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MMWR

MORBIDITY AND MORTALITY WEEKLY REPORT

Surveillance Summary

Brucellosis — United States, 1978

In 1978, 172 cases of brucellosis were reported to the Center for Disease Control. This is a decrease of 69 cases from the 241 reported in 1977, and the lowest number of cases reported in any year since 1927, when brucellosis was first recognized as a common cause of human illness.

Of these 172 cases, surveillance reports were received on 161 (94%); 127 (79%) of these were classified as initial infections, and 15 (9%) were recrudescent.* No reinfections were reported with onset in 1978. There were also no fatal cases.

Onset of illness was specified as acute or insidious in 104 brucellosis cases: acute in 57 (55%) and insidious in 47 (45%). In 136 cases the month of onset was specified. Onset of illness was reported to occur more frequently in the spring and summer than in the fall and winter—a pattern observed for the period 1965-1974 (*1*).

As in the past, brucellosis predominantly affected adult males. Of 160 cases for which sex was specified, 134 (84%) were in males; 116 (82%) of 142 cases for which age was given were in persons between 20 and 60 years of age. This is the age category of the work force in the United States and the population at greatest risk of acquiring brucellosis in the meat-packing and livestock industries. Indeed, 58 (46%) of the 127 cases for which information was available were in individuals working in the meat-processing industry (Figure 1).

Thirty-eight states reported cases last year (Figure 2) compared with 37 states, Puerto Rico, and Guam in 1977. Two states, Iowa and Texas, reported more than 15 cases each and together accounted for 22% of the 1978 total. Idaho reported the greatest increase in total cases (5), while Virginia reported the greatest decrease (33). Virginia's marked decline was because of a reduction in swine-associated cases in abattoir workers. The majority of the Idaho cases were associated with cattle.

As in the period 1975-1977, cattle were the most common source of human infection last year. Contact with infected cattle resulted in 54 (34%) human cases in 1978. Swine-associated cases were markedly reduced, due primarily to Virginia's decrease in such cases. Contact with infected domestic swine was responsible for 16 cases (10%), and

*A confirmed case was defined as 1). a clinical specimen culture-positive for *Brucella*, or 2). clinical symptoms compatible with brucellosis, such as any combination of fever, sweats, chills, undue fatigue, anorexia, weight loss, arthralgia, lymphadenopathy, and splenomegaly, and a ≥4-fold change in *Brucella* agglutination titer between acute and convalescent serum specimens obtained 2 or more weeks apart and studied at the same laboratory. A presumptive case was defined as clinical symptoms compatible with brucellosis with either a *Brucella* agglutination titer positive at a ≥1:160 dilution on a single serum specimen obtained after the onset of symptoms or a stable *Brucella* agglutination titer positive at a ≥1:160 dilution in serum specimens obtained after the onset of symptoms. A recrudescent case is a confirmed or presumptive case in a person who, within the preceding 3 years, had an illness diagnosed as brucellosis followed by a period of apparent recovery.

Brucellosis – Continued

feral swine for 2 cases in hunters. An additional 18 (11%) cases resulted from contact with cattle and swine. Three cases were associated with contact with dogs. Fourteen (9%) cases were attributed to the ingestion of unpasteurized dairy products—9 of these to milk produced in the United States. Five cases were attributed to foreign dairy products, including raw milk or cheese from Mexico (3 cases), Iran (1 case), and an unspecified Latin American country (1 case). Accidental injection of strain 19 *Brucella* vaccine was listed as the cause in 3 cases, all in veterinarians, and laboratory accidents resulted in 2 cases.

Reported by the Bacterial Zoonoses Br, Bacterial Diseases Div, Bur of Epidemiology, CDC.

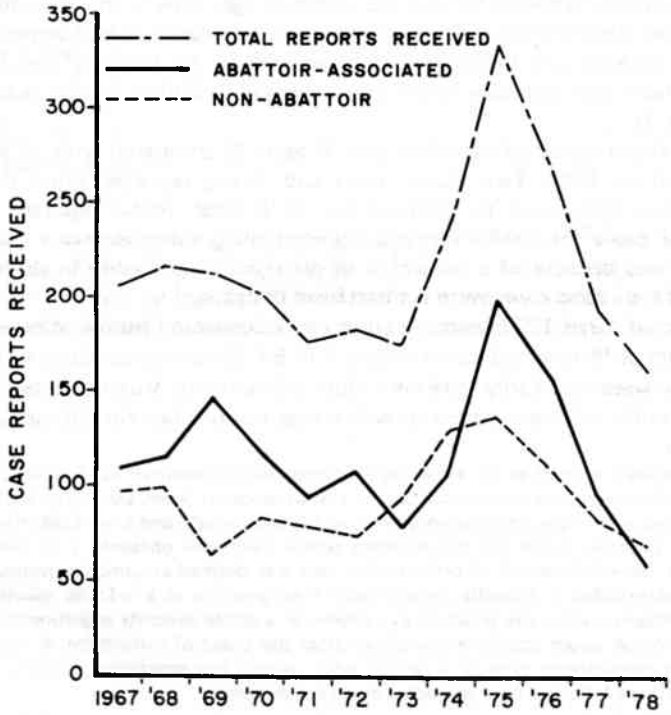
Editorial Note: A review of brucellosis cases in the United States from 1967 to 1978 emphasizes the importance of abattoirs in the epidemiology of brucellosis. In 7 of the last 10 years, more than half of reported cases occurred in people associated with the meat-processing industry (Figure 2). Of 2,063 cases on which reports were received in this 10-year period, 1,171 (57%) were in abattoir workers.

