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 Season

Evaluating Newborn Screening Program Data Systems — Georgia, 1998

All 50 states and the District of Columbia conduct newborn screening (NBS) programs that annually screen approximately 4 million infants for metabolic and other disorders to prevent mental retardation, disability, and death (1,2). In 1998, Georgia newborns were screened for eight disorders: phenylketonuria, galactosemia, tyrosinemia, homocystinuria, hypothyroidism, maple syrup urine disease, congenital adrenal hyperplasia, and sickle cell disease (3). Appropriate data that reflect progress toward achieving short- and long-term goals are necessary to assess the effectiveness of NBS and to inform public health policy decisions about which disorders to add or delete from screening. This report summarizes findings from an evaluation of data systems for metabolic and endocrine disorders in the Georgia NBS program and assesses the ability to measure progress toward short- and long-term goals. Although the data indicate that the program typically received specimens of sufficient quality for testing in a timely manner, additional data are needed to assess fully the effectiveness of the NBS program in identifying disorders.

The Georgia NBS data system includes the Georgia NBS laboratory and the Emory University Medical Genetics databases. The NBS laboratory database is a computerized database of each blood specimen received and tested by the laboratory. Information from the blood specimen collection forms and results of each test were entered by specimen. Collection form data included demographics, specimen quality (adequate or inadequate), reason if the specimen is inadequate, and confounders of test results (e.g., antibiotic use and transfusions). Data from the NBS laboratory on specimens initially screening positive for any of the eight disorders were transmitted electronically to and included in the Emory University Medical Genetics database. In the Emory database, test results were consolidated by child. Data on each child included the same demographic data in the NBS laboratory database, follow-up test results, final diagnosis (or confirmation of false-positive results), and initial treatment or referral received. All specimens received by the NBS laboratory in 1998 and entered into the database were included in this analysis.

During 1998, the NBS laboratory received 199,387* specimens. Of these specimens, 135,163 (67.8%) were collected satisfactorily and were received within 1 week

^{*}The Georgia NBS laboratory tests all specimens received by the laboratory, including unsatisfactory specimens.

Newborn Screening Program — Continued

of the infant's birth, which is the appropriate time; 20,839 (10.4%) specimens were collected satisfactorily, but received 1 week after the infant's birth; 20,691 (10.4%) specimens were collected from low birthweight newborns (<5 lbs, 8 oz [<2500 g]); and 20,687 (10.4%) specimens were classified as unsatisfactory. The remaining 1% of specimens were labeled "requested repeat" and were specimens from known cases. Of the 199,387 specimens collected, 4557 (2%) had initially abnormal screening results. From these abnormal screening results, Emory University Medical Genetics completed follow-up for 4364. The 42 results with incomplete follow-up included tests on 33 newborns lost to follow-up, tests on five newborns whose parents or physician refused further testing, and tests on four newborns who moved out of state. Repeat testing of specimens with initial abnormal results produced 4094 final normal results. The 4557 initially abnormal screening results represented 4466 infants who were examined at the Emory University Medical Genetics program and represented in the database. Clinically significant disorders (those requiring continued medical intervention) were diagnosed in 93 of the infants, and 100 additional infants needed transitory treatment and/or whose parents needed genetic counseling information. All those diagnosed with a clinically significant disorder obtained their first abnormal test result within 1 week of birth. Treatments were initiated from age 1 week to age 2 months (4).

Data unavailable from the system included the number of children the 199,387 specimens represent and long-term follow-up outcomes on the 93 children with clinically significant disorders diagnosed. In the system, no mechanism exists for systematic long-term follow-up of these or children with previously diagnosed disorders. Records of morbidity (e.g., hospitalizations, disability, diagnosis of mental retardation, and mortality records) are not included in either NBS database.

Reported by: PM Fernhoff, MD, K Grinzaid, MS, Div of Medical Genetics, Dept of Pediatrics, Emory Univ School of Medicine, Atlanta; M Ramachandran, PhD, EA Franko, DrPH, Georgia Public Health Laboratory, Atlanta; M Henson, Genetics Program, Child and Adolescent Health Unit, Div of Public Health, Georgia Dept of Human Resources. Office of Genetics and Disease Prevention, National Center for Environmental Health; and an EIS Officer, CDC.

Editorial Note: Information collected on newborns screened in Georgia includes short-term outcomes; specimen quality and timeliness of the screening, diagnosis, and initiation of treatment all are documented. Although these data help to evaluate program performance, other key short-term measures were not available from the data collected. For example, screening coverage (percentage of infants adequately screened) cannot be calculated, and children missed by the program cannot be identified. Comparing the Georgia NBS program with other state programs is difficult because each state conducts its program independently; each state screens for different disorders, and some define each disorder differently (e.g., different laboratory definitions/cut-offs). For the Georgia NBS program, additional data would help to ensure optimal screening coverage and prevent adverse outcomes.

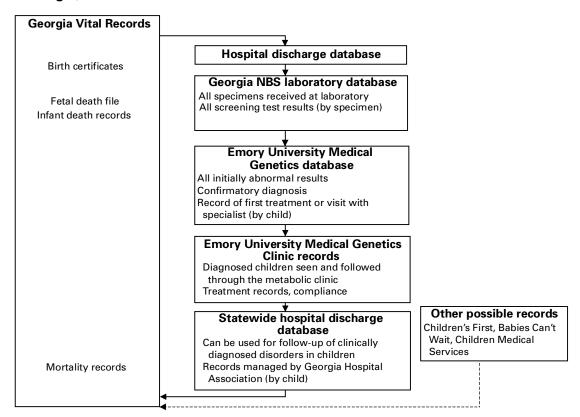
Recent technologic advances are leading to an increasing number of disorders that can be screened in NBS programs. The ability of NBS programs to adequately assess the effectiveness of their programs would help states make data-based policy decisions on which disorders to include and which to remove. To facilitate evaluations of NBS programs, short-term and long-term performance measures should be collected. Key short-term measures for NBS programs include the percentage of live-born infants screened in the state, the percentage of live-born infants adequately screened, and the timeliness of diagnoses and treatment. Essential long-term measures should

Newborn Screening Program — Continued

assess whether infants with a diagnosed disorder have developmental disabilities, mental retardation, and premature mortality (5,6) (as measured by hospitalization records to assess burden of illness), and should identify adverse health outcomes associated with each disorder beyond the newborn period.

