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**MORBIDITY AND MORTALITY
WEEKLY REPORT**

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***Staphylococcus aureus* with Reduced Susceptibility to Vancomycin — Illinois, 1999**

Staphylococcus aureus is one of the most common causes of hospital- and community-acquired infections. Nosocomial methicillin-resistant *S. aureus* (MRSA) infections have become common, and cases of community-acquired MRSA infections also have occurred (1,2). Since 1996, vancomycin-intermediate *S. aureus* (VISA; vancomycin minimum inhibitory concentration [MIC]=8–16 µg/mL) has been identified in Europe, Asia, and the United States (3–5). The emergence of reduced vancomycin susceptibility in *S. aureus* increases the possibility that some strains will become fully resistant and that available antimicrobial agents will become ineffective for treating infections caused by such strains. This report describes the fourth case of confirmed VISA from a patient in the United States.

In April 1999, a 63-year-old woman with MRSA bacteremia (MIC <1 µg/mL) was transferred from a long-term-care facility to an Illinois hospital (hospital A). The patient had a history of frequent hospitalizations for complications of hemodialysis-dependent, end-stage renal disease, and intravascular access, including two failed arteriovenous grafts, multiple central venous catheter-associated infections, and intermittent receipt of vancomycin therapy through June 1998. Thirteen days after hospital admission and 25 days after initiating vancomycin therapy (median vancomycin serum concentration=12.7 µg/mL; range: 12.1 µg/mL–20.9 µg/mL), a culture from her blood grew *S. aureus* with an MIC of 4 µg/mL; the blood culture was tested using the Vitek® system (bioMérieux; Hazelwood, Missouri)*. Three subsequent blood specimens drawn within the next 3 days grew *S. aureus* with MICs of 8 µg/mL on confirmatory testing. The isolates, identical by pulsed-field gel electrophoresis, were resistant to penicillin, oxacillin, clindamycin, erythromycin, ciprofloxacin, and rifampin but susceptible to trimethoprim-sulfamethoxazole, tetracycline, gentamicin, and had intermediate susceptibility to chloramphenicol. No VISA strains were recovered from other body sites. An echocardiogram demonstrated a mitral valve vegetation but the patient declined surgical intervention. Despite treatment with intravenous vancomycin, rifampin, and

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

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tobramycin, the patient died 10 days after the first VISA blood specimen was drawn; the cause of death was endocarditis.

The VISA isolate was interpreted as "susceptible" at 4 µg/mL by the Vitek system. Because of the increased awareness of VISA strain emergence, according to laboratory protocol at hospital A, confirmatory testing was performed on all strains of *S. aureus* with Vitek (MIC \geq 4 µg/mL) using three additional independent methods: the Pasco Gram Positive Microtiter Panel (Pasco Laboratories, Wheatridge, Colorado), MIC=8 µg/mL; the Etest (AB Biodisk North America, Inc., Piscataway, New Jersey), MIC=6 µg/mL; and inoculation into brain heart infusion (Remel, Lenexa, Kansas) agar with 6 µg/mL of vancomycin (e.g., a vancomycin screen plate indicated growth). Susceptibility results were confirmed by CDC.

After identifying the VISA isolate, hospital A's infection-control department implemented CDC's *Interim Guidelines for Prevention and Control of Staphylococcal Infection Associated with Reduced Susceptibility to Vancomycin* (6) and began an epidemiologic investigation to evaluate potential transmission. None of 10 family members or 171 health-care workers screened by nares culture was colonized with VISA. No other VISA isolates were identified in other hospitalized patients.

Reported by: MA Khurshid, MD, T Chou, MPH, R Carey, PhD, R Larsen, Chicago; C Conover, MD, SL Bornstein, MD, Acting State Epidemiologist, Illinois Dept of Public Health. Hospital Infections Program, National Center for Infectious Diseases; and an EIS Officer, CDC.

Editorial Note: Since the emergence of nosocomial MRSA infections in the 1980s, and more recently the emergence of community-acquired MRSA infections, vancomycin is being used increasingly as therapy for treating suspected *S. aureus* infections. Because few therapies are available to treat MRSA, the confirmed reports of VISA strains demonstrating reduced susceptibility to vancomycin, which has been the drug of last resort to treat MRSA, is of concern.

The acronyms "VISA" and "GISA" (glycopeptide-intermediate *S. aureus*) have been used in the United States to describe *S. aureus* isolates with reduced susceptibility to vancomycin. The National Committee for Clinical Laboratory Standards published interpretive criteria defining both (7). The term "GISA" is a technically more accurate description of VISA strains, because all isolates have shown intermediate level MICs to the glycopeptide drugs, vancomycin and teicoplanin. However, clinicians may not recognize the term glycopeptide, and the acronym VISA is used more frequently.

Laboratorians may not be aware of proper methods for accurately identifying VISA (8). Hospital A's laboratory described in this report properly identified this VISA-infected patient by using a confirmatory testing protocol consistent with CDC's interim guidelines (6). This protocol included an algorithm to identify candidate strains (i.e., vancomycin MIC \geq 4 µg/mL) for confirmatory testing. At hospital A's laboratory, the Vitek system is not used only to detect intermediate resistance of *S. aureus* isolates but also to detect candidate strains for confirmatory susceptibility testing. Correct and prompt identification of VISA is critical in preventing transmission.

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If candidate strains are detected, CDC is available to perform expedited confirmatory susceptibility testing. CDC is seeking laboratory reports of confirmed cases of VISA infection for an ongoing nationwide epidemiologic study. Information on confirmatory testing, investigation therapy, and infection-control guidelines can be obtained from CDC's Hospital Infections Program, National Center for Infectious Diseases, telephone (404) 639-6413; World-Wide Web site, <http://www.cdc.gov/ncidod/hip/vanco/vanco.htm>, or e-mail SEARCH@cdc.gov. The recovery of *S. aureus* with reduced susceptibility to vancomycin (e.g., MIC ≥ 4 $\mu\text{g}/\text{mL}$) should be reported promptly to local and state health departments and to CDC, infection-control precautions should be implemented (6), and an epidemiologic investigation should be conducted.

References

1. Herold B, Immergluck LC, Maranan MC, et al. Community-acquired methicillin - resistant *Staphylococcus aureus* in children with no identified predisposing risk. JAMA 1998;279:593-8.
2. CDC. Four pediatric deaths from community-acquired methicillin-resistant *Staphylococcus aureus*—Minnesota and North Dakota, 1997-1999. MMWR 1999;48:707-10.
3. CDC. Reduced susceptibility of *Staphylococcus aureus* to vancomycin—Japan, 1996. MMWR 1997;46:624-6
4. Smith TL, Pearson ML, Wilcox KR, et al. Emergence of vancomycin resistance in *Staphylococcus aureus*. N Engl J Med 1999;340:493-501.
5. Rotun SS, McMath V, Schoonamker DJ, et al. *Staphylococcus aureus* with reduced susceptibility to vancomycin isolated from a patient with fatal bacteremia. Emerg Infect Dis 1999; 5:147-9.
6. CDC. Interim guidelines for prevention and control of staphylococcal infection associated with reduced susceptibility to vancomycin. MMWR 1997;46:626-8,656.
7. National Committee for Clinical Laboratory Standards. Approved standard M7-A4: methods for dilution antimicrobial susceptibility tests for bacteria that grow aerobically. 4th ed. Wayne, Pennsylvania: National Committee for Clinical Laboratory Standards, 1997.
8. CDC. Laboratory capacity to detect antimicrobial resistance, 1998. MMWR 2000;48:1167-71.

Laboratory Capacity to Detect Antimicrobial Resistance, 1998

Emerging mechanisms of antimicrobial resistance have clinical, microbiologic, and infection-control implications for health-care providers. Antimicrobial resistant organisms include *Staphylococcus aureus* with reduced susceptibility to vancomycin (minimum inhibitory concentration [MIC] ≥ 4 $\mu\text{g}/\text{mL}$), including vancomycin intermediate *S. aureus* (VISA; vancomycin MIC=8-16 $\mu\text{g}/\text{mL}$) (1-4) and *Enterobacteriaceae* that produce extended spectrum β -lactamases (ESBLs), which result in resistance to a broad range of β -lactam antibiotics (5). Detecting VISA and ESBLs-producing gram-negative pathogens can be difficult for clinical microbiology laboratories. Although CDC (1-3,6) and the National Committee for Clinical Laboratory Standards (NCCLS) (7-9) have published screening and confirmatory methods for these pathogens (Tables 1 and 2), the extent of use of these methods is unknown. This report summarizes results from a survey of microbiology laboratories that participate in the Active Bacterial Core Surveillance (ABCs)/Emerging Infections Program (EIP) Network to assess the capacity of

*Antimicrobial Resistance — Continued***TABLE 1. Recommendations for testing for *Staphylococcus aureus* with reduced susceptibility to vancomycin****Strategies for selection of strains for additional testing:**

1. Select isolates with vancomycin minimum inhibitory concentrations (MICs) of ≥ 4 $\mu\text{g/mL}$. This is based on the apparent heterogeneity of strains because organisms with MICs of ≥ 4 $\mu\text{g/mL}$ have subpopulations with higher MICs (6). Clinical treatment failures have occurred with vancomycin in infections with these isolates (6).
2. Select isolates with vancomycin MICs of ≥ 8 $\mu\text{g/mL}$ (based on National Committee for Clinical Laboratory Standards [NCCLS] breakpoints*) (7).
3. Select all methicillin-resistant *S. aureus* (MRSA). All identified isolates of *S. aureus* with reduced susceptibility to vancomycin have been MRSA (10).
4. Select all *S. aureus* isolates. Because little is known about the extent of this resistance, any *S. aureus* potentially could have reduced susceptibility to vancomycin.

Testing and confirmation:

1. Primary testing of *S. aureus* against vancomycin requires 24 hours of incubation time (7).
2. Disk diffusion is not an acceptable method for vancomycin susceptibility testing of *S. aureus*. None of the known strains of *S. aureus* with reduced susceptibility to vancomycin have been detected by this method (10).
3. An MIC susceptibility testing method should be used to confirm vancomycin test results (6).

*NCCLS MIC breakpoints for vancomycin are: susceptible, ≤ 4 $\mu\text{g/mL}$; intermediate, 8–16 $\mu\text{g/mL}$; and resistant, ≥ 32 $\mu\text{g/mL}$.

TABLE 2. National Committee for Clinical Laboratory Standards 1999 guidelines for susceptibility testing for *Enterobacteriaceae* with potential extended-spectrum β -lactamases (ESBLs) production**Testing:**

1. Expanded screening to include special breakpoints for the three previously included antimicrobials, two cephalosporins (ceftazidime, cefpodoxime), and aztreonam, but also cefotaxime and ceftriaxone.
2. Confirmatory testing methods for potential ESBLs-producing isolates of *Klebsiella pneumoniae*, *K. oxytoca*, and *Escherichia coli* by testing both cefotaxime and ceftazidime, alone and in combination with clavulanic acid. Testing can be performed by the broth microdilution method or by disk diffusion.

Reporting and interpretation:

Confirmed ESBL producers should be reported as resistant to all penicillins, cephalosporins (not including cephamycins such as cefoxitin and cefotetan), and aztreonam.

clinical microbiology laboratories to detect VISA and ESBL-producing pathogens; findings indicate that despite adequate capacity for proper testing, many laboratories do not have appropriate methodology to detect these resistant pathogens.

A survey of laboratory practices was sent to the primary contact for participating ABCs/EIP Network laboratories during August–September 1998. Follow-up was con-

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ducted by site coordinators.

As of June 1999, 416 (93%) of 447 ABCs/EIP Network laboratorians from eight states (California, Connecticut, Georgia, Maryland, Minnesota, New York, Oregon, and Tennessee) had responded to the survey. Of the 416 respondents, 369 (89%) performed clinical microbiologic services (i.e., "study laboratorians"). Of the 369 study laboratorians, 44 (12%) were from referral laboratories. The other 325 (88%) served health-care facilities that had a median of 121 (range: 5–2506) licensed beds. Seventy-six (36%) of the laboratorians served health-care facilities that were part of a health-maintenance organization.

In reviewing the susceptibility testing methods for *S. aureus*, 278 (84%) of 329 laboratorians used methods that allowed them to detect an isolate with reduced susceptibility to vancomycin. Fifty-two (16%) laboratorians used methods that would not identify these isolates, such as disk diffusion with no additional method (n=13), Microscan® Walkaway Rapid* panels (which provides <24 hours incubation) (n=four), and Vitek systems (bioMérieux, Hazelwood, Missouri) with a vancomycin MIC of ≥ 8 $\mu\text{g/mL}$ as the indicator for additional testing (Vitek software typically did not report isolates of *S. aureus* with an MIC >4 $\mu\text{g/mL}$) (n=25). Of 369 study laboratorians, 216 (59%) reported performing confirmatory testing of suspected isolates that were possibly VISA (candidate strains). Of the 204 study laboratorians who reported criteria for selecting strains of *S. aureus* as candidates for confirmatory susceptibility testing to vancomycin, 173 (85%) used recommended criteria. Of the 201 study laboratorians who reported methodology for confirming *S. aureus* with reduced susceptibility to vancomycin, 135 (67%) used an acceptable methodology.

Of the 369 study laboratorians, 117 (32%) reported performing tests to identify ESBL-producing organisms. Of the 112 laboratorians who described their methods, 93 (83%) used adequate methods for ESBL screening, and 19 (17%) reported performing definitive confirmatory tests for ESBL production (i.e., E-Test, MIC susceptibility testing of ceftazidime, alone and in combination with clavulanic acid). One hundred eight laboratorians commented on interpretation and clinical reporting of extended-spectrum cephalosporin and other susceptibility to β -lactam agents: 76 (70%) reported isolates identified as ESBL-producers as resistant to all extended-spectrum cephalosporins; 57 (53%) reported that these isolates also were resistant to aztreonam.

Variability in practices occurred based on demographics and characteristics of laboratories. Within the ABCs/EIP Network, the percentage of study laboratories confirming *S. aureus* with reduced susceptibility to vancomycin or testing for ESBL-producing organisms varied from 39% to 100% and 18% to 84%, respectively. Laboratories performing services for hospitals with >200 beds were significantly more likely to confirm *S. aureus* with reduced susceptibility to vancomycin (odds ratio [OR]=8.2; $p=0.0001$) or test for ESBL-producing organisms (OR=2.1; $p=0.002$) than were other laboratories surveyed. Managed-care-based laboratories were significantly less likely to confirm *S. aureus* with reduced susceptibility to vancomycin than were laboratories that were not part of a managed-care organization (OR=0.3; 95% confidence interval=0.2–0.6).