Reference

1. Fox JD, Kaufmann AF: Brucellosis in the United States, 1965-1974. J Infect Dis 136: 312-316, 1977

▲ A copy of the surveillance report from which these data were summarized is available on request from CDC, Attn: Bacterial Zoonoses Br, Bacterial Diseases Div, Bur of Epidemiology, CDC.

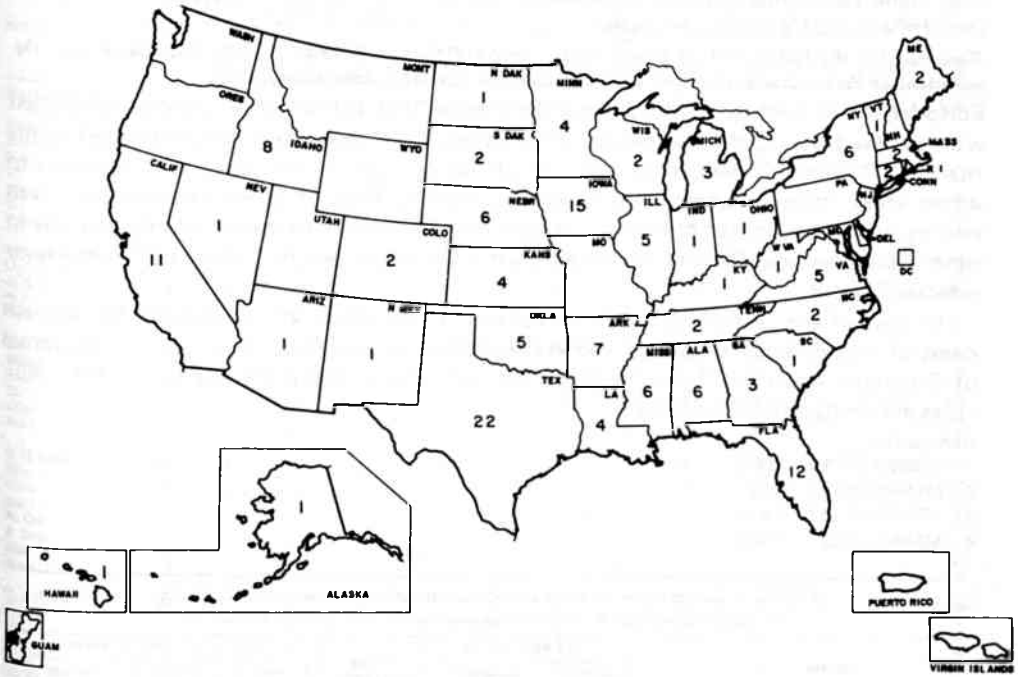
FIGURE 1. Total brucellosis cases and proportion associated with abattoirs,* United States, 1967-1978



*Includes packinghouse employees, government meat inspectors, and rendering plant workers.

Brucellosis — Continued

FIGURE 2. Human brucellosis cases, by state, United States, 1978



International Notes

Yellow Fever — Trinidad, Colombia

Trinidad: On September 11, the Ministry of Health, Trinidad and Tobago, officially notified the Pan American Health Organization and the World Health Organization (WHO) that an outbreak of jungle yellow fever had been confirmed in howler monkeys from the Mamural Forest of central Trinidad. In addition, 7 suspected human cases—all sylvatic—were under investigation.

A similar outbreak of jungle yellow fever in the Guayaguayare Forest of southeast Trinidad occurred in the fall of 1978 and spring of this year (*1-3*). As a result of that outbreak, more than 75% of the population of Trinidad was immunized in a mass immunization program in the spring of 1979.

Control measures for *Aedes aegypti* and surveillance for suspected human cases are continuing throughout the island.

The island of Tobago remains free of yellow fever infection.

Colombia: A recently reported outbreak of yellow fever (*4*) appears to be spreading north from Valledupar toward the more populated coastal areas. Several cases have been reported in Fundación and Ciénaga, about 40 miles east of Barranquilla on the coast. Health officials are vaccinating persons in the Fundación area and other coastal areas to the west. Although it has not been determined that the *A. aegypti* vector is involved in the outbreak, this species is known to be prevalent throughout the affected area.

Yellow Fever — Continued

Currently, the following areas of Colombia are officially included in those listed by WHO as being infected with jungle yellow fever: Caquetá Intendencia, Cesar Department, Magdalena Department, Meta Intendencia, Norte de Santander Department, Santander Department, and Vaupés Comisaria.