Using the Georgia NBS program as a model, one method to obtain additional data is through database linkage (Figure 1). To calculate screening coverage (and identify children missed), the number of infants screened in Georgia and the number of live births in Georgia are needed. These data could be created by linking the Georgia laboratory database to the Georgia vital records department that handles all birth certificates and infant death files; with the information from these records, the percentage of infants adequately screened could be calculated. This linkage also could assess characteristics of infants missed, allowing development of methods for optimizing screening coverage. Long-term follow-up on children screened and with a diagnosed disorder can be obtained in several ways. First, the Georgia Hospital Association maintains a statewide hospital discharge database; links to the NBS laboratory or Emory University Medical Genetics databases with the hospital discharge database would allow data on hospitalizations of diagnosed children and possible identification of false negatives to be generated. Second, follow-up information such as treatment, compliance, and disease progression for children with a diagnosed disorder could be obtained from treatment center records. Finally, the Georgia vital records department

FIGURE 1. Potential linkage of databases to assess short- and long-term outcomes of children with diagnosed disorders through the newborn screening program (NBS) — Georgia, 1998



Newborn Screening Program — Continued

could provide information on mortality of all newborns screened, all newborns with a diagnosed disorder, and the reason for death. A "data warehouse" concept, where databases report their respective data to a central external location for data linkage, also may be useful for the Georgia NBS program. This concept has been discussed for programs relying on coordinated efforts using data systems and eliminates the need for statewide overhaul of computer systems. Linking databases (birth certificates, NBS test results, hospitalizations, clinic visits, and death certificates) would allow unique follow-up of diagnosed disorders in children. To evaluate program performance, CDC is conducting several studies using short and long-term measures to assess effectiveness of NBS for specific disorders.

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Update: Respiratory Syncytial Virus Activity — United States, 1998–1999 Season

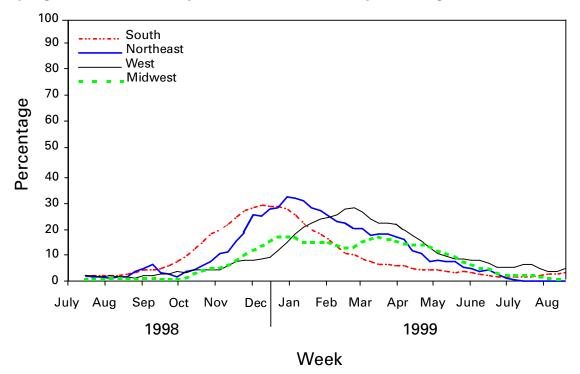
Respiratory syncytial virus (RSV) is the most common cause of lower respiratory tract disease in infants and young children worldwide (1). In temperate climates, RSV infections occur primarily during annual outbreaks, which peak during winter months (2). In the United States, RSV activity is monitored by the National Respiratory and Enteric Virus Surveillance System (NREVSS), a voluntary, laboratory-based system. This report summarizes trends in RSV activity reported to NREVSS during July 1998–June 1999 and presents preliminary surveillance data during July 1–November 12, 1999, which show that RSV community outbreaks are becoming widespread.

Clinical and public health laboratories report weekly to CDC the number of specimens tested for RSV by antigen-detection and/or virus-isolation methods and the number of positive results. RSV activity is considered widespread by NREVSS when at least half of participating laboratories report any RSV detections for at least 2 consecutive weeks and when >10% of all specimens tested by antigen detection for RSV are positive. RSV community outbreaks are defined similarly (>2 consecutive weeks with >10% positive tests, by city).

From July 1998 through June 1999, 72 laboratories in 45 states reported 128,579 tests for RSV, of which 18,418 were positive for RSV (Figure 1). In the United States, widespread RSV activity began in early November 1998 and continued for

Respiratory Syncytial Virus — Continued

FIGURE 1. Percentage* of specimens testing positive for respiratory syncytial virus, by region[†] and week of report — United States, July 1998–August 1999



*Weekly laboratory group average smoothed using a 3-week running interval.

27 weeks, until late April. Timing of RSV community outbreaks varied from onset (range: September 11 to April 2) to conclusion (range: January 8 to June 18). Overall, RSV outbreaks were observed earlier in laboratories in the South (19 sites; median weeks of onset and conclusion: November 20 and April 2, respectively), later in Northeast laboratories (seven sites; November 27 and April 23), and latest in the Midwest (11 sites; December 18 and May 14) and West (12 sites; January 1 and April 30).

Although most positive tests (91%) were reported from the week ending November 27 through the week ending April 30, RSV was detected throughout the year. For example, during July–August 1999, one or two sporadic RSV isolates were reported from single laboratories in Colorado, Nebraska, Oklahoma, South Dakota, Tennessee, Texas, and Washington. In addition, during July–August, an outbreak of RSV-related lower respiratory tract infections, including 18 cases of pneumonia and 15 hospitalizations, was detected among residents and staff in a long-term–care facility in Maryland. As of the week ending November 12, 1999, widespread RSV activity has been reported in communities in the South (eight of 20 sites), West (three of 15 sites), Northeast (one of 8 sites), and Midwest (one of 18 sites).

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

Respiratory Syncytial Virus — Continued

Reported by: National Respiratory and Enteric Virus Surveillance System collaborating laboratories. B Mitchell, MD, C Groves, MS, JC Roche, MD, Acting State Epidemiologist, Maryland Dept of Health and Mental Hygiene. Respiratory and Enteric Viruses Br, Div of Viral and Rickettsial Diseases, National Center for Infectious Diseases, CDC.

Editorial Note: For the July 1998–June 1999 surveillance period, the total number of specimens positive for RSV, average months of peak activity, and regional trends were similar to trends observed during previous years. The duration of the 1998–1999 season was longer than previous years, with later-than-usual RSV outbreaks reported by several western and midwestern laboratories. Although RSV community outbreaks occurred largely during winter months, sporadic RSV detections were found throughout the year, including the summer.

NREVSS consists of 72 widely distributed laboratories and is a useful system for characterizing the geographic and temporal trends of RSV infections in the United States. NREVSS data can alert public health officials and physicians to the timing of seasonal RSV activity.