Reported by: W Baughman, M Farley, K Toomey, P Daily, G Rothrock, L Gelling, N Mokerjee, N Barrett, M Pass, K White, J Rainbow, B Damaske, K Stefonek, B Barnes, S Zansky, C Morin, Q Phan,

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Antimicrobial Resistance — Continued

P Moshar, J Hadler, Active Bacterial Core Surveillance/Emerging Infections Program Network. Respiratory Diseases Br, Div of Bacterial and Mycotic Diseases; Hospital Infections Program, National Center for Infectious Diseases; and an EIS Officer, CDC.

Editorial Note: The findings in this report indicate that most ABCs/EIP Network laboratories were using routine methods that would allow detection of VISA or ESBL-producing pathogens; however, approximately 40% of the laboratories were not performing confirmatory testing of *S. aureus* for reduced susceptibility to vancomycin and even fewer laboratories tested *Enterobacteriaceae* for ESBL production. Smaller hospital-based laboratories, managed-care-based laboratories, and laboratories from specific ABCs/EIP state locations did not report testing for these resistant pathogens.

Recent reports of *S. aureus* with reduced susceptibility to vancomycin underscore the importance of increasing awareness of clinical microbiology laboratory personnel on proper testing methods (1–4). The testing of isolates of *S. aureus* for reduced susceptibility to vancomycin requires that laboratorians know the appropriate susceptibility testing methods and strategies for selecting candidate strains. Despite the national recommendations for testing, many laboratorians may not be aware of the need to perform confirmatory testing on candidate VISA strains. Manufacturers should be aware of the difficulties in resistance identification. For example, Vitek systems software typically did not report MICs >4 µg/mL for *S. aureus* isolates. Therefore, a laboratory that used this system and the criteria for additional testing of 8 µg/mL may not have reliably detected isolates. In November 1999, Vitek upgraded its software to improve detection and reporting of *S. aureus* isolates with reduced susceptibility to vancomycin.

The recommendations and guidelines for testing for ESBL-producers have evolved over several years, and this may explain the variations in practices among ABCs/EIP laboratories. In January 1999, NCCLS attempted to clarify this topic by publishing new recommendations (10), including methods to confirm ESBL production (Table 2).

The findings in this report are subject to at least two limitations. First, the data were self reported. The degree of correlation between actual practice and such reports is unknown. Second, the sample was not random and results may not be representative of other facilities. Despite these limitations, the survey indicates a need to increase awareness among clinical microbiology laboratory and related personnel about evolving practices of susceptibility testing for antimicrobial resistant bacteria.

Additional information about survey results or resistance testing is available from CDC's Hospital Infections Program, telephone (404) 639-6413. In addition, information about testing for these resistant organisms is available on CDC's National Center for Infectious Diseases, Hospital Infections Program World-Wide Web site, <http://www.cdc.gov/ncidod/hip.htm>, click on "Laboratory."

References

1. CDC. Reduced susceptibility of *Staphylococcus aureus* to vancomycin—Japan, 1996. MMWR 1997;46:624–6.
2. CDC. *Staphylococcus aureus* with reduced susceptibility to vancomycin—United States, 1997. MMWR 1997;46:765–6.
3. CDC. Update: *Staphylococcus aureus* with reduced susceptibility to vancomycin—United States, 1997. MMWR 1997;46:813–5.
4. Smith T, Pearson M, Wilcox K, et al. Emergence of vancomycin resistance in *Staphylococcus aureus*. N Engl J Med 1999;440:493–501.

Antimicrobial Resistance — Continued

5. National Nosocomial Infection Surveillance (NNIS) System. Report, data summary from January 1990–May 1999. *Am J Infect Control* 1999;27:520–32.
6. CDC. Interim guidelines for prevention and control of staphylococcal infection associated with reduced susceptibility to vancomycin. *MMWR* 1997;46:626–8,635–6.
7. National Committee for Clinical Laboratory Standards. Approved standard M7-A4: methods for dilution antimicrobial susceptibility tests for bacteria that grow aerobically. 4th ed. Villanova, Pennsylvania: National Committee for Clinical Laboratory Standards, 1997.
8. National Committee for Clinical Laboratory Standards. Approved standard M100-S8: performance standards for antimicrobial susceptibility testing. Wayne, Pennsylvania: National Committee for Clinical Laboratory Standards, 1998.
9. National Committee for Clinical Laboratory Standards. Approved standard M100-S9: performance standards for antimicrobial susceptibility testing. Wayne, Pennsylvania: National Committee for Clinical Laboratory Standards, 1999.
10. Tenover FC, Lancaster MV, Hill BC, et al. Characterization of staphylococci with reduced susceptibilities to vancomycin and other glycopeptides. *J Clin Microbiol* 1998;36:2167.

Abortion Surveillance: Preliminary Analysis — United States, 1997

For 1997, CDC compiled data about legal induced abortions from the 50 states, New York City, and the District of Columbia. The total number of legal induced abortions was available from all reporting areas; however, not all these areas collected information about the characteristics of women who obtained abortions. This report presents preliminary data for 1997; final 1997 abortion data will be published during summer 2000.

In 1997, 1,184,758 legal induced abortions were reported to CDC (Table 1), a decrease of 3.0% from 1996 (1). The number of live births also decreased slightly (0.3% decrease) during the same period (2). From 1996 to 1997, the number of reported abortions decreased in 34 of 52 reporting areas. The national abortion ratio (number of legal abortions per 1000 live births reported by all reporting areas) decreased from 314 in 1996 to 305 in 1997 (Table 1), and the national abortion rate (number of legal abortions per 1000 women aged 15–44 years) remained at 20. Consistent with previous years, approximately 92% of women who had legal induced abortions were residents of the state in which the procedure was performed. Women who obtained legal abortions in 1997 were predominately white and unmarried. As in 1996, approximately 20% of women who obtained a legal abortion in 1997 were aged ≤ 19 years; 32% were aged 20–24 years.

Curettage (suction and sharp) remained the primary abortion procedure (98%); 18 reporting areas submitted information about abortions performed by medical (nonsurgical) procedures*. In 1997, 16 reporting areas reported 2988 medical procedures, and two states reported that medical procedures were included in the “other” category. As in previous years, more than half (approximately 55%) of legal abortions were per-

*Medical abortions are nonsurgical procedures involving the administration of medication(s) to induce an abortion and are most frequently performed early in the first trimester of pregnancy (3).

TABLE 1. Reported number of legal induced abortions, abortion ratios,* abortion rates,† and characteristics of women who obtained legal induced abortions, by year — United States, selected years, 1972–1997

Characteristic	1972	1976	1980	1985	1990	1991	1992	1993	1994	1995	1996	1997 [§]
Reported no. legal abortions	586,760	988,267	1,297,606	1,328,570	1,429,577	1,388,937	1,359,145	1,330,414	1,267,415	1,210,883	1,221,585	1,184,758
Abortion ratio	180	312	359	354	345	339	335	334	321	311	314	305
Abortion rate	13	21	25	24	24	24	23	22	21	20	20	20
	Percentage distribution[¶]											
Residence												
In-state	56.2	90.0	92.6	92.4	91.8	91.6	92.0	91.4	91.5	91.7	91.9	92.0
Out-of-state	43.8	10.0	7.4	7.6	8.2	8.4	8.0	8.6	8.5	8.3	8.1	8.0
Age group (yrs)												
≤ 19	32.6	32.1	29.2	26.3	22.4	21.0	20.1	20.0	20.2	20.1	20.3	20.1
20–24	32.5	33.3	35.5	34.7	33.2	34.4	34.5	34.4	33.5	32.5	31.9	31.7
≥ 25	34.9	34.6	35.3	39.0	44.4	44.6	45.4	45.6	46.3	47.4	47.8	48.2
Race												
White	77.0	66.6	69.9	66.6	64.8	63.8	61.5	60.9	60.5	59.5	59.1	58.5
Black	23.0	33.4	30.1	29.8	31.8	32.5	33.9	34.9	34.7	35.0	35.2	35.8
Other**	—	—	—	3.5	3.4	3.7	4.6	4.2	4.8	5.5	5.7	5.7
Ethnicity												
Hispanic	—	—	—	—	9.8	13.5	15.2	14.7	14.5	15.4	16.1	15.6
Non-Hispanic	—	—	—	—	90.2	86.5	84.8	85.3	85.5	84.6	83.9	84.4
Marital status												
Married	29.7	24.6	23.1	19.3	21.7	21.4	20.8	20.4	19.9	19.7	20.1	19.0
Unmarried	70.3	75.4	76.9	80.7	78.3	78.6	79.2	79.6	80.1	80.3	79.9	81.0
No. live births^{††}												
0	49.4	47.7	58.4	56.3	49.2	47.8	45.9	46.3	46.2	45.2	44.2	42.2
1	18.2	20.7	19.4	21.6	24.4	25.3	25.9	26.0	25.9	26.5	26.8	27.6
2	13.3	15.4	13.7	14.5	16.9	17.4	18.0	17.8	17.8	18.0	18.4	19.1
3	8.7	8.3	5.3	5.1	6.1	6.4	6.7	6.6	6.7	6.8	7.0	7.3
≥ 4	10.4	7.9	3.2	2.5	3.4	3.4	3.5	3.3	3.4	3.5	3.6	3.8
Type of procedure												
Curettage	88.6	92.8	95.5	97.5	98.8	98.9	98.9	99.0	99.1	98.9	98.8	97.7
Suction	65.2	82.6	89.8	94.6	96.0	97.3	97.0	96.4	96.5	96.6	96.5	96.7
Sharp	23.4	10.2	5.7	2.9	2.8	1.6	1.9	2.6	2.6	2.3	2.3	1.0
Intrauterine instillation	10.4	6.0	3.1	1.7	0.8	0.7	0.7	0.6	0.5	0.5	0.4	0.4
Other ^{§§}	1.0	1.2	1.4	0.8	0.4	0.4	0.4	0.4	0.4	0.6	0.8	1.9 ^{¶¶}

Weeks' gestation													
≤8	34.0	47.0	51.7	50.3	51.6	52.3	52.1	52.3	53.7	54.0	54.6	55.5	
≤6	—	—	—	—	—	—	14.3***	14.7†††	15.7§§§	15.7§§§	16.4¶¶¶	17.7*****	
7	—	—	—	—	—	—	15.6***	16.2†††	16.5§§§	17.1§§§	17.4¶¶¶	8.1*****	
8	—	—	—	—	—	—	22.2***	21.6†††	21.6§§§	21.2§§§	20.9¶¶¶	9.6*****	
9–10	30.7	28.1	26.2	26.6	25.3	25.1	24.2	24.4	23.5	23.1	22.6	21.9	
11–12	17.5	14.4	12.2	12.5	11.7	11.5	12.0	11.6	10.9	10.9	11.0	10.7	
13–15	8.4	4.5	5.1	5.9	6.4	6.1	6.0	6.3	6.3	6.3	6.0	6.2	
16–20	8.2	5.1	3.9	3.9	4.0	3.9	4.2	4.1	4.3	4.3	4.3	4.3	
≥21	1.2	0.9	0.9	0.8	1.0	1.1	1.5	1.3	1.3	1.4	1.5	1.4	

* Number of legal induced abortions per 1000 live births.

† Number of legal induced abortions per 1000 women aged 15–44 years.

§ Preliminary data. The number of areas reporting a given characteristic varied. For 1997, the number of areas reporting residence was 46; age, 47; race, 40; ethnicity, 28; marital status, 39; number of live-born infants, 40; type of procedure, 44; and weeks of gestation, 43.

¶ Percentage distributions are based on known values in data from all areas reporting a given characteristic, except where the proportion of unknown values >15%.

** Reported as "other" race.

†† For 1972 and 1976, data indicate number of living children.

§§ Includes hysterotomy and hysterectomy and procedures reported as "other."

¶¶ Includes hysterotomy and hysterectomy and procedures reported as "other" and 2988 abortions reported as medical (nonsurgical) procedures.

*** Data are for 36 of 39 areas reporting weeks of gestation.

††† Data are for 38 of 41 areas reporting weeks of gestation.

§§§ Data are for 38 of 40 areas reporting weeks of gestation.

¶¶¶ Data are for 37 of 40 areas reporting weeks of gestation.

***** Data are for 41 of 43 areas reporting weeks of gestation.

Abortion Surveillance — Continued

formed during the first 8 weeks of gestation; 18% were at ≤ 6 weeks; 18% at 7 weeks; and 20% at 8 weeks. Approximately 88% were performed during the first 12 weeks of pregnancy.

Reported by: Surveillance Unit, Statistics and Computer Resources Br, Div of Reproductive Health, National Center for Chronic Disease Prevention and Health Promotion, CDC.

Editorial Note: In the United States during 1980–1990, the number of legal induced abortions varied annually by $\leq 5\%$ and increased overall by 10% (Table 1). The reported number of legal induced abortions was highest in 1990. Since that year, the number of abortions has declined each year by 2%–5%, except 1995–1996, when the number of abortions increased by 0.9%. The number of abortions reported to CDC for 1997 declined from 1996 and is the lowest recorded number since 1978 (4).

The national legal induced abortion rate indicates the number of abortions per 1000 women of reproductive age in a given year. During 1972–1980, the national legal induced abortion rate increased each year; during 1980–1991, the rate remained stable and declined during 1991–1995. The 1997 abortion rate of 20 per 1000 women of reproductive age (aged 15–44 years) remained unchanged from 1995 and was the lowest rate recorded since 1975 (5).