Reported by the Pan American Health Organization; Office of Foreign Disaster Assistance, U.S. Department of State; Quarantine Div, Viral Diseases Div, Bur of Epidemiology, CDC.

Editorial Note: Because of the official declaration that the island of Trinidad is infected with yellow fever, CDC now recommends yellow fever vaccination for all travelers to the island of Trinidad. There is no evidence of risk for visitors who limit their activities to urban areas, such as cruise ship passengers visiting Port of Spain. Nevertheless, even visitors with such limited travel in Trinidad may be subject to quarantine restrictions in other Caribbean and Central American ports of entry in view of Trinidad's "yellow fever infected" status.

In view of the current yellow fever activity in Colombia, all travelers to the northern coast of that country should be vaccinated against yellow fever. Travelers to other areas of Colombia listed as infected with yellow fever should be vaccinated, unless their activities are limited to urban areas.

References

1. MMWR 27:509, 1978
2. MMWR 28:72, 1979
3. MMWR 28:279, 1979
4. MMWR 28:371, 1979

TABLE I. Summary — cases of specified notifiable diseases, United States

[Cumulative totals include revised and delayed reports through previous weeks.]

DISEASE	37th WEEK ENDING		MEDIAN 1974-1978**	CUMULATIVE, FIRST 37 WEEKS		
	September 15, 1979	September 16, 1978*		September 15, 1979	September 16, 1978*	MEDIAN 1974-1978**
Aseptic meningitis	367	293	171	4,535	3,820	2,364
Brucellosis	6	2	6	110	126	164
Chickenpox	252	240	248	171,292	124,132	124,132
Diphtheria	–	–	1	62	59	126
Encephalitis: Primary (arthropod-borne & unspec.)	31	67	63	595	802	802
Post-infectious	6	3	3	170	162	198
Hepatitis, Viral: Type B	297	272	272	10,215	10,671	10,580
Type A	586	497	599	20,638	20,311	24,081
Type unspecified	234	139	158	7,358	5,892	5,900
Malaria	10	19	12	470	530	326
Measles (rubeola)	42	200	107	12,135	23,944	23,944
Meningococcal infections: Total	21	29	29	1,933	1,823	1,158
Civilian	21	28	28	1,923	1,800	1,141
Military	–	1	–	10	23	23
Mumps	70	58	183	11,189	13,425	32,698
Pertussis	36	41	41	968	1,488	1,098
Rubella (German measles)	36	140	78	10,660	16,874	14,826
Tetanus	3	–	1	50	59	59
Tuberculosis	497	567	588	19,928	20,687	21,769
Tularemia	7	1	1	148	88	105
Typhoid fever	15	9	10	335	364	281
Typhus fever, tick-borne (Rky. Mt. spotted)	23	23	27	857	874	737
Venereal diseases:						
Gonorrhea: Civilian	23,211	20,955	21,331	699,722	703,068	703,068
Military	381	525	525	19,494	18,363	19,235
Syphilis, primary & secondary: Civilian	495	475	410	17,115	14,776	14,776
Military	10	4	5	224	204	209
Rabies in animals	90	63	59	3,503	2,261	2,099

TABLE II. Notifiable diseases of low frequency, United States

	CUM. 1979		CUM. 1979
Anthrax	–	Poliomyelitis: Total	23
Botulism (Wash. 1, Calif. 1)	17	Paralytic	20
Cholera (Calif. 1)	1	Psittacosis (Colo. 1)	76
Congenital rubella syndrome	36	Rabies in man	2
Leprosy†	114	Trichinosis† (Upst. N.Y. 1, N.J. 1, La. 1, Tex. 1)	113
Leptospirosis (Va. 1)	32	Typhus fever, flea-borne (endemic, murine) (Tex. 7)	42
Plague	9		

*Delayed reports received for calendar year 1978 are used to update last year's weekly and cumulative totals.

**Medians for gonorrhea and syphilis are based on data for 1976-1978.

†The following delayed reports will be reflected in next week's cumulative totals: Leprosy: P.R. +1; Trichinosis: Mo. +1, N.Mex. +3.

TABLE III. Cases of specified notifiable diseases, United States, weeks ending September 15, 1979, and September 16, 1978 (37th week)