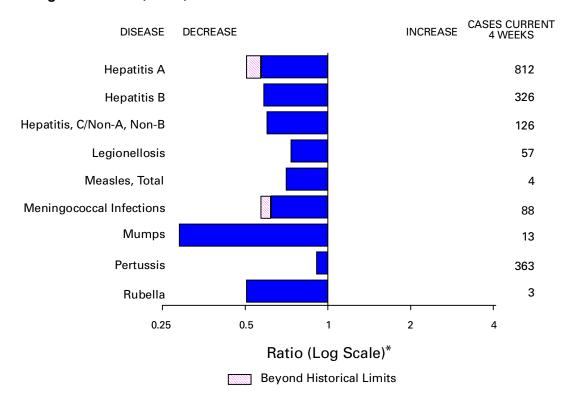
When reviewing NREVSS data, at least three limitations should be considered. First, laboratory results are not confirmed by CDC. Second, laboratory data serve as an indicator of when RSV is circulating in a community; however, the correlation of these data to disease burden in the population is uncertain. Finally, some regions have few laboratories; recruitment of additional laboratories is needed. To alert the public to RSV trends, regional summary data are frequently updated on the CDC World-Wide Web site (http://www.cdc.gov/ncidod/dvrd/nrevss). As in the 1998–1999 season, timing of community RSV outbreaks may vary considerably within and among regions.

Severe manifestations of RSV infection (e.g., pneumonia and bronchiolitis) most commonly occur in infants aged 2–6 months, and hospitalization rates for these diagnoses have been used as an indicator for severe RSV disease among young children. In the United States, bronchiolitis hospitalization rates among children aged <1 year increased substantially from 12.9 per 1000 in 1980 to 31.2 per 1000 in 1996; the reasons for this increase are unclear (3). Considerably higher hospitalization rates (61.8 per 1000 children aged <1 year) have been identified among American Indian/Alaska Native children receiving care through the Indian Health Service (4).

Symptomatic RSV disease can recur throughout life because of limited protective immunity induced by natural infection. As a result, health-care providers should consider RSV as a cause of acute respiratory disease in children and adults during community outbreaks. Persons with underlying cardiac or pulmonary disease or compromised immune systems and the elderly are at increased risk for serious complications of RSV infection, such as pneumonia and death (5,6). RSV infection among recipients of bone marrow transplants has resulted in high mortality rates (83%) (7).

The risk for nosocomial transmission of RSV increases during community outbreaks; nosocomial outbreaks of RSV can be controlled by adhering to contactisolation procedures (8). No RSV vaccines are available, although both live attenuated and subunit vaccines have entered clinical trials. RSV immune globulin intravenous and a humanized murine anti-RSV monoclonal antibody are recommended as prophylaxis for some high-risk infants and young children (e.g., those born prematurely or with chronic lung disease) to prevent serious RSV disease (9).

FIGURE I. Selected notifiable disease reports, comparison of provisional 4-week totals ending December 4, 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 I. Summary — provisional cases of selected notifiable diseases, United States, cumulative, week ending December 4, 1999 (48th Week)

	Cum. 1999		Cum. 1999
Anthrax Brucellosis* Cholera Congenital rubella syndrome Cyclosporiasis* Diphtheria Encephalitis: California* eastern equine* St. Louis* western equine* human granulocytic (HGE)* human monocytic (HME)* Hansen Disease* Hantavirus pulmonary syndrome*† Hemolytic uremic syndrome, post-diarrheal*	- 46 3 6 50 1 56 6 7 1 146 40 91 18 109	HIV infection, pediatric* Plague Poliomyelitis, paralytic Psittacosis* Rabies, human Rocky Mountain spotted fever (RMSF) Streptococcal disease, invasive Group A Streptococcal toxic-shock syndrome* Syphilis, congenital* Tetanus Toxic-shock syndrome Trichinosis Typhoid fever Yellow fever	137 8 - 16 - 503 1,970 33 204 31 109 9 287 1

^{-:} no reported cases

^{*}Not notifiable in all states.

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† 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 4, 1999, and December 5, 1998 (48th Week)

					Escherichia coli O157:H7*					
	Al	IDS	Chla	mydia	Cryptosp	oridiosis	NE ⁻	rss		ILIS
Reporting Area	Cum. 1999†	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	40,933	42,308	541,736	546,981	2,223	3,529	3,249	2,784	2,179	2,089
NEW ENGLAND	2,090	1,664	19,450	18,616	154	146	389	319	337	269
Maine N.H.	75 45	28 34	904 875	962 891	29 19	31 15	38 34	36 44	33	45
Vt.	16	18 844	429	378	35	26	32	21 142	20	18
Mass. R.I.	1,338 96	119	8,419 2,159	7,688 2,112	50 6	67 7	168 27	12	181 26	152 1
Conn.	520	621	6,664	6,585	15	U	90	64	77	53
MID. ATLANTIC Upstate N.Y.	10,473 1,196	11,353 1,322	55,592 N	57,178 N	412 170	549 322	294 232	288 208	92	86
N.Y. City	5,571	6,520	21,963	24,367	116	203	11	13	17	13
N.J. Pa.	1,932 1,774	2,007 1,504	10,095 23,534	10,910 21,901	36 90	24 N	51 N	67 N	46 29	52 21
E.N. CENTRAL	2,801	3,061	75,658	93,186	547	712	672	441	482	359
Ohio Ind.	448 320	645 473	21,787 10,196	24,986 10,372	61 38	70 54	235 103	120 99	199 63	73 52
III.	1,345	1,188	23,831	24,684	67	84	221	109	81	79
Mich. Wis.	555 133	577 178	19,844 U	20,247 12,897	47 334	38 466	113 N	113 N	75 64	68 87
W.N. CENTRAL	940	827	32,533	32,463	202	328	582	461	401	391
Minn.	178 77	163 62	6,301	6,521	78 55	138 64	228	191 91	174	205
Iowa Mo.	449	400	4,423 12,295	4,087 11,649	29	26	113 60	49	73 63	58 62
N. Dak. S. Dak.	6 15	5 15	707 1,471	966 1,437	18 7	30 24	16 47	12 33	14 62	15 37
Nebr.	65	66	3,110	2,623	14	35	97	50	-	-
Kans.	150	116	4,226	5,180	1	11	21	35	15	14
S. ATLANTIC Del.	11,305 159	11,023 152	117,615 2,551	105,803 2,391	362	334 3	332 6	238	158 3	168 2
Md.	1,344	1,482	10,551	6,815	17	19	42	42	4	14
D.C. Va.	637 782	808 908	N 13,066	N 12,760	8 27	25 20	1 71	1 N	U 56	U 52
W. Va. N.C.	64 739	77 753	1,240 20,314	2,257 20,312	3 29	2 N	14 72	13 54	9 52	10 47
S.C.	919	720	11,037	16,327	-	-	20	15	14	12
Ga. Fla.	1,581 5,080	1,173 4,950	30,493 28,363	22,019 22,922	128 150	124 141	33 73	73 40	20	31
E.S. CENTRAL	1,796	1,681	41,642	37,704	28	25	119	116	58	64
Ky. Tenn.	255 706	262 621	6,900 12,569	5,963 12,608	7 6	10 9	46 43	34 53	- 38	- 40
Ala.	449	455	11,811	9,460	11	N	25	23	16	20
Miss.	386	343	10,362	9,673	4	6	5	6	4	4
W.S. CENTRAL Ark.	4,177 188	5,129 189	75,156 5,490	82,722 3,724	84 2	909 6	128 15	99 11	120 8	102 10
La.	813	874	11,220	13,969	22	16	9	5	14	7
Okla. Tex.	123 3,053	274 3,792	7,580 50,866	8,747 56,282	12 48	N 887	31 73	23 60	26 72	9 76
MOUNTAIN	1,608	1,478	29,312	30,740	96	121	319	359	198	244
Mont. Idaho	13 22	28 28	1,450 1,606	1,205 1,883	13 8	10 17	25 64	15 41	20	5 25
Wyo.	11	3	710	646	1	2	15	53	14	55
Colo. N. Mex.	290 82	286 203	5,310 3,828	7,628 3,565	12 42	18 47	108 12	89 19	88 5	68 20
Ariz. Utah	819 142	588 128	11,634 1,992	10,689 2,021	12 N	18 N	37 38	43 75	21 48	26 21
Nev.	229	214	2,782	3,103	8	9	20	24	2	24
PACIFIC	5,743	6,092	94,778	88,569	338	405	414	463	333	406
Wash. Oreg.	337 208	386 166	11,111 5,567	10,203 5,268	N 93	N 67	164 74	106 106	159 68	128 100
Calif.	5,089	5,364	73,925 1,611	68,926	245	334 1	165 1	244	94	162
Alaska Hawaii	15 94	17 159	2,564	1,772 2,400	-	3	10	7 -	1 11	16
Guam	10	1	299	396	-	-	N	Ñ	U	U
P.R. V.I.	1,180 35	1,601 31	U U	U U	U	N U	8 U	5 U	U U	U U
Amer. Samoa	-	-	Ü	Ü	Ü	Ū U	Ü	Ü	U	Ü
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