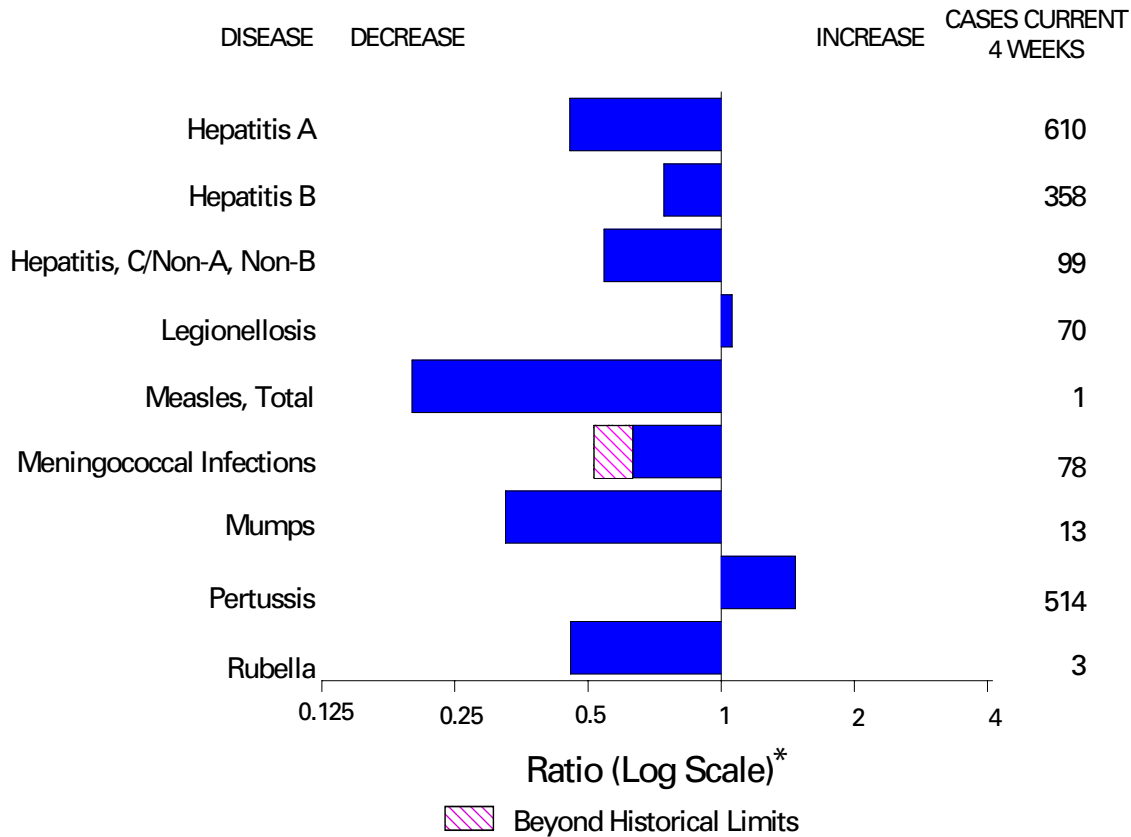
The national ratio of legal induced abortions to live births indicates the number of abortions per 1000 live births. The national abortion ratio steadily declined each year from 1987 to 1995; in 1996, a slight increase in the ratio occurred; in 1997, the abortion ratio decreased and was at its lowest recorded level since 1975 (5). Factors that might have contributed to the decline include a reduced number of unintended pregnancies, attitude changes concerning the decision to have an abortion or to carry a pregnancy to term, and reduced access to abortion services (6–8).

The decline in the abortion ratios also might be attributed to a shift in the age distribution of reproductive-aged women obtaining abortions. Although the actual number of women of reproductive age has increased by 2% since 1990, the proportion who are older (i.e., in later, less fertile reproductive years) also has increased. During 1990–1997, the percentage of reproductive-aged women in the highest fertility age group (<30 years) declined from 49% to 46% (Bureau of the Census, unpublished data, 1999), and the percentage in the lowest fertility age group (women aged 35–44 years) increased from 33% to 37% (2).

For the first time in this report, medical (nonsurgical) procedures are included. Since the mid-1990s, medications (e.g., methotrexate and misoprostol) have been used by clinical practitioners to perform early medical abortions (9). In 1997, the U.S. Standard Report of Induced Termination of Pregnancy, published by CDC's National Center for Health Statistics, was revised to include "Medical (Nonsurgical)," a new procedure category (3). In 1997, 18 states, New York City, and the District of Columbia included medical abortion procedures on their reporting forms. For the same year, 16 reporting areas submitted information to CDC about the number of performed medical abortions. However, the number reported to CDC may be an undercount; other researchers have estimated that approximately 4300 medical procedures were performed during the first half of 1997 (7). During 1994–1995 in the United States, approximately 2000 women aged >18 years participated in clinical trials testing mifepristone (10), a medication the

(Continued on page 1191)

FIGURE I. Selected notifiable disease reports, comparison of provisional 4-week totals ending December 25, 1999, with historical data — United States



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

TABLE 1. Summary — provisional cases of selected notifiable diseases, United States, cumulative, week ending December 25, 1999 (51st Week)

	Cum. 1999		Cum. 1999
Anthrax	-	HIV infection, pediatric*§	137
Brucellosis*	47	Plague	8
Cholera	3	Poliomyelitis, paralytic	-
Congenital rubella syndrome	8	Psittacosis*	16
Cyclosporiasis*	51	Rabies, human	-
Diphtheria	1	Rocky Mountain spotted fever (RMSF)	566
Encephalitis: California*	61	Streptococcal disease, invasive Group A	2,151
eastern equine*	6	Streptococcal toxic-shock syndrome*	41
St. Louis*	7	Syphilis, congenital¶	237
western equine*	1	Tetanus	32
Ehrlichiosis: human granulocytic (HGE)*	160	Toxic-shock syndrome	116
human monocytic (HME)*	40	Trichinosis	9
Hansen Disease*	95	Typhoid fever	298
Hantavirus pulmonary syndrome*†	21	Yellow fever	1
Hemolytic uremic syndrome, post-diarrheal*	118		

-: no reported cases

* Not notifiable in all states.

† Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases (NCID).

§ Updated monthly from reports to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), last update November 28, 1999.

¶ Updated from reports to the Division of STD Prevention, NCHSTP.

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	AIDS		Chlamydia		Cryptosporidiosis		<i>Escherichia coli</i> O157:H7*			
	Cum. 1999 ¹	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	NETSS		PHLIS	
							Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	40,933	44,438	581,689	583,049	2,321	3,622	3,419	2,889	2,309	2,164
NEW ENGLAND	2,090	1,773	20,316	19,754	162	149	396	332	343	283
Maine	75	28	904	1,008	30	31	38	36	-	-
N.H.	45	36	925	950	19	17	34	46	33	47
Vt.	16	18	462	409	36	26	32	21	21	18
Mass.	1,338	906	8,758	8,197	53	68	173	149	184	161
R.I.	96	119	2,300	2,270	6	7	27	13	26	1
Conn.	520	666	6,967	6,920	18	U	92	67	79	56
MID. ATLANTIC	10,473	12,110	56,608	60,586	425	564	320	299	92	87
Upstate N.Y.	1,196	1,435	N	N	181	333	258	218	-	-
N.Y. City	5,571	6,852	21,963	25,785	116	206	11	14	17	13
N.J.	1,932	2,085	10,700	11,549	36	25	51	67	46	53
Pa.	1,774	1,738	23,945	23,252	92	N	N	N	29	21
E.N. CENTRAL	2,801	3,222	84,274	99,126	570	726	708	458	497	373
Ohio	448	682	26,638	27,040	67	73	255	127	208	77
Ind.	320	485	11,097	11,033	40	61	114	104	64	54
Ill.	1,345	1,188	25,693	25,930	67	84	223	112	81	81
Mich.	555	680	20,846	21,405	49	38	116	115	78	73
Wis.	133	187	U	13,718	347	470	N	N	66	88
W.N. CENTRAL	940	884	33,702	34,670	206	336	616	479	415	406
Minn.	178	163	6,683	6,877	78	142	236	196	184	214
Iowa	77	72	4,649	4,497	55	65	115	92	73	59
Mo.	449	439	12,529	12,394	31	28	67	53	67	64
N. Dak.	6	6	707	1,037	18	30	17	12	14	15
S. Dak.	15	15	1,530	1,543	7	25	47	36	62	40
Nebr.	65	66	3,378	2,870	16	35	113	54	-	-
Kans.	150	123	4,226	5,452	1	11	21	36	15	14
S. ATLANTIC	11,305	11,544	123,247	113,440	387	352	342	251	180	179
Del.	159	171	2,715	2,555	-	3	6	-	3	2
Md.	1,344	1,608	10,999	7,484	17	21	42	43	4	15
D.C.	637	808	N	N	8	25	1	1	U	U
Va.	782	959	13,391	13,554	27	20	75	N	59	55
W. Va.	64	84	1,240	2,346	3	3	16	13	11	10
N.C.	739	787	21,443	21,580	34	N	74	57	52	47
S.C.	919	777	12,830	18,070	-	-	21	15	14	12
Ga.	1,581	1,174	31,567	23,366	143	129	37	78	-	-
Fla.	5,080	5,176	29,062	24,485	155	151	70	44	37	38
E.S. CENTRAL	1,796	1,837	44,431	40,250	44	26	134	120	58	65
Ky.	255	279	7,249	6,083	8	10	48	36	-	-
Tenn.	706	659	13,850	13,717	13	10	55	54	38	40
Ala.	449	484	12,377	10,059	14	N	25	24	16	20
Miss.	386	415	10,955	10,391	9	6	6	6	4	5
W.S. CENTRAL	4,177	5,353	87,795	87,430	88	916	139	106	124	108
Ark.	188	203	5,585	3,975	2	6	15	11	8	10
La.	813	914	15,948	14,770	25	16	12	5	14	7
Okla.	123	285	7,763	9,243	13	N	39	25	27	9
Tex.	3,053	3,951	58,499	59,442	48	894	73	65	75	82
MOUNTAIN	1,608	1,568	30,156	33,351	99	123	330	365	225	249
Mont.	13	29	1,496	1,278	13	10	25	16	-	5
Idaho	22	32	1,712	1,987	8	17	72	43	43	25
Wyo.	11	6	759	701	1	2	16	53	14	55
Colo.	290	313	5,462	8,552	14	19	108	90	88	69
N. Mex.	82	204	3,931	4,068	42	48	13	19	7	20
Ariz.	819	588	11,929	11,324	13	18	38	45	23	29
Utah	142	139	2,085	2,150	N	N	38	75	48	22
Nev.	229	257	2,782	3,291	8	9	20	24	2	24
PACIFIC	5,743	6,147	101,160	94,442	340	430	434	479	375	414
Wash.	337	387	11,697	10,842	N	N	167	110	159	131
Oreg.	208	204	5,901	5,664	93	69	74	107	68	102
Calif.	5,089	5,366	79,068	73,503	247	357	181	255	136	165
Alaska	15	29	1,837	1,860	-	1	1	7	1	-
Hawaii	94	161	2,657	2,573	-	3	11	-	11	16
Guam	10	2	299	422	-	-	N	N	U	U
P.R.	1,180	1,685	U	U	-	N	9	5	U	U
V.I.	35	31	U	U	U	U	U	U	U	U
Amer. Samoa	-	-	U	U	U	U	U	U	U	U
C.N.M.I.	-	-	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases C.N.M.I.: Commonwealth of Northern Mariana Islands
¹Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).
¹Updated monthly from reports to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention, last update November 28, 1999.

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	Gonorrhea		Hepatitis C/NA,NB		Legionellosis		Lyme Disease	
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	322,988	347,207	3,289	3,250	943	1,267	13,081	15,632
NEW ENGLAND	6,370	5,966	15	59	84	85	3,839	4,649
Maine	71	66	2	-	3	1	41	78
N.H.	106	91	-	-	8	7	23	43
Vt.	50	37	7	6	15	7	23	11
Mass.	2,436	2,225	3	50	31	33	986	695
R.I.	586	416	3	3	12	22	464	650
Conn.	3,121	3,131	-	-	15	15	2,302	3,172
MID. ATLANTIC	38,253	37,886	97	214	189	317	7,202	8,778
Upstate N.Y.	6,686	7,152	62	107	62	108	3,962	4,058
N.Y. City	13,701	11,900	-	-	9	36	44	230
N.J.	6,055	7,746	-	U	18	18	922	1,874
Pa.	11,811	11,088	35	107	100	155	2,274	2,616
E.N. CENTRAL	56,028	68,070	1,444	667	257	417	227	761
Ohio	16,185	17,783	4	8	83	132	76	46
Ind.	6,051	6,490	1	5	46	82	21	37
Ill.	19,310	21,461	48	40	23	53	12	14
Mich.	14,482	16,080	800	469	60	82	1	12
Wis.	U	6,256	591	145	45	68	117	652
W.N. CENTRAL	14,398	17,246	325	44	56	64	312	226
Minn.	2,563	2,676	12	12	13	7	240	173
Iowa	1,155	1,492	-	8	14	10	21	26
Mo.	7,197	9,019	301	15	17	16	27	12
N. Dak.	71	78	1	-	2	-	1	-
S. Dak.	190	217	-	-	3	4	-	-
Nebr.	1,396	1,193	5	5	7	19	11	4
Kans.	1,826	2,571	6	4	-	8	12	11
S. ATLANTIC	93,316	93,841	193	125	152	145	1,161	903
Del.	1,635	1,519	1	-	15	13	64	66
Md.	9,235	9,901	42	23	34	38	819	627
D.C.	3,365	4,391	1	-	5	8	6	8
Va.	9,151	9,252	11	12	40	22	118	69
W. Va.	387	843	17	8	N	N	18	13
N.C.	19,082	18,666	34	25	15	14	74	61
S.C.	8,471	11,287	22	13	11	11	7	7
Ga.	21,341	19,271	2	9	3	8	-	5
Fla.	20,649	18,711	63	35	29	31	55	47
E.S. CENTRAL	35,271	38,601	325	273	48	65	106	112
Ky.	3,285	3,577	25	21	22	26	17	26
Tenn.	11,093	11,840	117	164	22	23	57	45
Ala.	10,950	12,707	1	5	4	9	19	24
Miss.	9,943	10,477	182	83	-	7	13	17
W.S. CENTRAL	49,549	53,977	466	557	27	34	58	31
Ark.	2,984	3,893	18	22	-	2	4	7
La.	12,804	12,743	253	116	4	4	11	7
Okla.	3,792	5,147	16	20	5	12	8	2
Tex.	29,969	32,194	179	399	18	16	35	15
MOUNTAIN	9,048	9,056	154	371	49	74	18	19
Mont.	54	48	5	7	-	2	-	-
Idaho	82	178	8	87	3	3	5	7
Wyo.	36	34	50	96	-	1	3	1
Colo.	2,382	2,010	23	32	13	19	-	-
N. Mex.	819	968	8	97	1	2	1	4
Ariz.	4,251	4,157	46	11	7	18	2	1
Utah	230	228	6	21	19	21	5	-
Nev.	1,194	1,433	8	20	6	8	2	6
PACIFIC	20,755	22,564	270	940	81	66	158	153
Wash.	2,069	1,927	20	22	17	12	10	7
Oreg.	870	832	22	21	N	N	14	21
Calif.	17,140	18,981	228	843	63	52	134	124
Alaska	291	325	-	-	1	1	-	1
Hawaii	385	499	-	54	-	1	N	N
Guam	38	72	1	1	-	2	-	1
P.R.	337	377	-	-	-	-	N	N
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable

U: Unavailable

- : no reported cases

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	Malaria		Rabies, Animal		Salmonellosis*			
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	NETSS		PHLIS	
					Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	1,313	1,476	5,771	7,094	37,752	41,591	29,511	33,174
NEW ENGLAND	66	70	871	1,437	2,155	2,475	2,050	2,246
Maine	3	5	171	241	132	165	99	67
N.H.	2	5	50	77	136	183	140	215
Vt.	4	2	88	69	92	144	85	114
Mass.	24	26	219	498	1,155	1,295	1,137	1,329
R.I.	5	14	95	103	129	147	147	34
Conn.	28	18	248	449	511	541	442	487
MID. ATLANTIC	328	417	1,124	1,575	4,783	6,557	4,082	5,675
Upstate N.Y.	72	88	803	1,076	1,403	1,572	1,268	1,348
N.Y. City	170	237	U	U	1,349	1,876	1,173	1,441
N.J.	48	58	170	223	979	1,469	685	1,370
Pa.	38	34	151	276	1,052	1,640	956	1,516
E.N. CENTRAL	143	144	146	124	5,304	6,215	3,336	4,790
Ohio	18	15	36	58	1,294	1,478	1,046	1,129
Ind.	21	10	13	12	530	671	406	519
Ill.	54	59	10	N	1,553	1,905	399	1,564
Mich.	40	48	87	35	933	1,158	922	1,074
Wis.	10	12	-	19	994	1,003	563	504
W.N. CENTRAL	80	100	676	697	2,219	2,265	2,207	2,299
Minn.	47	63	113	117	633	564	662	647
Iowa	13	7	156	149	261	365	197	289
Mo.	15	14	15	42	751	613	889	842
N. Dak.	-	3	139	143	51	60	49	67
S. Dak.	-	1	163	151	96	125	116	132
Nebr.	1	2	3	7	208	188	78	47
Kans.	4	10	87	88	219	350	216	275
S. ATLANTIC	352	313	2,067	2,300	8,853	8,597	6,100	6,090
Del.	1	3	43	49	142	77	153	123
Md.	98	88	391	437	876	916	983	882
D.C.	18	19	-	-	69	84	U	U
Va.	71	59	576	543	1,227	1,076	980	859
W. Va.	4	2	107	76	168	157	150	163
N.C.	34	30	404	551	1,313	1,297	1,243	1,413
S.C.	17	6	133	144	691	631	492	540
Ga.	29	39	231	303	1,585	1,712	1,644	1,541
Fla.	80	67	182	197	2,782	2,647	455	569
E.S. CENTRAL	25	34	252	273	2,145	2,316	1,066	1,565
Ky.	7	7	35	32	410	362	-	124
Tenn.	9	16	93	141	571	589	513	709
Ala.	7	6	123	98	584	688	476	570
Miss.	2	5	1	2	580	677	77	162
W.S. CENTRAL	17	73	107	28	3,898	4,817	3,599	3,158
Ark.	3	1	14	28	633	595	120	375
La.	11	15	-	-	578	768	568	802
Okla.	2	3	93	N	455	475	320	232
Tex.	1	54	-	-	2,232	2,979	2,591	1,749
MOUNTAIN	44	62	197	249	3,035	2,524	2,487	2,001
Mont.	4	1	59	54	83	76	1	43
Idaho	3	8	5	N	134	121	98	96
Wyo.	1	-	44	66	67	67	49	60
Colo.	17	18	1	42	695	534	701	499
N. Mex.	2	12	9	6	368	301	245	261
Ariz.	9	9	66	48	956	833	783	697
Utah	4	2	8	27	547	349	557	122
Nev.	4	12	5	6	185	243	53	223
PACIFIC	258	263	331	411	5,360	5,825	4,584	5,350
Wash.	28	20	-	-	648	524	795	681
Oreg.	21	16	2	7	409	322	497	335
Calif.	196	214	322	379	3,923	4,629	2,996	3,995
Alaska	1	4	7	25	54	56	30	37
Hawaii	12	9	-	-	326	294	266	302
Guam	-	2	-	-	24	45	U	U
P.R.	-	-	73	51	476	815	U	U
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases

*Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	Shigellosis*				Syphilis (Primary & Secondary)		Tuberculosis	
	NETSS		PHLIS		Cum. 1999	Cum. 1998	Cum. 1999†	Cum. 1998†
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998				
UNITED STATES	15,787	21,954	7,606	12,207	6,174	6,942	13,727	17,043
NEW ENGLAND	846	407	800	362	59	77	421	442
Maine	5	14	-	-	-	1	20	12
N.H.	17	16	17	22	1	2	10	-
Vt.	8	7	4	4	3	4	2	5
Mass.	716	263	701	258	36	43	237	262
R.I.	31	36	18	13	3	1	42	56
Conn.	69	71	60	65	16	26	110	107
MID. ATLANTIC	957	2,361	454	1,672	198	324	2,475	3,032
Upstate N.Y.	290	639	67	223	23	38	307	368
N.Y. City	292	706	82	582	89	84	1,317	1,412
N.J.	197	661	155	613	53	105	507	621
Pa.	178	355	150	254	33	97	344	631
E.N. CENTRAL	2,974	2,987	1,297	1,556	1,154	1,022	1,301	1,679
Ohio	416	546	141	150	88	133	250	231
Ind.	337	175	101	43	443	211	137	172
Ill.	1,115	1,563	592	1,289	393	408	537	810
Mich.	504	274	382	4	230	211	282	359
Wis.	602	429	81	70	U	59	95	107
W.N. CENTRAL	1,140	1,062	739	616	108	139	473	487
Minn.	253	298	240	329	9	9	189	149
Iowa	70	68	48	46	9	3	54	51
Mo.	673	208	357	134	72	106	171	170
N. Dak.	3	10	2	3	-	-	6	10
S. Dak.	18	33	10	23	-	-	17	23
Nebr.	86	369	35	19	8	7	17	30
Kans.	37	76	47	62	10	13	19	54
S. ATLANTIC	2,442	4,283	498	1,264	1,965	2,531	2,863	3,223
Del.	13	46	9	38	8	21	12	36
Md.	160	200	62	69	311	663	263	292
D.C.	51	37	U	U	60	89	50	104
Va.	130	195	63	87	150	148	268	339
W. Va.	8	11	5	8	2	3	37	42
N.C.	206	359	86	181	428	717	430	498
S.C.	124	185	62	98	246	313	222	278
Ga.	238	1,075	85	246	419	292	574	515
Fla.	1,512	2,175	126	537	341	285	1,007	1,119
E.S. CENTRAL	1,163	1,524	485	1,205	1,121	1,199	857	1,218
Ky.	233	156	-	45	101	103	166	173
Tenn.	659	857	428	933	630	567	333	458
Ala.	117	456	47	220	205	274	302	381
Miss.	154	55	10	7	185	255	56	206
W.S. CENTRAL	2,579	4,607	2,375	1,443	994	1,053	1,479	2,397
Ark.	74	204	23	67	79	108	167	146
La.	179	337	128	287	298	420	U	278
Okla.	536	651	153	210	175	98	133	163
Tex.	1,790	3,415	2,071	879	442	427	1,179	1,810
MOUNTAIN	1,177	1,306	741	754	232	238	428	554
Mont.	10	8	-	3	1	-	13	19
Idaho	28	20	12	14	1	2	15	11
Wyo.	3	4	1	1	-	1	3	4
Colo.	198	227	157	164	2	10	U	73
N. Mex.	152	301	94	176	11	22	61	67
Ariz.	626	633	405	340	209	184	215	213
Utah	70	48	66	36	2	4	39	51
Nev.	90	65	6	20	6	15	82	116
PACIFIC	2,509	3,417	217	3,335	343	359	3,430	4,011
Wash.	122	230	99	190	65	27	177	259
Oreg.	95	192	88	155	10	6	99	137
Calif.	2,255	2,933	-	2,933	264	321	2,921	3,381
Alaska	4	11	3	7	1	1	59	54
Hawaii	33	51	27	50	3	4	174	180
Guam	8	39	U	U	1	1	11	84
P.R.	113	65	U	U	159	175	41	140
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases

*Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).

† Cumulative reports of provisional tuberculosis cases for 1999 are unavailable ("U") for some areas using the Tuberculosis Information System (TIMS).

TABLE III. Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	<i>H. influenzae</i> , invasive		Hepatitis (Viral), by type				Measles (Rubeola)				Total	
	Cum. 1999†	Cum. 1998	A		B		Indigenous		Imported*		Cum. 1999	Cum. 1998
			Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	1999	Cum. 1999	1999	Cum. 1999		
UNITED STATES	1,142	1,048	16,573	21,838	6,357	9,455	-	60	-	25	85	91
NEW ENGLAND	101	70	304	292	136	216	-	6	-	5	11	3
Maine	8	4	14	20	1	5	U	-	U	-	-	-
N.H.	21	10	18	16	16	20	U	-	U	1	1	-
Vt.	6	9	23	17	3	10	-	-	-	-	-	1
Mass.	39	39	120	124	43	79	-	5	-	3	8	2
R.I.	6	6	26	17	34	68	-	-	-	-	-	-
Conn.	21	2	103	98	39	34	-	1	-	1	2	-
MID. ATLANTIC	174	174	939	1,672	582	1,203	-	-	-	2	2	15
Upstate N.Y.	80	63	270	352	181	237	-	-	-	2	2	3
N.Y. City	41	48	312	589	204	419	-	-	-	-	-	-
N.J.	49	51	112	338	41	204	-	-	-	-	-	8
Pa.	4	12	245	393	156	343	-	-	-	-	-	4
E.N. CENTRAL	169	179	2,816	3,623	675	1,401	-	1	-	2	3	16
Ohio	61	47	650	372	94	75	-	-	-	-	-	1
Ind.	25	47	109	166	43	111	-	1	-	1	2	3
Ill.	68	65	744	799	1	229	-	-	-	-	-	1
Mich.	14	13	1,244	2,099	513	474	-	-	-	1	1	10
Wis.	1	7	69	187	24	512	U	-	U	-	-	1
W.N. CENTRAL	87	88	1,074	1,307	383	406	-	1	-	-	1	-
Minn.	47	66	109	130	57	49	-	1	-	-	1	-
Iowa	8	3	145	399	39	55	-	-	-	-	-	-
Mo.	23	11	707	604	239	245	-	-	-	-	-	-
N. Dak.	1	-	3	3	2	4	U	-	U	-	-	-
S. Dak.	1	1	9	39	1	3	-	-	-	-	-	-
Nebr.	3	1	61	26	18	23	-	-	-	-	-	-
Kans.	4	6	40	106	27	27	U	-	U	-	-	-
S. ATLANTIC	259	186	2,011	2,009	1,228	1,060	-	14	-	6	20	8
Del.	-	1	2	6	1	4	-	-	-	-	-	1
Md.	68	54	354	404	169	135	-	-	-	-	-	1
D.C.	5	-	59	66	24	19	-	-	-	-	-	-
Va.	22	19	175	216	96	102	-	14	-	4	18	2
W. Va.	7	6	40	7	23	11	U	-	U	-	-	-
N.C.	36	24	162	126	224	243	-	-	-	-	-	-
S.C.	6	3	47	46	64	53	-	-	-	-	-	-
Ga.	68	51	453	657	186	145	-	-	-	-	-	2
Fla.	47	28	719	481	441	348	-	-	-	2	2	2
E.S. CENTRAL	66	61	381	403	459	484	-	2	-	-	2	2
Ky.	8	7	63	32	44	48	-	2	-	-	2	-
Tenn.	38	36	147	222	207	268	-	-	-	-	-	1
Ala.	17	15	60	80	78	74	-	-	-	-	-	1
Miss.	3	3	111	69	130	94	U	-	U	-	-	-
W.S. CENTRAL	61	56	3,831	3,957	916	2,141	-	10	-	4	14	-
Ark.	2	-	74	79	74	106	-	5	-	-	5	-
La.	13	23	204	135	167	179	-	-	-	-	-	-
Okla.	42	30	517	615	147	121	-	-	-	-	-	-
Tex.	4	3	3,036	3,128	528	1,735	U	5	U	4	9	-
MOUNTAIN	112	120	1,264	3,085	550	795	-	4	-	-	4	5
Mont.	3	-	17	94	17	5	-	-	-	-	-	-
Idaho	1	2	45	233	29	49	-	-	-	-	-	-
Wyo.	1	1	8	37	13	10	U	-	U	-	-	-
Colo.	12	21	209	342	94	102	-	-	-	-	-	-
N. Mex.	19	8	53	151	171	310	-	-	-	-	-	-
Ariz.	61	63	735	1,814	141	173	-	1	-	-	1	5
Utah	11	6	66	193	37	65	U	2	U	-	2	-
Nev.	4	19	131	221	48	81	U	1	U	-	1	-
PACIFIC	113	114	3,953	5,490	1,428	1,749	-	22	-	6	28	42
Wash.	7	9	380	940	76	108	-	-	-	-	-	1
Oreg.	40	41	238	430	100	200	-	9	-	-	9	-
Calif.	48	50	3,302	4,049	1,220	1,410	U	13	U	4	17	8
Alaska	9	4	12	17	18	13	-	-	-	-	-	33
Hawaii	9	10	21	54	14	18	U	-	U	2	2	-
Guam	-	-	2	1	2	2	U	1	U	-	1	-
P.R.	1	2	236	86	167	243	-	-	-	-	-	-
V.I.	U	U	U	U	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable - : no reported cases

*For imported measles, cases include only those resulting from importation from other countries.

†Of 224 cases among children aged <5 years, serotype was reported for 114 and of those, 32 were type b.