REPORTING AREA	ASEPTIC MENINGITIS	BRUCELLOSIS	CHICKENPOX	DIPHTHERIA		ENCEPHALITIS			HEPATITIS (VIRAL), BY TYPE			MALARIA	
						Primary		Post-infectious	B	A	Unspecified		
	1979	1979	1979	1979	CUM. 1979	1979	1978*	1979	1979	1979	1979	1979	CUM. 1979
UNITED STATES	367	6	252	–	62	31	67	6	297	586	234	10	470
NEW ENGLAND	41	–	37	–	–	1	1	–	4	14	16	–	31
Maine†	–	–	3	–	–	–	–	–	–	2	1	–	1
N.H.†	3	–	–	–	–	1	–	–	–	–	–	–	–
Vt.	–	–	–	–	–	–	–	–	2	–	–	–	–
Mass.	14	–	14	–	–	–	1	–	–	3	14	–	9
R.I.	7	–	11	–	–	–	–	–	1	4	–	–	9
Conn.	17	–	9	–	–	–	–	–	1	5	1	–	12
MID. ATLANTIC	79	1	22	–	–	5	8	–	41	58	14	1	65
Upstate N.Y.	29	1	8	–	–	2	2	–	7	22	6	–	13
N.Y. City	8	–	11	–	–	–	–	–	8	13	2	–	31
N.J.†	39	–	NN	–	–	1	4	–	8	13	5	–	8
Pa.†	3	–	3	–	–	2	2	–	18	10	1	1	13
E.N. CENTRAL	51	1	87	–	2	4	34	1	42	74	25	–	36
Ohio†	–	1	4	–	–	–	15	–	6	10	–	–	7
Ind.†	3	–	12	–	1	–	5	–	3	4	11	–	1
Ill.	3	–	10	–	–	–	3	–	20	20	2	–	17
Mich.	22	–	12	–	–	1	4	–	7	36	12	–	9
Wis.†	23	–	49	–	1	3	7	1	6	4	–	–	2
W.N. CENTRAL	29	1	24	–	1	–	5	3	32	30	8	–	15
Minn.†	–	–	1	–	–	–	4	–	8	5	1	–	5
Iowa	2	1	15	–	–	–	–	–	3	3	3	–	2
Mo.†	14	–	3	–	1	–	1	–	9	8	4	–	3
N. Dak.	–	–	–	–	–	–	–	–	–	–	–	–	–
S. Dak.	–	–	–	–	–	–	–	–	–	2	–	–	1
Nebr.	6	–	5	–	–	–	–	–	1	–	–	–	2
Kans.	7	–	–	–	–	–	–	3	11	12	–	–	2
S. ATLANTIC	30	–	14	–	1	6	13	2	51	81	23	–	58
Del.	–	–	1	–	–	–	–	–	–	–	–	–	1
Md.	–	–	2	–	–	–	1	–	5	5	2	–	9
D.C.	–	–	1	–	–	–	–	–	–	–	–	–	6
Va.†	7	–	1	–	1	–	5	–	6	3	5	–	19
W. Va.	7	–	2	–	–	4	6	–	1	1	1	–	2
N.C.	5	–	NN	–	–	2	1	–	6	10	3	–	5
S.C.	–	–	–	–	–	–	–	–	1	6	1	–	1
Ga.	–	–	–	–	–	–	–	–	9	21	–	–	2
Fla.	11	–	7	–	–	–	–	2	23	35	11	–	13
E.S. CENTRAL	38	1	9	–	–	6	4	–	27	20	1	–	8
Ky.	16	–	9	–	–	1	–	–	–	1	–	–	–
Tenn.	8	1	NN	–	–	2	1	–	12	9	–	–	–
Ala.	11	–	–	–	–	1	1	–	10	4	1	–	3
Miss.	3	–	–	–	–	2	2	–	5	6	–	–	5
W.S. CENTRAL	29	1	18	–	–	2	–	–	16	71	55	2	28
Ark.	1	–	–	–	–	1	–	–	–	5	6	–	–
La.	5	–	NN	–	–	–	–	–	3	14	3	–	2
Okla.	2	–	–	–	–	–	–	–	–	9	4	1	4
Tex.	21	1	18	–	–	1	–	–	13	43	42	1	22
MOUNTAIN	9	1	18	–	1	5	–	–	8	78	43	–	13
Mont.	4	–	17	–	–	1	–	–	–	3	–	–	2
Idaho	–	1	–	–	–	–	–	–	–	1	–	–	–
Wyo.	–	–	–	–	–	–	–	–	–	–	–	–	1
Colo.	2	–	1	–	–	2	–	–	3	8	1	–	5
N. Mex.	–	–	–	–	–	1	–	–	–	12	–	–	1
Ariz.	–	–	NN	–	1	–	–	–	5	49	41	–	4
Utah	–	–	–	–	–	–	–	–	–	1	5	–	–
Nev.	3	–	–	–	–	1	–	–	–	4	1	–	–
PACIFIC	61	–	23	–	57	2	2	–	76	160	44	7	216
Wash.†	9	–	14	–	55	–	–	–	4	15	4	–	10
Oreg.	2	–	–	–	–	–	–	–	6	21	–	1	10
Calif.†	48	–	–	–	2	1	2	–	64	120	38	6	194
Alaska	1	–	1	–	–	1	–	–	–	–	–	–	–
Hawaii	1	–	8	–	–	–	–	–	2	4	2	–	2
Guam†	NA	NA	NA	NA	–	NA	–	–	NA	NA	NA	NA	–
P.R.†	2	–	17	–	–	–	–	–	4	26	17	–	1
V.I.	–	–	–	–	–	–	–	–	–	–	–	–	–
Pac. Trust Terr.†	NA	NA	NA	NA	–	NA	–	–	NA	NA	NA	NA	–

NN: Not notifiable. NA: Not available.