^{*}Individual cases may be reported through both the National Electronic Telecommunications System for Surveillance (NETSS) and the

Public Health Laboratory Information System (PHLIS).

†Updated monthly from reports to the Division of HIV/AIDS Prevention–Surveillance and Epidemiology, National Center for HIV, STD, and TB Prevention, last update November 28, 1999.

TABLE II. (Cont'd.) Provisional cases of selected notifiable diseases, United States, weeks ending December 4, 1999, and December 5, 1998 (48th Week)

	Gond	orrhea	Hepa C/N/	atitis A,NB	Legion	ellosis	Lyı Dise	me ease
Reporting Area	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998
UNITED STATES	298,263	326,615	2,976	3,089	854	1,204	12,057	14,899
NEW ENGLAND	6,067	5,618	14	57	78	80	3,345	4,449
Maine N.H.	71 103	63 85	2	-	3 8	1 7	41 23	78 43
Vt. Mass.	43 2,326	34 2,105	7 2	5 49	14 28	7 33	23 931	11 687
R.I. Conn.	543 2,981	382 2,949	3	3	11 14	19 13	464 1,863	598 3,032
MID. ATLANTIC	35,704	35,652	123	203	180	305	6,896	8,338
Upstate N.Y. N.Y. City	6,365 11,762	6,763 11,127	88	102	57 9	106 35	3,741 35	3,892 226
N.J.	5,962	7,374	-	U 101	18	17 147	922	1,795
Pa. E.N. CENTRAL	11,615 50,570	10,388 64,073	35 1.408	640	96 230	395	2,198 173	2,425 747
Ohio Ind.	13,299 5,519	16,349 6,081	4	8 5	69 41	123 75	71 20	45 36
III.	17,813	20,417	41	39	23	51	12	14
Mich. Wis.	13,939 U	15,335 5,891	771 591	449 139	60 37	80 66	1 69	12 640
W.N. CENTRAL Minn.	14,035 2,426	16,242 2,512	299 10	41 10	50 13	62 7	257 189	209 157
lowa	1,104	1,373	-	8	14	9	19	26
Mo. N. Dak.	7,129 71	8,519 76	277 1	15 -	14 2	16 -	26 1	12 -
S. Dak. Nebr.	184 1,295	209 1,110	- 5	- 5	3 4	3 19	10	3
Kans.	1,826	2,443	6	3	-	8	12	11
S. ATLANTIC Del.	88,484 1,562	88,007 1,413	190 1	111 -	135 14	139 13	1,099 64	857 66
Md. D.C.	8,960 3,316	8,989 3,976	41 1	21	31 4	35 8	767 6	605 4
Va. W. Va.	8,867 387	8,773 806	10 17	11 7	32 N	20 N	114 17	66 13
N.C.	18,140	17,482	34	24	14	14	72	55
S.C. Ga.	6,434 20,632	10,496 18,398	22 1	9 9	11 2	11 8	7 -	7 5
Fla.	20,186	17,674	63 226	30	27 38	30 63	52 72	36 108
E.S. CENTRAL Ky.	33,268 3,113	36,468 3,513	21	265 20	20	26	10	25
Tenn. Ala.	10,165 10,540	11,020 12,036	79 1	158 4	14 4	22 8	30 19	43 23
Miss.	9,450	9,899	125	83	-	7	13	17
W.S. CENTRAL Ark.	42,092 2,943	50,986 3,681	314 18	527 21	23	30 1	43 4	24 7
La. Okla.	8,880 3,717	12,072 4,865	102 15	109 16	2 3	4 12	4	4 2
Tex.	26,552	30,368	179	381	18	13	35	11
MOUNTAIN Mont.	8,762 54	8,459 44	136 5	359 7	46 -	69 2	18 -	18 -
ldaho Wyo.	79 29	164 31	7 38	86 90	2	2 1	5 3	6 1
Colo. N. Mex.	2,259 804	1,908 858	21 8	31 94	12 1	17 2	- 1	- 4
Ariz.	4,131	3,894	43	11	7	17	2	1
Utah Nev.	212 1,194	215 1,345	6 8	21 19	18 6	21 7	5 2	6
PACIFIC Wash.	19,281 1,947	21,110 1,816	266 20	886 22	74 16	61 12	154 10	149 7
Oreg.	809	780	22	18	N	N	14	21
Calif. Alaska	15,894 260	17,746 296	224	792 -	57 1	47 1	130	120 1
Hawaii Guam	371 38	472 66	- 1	54 1	-	1 2	N	N 1
P.R.	317	360	-	-	-	-	N N	N
V.I. Amer. Samoa	U U	U U	U U	U U	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 4, 1999, and December 5, 1998 (48th Week)