TABLE III. (Cont'd.) Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending December 25, 1999, and December 26, 1998 (51st Week)

Reporting Area	Meningococcal Disease		Mumps			Pertussis			Rubella		
	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998
UNITED STATES	2,282	2,573	2	338	633	150	5,917	6,836	1	237	355
NEW ENGLAND	108	120	-	8	10	7	743	1,056	-	7	38
Maine	5	7	U	-	-	U	-	5	U	-	-
N.H.	13	12	U	1	-	U	78	129	U	-	-
Vt.	5	5	-	1	-	4	86	79	-	-	-
Mass.	62	58	-	4	6	3	510	781	-	7	8
R.I.	7	8	-	2	1	-	38	16	-	-	1
Conn.	16	30	-	-	3	-	31	46	-	-	29
MID. ATLANTIC	209	279	1	36	194	56	1,009	645	-	25	149
Upstate N.Y.	69	79	-	14	14	40	803	337	-	21	114
N.Y. City	50	34	-	3	155	-	10	49	-	-	19
N.J.	47	57	-	-	6	-	12	29	-	1	14
Pa.	43	109	1	19	19	16	184	230	-	3	2
E.N. CENTRAL	380	391	-	46	81	39	608	872	-	2	-
Ohio	129	140	-	20	29	33	324	291	-	-	-
Ind.	70	72	-	5	7	2	77	184	-	1	-
Ill.	97	101	-	12	10	3	85	144	-	1	-
Mich.	45	44	-	7	32	1	70	70	-	-	-
Wis.	39	34	U	2	3	U	52	183	U	-	-
W.N. CENTRAL	239	225	-	14	33	10	442	638	-	127	40
Minn.	50	35	-	1	13	8	234	342	-	5	-
Iowa	43	44	-	8	11	2	77	74	-	29	-
Mo.	100	80	-	1	4	-	65	49	-	3	2
N. Dak.	4	5	U	1	2	U	18	42	U	-	-
S. Dak.	11	8	-	-	-	-	7	8	-	-	-
Nebr.	13	17	-	-	-	-	6	20	-	90	-
Kans.	18	36	U	3	3	U	35	103	U	-	38
S. ATLANTIC	416	437	1	51	50	11	434	346	1	39	19
Del.	8	2	-	-	-	-	6	5	-	-	-
Md.	54	34	-	7	-	-	107	66	-	1	1
D.C.	2	4	-	2	-	-	1	1	-	-	-
Va.	55	48	-	10	10	-	51	54	-	-	1
W. Va.	8	18	U	-	-	U	4	4	U	-	-
N.C.	47	58	1	9	11	1	99	104	-	37	13
S.C.	44	57	-	5	7	10	29	27	-	-	-
Ga.	63	97	-	4	2	-	40	28	-	-	-
Fla.	135	119	-	14	20	-	97	57	1	1	4
E.S. CENTRAL	152	198	-	14	19	2	97	158	-	1	2
Ky.	32	37	-	-	1	2	29	88	-	-	-
Tenn.	64	69	-	-	2	-	45	37	-	-	2
Ala.	32	55	-	11	9	-	21	27	-	1	-
Miss.	24	37	U	3	7	U	2	6	U	-	-
W.S. CENTRAL	203	301	-	41	60	-	165	370	-	15	89
Ark.	35	31	-	-	13	-	19	84	-	6	-
La.	58	61	-	11	7	-	10	9	-	-	-
Okla.	36	42	-	1	-	-	12	33	-	-	-
Tex.	74	167	U	29	40	U	124	244	U	9	89
MOUNTAIN	141	151	-	28	40	21	783	1,236	-	16	5
Mont.	4	4	-	-	-	-	2	13	-	-	-
Idaho	14	14	-	3	7	-	140	246	-	-	-
Wyo.	5	8	U	-	1	U	2	8	U	-	-
Colo.	36	31	-	5	7	8	221	348	-	1	-
N. Mex.	16	26	N	N	N	8	220	100	-	-	1
Ariz.	42	45	-	8	6	5	126	213	-	13	1
Utah	16	13	U	7	5	U	61	267	U	1	2
Nev.	8	10	U	5	14	U	11	41	U	1	1
PACIFIC	434	471	-	100	146	4	1,636	1,515	-	5	13
Wash.	65	65	-	2	11	4	620	332	-	-	8
Oreg.	77	88	N	N	N	-	58	89	-	-	-
Calif.	277	310	U	83	107	U	919	1,054	U	5	3
Alaska	6	3	-	3	3	-	5	15	-	-	-
Hawaii	9	5	U	12	25	U	34	25	U	-	2
Guam	2	2	U	1	5	U	1	1	U	-	-
P.R.	9	11	-	-	7	-	20	9	-	-	14
V.I.	U	U	U	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U	U	U	U

N: Not notifiable

U: Unavailable

- : no reported cases

TABLE IV. Deaths in 122 U.S. cities*, week ending December 25, 1999 (51st Week)

Reporting Area	All Ages	All Causes, By Age (years)					P&I †	Reporting Area	All Ages	All Causes, By Age (years)					P&I †
		>65	45-64	25-44	1-24	<1				Total	>65	45-65	25-44	1-24	
NEW ENGLAND	481	349	83	31	8	9	52	S. ATLANTIC	1,120	729	253	79	34	24	76
Boston, Mass.	133	88	24	12	4	5	12	Atlanta, Ga.	U	U	U	U	U	U	U
Bridgeport, Conn.	51	40	9	2	-	-	8	Baltimore, Md.	277	153	80	25	15	4	32
Cambridge, Mass.	13	12	1	-	-	-	1	Charlotte, N.C.	82	54	16	3	5	4	4
Fall River, Mass.	28	22	5	1	-	-	3	Jacksonville, Fla.	134	88	31	11	-	3	9
Hartford, Conn.	U	U	U	U	U	U	U	Miami, Fla.	120	77	31	9	1	2	10
Lowell, Mass.	36	29	3	4	-	-	5	Norfolk, Va.	40	32	5	2	-	1	-
Lynn, Mass.	16	13	3	-	-	-	2	Richmond, Va.	49	27	10	7	4	1	1
New Bedford, Mass.	23	16	3	3	1	-	2	Savannah, Ga.	57	41	14	1	-	1	4
New Haven, Conn.	44	28	9	4	1	2	4	St. Petersburg, Fla.	59	52	2	2	1	2	4
Providence, R.I.	57	45	9	1	1	-	7	Tampa, Fla.	189	140	35	10	3	1	7
Somerville, Mass.	5	4	1	-	-	-	-	Washington, D.C.	101	62	20	9	5	5	5
Springfield, Mass.	44	30	9	3	1	1	6	Wilmington, Del.	12	3	9	-	-	-	-
Waterbury, Conn.	31	22	7	1	-	1	2	E.S. CENTRAL	667	440	112	71	36	7	56
Worcester, Mass.	U	U	U	U	U	U	U	Birmingham, Ala.	182	116	33	23	9	-	18
MID. ATLANTIC	2,031	1,471	387	106	31	36	93	Chattanooga, Tenn.	53	38	7	5	2	1	4
Albany, N.Y.	67	48	12	6	-	1	8	Knoxville, Tenn.	64	45	15	3	1	-	8
Allentown, Pa.	U	U	U	U	U	U	U	Lexington, Ky.	54	39	9	6	-	-	4
Buffalo, N.Y.	U	U	U	U	U	U	U	Memphis, Tenn.	210	130	30	26	20	4	14
Camden, N.J.	27	13	5	4	1	4	-	Mobile, Ala.	80	53	13	8	4	2	3
Elizabeth, N.J.	15	11	3	-	1	-	-	Montgomery, Ala.	24	19	5	-	-	-	5
Erie, Pa. §	46	39	4	2	1	-	4	Nashville, Tenn.	U	U	U	U	U	U	U
Jersey City, N.J.	37	27	3	5	1	1	1	W.S. CENTRAL	1,167	754	248	102	34	29	80
New York City, N.Y.	1,144	812	240	62	17	13	33	Austin, Tex.	69	40	15	11	2	1	4
Newark, N.J.	U	U	U	U	U	U	U	Baton Rouge, La.	U	U	U	U	U	U	U
Paterson, N.J.	16	10	3	2	-	1	-	Corpus Christi, Tex.	56	45	6	4	-	1	2
Philadelphia, Pa.	281	206	48	12	7	8	11	Dallas, Tex.	156	93	37	11	6	9	7
Pittsburgh, Pa. §	59	41	11	-	3	4	9	El Paso, Tex.	72	48	12	5	5	2	1
Reading, Pa.	33	26	6	1	-	-	3	Ft. Worth, Tex.	86	58	20	3	-	5	8
Rochester, N.Y.	110	87	17	5	-	1	14	Houston, Tex.	393	229	99	47	10	8	30
Schenectady, N.Y.	18	15	1	1	-	1	2	Little Rock, Ark.	56	39	6	5	4	2	2
Scranton, Pa. §	36	29	7	-	-	-	2	New Orleans, La.	U	U	U	U	U	U	U
Syracuse, N.Y.	103	77	21	4	-	1	5	San Antonio, Tex.	176	128	31	11	5	1	21
Trenton, N.J.	17	11	3	2	-	1	1	Shreveport, La.	U	U	U	U	U	U	U
Utica, N.Y.	22	19	3	-	-	-	-	Tulsa, Okla.	103	74	22	5	2	-	5
Yonkers, N.Y.	U	U	U	U	U	U	U	MOUNTAIN	1,061	751	208	60	19	22	116
E.N. CENTRAL	1,544	1,121	267	88	27	40	122	Albuquerque, N.M.	115	82	23	7	2	1	13
Akron, Ohio	38	31	3	2	1	1	8	Boise, Idaho	43	33	8	1	-	1	7
Canton, Ohio	30	25	4	-	-	1	2	Colo. Springs, Colo.	86	63	17	3	1	2	7
Chicago, Ill.	366	244	71	31	6	13	33	Denver, Colo.	120	84	22	7	1	6	16
Cincinnati, Ohio	79	54	11	7	1	6	5	Las Vegas, Nev.	218	151	46	10	4	6	20
Cleveland, Ohio	102	69	28	3	1	1	-	Ogden, Utah	19	13	3	3	-	-	1
Columbus, Ohio	165	111	31	16	2	5	10	Phoenix, Ariz.	171	108	36	16	6	5	14
Dayton, Ohio	111	90	15	6	-	-	9	Pueblo, Colo.	17	14	3	-	-	-	3
Detroit, Mich.	U	U	U	U	U	U	U	Salt Lake City, Utah	95	69	15	8	2	1	9
Evansville, Ind.	36	30	6	-	-	-	5	Tucson, Ariz.	177	134	35	5	3	-	26
Fort Wayne, Ind.	60	43	10	5	1	1	3	PACIFIC	1,034	730	180	83	23	18	96
Gary, Ind.	10	5	3	-	2	-	1	Berkeley, Calif.	14	10	2	1	-	1	2
Grand Rapids, Mich.	28	23	5	-	-	-	3	Fresno, Calif.	91	63	16	10	1	1	9
Indianapolis, Ind.	128	87	26	5	8	2	10	Glendale, Calif.	5	3	2	-	-	-	-
Lansing, Mich.	52	42	9	1	-	-	4	Honolulu, Hawaii	69	57	6	3	1	2	4
Milwaukee, Wis.	94	72	10	4	3	5	10	Long Beach, Calif.	62	49	10	3	-	-	11
Peoria, Ill.	45	34	7	2	-	2	3	Los Angeles, Calif.	118	54	34	21	5	4	3
Rockford, Ill.	30	23	4	2	1	-	1	Pasadena, Calif.	24	17	6	1	-	-	2
South Bend, Ind.	27	23	1	1	-	2	-	Portland, Oreg.	U	U	U	U	U	U	U
Toledo, Ohio	88	69	15	2	1	1	7	Sacramento, Calif.	U	U	U	U	U	U	U
Youngstown, Ohio	55	46	8	1	-	-	8	San Diego, Calif.	141	101	24	10	3	3	10
W.N. CENTRAL	555	385	106	34	12	18	42	San Francisco, Calif.	U	U	U	U	U	U	U
Des Moines, Iowa	U	U	U	U	U	U	U	San Jose, Calif.	249	181	44	12	9	3	35
Duluth, Minn.	31	24	5	-	-	2	5	Santa Cruz, Calif.	25	18	5	2	-	-	4
Kansas City, Kans.	26	19	5	1	-	1	3	Seattle, Wash.	144	104	18	16	3	3	10
Kansas City, Mo.	123	76	26	14	4	3	5	Spokane, Wash.	56	46	6	2	1	1	5
Lincoln, Nebr.	28	21	3	1	-	3	6	Tacoma, Wash.	36	27	7	2	-	-	1
Minneapolis, Minn.	129	95	22	7	1	4	10	TOTAL	9,660 †	6,730	1,844	654	224	203	733
Omaha, Nebr.	U	U	U	U	U	U	U								
St. Louis, Mo.	85	52	21	5	5	2	-								
St. Paul, Minn.	65	49	10	4	-	2	9								
Wichita, Kans.	68	49	14	2	2	1	4								

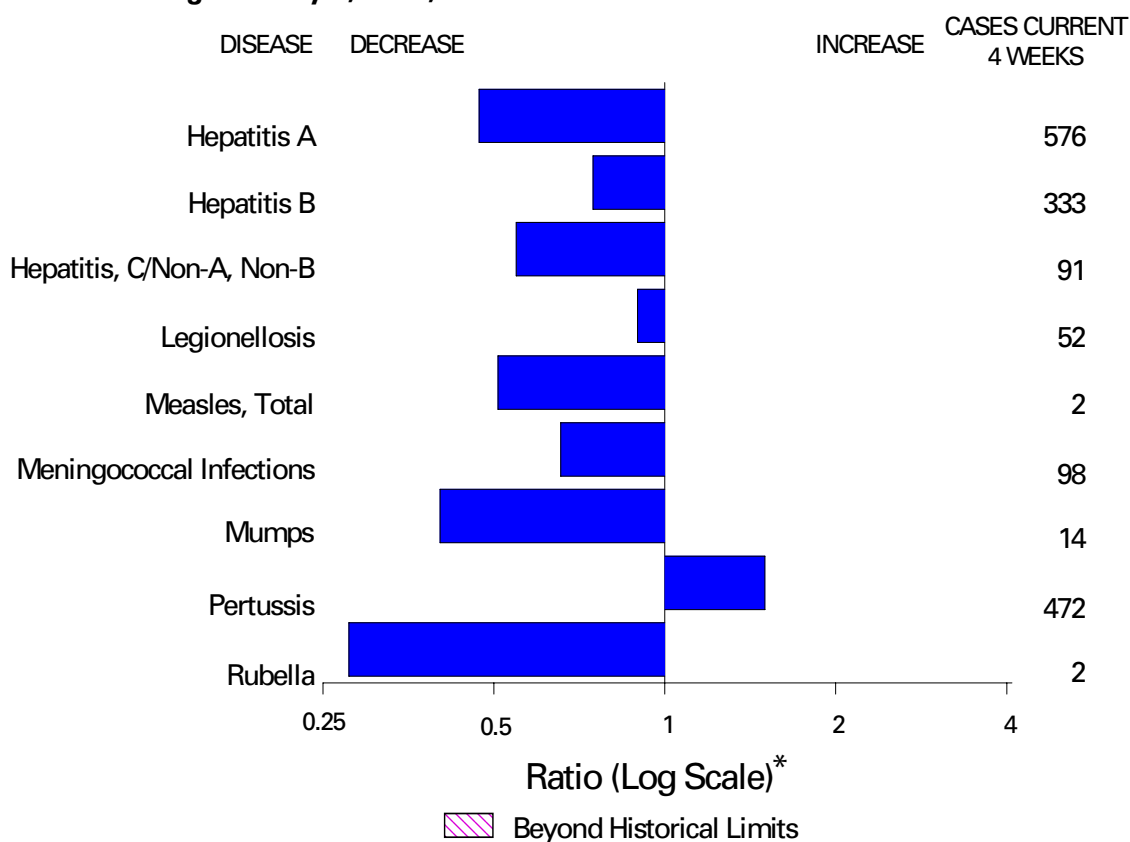
U: Unavailable -no reported cases

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

† Pneumonia and influenza.