*Delayed reports received for 1978 are not shown below but are used to update last year's weekly and cumulative totals.

†The following delayed reports will be reflected in next week's cumulative totals: Asep. meng.: Pa. –1, Ind. +18, Wis. +22, Mo. +5, Wash. –5, Calif. +37, P.R. +2; Chickenpox: N.H. –54, Mo. +133, Calif. +3, Guam +1, Pac.Tr.Terr. +2; Enceph.: Ohio +1, Ind. +5, Calif. +4; Hep.B: N.H. +1, Mo. –7, Calif. +52, Guam +2; Hep.A: N.H. –1, Minn. –1, Mo. –6, Calif. +72, Guam +2; Hep.unsp: N.J. –1, Mo. –4, Va. –1, Calif. +33, Guam +2, Pac.Tr.Terr. +1; Malaria: Maine +2, Minn. +1, Calif. +9.

TABLE III (Cont.'d). Cases of specified notifiable diseases, United States, weeks ending September 15, 1979, and September 16, 1978 (37th week)

REPORTING AREA	MEASLES (RUBEOLA)			MENINGOCOCCAL INFECTIONS TOTAL			MUMPS		PERTUSSIS	RUBELLA		TETANUS
	1979	CUM. 1979	CUM. 1978*	1979	CUM. 1979	CUM. 1978*	1979	CUM. 1979	1979	1979	CUM. 1979	CUM. 1979
UNITED STATES	42	12,135	23,944	21	1,933	1,823	70	11,189	36	36	10,660	50
NEW ENGLAND	1	287	1,961	–	97	101	7	398	–	1	1,409	4
Maine	–	17	1,314	–	5	7	5	139	–	–	61	–
N.H.	–	32	46	–	9	8	–	4	–	–	122	–
Vt.	1	119	25	–	6	2	–	8	–	–	397	–
Mass.	–	13	241	–	29	43	–	36	–	1	481	3
R.I.	–	102	8	–	7	15	1	33	–	–	93	–
Conn.†	–	4	327	–	41	26	1	178	–	–	255	1
MID. ATLANTIC	7	1,513	2,165	7	295	289	2	1,086	10	4	1,899	9
Upstate N.Y.	2	655	1,390	1	99	92	–	157	5	2	1,054	3
N.Y. City	5	756	346	4	75	68	–	119	2	1	259	4
N.J.†	–	57	74	–	70	57	–	527	3	–	322	1
Pa.	–	45	355	2	51	72	2	283	–	1	264	1
E.N. CENTRAL	7	3,143	10,816	1	191	244	29	4,877	4	10	2,484	3
Ohio†	–	264	474	–	71	66	13	1,764	4	–	135	2
Ind.	1	204	191	–	40	40	2	274	–	3	726	–
Ill.	4	1,406	1,078	–	11	77	2	867	–	1	179	–
Mich.†	–	823	7,606	1	53	50	1	884	–	3	1,192	1
Wis.†	2	446	1,467	–	16	11	11	1,088	–	3	252	–
W.N. CENTRAL	5	1,733	387	1	52	63	5	649	2	4	447	2
Minn.	5	1,214	36	1	11	16	–	10	–	–	38	–
Iowa	–	16	57	–	9	9	3	231	–	–	52	–
Mo.†	–	420	9	–	24	24	–	189	1	2	54	1
N. Dak.	–	20	193	–	1	3	–	2	–	–	8	1
S. Dak.	–	2	–	–	2	2	2	7	–	–	5	–
Nebr.	–	–	5	–	–	–	–	7	–	2	202	–
Kans.	–	61	87	–	5	9	–	203	1	–	88	–
S. ATLANTIC	4	1,820	5,070	1	480	430	5	563	8	2	1,218	8
Del.	–	1	6	–	3	2	–	39	–	–	5	–
Md.†	–	15	52	–	43	28	2	155	–	–	28	–
D.C.	–	–	48	–	2	1	–	2	–	–	1	–
Va.	1	269	2,824	–	69	53	–	83	–	–	200	1
W. Va.	1	54	1,042	–	8	10	–	98	–	–	106	–
N.C.	1	112	117	–	75	89	1	70	1	–	527	3
S.C.	–	151	197	–	59	26	–	3	–	–	62	–
Ga.	–	450	28	–	69	47	1	4	6	–	11	–
Fla.	1	768	756	1	152	174	1	109	1	2	278	4
E.S. CENTRAL	5	201	1,407	2	146	143	2	1,323	2	1	298	8
Ky.	–	37	119	–	29	28	1	1,088	2	–	68	1
Tenn.	5	56	943	1	41	35	1	98	–	–	95	–
Ala.	–	84	101	–	36	45	–	22	–	1	44	5
Miss.	–	24	244	1	40	35	–	115	–	–	91	2
W.S. CENTRAL	4	900	1,051	3	311	269	9	1,342	1	1	232	15
Ark.	–	9	16	–	26	21	–	480	–	–	6	4
La.	2	247	343	1	116	112	–	36	–	–	26	2
Okla.	–	22	13	1	27	16	–	–	–	–	22	–
Tex.	2	622	679	1	142	120	9	826	1	1	178	9
MOUNTAIN	4	318	250	–	77	41	1	265	3	1	507	–
Mont.	–	57	106	–	8	3	–	10	1	–	68	–
Idaho	–	21	1	–	7	4	–	8	–	–	199	–
Wyo.	–	36	–	–	1	–	–	–	–	–	–	–
Colo.	4	64	30	–	5	3	–	75	1	–	66	–
N. Mex.†	–	39	–	–	4	7	–	12	1	–	11	–
Ariz.	–	72	50	–	33	15	–	53	–	–	126	–
Utah	–	18	44	–	8	5	–	94	–	1	35	–
Nev.	–	11	19	–	11	4	1	13	–	–	2	–
PACIFIC	5	2,220	837	6	284	243	10	686	6	12	2,166	1
Wash.	–	1,126	165	1	46	40	–	186	–	2	176	–
Oreg.	3	61	146	–	23	27	5	79	–	–	101	–
Calif.†	2	951	519	4	199	167	4	313	6	9	1,864	1
Alaska	–	17	–	1	6	6	–	9	–	–	3	–
Hawaii	–	65	7	–	10	3	1	99	–	1	22	–
Guam†	NA	3	25	–	1	1	NA	9	NA	NA	4	–
P.R.†	8	337	245	1	4	6	6	536	–	1	34	8
V.I.	–	4	6	–	3	1	–	15	–	–	–	–
Pac. Trust Terr.†	NA	7	592	–	1	2	NA	28	NA	NA	1	–