					Salmonellosis*						
	Ma	laria	Rabies,	Animal	NE	TSS	PH	LIS			
Reporting Area	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998			
UNITED STATES	1,244	1,363	5,578	6,837	35,496	39,406	27,214	31,844			
NEW ENGLAND	62	64	841 166	1,379 229	2,031 126	2,377 158	1,967 99	2,172			
Maine N.H.	3 2	5 5	50	77	133	177	138	63 212			
Vt. Mass.	4 23	1 25	87 20 8	63 483	88 1,083	136 1,251	80 1,090	107 1,277			
R.I.	5	10	93	96	121	132	147	34			
Conn.	25	18	237	431	480	523	413	479 5 510			
MID. ATLANTIC Upstate N.Y.	306 69	398 87	1,074 758	1,508 1,037	4,547 1,299	6,201 1,517	4,003 1,228	5,519 1,293			
N.Y. City N.J.	151 48	225 55	U 166	U 207	1,243 989	1,792 1,374	1,134 685	1,395 1,317			
Pa.	38	31	150	264	1,016	1,518	956	1,514			
E.N. CENTRAL	140	140	144	121	5,059	5,921	3,214	4,556			
Ohio Ind.	18 19	15 10	34 13	56 11	1,209 506	1,428 626	973 403	1,085 502			
III. Mich.	54 39	56 47	10 87	N 35	1,495 906	1,824 1,090	399 897	1,466 1,019			
Wis.	10	12	-	19	943	953	542	484			
W.N. CENTRAL Minn.	72 41	89 55	655 102	670 110	2,095 609	2,154 536	2,152 641	2,209 631			
lowa	13	7	153	143	257	350	197	277			
Mo. N. Dak.	14 -	14 2	14 133	41 131	689 44	583 59	862 49	797 67			
S. Dak.	-	-	163	151	92	115	114	125			
Nebr. Kans.	4	1 10	3 87	7 87	185 219	172 339	78 211	45 267			
S. ATLANTIC	333	296	1,996	2,232	8,379	8,096	4,954	5,812			
Del. Md.	1 88	3 86	42 378	48 422	133 834	74 875	144 940	112 847			
D.C.	18	18 54	543	- 525	69	79	U 919	U 827			
Va. W. Va.	69 3	2	106	76	1,179 163	1,037 145	147	149			
N.C. S.C.	30 17	27 6	396 132	538 143	1,250 665	1,211 601	1,243 479	1,361 516			
Ga.	28	36	222	290	1,438	1,606	651	1,456			
Fla. E.S. CENTRAL	79 22	64 32	177 250	190 261	2,648 1,755	2,468 2,218	431 1,029	544 1,509			
Ky.	7	7	35	31	393	345	, -	124			
Tenn. Ala.	6 7	16 6	93 121	133 95	317 561	559 658	499 453	676 553			
Miss.	2	3	1	2	484	656	77	156			
W.S. CENTRAL Ark.	16 3	35 1	94 14	28 28	3,586 614	4,549 581	3,170 120	3,050 359			
La.	10	14	-	-	334	717	496	764			
Okla. Tex.	2 1	3 17	80	N -	406 2,232	460 2,791	314 2,240	221 1,706			
MOUNTAIN	42	61	194	244	2,877	2,402	2,305	1,897			
Mont. Idaho	4 3	1 8	57 5	52 N	78 121	75 116	1 81	43 92			
Wyo.	1	-	43 1	64	65	62	49	56			
Colo. N. Mex.	16 2	18 12	9	42 6	666 359	510 280	670 217	479 247			
Ariz. Utah	8 4	9 1	66 8	48 26	909 494	794 337	733 501	649 122			
Nev.	4	12	5	6	185	228	53	209			
PACIFIC Wash.	251 27	248 20	330	394	5,167 632	5,488 478	4,420 795	5,120 648			
Oreg.	21	15	2	7	409	309	480	317			
Calif. Alaska	191 1	203 3	321 7	364 23	3,753 53	4,375 55	2,849 30	3,836 33			
Hawaii	11	7	-	-	320	271	266	286			
Guam P.R.	-	2	- 65	- 49	24 383	39 750	U U	U U			
V.I.	Ü	Ü	U	U	U	U	U	U			
Amer. Samoa C.N.M.I.	U U	U U	U U	U U	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 4, 1999, and December 5, 1998 (48th Week)