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

¶ Total includes unknown ages.

FIGURE I. Selected notifiable disease reports, comparison of provisional 4-week totals ending January 1, 2000, with historical data — United States

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

TABLE 1. Summary — provisional cases of selected notifiable diseases, United States, cumulative, week ending January 1, 2000 (52nd Week)

	Cum. 1999		Cum. 1999
Anthrax	-	HIV infection, pediatric*§	159
Brucellosis*	49	Plague	8
Cholera	3	Poliomyelitis, paralytic	-
Congenital rubella syndrome	8	Psittacosis*	16
Cyclosporiasis*	51	Rabies, human	-
Diphtheria	1	Rocky Mountain spotted fever (RMSF)	567
Encephalitis: California*	61	Streptococcal disease, invasive Group A	2,196
eastern equine*	5	Streptococcal toxic-shock syndrome*	41
St. Louis*	7	Syphilis, congenital [¶]	277
western equine*	1	Tetanus	33
Ehrlichiosis: human granulocytic (HGE)*	163	Toxic-shock syndrome	117
human monocytic (HME)*	40	Trichinosis	11
Hansen Disease*	98	Typhoid fever	299
Hantavirus pulmonary syndrome* [†]	21	Yellow fever	1
Hemolytic uremic syndrome, post-diarrheal*	119		

-: no reported cases

* Not notifiable in all states.

[†] Updated weekly from reports to the Division of Viral and Rickettsial Diseases, National Center for Infectious Diseases (NCID).

[§] Updated monthly from reports to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention (NCHSTP), last update December 26, 1999.

[¶] Updated from reports to the Division of STD Prevention, NCHSTP.

TABLE II. Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	AIDS		Chlamydia		Cryptosporidiosis		<i>Escherichia coli</i> O157:H7*			
	Cum. 1999 ¹	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	NETSS		PHLIS	
							Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	45,000	46,019	591,504	597,125	2,379	3,793	3,483	3,161	2,476	2,172
NEW ENGLAND	2,293	1,786	20,599	20,092	163	152	396	340	347	286
Maine	80	31	904	1,073	30	33	38	37	-	-
N.H.	46	36	942	960	20	18	34	48	34	47
Vt.	20	20	472	413	36	26	32	21	21	18
Mass.	1,454	906	8,874	8,362	53	68	173	153	187	164
R.I.	108	127	2,300	2,307	6	7	27	14	26	1
Conn.	585	666	7,107	6,977	18	U	92	67	79	56
MID. ATLANTIC	11,713	12,525	57,408	61,517	429	580	328	312	101	87
Upstate N.Y.	1,690	1,576	N	N	184	343	266	231	9	-
N.Y. City	6,013	7,093	21,963	26,129	116	208	11	14	17	13
N.J.	2,043	2,118	11,125	11,686	36	29	51	67	46	53
Pa.	1,967	1,738	24,320	23,702	93	N	N	N	29	21
E.N. CENTRAL	3,268	3,376	87,491	101,474	580	737	726	464	509	374
Ohio	547	682	27,104	27,786	67	75	267	128	214	77
Ind.	363	485	11,595	11,267	40	63	114	106	67	54
Ill.	1,557	1,295	26,613	26,363	73	84	227	113	81	81
Mich.	649	711	22,179	22,156	49	39	118	117	78	74
Wis.	152	203	U	13,902	351	476	N	N	69	88
W.N. CENTRAL	1,069	917	34,317	35,929	208	374	620	499	537	408
Minn.	190	188	6,795	6,970	79	173	238	209	185	215
Iowa	87	72	4,731	5,174	56	66	116	93	75	60
Mo.	531	440	12,950	12,670	31	29	67	55	68	64
N. Dak.	7	6	707	1,045	18	34	17	12	18	15
S. Dak.	16	15	1,530	1,572	7	25	47	37	62	40
Nebr.	67	73	3,378	2,911	16	36	114	57	113	-
Kans.	171	123	4,226	5,587	1	11	21	36	16	14
S. ATLANTIC	12,460	12,074	124,550	116,821	396	430	350	404	181	179
Del.	186	172	2,761	2,608	-	3	6	-	3	2
Md.	1,525	1,631	11,256	7,560	17	21	44	43	4	15
D.C.	838	988	N	N	8	25	1	1	U	U
Va.	943	995	13,734	13,561	28	22	77	N	60	55
W. Va.	69	84	1,240	2,386	3	3	16	14	11	10
N.C.	794	788	21,812	22,197	35	N	74	186	52	47
S.C.	959	777	12,983	18,312	-	-	21	15	14	12
Ga.	1,678	1,293	31,702	25,242	147	152	41	84	-	-
Fla.	5,468	5,346	29,062	24,955	158	204	70	61	37	38
E.S. CENTRAL	1,933	1,873	44,924	40,438	48	27	134	120	69	67
Ky.	277	280	7,379	6,083	8	10	48	36	-	-
Tenn.	759	694	13,850	13,717	13	11	55	54	44	41
Ala.	476	484	12,384	10,065	15	N	25	24	21	20
Miss.	421	415	11,311	10,573	12	6	6	6	4	6
W.S. CENTRAL	4,377	5,387	88,218	88,722	88	932	139	137	129	108
Ark.	194	203	5,585	4,123	2	6	15	12	8	10
La.	854	947	15,948	14,770	25	20	12	14	15	7
Okla.	148	285	8,186	9,393	13	N	39	26	29	9
Tex.	3,181	3,952	58,499	60,436	48	906	73	85	77	82
MOUNTAIN	1,742	1,625	30,509	34,291	101	124	342	367	227	249
Mont.	13	29	1,496	1,330	13	10	25	17	-	5
Idaho	25	32	1,750	2,016	8	17	78	43	43	25
Wyo.	15	6	788	725	1	2	17	53	14	55
Colo.	319	313	5,474	9,113	14	19	112	90	88	69
N. Mex.	93	209	3,931	4,179	42	48	13	19	7	20
Ariz.	880	639	12,069	11,399	15	19	38	46	24	29
Utah	155	139	2,219	2,209	N	N	39	75	49	22
Nev.	242	258	2,782	3,320	8	9	20	24	2	24
PACIFIC	6,145	6,456	103,488	97,841	366	437	448	518	376	414
Wash.	360	436	11,973	10,998	N	N	172	143	159	131
Oreg.	225	204	5,901	5,855	93	70	74	107	69	102
Calif.	5,445	5,626	80,959	76,477	273	363	190	261	136	165
Alaska	15	29	1,859	1,907	-	1	1	7	1	-
Hawaii	100	161	2,796	2,604	-	3	11	-	11	16
Guam	10	2	299	432	-	-	N	N	U	U
P.R.	1,247	1,710	U	U	-	N	9	5	U	U
V.I.	39	35	U	U	U	U	U	U	U	U
Amer. Samoa	-	-	U	U	U	U	U	U	U	U
C.N.M.I.	-	-	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases C.N.M.I.: Commonwealth of Northern Mariana Islands
¹Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).

¹Updated monthly from reports to the Division of HIV/AIDS Prevention—Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention, last update December 26, 1999.

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	Gonorrhea		Hepatitis C/NA,NB		Legionellosis		Lyme Disease	
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	327,510	354,482	3,328	3,518	956	1,355	13,306	16,801
NEW ENGLAND	6,469	6,061	15	61	84	98	3,856	5,056
Maine	71	67	2	-	3	1	41	78
N.H.	110	91	-	-	8	7	26	45
Vt.	50	38	7	6	15	7	24	11
Mass.	2,476	2,258	3	51	31	34	999	699
R.I.	586	430	3	4	12	26	464	789
Conn.	3,176	3,177	-	-	15	23	2,302	3,434
MID. ATLANTIC	38,806	38,559	97	246	191	332	7,369	9,311
Upstate N.Y.	6,869	7,304	62	124	63	113	4,046	4,409
N.Y. City	13,701	12,100	-	-	9	37	45	231
N.J.	6,294	7,858	-	U	18	18	966	1,911
Pa.	11,942	11,297	35	122	101	164	2,312	2,760
E.N. CENTRAL	57,625	69,359	1,444	673	264	420	229	774
Ohio	16,496	18,275	4	8	85	133	78	47
Ind.	6,050	6,643	1	6	46	83	21	39
Ill.	19,726	21,735	48	41	27	54	12	14
Mich.	15,353	16,359	800	470	60	82	1	17
Wis.	U	6,347	591	148	46	68	117	657
W.N. CENTRAL	14,564	17,912	334	52	57	80	327	317
Minn.	2,603	2,708	13	20	13	12	253	261
Iowa	1,160	1,616	-	8	15	11	22	27
Mo.	7,318	9,463	309	15	17	18	28	12
N. Dak.	71	78	1	-	2	-	1	-
S. Dak.	190	221	-	-	3	7	-	-
Nebr.	1,396	1,204	5	5	7	21	11	4
Kans.	1,826	2,622	6	4	-	11	12	13
S. ATLANTIC	94,256	96,663	199	197	152	170	1,172	977
Del.	1,662	1,556	1	-	15	13	64	77
Md.	9,343	9,987	42	23	34	38	826	659
D.C.	3,365	4,480	1	-	5	9	6	8
Va.	9,399	9,265	11	13	40	27	119	73
W. Va.	387	856	21	9	N	N	19	13
N.C.	19,426	19,221	34	26	15	14	74	63
S.C.	8,592	11,585	22	20	12	12	7	8
Ga.	21,433	20,630	3	9	3	8	-	5
Fla.	20,649	19,083	64	97	28	49	57	71
E.S. CENTRAL	35,567	38,787	333	284	48	66	108	115
Ky.	3,349	3,577	25	23	22	27	19	27
Tenn.	11,093	11,840	117	173	22	23	57	47
Ala.	10,933	12,737	1	5	4	9	19	24
Miss.	10,192	10,633	190	83	-	7	13	17
W.S. CENTRAL	49,772	54,772	467	655	27	42	61	68
Ark.	2,984	3,953	19	30	-	2	7	8
La.	12,804	12,743	253	137	4	6	11	15
Okla.	4,015	5,243	16	25	5	17	8	13
Tex.	29,969	32,833	179	463	18	17	35	32
MOUNTAIN	9,118	9,173	162	387	51	78	18	19
Mont.	54	50	5	8	-	2	-	-
Idaho	89	181	8	87	3	3	5	7
Wyo.	44	36	58	102	-	1	3	1
Colo.	2,386	2,033	23	32	15	20	-	-
N. Mex.	819	1,011	8	97	1	2	1	4
Ariz.	4,278	4,181	46	19	7	21	2	1
Utah	254	236	6	22	19	21	5	-
Nev.	1,194	1,445	8	20	6	8	2	6
PACIFIC	21,333	23,196	277	963	82	69	166	164
Wash.	2,133	1,948	20	29	17	15	11	7
Oreg.	870	880	22	21	N	N	14	21
Calif.	17,627	19,531	235	859	64	52	141	135
Alaska	296	331	-	-	1	1	-	1
Hawaii	407	506	-	54	-	1	N	N
Guam	38	73	1	1	-	2	-	1
P.R.	337	382	-	-	-	-	N	N
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable

U: Unavailable

- : no reported cases

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	Malaria		Rabies, Animal		Salmonellosis*			
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	NETSS		PHLIS	
					Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	1,354	1,611	5,844	7,259	38,324	43,694	30,299	33,617
NEW ENGLAND	67	98	884	1,452	2,175	2,508	2,161	2,267
Maine	3	5	171	241	132	165	104	69
N.H.	2	6	50	83	136	187	143	216
Vt.	5	2	92	72	93	144	90	114
Mass.	24	27	223	498	1,174	1,312	1,191	1,346
R.I.	5	15	95	103	129	159	173	34
Conn.	28	43	253	455	511	541	460	488
MID. ATLANTIC	329	426	1,137	1,609	4,876	6,767	4,154	5,723
Upstate N.Y.	73	93	812	1,095	1,426	1,680	1,297	1,365
N.Y. City	170	240	U	U	1,398	1,895	1,216	1,456
N.J.	48	58	173	224	979	1,476	685	1,386
Pa.	38	35	152	290	1,073	1,716	956	1,516
E.N. CENTRAL	154	147	146	127	5,361	6,279	3,439	4,865
Ohio	18	15	36	59	1,320	1,491	1,090	1,139
Ind.	21	11	13	12	530	685	431	523
Ill.	61	59	10	N	1,565	1,921	399	1,591
Mich.	42	50	87	37	940	1,169	938	1,097
Wis.	12	12	-	19	1,006	1,013	581	515
W.N. CENTRAL	80	110	684	741	2,223	2,361	2,276	2,325
Minn.	47	71	115	119	633	601	677	656
Iowa	13	8	162	153	263	375	210	294
Mo.	15	15	15	42	752	632	904	852
N. Dak.	-	3	139	155	51	68	61	67
S. Dak.	-	1	163	166	96	132	118	134
Nebr.	1	2	3	7	209	190	81	47
Kans.	4	10	87	99	219	363	225	275
S. ATLANTIC	361	349	2,099	2,350	9,036	9,326	6,183	6,189
Del.	1	3	43	49	146	79	161	127
Md.	100	89	395	439	884	931	991	897
D.C.	18	19	-	10	69	84	U	U
Va.	73	61	578	549	1,261	1,135	983	878
W. Va.	4	2	111	77	178	181	150	164
N.C.	36	30	413	555	1,331	1,309	1,307	1,430
S.C.	17	6	133	147	698	667	492	544
Ga.	29	43	241	309	1,640	1,839	1,644	1,576
Fla.	83	96	185	215	2,829	3,101	455	573
E.S. CENTRAL	27	35	256	278	2,174	2,363	1,154	1,584
Ky.	7	7	35	32	413	364	-	124
Tenn.	9	17	95	142	571	624	587	720
Ala.	7	6	125	102	596	695	490	578
Miss.	4	5	1	2	594	680	77	162
W.S. CENTRAL	17	101	107	35	3,907	5,381	3,698	3,191
Ark.	3	2	14	35	642	616	120	380
La.	11	17	-	-	578	863	602	805
Okla.	2	4	93	N	455	501	338	236
Tex.	1	78	-	-	2,232	3,401	2,638	1,770
MOUNTAIN	44	68	198	251	3,098	2,601	2,541	2,029
Mont.	4	1	59	56	83	79	1	44
Idaho	3	8	5	N	135	122	98	97
Wyo.	1	-	45	66	68	70	49	61
Colo.	17	18	1	42	703	539	710	507
N. Mex.	2	12	9	6	374	306	245	265
Ariz.	9	15	66	48	978	885	807	707
Utah	4	2	8	27	572	355	578	122
Nev.	4	12	5	6	185	245	53	226
PACIFIC	275	277	333	416	5,474	6,108	4,693	5,444
Wash.	33	30	-	-	664	703	795	686
Oreg.	21	17	2	7	409	329	515	349
Calif.	208	217	324	384	4,008	4,724	3,087	4,065
Alaska	1	4	7	25	55	57	30	38
Hawaii	12	9	-	-	338	295	266	306
Guam	-	2	-	-	24	46	U	U
P.R.	-	1	73	52	476	901	U	U
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases

*Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	Shigellosis*				Syphilis (Primary & Secondary)		Tuberculosis	
	NETSS		PHLIS		Cum. 1999	Cum. 1998	Cum. 1999†	Cum. 1998†
	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998				
UNITED STATES	16,015	23,626	7,900	12,432	6,277	7,089	13,996	18,258
NEW ENGLAND	854	413	825	364	60	80	449	477
Maine	5	14	-	-	-	1	20	13
N.H.	17	18	17	22	1	2	10	-
Vt.	7	7	4	5	3	4	2	5
Mass.	725	266	714	259	37	46	263	282
R.I.	31	37	28	13	3	1	42	63
Conn.	69	71	62	65	16	26	112	114
MID. ATLANTIC	982	2,412	481	1,689	199	334	2,539	3,353
Upstate N.Y.	297	678	73	228	23	38	312	442
N.Y. City	300	710	103	589	89	90	1,329	1,558
N.J.	197	662	155	618	53	107	517	640
Pa.	188	362	150	254	34	99	381	713
E.N. CENTRAL	3,028	3,037	1,354	1,577	1,186	1,040	1,304	1,747
Ohio	424	566	143	154	90	134	253	231
Ind.	337	180	112	43	454	212	137	173
Ill.	1,134	1,573	592	1,305	393	424	537	850
Mich.	518	279	423	4	249	211	282	384
Wis.	615	439	84	71	U	59	95	109
W.N. CENTRAL	1,145	1,119	796	622	108	146	477	520
Minn.	253	331	252	333	9	9	189	161
Iowa	72	69	51	46	9	5	58	55
Mo.	676	221	361	136	72	109	171	184
N. Dak.	3	11	2	3	-	-	6	10
S. Dak.	18	33	10	23	-	1	17	23
Nebr.	86	372	66	19	8	8	17	31
Kans.	37	82	54	62	10	14	19	56
S. ATLANTIC	2,473	4,727	503	1,274	1,984	2,593	2,876	3,556
Del.	13	46	9	38	10	21	12	37
Md.	161	202	62	69	311	667	267	324
D.C.	51	37	U	U	60	89	50	105
Va.	131	200	63	87	153	149	268	339
W. Va.	9	11	5	8	2	3	41	42
N.C.	210	372	91	183	439	724	430	498
S.C.	124	198	62	99	247	313	226	283
Ga.	242	1,138	85	251	421	333	575	630
Fla.	1,532	2,523	126	539	341	294	1,007	1,298
E.S. CENTRAL	1,173	1,734	527	1,232	1,126	1,210	869	1,239
Ky.	235	158	-	45	101	103	166	175
Tenn.	659	1,062	455	960	630	567	333	458
Ala.	117	459	62	220	205	274	314	381
Miss.	162	55	10	7	190	266	56	225
W.S. CENTRAL	2,580	5,295	2,446	1,474	1,005	1,069	1,490	2,519
Ark.	75	211	23	68	79	108	167	171
La.	179	384	139	288	298	420	U	311
Okla.	536	712	155	213	186	98	144	191
Tex.	1,790	3,988	2,129	905	442	443	1,179	1,846
MOUNTAIN	1,201	1,323	749	760	235	239	455	617
Mont.	10	8	-	3	1	-	13	21
Idaho	29	20	12	15	1	2	15	14
Wyo.	3	4	1	1	-	1	3	4
Colo.	207	229	158	164	2	10	U	76
N. Mex.	155	306	94	177	11	22	63	68
Ariz.	637	643	411	344	212	185	239	254
Utah	70	48	67	36	2	4	40	52
Nev.	90	65	6	20	6	15	82	128
PACIFIC	2,579	3,566	219	3,440	374	378	3,537	4,230
Wash.	134	277	99	192	77	44	190	265
Oreg.	95	194	90	156	10	6	99	156
Calif.	2,311	3,033	-	3,033	283	323	3,008	3,573
Alaska	4	11	3	7	1	1	60	55
Hawaii	35	51	27	52	3	4	180	181
Guam	8	39	U	U	1	1	11	84
P.R.	113	69	U	U	159	177	41	201
V.I.	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable -: no reported cases

*Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the Public Health Laboratory Information System (PHLIS).

† Cumulative reports of provisional tuberculosis cases for 1999 are unavailable ("U") for some areas using the Tuberculosis Information System (TIMS).

TABLE III. Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	<i>H. influenzae</i> , invasive		Hepatitis (Viral), by type				Measles (Rubeola)				Total	
	Cum. 1999†	Cum. 1998	A		B		Indigenous		Imported*		Cum. 1999	Cum. 1998
			Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	1999	Cum. 1999	1999	Cum. 1999		
UNITED STATES	1,165	1,194	16,919	23,229	6,495	10,258	-	60	1	26	86	100
NEW ENGLAND	102	108	307	299	137	230	-	6	-	5	11	3
Maine	8	5	14	20	1	5	U	-	U	-	-	-
N.H.	21	10	18	19	17	21	-	-	-	1	1	-
Vt.	6	9	24	17	3	10	-	-	-	-	-	1
Mass.	40	42	122	126	43	81	-	5	-	3	8	2
R.I.	6	9	26	18	34	75	U	-	U	-	-	-
Conn.	21	33	103	99	39	38	-	1	-	1	2	-
MID. ATLANTIC	176	196	954	1,726	588	1,249	-	-	-	2	2	16
Upstate N.Y.	81	81	275	376	182	262	-	-	-	2	2	4
N.Y. City	41	50	322	591	209	423	-	-	-	-	-	-
N.J.	50	53	112	343	41	205	-	-	-	-	41	8
Pa.	4	12	245	416	156	359	-	-	-	-	-	4
E.N. CENTRAL	176	186	2,837	3,715	682	1,414	-	1	1	3	4	16
Ohio	62	48	658	398	95	77	-	-	-	-	-	1
Ind.	25	51	109	174	44	117	-	1	-	1	2	3
Ill.	74	67	746	821	1	230	-	-	-	-	-	1
Mich.	14	13	1,254	2,135	517	476	-	-	1	2	2	10
Wis.	1	7	70	187	25	514	-	-	-	-	-	1
W.N. CENTRAL	89	104	1,109	1,362	400	438	-	1	-	-	1	-
Minn.	48	77	111	145	59	71	-	1	-	-	1	-
Iowa	9	5	150	400	41	55	-	-	-	-	-	-
Mo.	23	12	732	637	252	252	-	-	-	-	-	-
N. Dak.	1	1	3	4	2	4	U	-	U	-	-	-
S. Dak.	1	1	9	40	1	4	-	-	-	-	-	-
Nebr.	3	2	64	27	18	24	-	-	-	-	-	-
Kans.	4	6	40	109	27	28	U	-	U	-	-	-
S. ATLANTIC	264	224	2,071	2,395	1,246	1,323	-	14	-	6	20	9
Del.	-	1	2	6	1	4	-	-	-	-	-	1
Md.	71	57	358	416	170	143	-	-	-	-	-	1
D.C.	5	-	59	66	24	19	-	-	-	-	-	-
Va.	23	19	181	226	98	109	-	14	-	4	18	2
W. Va.	8	7	44	9	23	14	-	-	-	-	-	-
N.C.	36	24	167	128	224	243	-	-	-	-	-	1
S.C.	6	3	47	54	64	65	-	-	-	-	-	-
Ga.	68	69	464	879	186	209	-	-	-	-	-	2
Fla.	47	44	749	611	456	517	-	-	-	2	2	2
E.S. CENTRAL	67	64	386	416	464	512	-	2	-	-	2	2
Ky.	8	7	63	32	45	49	-	2	-	-	2	-
Tenn.	38	38	147	234	207	294	-	-	-	-	-	1
Ala.	17	16	60	81	78	75	-	-	-	-	-	1
Miss.	4	3	116	69	134	94	-	-	-	-	-	-
W.S. CENTRAL	61	68	3,832	4,461	917	2,466	-	10	-	4	14	-
Ark.	2	-	75	82	75	115	-	5	-	-	5	-
La.	13	29	204	174	167	219	U	-	U	-	-	-
Okla.	42	36	517	667	147	172	-	-	-	-	-	-
Tex.	4	3	3,036	3,538	528	1,960	-	5	-	4	9	-
MOUNTAIN	113	127	1,285	3,134	570	813	-	4	-	-	4	11
Mont.	3	-	17	96	17	8	U	-	U	-	-	-
Idaho	2	2	48	235	29	49	-	-	-	-	-	-
Wyo.	1	1	8	37	13	11	-	-	-	-	-	-
Colo.	12	21	215	345	97	102	-	-	-	-	-	-
N. Mex.	19	8	56	155	185	311	-	-	-	-	-	-
Ariz.	61	69	744	1,843	144	185	-	1	-	-	1	11
Utah	11	7	66	196	37	66	-	2	-	-	2	-
Nev.	4	19	131	227	48	81	U	1	U	-	1	-
PACIFIC	117	117	4,138	5,721	1,491	1,813	-	22	-	6	28	43
Wash.	7	11	466	1,037	94	136	-	-	-	-	-	1
Oreg.	40	42	238	435	100	201	U	9	U	-	9	-
Calif.	50	50	3,401	4,178	1,264	1,445	-	13	-	4	17	9
Alaska	9	4	12	17	19	13	-	-	-	-	-	33
Hawaii	11	10	21	54	14	18	-	-	-	2	2	-
Guam	-	-	2	1	2	2	U	1	U	-	1	-
P.R.	1	2	236	94	167	276	-	-	-	-	-	-
V.I.	U	U	U	U	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U	U	U	U	U

N: Not notifiable U: Unavailable - : no reported cases
 *For imported measles, cases include only those resulting from importation from other countries.
 †Of 230 cases among children aged <5 years, serotype was reported for 117 and of those, 33 were type b.

TABLE III. (Cont'd.) Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending January 1, 2000, and January 2, 1999 (52nd Week)

Reporting Area	Meningococcal Disease		Mumps			Pertussis			Rubella		
	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998	1999	Cum. 1999	Cum. 1998
UNITED STATES	2,352	2,725	3	352	666	75	6,031	7,405	-	238	364
NEW ENGLAND	113	123	-	8	10	5	762	1,114	-	7	38
Maine	5	8	U	-	-	U	-	5	U	-	-
N.H.	13	13	-	1	-	-	78	149	-	-	-
Vt.	5	5	-	1	-	2	88	80	-	-	-
Mass.	66	59	-	4	6	3	527	805	-	7	8
R.I.	7	8	U	2	1	U	38	21	U	-	1
Conn.	17	30	-	-	3	-	31	54	-	-	29
MID. ATLANTIC	214	295	-	36	207	11	1,020	695	-	25	150
Upstate N.Y.	71	84	-	14	14	4	807	352	-	21	114
N.Y. City	50	35	-	3	167	-	10	54	-	-	20
N.J.	49	60	-	-	6	-	12	29	-	1	14
Pa.	44	116	-	19	20	7	191	260	-	3	2
E.N. CENTRAL	391	399	1	48	82	19	630	919	-	2	2
Ohio	132	143	1	21	29	5	329	299	-	-	-
Ind.	70	74	-	5	7	-	77	185	-	1	-
Ill.	101	104	-	13	10	14	102	173	-	1	1
Mich.	47	44	-	7	33	-	70	71	-	-	1
Wis.	41	34	-	2	3	-	52	191	-	-	-
W.N. CENTRAL	248	231	-	14	34	4	446	756	-	127	41
Minn.	54	37	-	1	13	2	236	439	-	5	-
Iowa	45	46	-	8	11	2	79	78	-	29	-
Mo.	103	80	-	1	4	-	65	59	-	3	2
N. Dak.	4	5	U	1	2	U	18	46	U	-	-
S. Dak.	11	9	-	-	-	-	7	8	-	-	-
Nebr.	13	17	-	-	-	-	6	21	-	90	-
Kans.	18	37	U	3	4	U	35	105	U	-	39
S. ATLANTIC	428	482	1	54	57	3	442	380	-	39	22
Del.	8	2	-	-	-	1	7	5	-	-	-
Md.	57	35	-	7	-	-	107	66	-	1	1
D.C.	2	4	-	2	-	-	1	1	-	-	-
Va.	56	49	-	10	13	-	51	56	-	-	1
W. Va.	9	19	-	-	-	-	4	7	-	-	-
N.C.	47	59	-	9	12	2	101	112	-	37	16
S.C.	46	57	1	6	8	-	29	29	-	-	-
Ga.	66	102	-	4	2	-	40	38	-	-	-
Fla.	137	155	-	16	22	-	102	66	-	1	4
E.S. CENTRAL	154	205	-	14	19	-	97	168	-	1	2
Ky.	34	38	-	-	-	-	29	95	-	-	-
Tenn.	64	75	-	-	2	-	45	40	-	-	2
Ala.	32	55	-	11	9	-	21	27	-	1	-
Miss.	24	37	-	3	7	-	2	6	-	-	-
W.S. CENTRAL	203	338	-	41	67	-	165	427	-	15	90
Ark.	35	31	-	-	13	-	19	93	-	6	-
La.	58	69	U	11	8	U	10	13	U	-	1
Okla.	36	44	-	1	4	-	12	33	-	-	-
Tex.	74	194	-	29	42	-	124	288	-	9	89
MOUNTAIN	146	157	1	29	40	28	811	1,324	-	17	6
Mont.	4	5	U	-	-	U	2	17	U	-	-
Idaho	15	14	1	4	7	1	141	263	-	-	-
Wyo.	5	8	-	-	1	-	2	8	-	-	-
Colo.	39	31	-	5	7	24	245	357	-	1	-
N. Mex.	16	26	N	N	N	1	221	100	-	-	1
Ariz.	43	48	-	8	6	2	128	241	-	13	2
Utah	16	15	-	7	5	-	61	297	-	2	2
Nev.	8	10	U	5	14	U	11	41	U	1	1
PACIFIC	455	495	-	108	150	5	1,658	1,622	-	5	13
Wash.	75	77	-	2	11	5	625	407	-	-	8
Oreg.	77	91	N	N	N	U	58	89	U	-	-
Calif.	287	319	-	90	110	-	936	1,085	-	5	3
Alaska	7	3	-	3	3	-	5	15	-	-	-
Hawaii	9	5	-	13	26	-	34	26	-	-	2
Guam	2	2	U	1	5	U	1	1	U	-	-
P.R.	9	11	-	-	7	-	20	10	-	-	14
V.I.	U	U	U	U	U	U	U	U	U	U	U
Amer. Samoa	U	U	U	U	U	U	U	U	U	U	U
C.N.M.I.	U	U	U	U	U	U	U	U	U	U	U

