—
Florida	49	28	87	1,486	1,143	—	0	2	2	3	—	0	0	—	—
Georgia	N	0	0	N	N	—	0	1	3	23	—	0	1	4	27
Maryland¶	N	0	0	N	N	—	0	2	7	6	—	0	2	7	4
North Carolina	N	0	0	N	N	—	0	0	—	4	—	0	0	—	4
South Carolina¶	3	15	66	759	987	—	0	0	—	3	—	0	0	—	2
Virginia¶	1	22	81	1,230	1,429	—	0	0	—	3	—	0	1	1	2
West Virginia	8	12	66	624	1,053	—	0	1	1	—	—	0	0	—	—
E.S. Central	3	17	101	1,021	564	—	0	9	56	74	—	0	12	84	96
Alabama¶	3	16	101	1,008	562	—	0	3	11	17	—	0	3	10	7
Kentucky	N	0	0	N	N	—	0	1	3	4	—	0	0	—	—
Mississippi	—	0	2	13	2	—	0	6	32	48	—	0	10	67	83
Tennessee¶	N	0	0	N	N	—	0	1	10	5	—	0	3	7	6
W.S. Central	89	129	886	7,150	9,283	—	0	7	56	268	—	0	8	58	156
Arkansas¶	—	9	38	514	680	—	0	1	7	13	—	0	1	2	7
Louisiana	—	1	10	69	109	—	0	2	9	27	—	0	6	27	12
Oklahoma	N	0	0	N	N	—	0	1	2	59	—	0	1	5	47
Texas¶	89	125	852	6,567	8,494	—	0	6	38	169	—	0	4	24	90
Mountain	21	36	90	1,741	2,448	—	0	12	99	288	—	0	23	183	1,040
Arizona	—	0	0	—	—	—	0	10	62	49	—	0	8	47	47
Colorado	16	14	43	778	976	—	0	4	13	99	—	0	12	64	477
Idaho¶	N	0	0	N	N	—	0	1	3	11	—	0	6	30	120
Montana¶	—	6	27	290	371	—	0	0	—	37	—	0	2	5	165
Nevada¶	N	0	0	N	N	—	0	2	9	2	—	0	3	7	10
New Mexico¶	—	4	22	185	363	—	0	2	6	39	—	0	1	3	21
Utah	5	9	55	478	704	—	0	2	6	28	—	0	4	19	42
Wyoming¶	—	0	4	10	34	—	0	0	—	23	—	0	2	8	158
Pacific	2	2	8	120	65	—	0	36	260	161	—	0	24	157	245
Alaska	2	1	5	63	35	—	0	0	—	—	—	0	0	—	—
California	—	0	0	—	—	—	0	36	256	154	—	0	19	143	226
Hawaii	—	1	6	57	30	—	0	0	—	—	—	0	0	—	—
Oregon¶	N	0	0	N	N	—	0	2	3	7	—	0	4	13	19
Washington	N	0	0	N	N	—	0	1	1	—	—	0	1	1	—
American Samoa	N	0	0	N	N	—	0	0	—	—	—	0	0	—	—
C.N.M.I.	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—
Guam	—	1	17	62	233	—	0	0	—	—	—	0	0	—	—
Puerto Rico	—	7	20	378	667	—	0	0	—	—	—	0	0	—	—
U.S. Virgin Islands	—	0	0	—	—	—	0	0	—	—	—	0	0	—	—

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

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

* Incidence data for reporting year 2008 are provisional.

† Updated weekly from reports to the Division of Vector-Borne Infectious Diseases, National Center for Zoonotic, Vector-Borne, and Enteric Diseases (ArboNET Surveillance). Data for California serogroup, eastern equine, Powassan, St. Louis, and western equine diseases are available in Table I.