	eks endii	Shige			Sypt		-			
	NE	TSS		LIS	(Primary &		Tubero	culosis		
Reporting Area	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999 [†]	Cum. 1998 [†]		
UNITED STATES	14,775	20,525	6,966	11,588	6,020	6,574	12,837	15,622		
NEW ENGLAND	807	393	764	350	54	71	395	407		
Maine N.H.	5 17	13 16	16	20	1	1 2	16 10	11 -		
Vt.	6	7	4	4	3	4	2	4		
Mass. R.I.	690 23	255 34	668 18	249 13	32 2	41 1	224 39	235 50		
Conn.	66	68	58	64	16	22	104	107		
MID. ATLANTIC	880	2,268	449	1,640	183	300	2,329	2,817		
Upstate N.Y. N.Y. City	264 266	606 676	62 82	209 575	26 79	36 75	293 1,240	357 1,335		
N.J.	194	643	155 150	602	51 27	98	479	573		
Pa. E.N. CENTRAL	156 2,757	343 2,794	150 1,241	254 1,487	27 1,302	91 939	317 1,167	552 1,538		
Ohio	385	484	135	134	85	128	218	216		
Ind. III.	311 1,048	163 1,504	97 592	43 1,239	625 362	191 385	90 508	151 736		
Mich.	451	258	343	1,239	230	176	266	335		
Wis.	562	385	74	67	U	59	85	100		
W.N. CENTRAL Minn.	1,064 237	1,011 294	704 222	590 325	108 9	128 9	447 187	458 143		
lowa	62	65	48	44	9	2	50	48		
Mo. N. Dak.	638 3	180 10	342 2	121 3	72	96	152 6	161 10		
S. Dak.	18	31	10	23	-	1	17	17		
Nebr. Kans.	69 37	362 69	35 45	19 55	8 10	7 13	16 19	27 52		
S. ATLANTIC	2,335	4,040	424	1,221	1,899	2,416	2,599	2,935		
Del.	13	42	8	36	. 8	20	12	34		
Md. D.C.	153 51	197 34	57 U	66 U	308 59	636 85	246 47	276 100		
Va.	126	188	54	87	146	140	247	280		
W. Va. N.C.	8 198	11 326	5 86	8 176	2 416	3 686	37 382	39 420		
S.C.	122	177	62	94	242	308	218	259		
Ga. Fla.	222 1,442	1,036 2,029	37 115	239 515	389 329	273 265	553 857	492 1,035		
E.S. CENTRAL	959	1,370	468	1,080	1,060	1,144	781	1,064		
Ky.	229	141	-	45	99	100	166	153		
Tenn. Ala.	508 109	738 437	411 47	812 216	581 199	536 268	272 287	364 343		
Miss.	113	54	10	7	181	240	56	204		
W.S. CENTRAL	2,437	4,200	2,038	1,359	866	1,003	1,459	2,294		
Ark. La.	73 118	199 325	23 115	61 279	79 208	107 403	158 U	143 278		
Okla.	456	528	151	180	168	86	122	152		
Tex. MOUNTAIN	1,790 1,118	3,148 1,232	1,749 664	839 705	411 223	407 229	1,179 418	1,721 514		
Mont.	9	. 8	-	3	1	-	13	18		
Idaho	26 3	19 3	9 1	14 1	1 -	2 1	14 3	11 4		
Wyo. Colo.	191	219	144	158	2	10	U	64		
N. Mex. Ariz.	138 597	286 592	62 378	166 312	11 200	22 175	59 207	65 202		
Utah	64	41	64	31	2	4	40	47		
Nev.	90	64	6	20	6	15	82	103		
PACIFIC Wash.	2,418 116	3,217 208	214 99	3,156 185	325 64	344 27	3,242 161	3,595 239		
Oreg.	95	185	85	150	10	5	97	124		
Calif. Alaska	2,174 3	2,766 9	3	2,766 5	247 1	308 1	2,768 53	3,023 48		
Hawaii	30	49	27	50	3	3	163	161		
Guam	8	36	Ų	U	1	1	11	84		
P.R. V.I.	88 U	58 U	U U	U U	147 U	167 U	41 U	140 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 4, 1999, and December 5, 1998 (48th Week)

	H. influ	ienzae,	ŀ	lepatitis (Vi	ral), by typ	ре			Measl	les (Rube	ola)	
	inva	sive		A		3	Indi	genous	lmp	orted*		tal
Reporting Area	Cum. 1999†	Cum. 1998	Cum. 1999	Cum. 1998	Cum. 1999	Cum. 1998	1999	Cum. 1999	1999	Cum. 1999	Cum. 1999	Cum. 1998
UNITED STATES	1,049	987	15,557	20,646	5,856	8,833	-	60	-	24	84	89
NEW ENGLAND	92	66	269	274	131	204	-	6	-	5	11	3
Maine N.H.	8 20	3 10	14 18	19 14	1 16	5 18	-	-	-	1	1	-
Vt.	5	8	19	17	3	10	-		-	-	-	1
Mass. R.I.	36 6	39 5	94 21	116 16	38 34	76 66	-	5 -	-	3	8	2
Conn.	17	1	103	92	39	29	-	1	-	1	2	-
MID. ATLANTIC	166	160 59	892 254	1,607	549	1,139	-	-	-	2	2 2	14 2
Upstate N.Y. N.Y. City	77 38	40	281	336 569	175 177	227 395	-	-	-	-	-	-
N.J. Pa.	49 2	51 10	112 245	328 374	41 156	189 328	-	-	-	-	-	8 4
E.N. CENTRAL	156	170	2,581	3,353	602	1,344		1	-	2	3	16
Ohio	53	46	606	289	87	72	-	-	-	-	-	1
Ind. III.	23 66	43 62	102 646	154 748	39 1	106 218	-	1 -	-	1 -	2	3 1
Mich.	13	12	1,160	1,982	453	458	-	-	-	1	1	10
Wis.	1	7	67	180	22	490	-	-	-	-	-	1
W.N. CENTRAL Minn.	85 45	85 66	8 6 8 94	1,255 118	343 54	383 48	-	1 1	-	-	1 1	-
lowa	9	2	138	394	38	53	-	-	-	-	-	-
Mo. N. Dak.	22 1	10	534 3	584 3	207 2	230 4	Ū	-	Ū	-	-	-
S. Dak. Nebr.	1 3	- 1	9 50	31 26	1 14	2 21	-	-	-	-	-	-
Kans.	4	6	40	99	27	25	-	-	-	-	-	-
S. ATLANTIC	237	173	1,897	1,906	1,143	968	-	14	-	6	20	8
Del. Md.	- 65	1 51	2 329	4 393	1 159	4 132	-	-	-	-	-	1 1
D.C.	5	-	58	63	24	14	-		-	-	-	-
Va. W. Va.	19 7	17 6	168 39	197 7	91 23	93 10	-	14 -	-	4	18	2
N.C.	31	24	152	120	212	227	-	-	-	-	-	-
S.C. Ga.	5 62	3 43	45 447	38 629	65 159	44 127	-	-	-	-	-	2
Fla.	43	28	657	455	409	317	-	-	-	2	2	2
E.S. CENTRAL	52 7	61 7	355 62	379 30	367 42	473 47	-	2 2	-	-	2 2	2
Ky. Tenn.	27	36	142	209	165	260	-	-	-	-	-	1
Ala. Miss.	15 3	15 3	52 99	72 68	78 82	72 94	-	-	-	-	-	1
W.S. CENTRAL	46	51	3,608	3,753	801	1,912	_	10	_	4	14	_
Ark.	2	-	64	78	67	102	-	5	-	-	5	-
La. Okla.	7 33	21 27	73 435	103 566	77 129	157 98	-	-	-	-	-	-
Tex.	4	3	3,036	3,006	528	1,555	-	5	-	4	9	-
MOUNTAIN	104 3	110	1,223	2,963	532 17	772	-	4	-	-	4	4
Mont. Idaho	1	2	17 42	92 229	28	5 45	-	-	-	-	-	-
Wyo. Colo.	1 11	1 21	7 204	37 317	13 88	9 101	U	-	U	-	-	-
N. Mex.	18	7	50	145	164	302	-	-	-	-	-	-
Ariz. Utah	55 11	55 5	713 59	1,745 184	138 36	167 65	-	1 2	-	-	1 2	4
Nev.	4	19	131	214	48	78	-	1	-	-	1	-
PACIFIC	111	111	3,864	5,156	1,388	1,638	-	22	-	5	27	42
Wash. Oreg.	8 40	9 40	360 238	911 419	73 97	105 187	-	9	-	-	- 9	1 -
Calif.	46	49	3,234	3,757	1,187	1,318	-	13	-	4	17	8
Alaska Hawaii	9 8	4 9	12 20	17 52	17 14	13 15	-	-	-	1	- 1	33
Guam	-	-	2	1	2	2	_	1	-	-	1	-
P.R.	1 U	2 U	152	74	123	237	- U	- U	- U	- U	Ū	- U
V.I. Amer. Samoa	U	U	U U	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 200 cases among children aged <5 years, serotype was reported for 101 and of those, 28 were type b.