N: Not notifiable

U: Unavailable

- : no reported cases

TABLE IV. Deaths in 122 U.S. cities, * week ending
January 1, 2000 (52nd Week)

Reporting Area	All Ages	All Causes, By Age (years)					P&I †	Reporting Area	All Ages	All Causes, By Age (years)					P&I †
		>65	45-64	25-44	1-24	<1				Total	>65	45-65	25-44	1-24	
NEW ENGLAND	643	467	109	44	13	10	52	S. ATLANTIC	896	573	199	78	28	18	82
Boston, Mass.	160	106	39	10	5	-	14	Atlanta, Ga.	U	U	U	U	U	U	U
Bridgeport, Conn.	49	37	5	4	3	-	1	Baltimore, Md.	180	111	43	14	8	4	16
Cambridge, Mass.	13	13	-	-	-	-	-	Charlotte, N.C.	104	76	16	7	1	4	10
Fall River, Mass.	24	21	1	1	1	-	1	Jacksonville, Fla.	96	58	22	13	3	-	12
Hartford, Conn.	54	34	14	6	-	-	8	Miami, Fla.	105	68	24	11	1	1	8
Lowell, Mass.	33	25	3	4	1	-	4	Norfolk, Va.	47	31	8	8	-	-	5
Lynn, Mass.	11	10	-	1	-	-	1	Richmond, Va.	59	35	13	7	2	2	7
New Bedford, Mass.	26	20	3	2	1	-	2	Savannah, Ga.	33	23	5	4	1	-	4
New Haven, Conn.	34	16	11	2	2	3	3	St. Petersburg, Fla.	U	U	U	U	U	U	U
Providence, R.I.	79	63	13	2	-	1	5	Tampa, Fla.	151	110	27	9	5	-	15
Somerville, Mass.	8	6	-	2	-	-	-	Washington, D.C.	101	53	29	5	7	7	5
Springfield, Mass.	59	42	9	4	-	4	4	Wilmington, Del.	20	8	12	-	-	-	-
Waterbury, Conn.	10	9	1	-	-	-	1	E.S. CENTRAL	670	462	139	40	15	13	70
Worcester, Mass.	83	65	10	6	-	2	8	Birmingham, Ala.	129	86	32	6	2	2	22
MID. ATLANTIC	2,144	1,530	405	146	30	32	80	Chattanooga, Tenn.	61	43	14	4	-	-	6
Albany, N.Y.	71	50	9	5	3	4	3	Knoxville, Tenn.	64	48	10	3	2	1	5
Allentown, Pa.	U	U	U	U	U	U	U	Lexington, Ky.	83	58	17	3	4	1	13
Buffalo, N.Y.	112	85	19	6	1	1	7	Memphis, Tenn.	115	75	21	10	4	5	9
Camden, N.J.	31	22	5	3	-	1	1	Mobile, Ala.	57	42	12	2	-	1	4
Elizabeth, N.J.	10	8	1	-	-	1	-	Montgomery, Ala.	39	27	7	2	3	-	5
Erie, Pa. §	37	30	6	-	1	-	1	Nashville, Tenn.	122	83	26	10	-	3	6
Jersey City, N.J.	63	45	9	7	1	1	-	W.S. CENTRAL	1,369	925	276	101	39	28	109
New York City, N.Y.	1,226	876	232	92	13	12	30	Austin, Tex.	82	60	15	6	1	-	9
Newark, N.J.	U	U	U	U	U	U	U	Baton Rouge, La.	63	50	6	3	3	1	-
Paterson, N.J.	21	15	5	1	-	-	1	Corpus Christi, Tex.	53	30	15	3	2	3	4
Philadelphia, Pa.	195	116	44	25	6	4	8	Dallas, Tex.	174	106	38	14	10	6	5
Pittsburgh, Pa. §	47	32	11	3	1	-	6	El Paso, Tex.	57	39	8	7	3	-	3
Reading, Pa.	29	23	3	-	1	2	1	Ft. Worth, Tex.	112	87	19	4	2	-	18
Rochester, N.Y.	110	83	23	1	2	1	7	Houston, Tex.	300	199	66	24	4	7	22
Schenectady, N.Y.	30	25	4	-	1	-	1	Little Rock, Ark.	78	45	18	8	5	2	5
Scranton, Pa. §	40	29	10	1	-	-	1	New Orleans, La.	63	40	16	4	3	-	8
Syracuse, N.Y.	66	49	14	-	-	3	7	San Antonio, Tex.	229	160	47	12	4	6	23
Trenton, N.J.	30	20	6	2	-	2	4	Shreveport, La.	65	48	9	3	2	3	8
Utica, N.Y.	26	22	4	-	-	-	2	Tulsa, Okla.	93	61	19	13	-	-	4
Yonkers, N.Y.	U	U	U	U	U	U	U	MOUNTAIN	952	691	160	63	17	21	122
E.N. CENTRAL	2,080	1,465	377	140	49	47	174	Albuquerque, N.M.	109	83	17	6	-	3	11
Akron, Ohio	43	35	5	-	-	3	8	Boise, Idaho	43	34	6	2	-	1	9
Canton, Ohio	35	27	8	-	-	-	2	Colorado Springs, Colo.	U	U	U	U	U	U	U
Chicago, Ill.	407	252	85	38	14	16	37	Denver, Colo.	111	76	19	11	2	3	7
Cincinnati, Ohio	137	106	17	9	4	1	19	Las Vegas, Nev.	167	118	35	11	1	2	18
Cleveland, Ohio	106	73	27	2	2	2	3	Ogden, Utah	46	37	6	3	-	-	7
Columbus, Ohio	159	119	29	7	3	1	9	Phoenix, Ariz.	183	112	33	21	8	9	28
Dayton, Ohio	111	83	18	6	3	1	9	Pueblo, Colo.	38	30	5	2	1	-	8
Detroit, Mich.	208	121	54	24	2	7	13	Salt Lake City, Utah	101	75	18	1	4	3	12
Evansville, Ind.	38	28	4	5	-	1	1	Tucson, Ariz.	154	126	21	6	1	-	22
Fort Wayne, Ind.	60	47	9	3	1	-	3	PACIFIC	1,311	964	231	76	21	16	166
Gary, Ind.	5	3	1	1	-	-	-	Berkeley, Calif.	17	12	4	-	-	1	4
Grand Rapids, Mich.	111	81	18	3	4	5	14	Fresno, Calif.	63	48	10	4	1	-	10
Indianapolis, Ind.	191	134	38	12	3	4	9	Glendale, Calif.	3	-	2	-	1	-	-
Lansing, Mich.	34	28	4	2	-	-	2	Honolulu, Hawaii	67	50	10	5	1	1	9
Milwaukee, Wis.	94	75	10	5	3	1	15	Long Beach, Calif.	85	57	22	-	5	1	17
Peoria, Ill.	45	33	8	2	2	-	5	Los Angeles, Calif.	127	81	32	10	3	1	6
Rockford, Ill.	93	66	13	8	3	3	11	Pasadena, Calif.	28	22	4	1	-	1	12
South Bend, Ind.	41	28	7	4	1	1	3	Portland, Oreg.	121	92	16	10	-	3	9
Toledo, Ohio	95	74	12	5	3	1	7	Sacramento, Calif.	120	101	14	4	-	1	16
Youngstown, Ohio	67	52	10	4	1	-	4	San Diego, Calif.	158	119	27	7	3	2	19
W.N. CENTRAL	644	485	108	31	6	14	44	San Francisco, Calif.	U	U	U	U	U	U	U
Des Moines, Iowa	U	U	U	U	U	U	U	San Jose, Calif.	195	154	26	12	1	2	29
Duluth, Minn.	26	21	4	1	-	-	1	Santa Cruz, Calif.	17	13	3	1	-	-	5
Kansas City, Kans.	22	17	3	1	1	-	1	Seattle, Wash.	108	68	26	13	1	-	6
Kansas City, Mo.	106	67	26	6	3	4	4	Spokane, Wash.	77	57	13	4	1	2	13
Lincoln, Nebr.	39	32	6	1	-	3	3	Tacoma, Wash.	125	90	22	5	4	1	11
Minneapolis, Minn.	112	92	9	7	1	3	8	TOTAL	10,709†	7,562	2,004	719	218	199	899
Omaha, Nebr.	98	78	17	1	1	1	13								
St. Louis, Mo.	84	60	16	4	-	4	-								
St. Paul, Minn.	85	67	12	5	-	1	9								
Wichita, Kans.	72	51	15	5	-	1	5								

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 or more. A death is reported by the place of its occurrence and by the week that the death certificate was filed. Fetal deaths are not included.

† Pneumonia and influenza.

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

¶ Total includes unknown ages.

Abortion Surveillance — Continued

Food and Drug Administration (FDA) has found “approvable” for use as an abortifacient (FDA, personal communication, 1999). Researchers expect that medical induced abortions will become more widespread if mifepristone is approved for use (7).

Since 1992, most reporting areas have reported abortions by gestational age in weeks of gestation for abortions performed at ≤ 8 weeks. As new medical methods are introduced and used for terminating pregnancies primarily at < 8 weeks of gestation, these data will continue to assist in monitoring trends in legal abortions.

During 1997, the total numbers of legal induced abortions were available for each of the 52 reporting areas. However, approximately 32% of abortions were reported from states that in 1997 did not have annual centralized reporting of abortions (three states) or from states whose health departments could not provide information about characteristics (e.g., age or race) of women obtaining legal abortions (two states). To track efforts to prevent unintended pregnancy and changes in abortion practice, each state needs an accurate and ongoing assessment of abortion (including the number and characteristics of women obtaining legal abortions).

Previously published *MMWRs* that include statistical and epidemiologic information about abortion are available on the CDC World-WideWeb site, <http://www.cdc.gov/mmwr> (1).

References

1. Koonin LM, Strauss LT, Chrisman CE, Montalbano MA, Bartlett LA, Smith JC. Abortion surveillance, United States, 1996. In: *MMWR surveillance summaries* (July 1999). *MMWR* 1999;48(no. SS-4).
2. Ventura SJ, Martin JA, Curtin SC, Mathews TJ. Births: final data for 1997. Hyattsville, Maryland: US Department of Health and Human Services, Public Health Service, CDC, National Center for Health Statistics, 1999; DHHS publication no. (PHS)99-1120. (Monthly vital statistics report; vol 47, no. 18).
3. CDC. Handbook on the reporting of induced termination of pregnancy (revised instructions and reporting form). Hyattsville, Maryland: US Department of Health and Human Services, CDC, 1997:1–18.
4. CDC. Abortion surveillance—1978. Atlanta, Georgia: US Department of Health and Human Services, Public Health Service, CDC, 1980.
5. CDC. Abortion surveillance—1975. Atlanta, Georgia: US Department of Health and Human Services, Public Health Service, CDC, 1977.
6. Abma J, Chandra A, Mosher W, Peterson L, Piccinino L. Fertility, family planning, and women’s health: new data from the 1995 National Survey of Family Growth. *Vital Health Stat* 1997;23:1–114.
7. Henshaw SK. Abortion incidence and services in the United States, 1995–1996. *Fam Plann Perspect* 1998;30:262–3,287.
8. Henshaw SK, Kost K. Abortion patients in 1994–1995. *Fam Plann Perspect* 1994;28:140–7,158.
9. Creinin MD, Vittinghoff E, Schaff E, Klaisle C, Darney PD, Dean C. Medical abortion with oral methotrexate and vaginal misoprostol. *Obstet Gynecol* 1997;90:611–6.
10. Winikoff B, Ellertson C, Elul B, Sivin I. Acceptability and feasibility of early pregnancy termination by mifepristone-misoprostol. Results of a large multicenter trial in the United States. *Arch Fam Med* 1998;7:360–6.

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Director, Centers for Disease Control
and Prevention

Jeffrey P. Koplan, M.D., M.P.H.

Acting Deputy Director for Science
and Public Health, Centers for
Disease Control and Prevention

Lynne S. Wilcox, M.D., M.P.H.

Acting Director,
Epidemiology Program Office

Barbara R. Holloway, M.P.H.

Editor, *MMWR* Series

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Managing Editor,
MMWR (weekly)

Karen L. Foster, M.A.

Writers-Editors,
MMWR (weekly)

Jill Crane

David C. Johnson

Teresa F. Rutledge

Caran R. Wilbanks

Desktop Publishing

Morie M. Higgins