NA: Not available.

*Delayed reports received for 1978 are not shown below but are used to update last year's weekly and cumulative totals.

†The following depayed reports will be reflected in next week's cumulative totals: Measles: Ohio +1, Wis. –3, Mo. –7, Calif. +4, Guam +4; Men. inf.: Mich. +1, Mo. +5, Md. –1, N.Mex. +1, Calif. +1, P.R. +1; Mumps: Mo. +4, Calif. +4, Guam +2, Pac.Tr.Terr. +1; Pertussis: Mo. +6, Calif. +3; Rubella: Conn. +1, N.J. –1, Mo. +4, Calif. +3.

TABLE III (Cont.'d). Cases of specified notifiable diseases, United States, weeks ending September 15, 1979, and September 16, 1978 (37th week)

REPORTING AREA	TUBERCULOSIS		TULAREMIA	TYPHOID FEVER		TYPHUS FEVER (Tick-borne) (RMSF)		VENEREAL DISEASES (Civilian)						RABIES (in Animals)
								GONORRHEA			SYPHILIS (Pri. & Sec.)			
	1979	CUM. 1979	CUM. 1979	1979	CUM. 1979	1979	CUM. 1979	1979	CUM. 1979	CUM. 1978*	1979	CUM. 1979	CUM. 1978*	CUM. 1979
UNITED STATES	497	19,928	148	15	335	23	857	23,211	699,722	703,068	495	17,115	14,776	3,503
NEW ENGLAND	10	546	3	–	16	1	7	482	17,368	18,344	5	341	418	39
Maine	–	39	–	–	1	–	–	32	1,218	1,442	–	10	7	24
N.H.	–	10	–	–	–	–	–	17	652	850	–	18	5	3
Vt.	–	24	–	–	–	–	–	16	413	436	–	1	3	–
Mass.	5	299	3	–	9	1	4	198	6,862	8,038	4	190	253	10
R.I.	3	48	–	–	2	–	–	43	1,431	1,312	1	12	17	1
Conn.†	2	126	–	–	4	–	3	176	6,792	6,266	–	110	133	1
MID. ATLANTIC	73	3,103	1	4	54	1	36	2,605	76,654	75,527	68	2,592	1,912	57
Upstate N.Y.	24	595	1	1	10	–	22	317	12,783	12,588	–	179	140	39
N.Y. City†	15	1,138	–	1	24	–	1	1,168	30,297	28,972	49	1,759	1,320	–
N.J.	20	568	–	1	13	–	5	107	13,554	13,964	5	339	234	5
Pa.†	14	802	–	1	7	1	8	1,013	20,020	20,003	18	315	218	13
E.N. CENTRAL	84	2,949	–	1	25	2	56	2,867	108,042	106,971	53	2,287	1,643	308
Ohio†	12	532	–	–	3	2	20	612	29,873	27,963	17	442	301	27
Ind.	6	373	–	–	–	–	2	179	9,272	11,148	1	166	118	61
Ill.	39	1,168	–	–	7	–	30	971	33,547	33,458	25	1,282	1,025	144
Mich.†	24	744	–	1	11	–	3	814	25,552	24,759	6	329	150	11
Wis.	3	132	–	–	4	–	1	291	9,798	9,643	4	68	49	65
W.N. CENTRAL	22	688	21	1	14	1	44	1,315	34,740	35,648	8	229	324	699
Minn.	2	109	–	–	3	–	2	277	5,850	6,150	1	62	133	128
Iowa	2	56	–	–	4	–	13	118	4,124	3,877	–	27	29	134
Mo.†	15	370	18	1	5	1	18	514	15,049	15,651	3	104	95	214
N. Dak.	–	14	–	–	–	–	–	22	576	659	–	2	2	52