TABLE III. (Cont'd.) Provisional cases of selected notifiable diseases preventable by vaccination, United States, weeks ending December 4, 1999, and December 5, 1998 (48th Week)

	_	ococcal			0, 1000	7 (1011)	vveek)		Duk dia			
	Cum.						Mumps Pertussis Cum. Cum. Cum. Cum.			Rubella Cum.	Cum.	
Reporting Area	1999	1998	1999	1999	1998	1999	1999	1998	1999	1999	1998	
UNITED STATES	2,149	2,428	2	316	607	117	5,327	6,348	1	231	350	
NEW ENGLAND Maine	106 5	111 6	-	8 -	8 -	15 -	662	985 5	-	7	38	
N.H. Vt.	13 5	11 5	-	1 1	-	- 1	78 69	119 74	-	-	-	
Mass.	60	56	-	4	5	13	451	733	-	7	8	
R.I. Conn.	7 16	8 25	-	2	1 2	- 1	33 31	9 45	-	-	1 29	
MID. ATLANTIC	204	260	-	33	190	18	897	609	1	25	148	
Upstate N.Y. N.Y. City	65 49	74 31	-	13 3	11 155	15 -	714 10	310 46	1 -	21 -	114 19	
N.J. Pa.	47 43	56 99	-	- 17	6 18	3	12 161	27 226	-	1 3	13 2	
E.N. CENTRAL	361	374	1	42	77	32	487	803	-	2	-	
Ohio Ind.	126 62	133 69	- 1	17 5	28 7	29 2	217 73	269 169	-	- 1	-	
III.	96 44	97 44	-	11 7	10	1	81	121	-	1	-	
Mich. Wis.	33	31	-	2	29 3	-	64 52	66 178	-	-	-	
W.N. CENTRAL	231	211	-	13	32	25	403	564	-	124	40	
Minn. Iowa	50 43	32 42	-	1 7	13 11	21 3	209 69	331 69	-	5 29	-	
Mo. N. Dak.	93 4	73 5	Ū	1 1	3 2	Ū	61 18	35 4	Ū	3	2	
S. Dak. Nebr.	11 12	7 17	-	-	-	1	7	8 16	-	- 87	-	
Kans.	18	35	-	3	3	-	35	101	-	-	38	
S. ATLANTIC Del.	392 8	421 2	1	49	47	8	407 5	316 5	-	36	19	
Md.	52	33	-	7	-	1	107	63	-	1	1	
D.C. Va.	2 50	2 44	-	2 10	8	- 1	1 51	1 41	-	-	- 1	
W. Va. N.C.	8 42	17 55	-	- 8	- 11	-	3 90	4 98	-	- 35	- 13	
S.C.	43 59	55 97	-	4	7	1	18	27 27	-	-	-	
Ga. Fla.	128	116	1	14	1 20	5	40 92	50	-	-	4	
E.S. CENTRAL	127	188	-	13	17	-	76	146 77	-	1	2	
Ky. Tenn.	31 43	34 66	-	-	1 1	-	25 27	37	-	-	2	
Ala. Miss.	31 22	51 37	-	10 3	8 7	-	21 3	26 6	-	1 -	-	
W.S. CENTRAL	174	278	-	33	58	-	157	350	-	15	88	
Ark. La.	35 34	30 53	-	3	12 7	-	18 3	81 9	-	6 -	-	
Okla. Tex.	31 74	40 155	-	1 29	39	-	12 124	32 228	-	- 9	- 88	
MOUNTAIN	133	139	-	28	39	15	716	1,149	-	16	5	
Mont. Idaho	4 12	4 13	-	3	- 7	-	2 139	13 227	-	-	-	
Wyo.	4 34	8 27	U	- 5	1 6	U 7	139 2	8 313	U	- 1	-	
Colo. N. Mex.	14	26	N	N	N	5	199 191	97	-	1 -	1	
Ariz. Utah	42 15	39 13	-	8 7	6 5	1 -	113 59	191 259	-	13 1	1 2	
Nev.	8	9	-	5	14	2	11	41	-	1	1	
PACIFIC Wash.	421 63	446 61	-	97 2	139 11	4 2	1,522 603	1,426 311	-	5 -	10 5	
Oreg. Calif.	77 268	81 296	N	N 80	N 101	2	58 822	87 990	-	- 5	3	
Alaska	6	3	-	3	3	-	5	15	-	-	-	
Hawaii Guam	7 2	5 2	-	12 1	24 5	-	34 1	23 1	-	-	2	
P.R.	5	10		-	7	1	19	9	-		14	
V.I. Amer. Samoa	U U	U U	U U	U U	U U	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	

N: Not notifiable

U: Unavailable

-: no reported cases

TABLE IV. Deaths in 122 U.S. cities,* week ending December 4, 1999 (48th Week)