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

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

TABLE III. Deaths in 122 U.S. cities,* week ending November 22, 2008 (47th week)

Reporting area	All causes, by age (years)							P&I† Total	Reporting area	All causes, by age (years)							P&I† Total
	All Ages	≥65	45-64	25-44	1-24	<1				All Ages	≥65	45-64	25-44	1-24	<1		
New England	508	355	115	23	7	8	52	S. Atlantic	1,303	817	337	74	41	34	87		
Boston, MA	141	79	47	10	1	4	14	Atlanta, GA	124	71	32	12	6	3	5		
Bridgeport, CT	38	27	7	2	—	2	5	Baltimore, MD	236	143	66	15	10	2	30		
Cambridge, MA	8	7	1	—	—	—	1	Charlotte, NC	117	76	29	4	6	2	9		
Fall River, MA	32	32	—	—	—	—	10	Jacksonville, FL	165	111	33	9	5	7	5		
Hartford, CT	56	41	10	2	3	—	2	Miami, FL	93	63	16	10	1	3	4		
Lowell, MA	21	14	7	—	—	—	2	Norfolk, VA	51	31	18	—	2	—	1		
Lynn, MA	0	0	0	0	0	0	0	Richmond, VA	62	31	24	3	—	4	2		
New Bedford, MA	25	23	1	1	—	—	1	Savannah, GA	72	47	19	2	1	3	6		
New Haven, CT	U	U	U	U	U	U	U	St. Petersburg, FL	55	39	11	2	1	2	7		
Providence, RI	52	38	10	4	—	—	6	Tampa, FL	211	137	52	10	7	5	12		
Somerville, MA	1	1	—	—	—	—	—	Washington, D.C.	100	56	33	6	2	3	2		
Springfield, MA	45	25	16	1	1	2	5	Wilmington, DE	17	12	4	1	—	—	4		
Waterbury, CT	25	20	5	—	—	—	1	E.S. Central	927	603	240	45	17	21	77		
Worcester, MA	64	48	11	3	2	—	5	Birmingham, AL	207	130	53	14	5	4	19		
Mid. Atlantic	1,807	1,268	396	96	14	33	77	Chattanooga, TN	98	75	13	3	2	5	9		
Albany, NY	46	28	12	3	1	2	1	Knoxville, TN	117	76	34	4	1	2	11		
Allentown, PA	31	22	5	4	—	—	1	Lexington, KY	88	59	22	5	—	2	4		
Buffalo, NY	74	47	19	6	—	2	5	Memphis, TN	146	88	48	8	2	—	7		
Camden, NJ	27	10	12	3	1	1	1	Mobile, AL	81	54	20	3	1	3	9		
Elizabeth, NJ	15	11	3	1	—	—	—	Montgomery, AL	53	36	11	2	1	3	5		
Erie, PA	53	42	10	—	—	1	3	Nashville, TN	137	85	39	6	5	2	13		
Jersey City, NJ	12	9	3	—	—	—	—	W.S. Central	1,658	1,023	424	120	52	39	78		
New York City, NY	1,181	831	269	53	11	17	37	Austin, TX	68	44	14	6	2	2	7		
Newark, NJ	40	12	15	6	—	7	2	Baton Rouge, LA	70	37	20	13	—	—	—		
Paterson, NJ	13	7	3	2	—	1	—	Corpus Christi, TX	59	44	11	1	2	1	3		
Philadelphia, PA	U	U	U	U	U	U	U	Dallas, TX	215	110	65	18	12	10	10		
Pittsburgh, PA§	34	26	6	1	1	—	6	El Paso, TX	100	71	19	6	3	1	4		
Reading, PA	33	28	2	3	—	—	2	Fort Worth, TX	112	59	36	9	2	6	2		
Rochester, NY	139	109	22	8	—	—	12	Houston, TX	440	269	115	33	16	7	20		
Schenectady, NY	17	14	2	1	—	—	2	Little Rock, AR	94	64	19	6	4	1	1		
Scranton, PA	31	27	3	—	—	1	1	New Orleans, LA¶	U	U	U	U	U	U	U		
Syracuse, NY	U	U	U	U	U	U	U	San Antonio, TX	289	176	74	22	7	10	16		
Trenton, NJ	28	20	5	2	—	1	—	Shreveport, LA	69	51	12	4	1	1	5		