S. Dak.	–	41	2	–	–	–	–	31	1,164	1,245	–	2	3	78
Nebr.†	2	16	1	–	1	–	3	113	2,434	2,618	1	3	11	–
Kans.†	1	82	–	–	1	–	8	240	5,543	5,448	3	29	51	93
S. ATLANTIC	93	4,540	8	1	36	10	495	5,769	170,146	172,029	98	4,093	3,909	486
Del.	–	36	–	–	–	–	3	80	2,816	2,432	–	21	7	–
Md.†	6	586	–	–	8	–	53	293	20,324	21,713	10	273	296	9
D.C.	–	217	2	–	1	–	2	452	11,169	11,511	8	319	297	–
Va.	26	540	1	–	4	3	82	519	16,298	16,497	13	347	338	15
W. Va.	3	174	–	–	3	–	9	74	2,344	2,363	–	41	15	–
N.C.†	13	724	–	–	1	6	195	711	24,443	25,010	2	322	409	12
S.C.	4	326	1	–	3	–	70	610	15,951	16,749	5	209	199	148
Ga.	14	712	4	1	2	–	75	924	32,316	32,977	37	1,130	978	258
Fla.†	27	1,225	–	–	14	1	6	2,106	44,485	42,777	23	1,431	1,370	44
E.S. CENTRAL	55	1,832	14	1	17	3	119	2,289	60,118	59,916	28	1,118	764	246
Ky.	12	477	2	–	5	–	18	302	7,922	7,769	6	122	97	98
Tenn.	12	517	12	1	3	3	72	796	21,681	22,196	8	472	261	86
Ala.	21	430	–	–	7	–	17	839	17,928	17,042	5	208	133	61
Miss.	10	408	–	–	2	–	12	352	12,587	12,909	9	316	273	1
W.S. CENTRAL	56	2,411	61	3	51	4	82	3,675	90,767	95,535	133	3,145	2,366	1,342
Ark.	3	208	39	2	3	2	18	216	7,152	7,036	2	102	53	262
La.	4	484	4	–	4	–	1	600	16,053	15,432	55	775	494	20
Okla.	11	263	12	–	–	1	48	279	8,716	9,038	5	68	68	213
Tex.†	38	1,456	6	1	44	1	15	2,580	58,846	64,029	71	2,200	1,751	847
MOUNTAIN	19	607	35	–	23	1	14	758	28,113	26,675	13	331	290	94
Mont.	–	29	8	–	–	–	4	47	1,392	1,531	–	6	7	8
Idaho	–	10	1	–	1	–	2	17	1,224	1,060	–	21	11	7
Wyo.†	2	6	–	–	1	–	–	58	766	636	–	5	8	–
Colo.	2	89	12	–	12	–	4	295	7,495	7,394	6	71	86	21
N. Mex.†	1	104	3	–	4	–	–	60	3,511	3,830	–	62	67	32
Ariz.	11	297	–	–	3	–	–	108	7,831	6,856	–	94	68	21
Utah	1	25	9	–	–	1	1	46	1,428	1,468	–	3	11	5
Nev.	2	47	2	–	2	–	3	127	4,466	3,900	7	69	32	–
PACIFIC	85	3,252	5	4	99	–	4	3,451	113,774	112,423	89	2,979	3,150	232
Wash.	4	190	3	–	5	–	–	578	10,142	9,055	–	153	173	–
Oreg.	4	137	–	–	1	–	–	280	7,458	7,777	4	126	111	11
Calif.†	73	2,635	2	3	84	–	4	2,414	90,355	90,076	84	2,610	2,830	219
Alaska†	–	52	–	1	2	–	–	91	3,633	3,485	–	21	8	2
Hawaii	4	238	–	–	7	–	–	88	2,186	2,030	1	69	28	–
Guam†	NA	43	–	NA	–	NA	–	NA	70	90	NA	–	–	–
P.R.†	2	221	–	–	4	–	–	46	1,456	1,590	27	369	339	16
V.I.	–	3	–	–	1	–	–	3	123	144	–	6	14	–
Pac. Trust Terr.†	NA	20	–	NA	–	NA	–	NA	273	350	NA	1	–	–