	All Causes, By Age (Years)						P&I [†]		All Cau	ıses, By	/ Age (Y	ears)		P&I [†]	
Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	Total	Reporting Area	All Ages	≥65	45-64	25-44	1-24	<1	Total
NEW ENGLAND Boston, Mass. Bridgeport, Conn. Cambridge, Mass. Fall River, Mass. Hartford, Conn. Lowell, Mass. Lynn, Mass. New Bedford, Mass. New Haven, Conn. Providence, R.I. Somerville, Mass. Springfield, Mass. Waterbury, Conn.	531 147 20 17 26 U 34 23 s. 30 40 78 9 9	391 91 14 17 22 U 28 16 21 23 65 5 5	35 5 3 0 4 4 6 7 9 2 4	40 15 1 1 U 2 2 2 7 1 2	8 1 - - - 1 - 3 2	7 5 - - - U - 1 - 1 -	45 11 1 2 2 U 1 4 2 8 3 3 6	S. ATLANTIC Atlanta, Ga. Baltimore, Md. Charlotte, N.C. Jacksonville, Fla. Miami, Fla. Norfolk, Va. Richmond, Va. Savannah, Ga. St. Petersburg, Fla. Tampa, Fla. Washington, D.C. Wilmington, Del.	190 56 28	720 U 89 83 104 69 36 53 29 67 137 40	229 U 39 23 39 23 16 16 11 12 32 13 5	99 U 24 12 16 11 1 8 - 4 11 2	34 U 11 4 3 2 2 3 1 1 6	22 U 2 4 4 1 2 2 3 4	65 U 9 12 5 9 1 7 3 11 6 2
Worcester, Mass. MID. ATLANTIC Albany, N.Y. Allentown, Pa. Buffalo, N.Y. Camden, N.J. Elizabeth, N.J. Erie, Pa. Jersey City, N.J. New York City, N.Y. Newark, N.J. Paterson, N.J. Philadelphia, Pa. Pittsburgh, Pa.§ Reading, Pa. Rochester, N.Y. Schenectady, N.Y.	51 2,304 46 U 105 24 13 59 46 1,219 63 7 276 56 43 147 25	42 1,657 34 U 77 16 9 49 35 860 20 4 189 44 39 117	3 442 7 U 19 6 3 8 9 255 20 - 57 10 2 22 4	5 130 1 U 3 1 1 2 1 68 16 3 21 1 1	1 41 3 U 1 - - 23 4 - 4 1 1 2	29 1 U 2 1 1 11 3 - 5 -	2 102 6 9 1 5 30 1 7 5 4 9 2	E.S. CENTRAL Birmingham, Ala. Chattanooga, Tenn. Knoxville, Tenn. Lexington, Ky. Memphis, Tenn. Mobile, Ala. Montgomery, Ala. Nashville, Tenn. W.S. CENTRAL Austin, Tex. Baton Rouge, La. Corpus Christi, Tex. Dallas, Tex. El Paso, Tex. Ft. Worth, Tex. Houston, Tex. Little Rock, Ark.	77 37 117 26 74 122 1,660 79 49	459 117 34 55 26 77 14 55 81 1,102 56 36 33 135 37 94 230 65	143 34 10 14 7 27 7 11 33 311 11 5 11 48 9 27 81 17	38 10 35 35 26 4 132 66 62 25 134 25	19 6 1 2 1 4 2 2 1 6 3 2 1 1 9 1 2 1 2 1 2 1 2 1 2 1 2 1 2 1 2	12 3 1 4 1 3 52 4 1 10 3 7 2	68 18 6 2 4 12 11 15 110 2 2 6 3 5 26 22 5
Scranton, Pa. Syracuse, N.Y. Trenton, N.J. Utica, N.Y. Yonkers, N.Y.	38 87 34 16 U	37 69 25 14 U	6 1 U	1 3 1 U	2 - - U	3 - - U	4 5 3 1 U	New Orleans, La. San Antonio, Tex. Shreveport, La. Tulsa, Okla. MOUNTAIN	97 258 100 141	40 176 75 105	20 43 18 21	12 21 4 8	13 9 2 5	12 9 1 2	16 15 8
E.N. CENTRAL Akron, Ohio Canton, Ohio Chicago, III. Cincinnati, Ohio Cleveland, Ohio Columbus, Ohio Dayton, Ohio Detroit, Mich. Evansville, Ind. Fort Wayne, Ind.	2,347 62 51 374 121 138 214 146 211 63 68	1,611 42 35 226 73 87 139 114 129 51	9 76 27 37 44 27 49 11	160 4 7 40 10 10 17 3 23 1 3	59 1 - 14 7 3 6 - 8	58 4 - 14 4 1 8 2 2	154 6 1 31 8 2 14 8 10 1	MOUNTAIN Albuquerque, N.M. Boise, Idaho Colo. Springs, Colo Denver, Colo. Las Vegas, Nev. Ogden, Utah Phoenix, Ariz. Pueblo, Colo. Salt Lake City, Utah Tucson, Ariz.	. 55 105 185 32 188 35	716 85 33 38 68 129 24 113 29 67 130	216 37 7 11 21 38 4 40 5 21	14 14 14 13 3 20 1 9	3 1 2 2 3 - 7 - 5 4	15 1 - - 2 1 8 - 2	15 2 7 14 3 6 4 7
Gary, Ind. Grand Rapids, Mich Indianapolis, Ind. Lansing, Mich. Milwaukee, Wis. Peoria, Ill. Rockford, Ill. South Bend, Ind. Toledo, Ohio Youngstown, Ohio	27 198 198 49 155 59 85 55 107 75	15 69 143 37 105 42 70 46 83 55	12 38 8 30 11 11 7	1 2 11 1 12 1 4 1 6 3	1 3 4 2 3 1 - 1 3	1 3 2 1 5 4 1 4 2	2 10 12 2 11 7 6 7 15	PACIFIC Berkeley, Calif. Fresno, Calif. Glendale, Calif. Honolulu, Hawaii Long Beach, Calif. Los Angeles, Calif. Pasadena, Calif. Portland, Oreg. Sacramento, Calif.	1,217 14 130 U 71 76 U 13 110	899 11 103 U 54 55 U 11 79	194 1 21 U 13 12 U 1 19	83 4 U 3 7 U - 8 U	20 2 1 U - - U 1 3 U	21 1 U 1 2 U	127 1 14 U 3 17 U 1 11
W.N. CENTRAL Des Moines, lowa Duluth, Minn. Kansas City, Kans. Kansas City, Mo. Lincoln, Nebr. Minneapolis, Minn. Omaha, Nebr. St. Louis, Mo. St. Paul, Minn. Wichita, Kans.	811 U 35 26 80 40 174 93 142 159 62	565 U 28 17 48 24 131 61 82 130 44	U 6 4 22 9 29 25 38 16	48 U 1 4 4 4 6 2 13 95	25 U 1 4 1 5 4 5 2 3	16 U - 2 2 3 1 4 2 2	49 U 1 2 7 3 10 6 - 17 3	San Diego, Calif. San Francisco, Calif. San Jose, Calif. Santa Cruz, Calif. Seattle, Wash. Spokane, Wash. Tacoma, Wash.	209 f. U 192 43 195 68 96 11,705	152 U 147 37 134 49 67 8,120	32 U 24 5 33 12 21 2,232	17 U 12 1 20 6 5 816	3 U 4 - 3 - 3 296	5 U 5 1 - 232	21 U 24 6 18 4 7 784

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.

Respiratory Syncytial Virus — Continued

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