Utica, NY	18	13	4	1	—	—	1	Tulsa, OK	142	98	39	2	3	—	10		
Yonkers, NY	15	12	1	2	—	—	3	Mountain	985	659	228	57	18	23	45		
E.N. Central	1,911	1,254	457	113	44	42	98	Albuquerque, NM	131	93	25	10	1	2	5		
Akron, OH	43	23	15	4	—	1	5	Boise, ID	67	49	11	3	1	3	6		
Canton, OH	47	38	6	2	1	—	8	Colorado Springs, CO	62	45	11	2	2	2	3		
Chicago, IL	114	69	26	11	3	4	8	Denver, CO	81	47	24	8	2	—	2		
Cincinnati, OH	U	U	U	U	U	U	U	Las Vegas, NV	288	183	75	22	3	5	16		
Cleveland, OH	255	175	60	11	6	3	12	Ogden, UT	31	18	8	2	2	1	—		
Columbus, OH	205	128	49	18	5	5	6	Phoenix, AZ	U	U	U	U	U	U	U		
Dayton, OH	135	98	26	5	5	1	11	Pueblo, CO	41	26	13	1	1	—	—		
Detroit, MI	185	86	66	17	7	9	6	Salt Lake City, UT	121	82	26	6	2	5	6		
Evansville, IN	45	35	9	1	—	—	3	Tucson, AZ	163	116	35	3	4	5	7		
Fort Wayne, IN	78	55	17	3	2	1	2	Pacific	1,610	1,108	339	90	38	34	165		
Gary, IN	17	8	6	2	1	—	—	Berkeley, CA	16	13	2	—	—	1	2		
Grand Rapids, MI	46	29	6	4	1	6	1	Fresno, CA	U	U	U	U	U	U	U		
Indianapolis, IN	257	159	69	17	9	3	15	Glendale, CA	32	26	6	—	—	—	10		
Lansing, MI	76	55	17	2	1	1	8	Honolulu, HI	64	47	10	4	1	2	8		
Milwaukee, WI	98	65	25	5	—	3	2	Long Beach, CA	67	37	26	1	2	1	11		
Peoria, IL	41	34	5	—	—	2	3	Los Angeles, CA	254	167	52	18	9	8	31		
Rockford, IL	56	41	12	3	—	—	2	Pasadena, CA	23	20	1	—	2	—	4		
South Bend, IN	41	34	5	—	—	2	2	Portland, OR	122	90	23	6	2	1	8		
Toledo, OH	106	68	28	7	2	1	2	Sacramento, CA	195	137	37	11	5	5	23		
Youngstown, OH	66	54	10	1	1	—	2	San Diego, CA	166	115	36	8	2	5	14		
W.N. Central	587	377	142	40	11	17	38	San Francisco, CA	119	82	21	6	4	5	26		
Des Moines, IA	44	31	10	—	1	2	3	San Jose, CA	181	125	42	12	2	—	12		
Duluth, MN	28	22	5	—	—	1	4	Santa Cruz, CA	35	27	7	—	1	—	—		
Kansas City, KS	23	12	9	1	—	1	4	Seattle, WA	135	78	41	10	1	5	7		
Kansas City, MO	117	72	30	10	2	3	5	Spokane, WA	67	50	11	4	1	1	2		
Lincoln, NE	29	23	2	2	—	2	2	Tacoma, WA	134	94	24	10	6	—	7		
Minneapolis, MN	59	41	11	5	—	2	6	Total**	11,296	7,464	2,678	658	242	251	717		
Omaha, NE	91	60	18	8	2	3	7										
St. Louis, MO	75	29	33	7	4	2	3										
St. Paul, MN	43	27	13	2	1	—	—										
Wichita, KS	78	60	11	5	1	1	4										

U: Unavailable. —:No reported cases.

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

† Pneumonia and influenza.

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

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

** Total includes unknown ages.

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

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

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

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

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