NA: Not available.
*Delayed reports received for 1978 are not shown below but are used to update last year's weekly and cumulative totals.
†The following delayed reports will be reflected in next week's cumulative totals: TB: NYC –14, Pa. +17, Mich. –1, Mo. –8, Kans. –1, N.C. –3, Fla. –3, Calif. +57, Alaska +7, Guam +4, Pac.Tr.Terr. +1; Tularemia: Mo. +2, N.Mex. +1; Typhoid fever: Mo. +1, Md. –1, Calif. +5; RMSF: Mo. +1, N.C. –1, N.Mex. +1, GC: Conn. –2 civ., Mo. +60 civ., Neb. –3 civ. +2 mil., Wyo. +3 mil., Calif. +1997 civ. +52 mil., Guam +3 civ. +8 mil., P.R. +20 civ., Pac.Tr.Terr. +6 civ.; Syphilis: Mo. –2, Tex. –1, Calif. +91; An. rabies: Ohio +2, N.Mex. +2, Calif. +11.

TABLE IV. Deaths in 121 U.S. cities,* week ending September 15, 1979 (37th week)

REPORTING AREA	ALL CAUSES, BY AGE (YEARS)					P&I** TOTAL
	ALL AGES	>65	45-64	25-44	<1	
NEW ENGLAND	605	394	140	34	17	37
Boston, Mass.	161	88	46	13	5	12
Bridgeport, Conn.	46	33	10	2	–	5
Cambridge, Mass.	23	14	8	1	–	–
Fall River, Mass.	25	22	3	–	–	1
Hartford, Conn.	50	30	11	3	2	1
Lowell, Mass.	27	19	3	3	–	3
Lynn, Mass.	16	11	4	1	–	1
New Bedford, Mass.	23	18	3	2	–	1
New Haven, Conn.	56	34	12	4	4	–
Providence, R.I.	66	45	17	2	1	7
Somerville, Mass.	4	3	1	–	–	–
Springfield, Mass.	43	34	5	1	2	2
Waterbury, Conn.	20	14	5	1	–	2
Worcester, Mass.	45	29	12	1	3	2
MID. ATLANTIC	2,644	1,639	647	203	78	108
Albany, N.Y.	52	27	16	4	4	–
Allentown, Pa.	22	17	5	–	–	1
Buffalo, N.Y.	117	76	27	8	3	6
Camden, N.J.	47	26	15	3	2	2
Elizabeth, N.J.	28	18	7	3	–	–
Erie, Pa.†	19	16	3	–	–	–
Jersey City, N.J.	38	25	8	2	3	1
Newark, N.J.	53	24	12	6	7	3
N.Y. City, N.Y.	1,413	876	321	124	43	45
Paterson, N.J.	22	15	5	2	–	1
Philadelphia, Pa.†	396	244	111	29	6	27
Pittsburgh, Pa.†	74	34	29	2	3	4
Reading, Pa.	38	33	5	–	–	4
Rochester, N.Y.	106	62	28	10	3	5
Schenectady, N.Y.	20	11	5	2	–	1
Scranton, Pa.†	24	18	5	–	1	–
Syracuse, N.Y.	83	55	21	3	2	2
Trenton, N.J.	36	22	13	1	–	2
Utica, N.Y.	25	17	6	1	1	2
Yonkers, N.Y.	31	23	5	3	–	2
E.N. CENTRAL	2,197	1,345	526	151	104	51
Akron, Ohio	56	35	16	–	4	–
Canton, Ohio	51	35	10	1	3	–
Chicago, Ill.	528	309	125	43	26	13
Cincinnati, Ohio	133	90	25	11	4	3
Cleveland, Ohio	191	97	61	20	7	5
Columbus, Ohio	141	80	34	13	8	4
Dayton, Ohio	92	61	21	2	5	3
Detroit, Mich.	248	152	65	19	6	7
Evansville, Ind.	51	32	13	3	1	2
Fort Wayne, Ind.	34	19	10	3	–	–
Gary, Ind.	19	12	–	4	1	–
Grand Rapids, Mich.	53	32	10	4	6	6
Indianapolis, Ind.	149	91	36	9	10	4
Madison, Wis.	23	15	5	2	1	1
Milwaukee, Wis.	143	95	28	7	12	1
Peoria, Ill.	35	20	8	3	3	–
Rockford, Ill.	32	20	6	–	4	1
South Bend, Ind.	46	39	6	–	–	1
Toledo, Ohio	123	80	33	5	2	1
Youngstown, Ohio	49	31	14	2	1	1
W.N. CENTRAL	734	441	168	43	46	26
Des Moines, Iowa	38	27	7	2	–	2
Duluth, Minn.	26	15	7	–	2	3
Kansas City, Kans.	32	14	7	4	5	–
Kansas City, Mo.	109	57	32	7	6	1
Lincoln, Nebr.	27	21	4	1	–	–
Minneapolis, Minn.	93	56	17	10	7	2
Omaha, Nebr.	106	76	17	3	9	3
St. Louis, Mo.	170	89	43	10	15	5
St. Paul, Minn.	66	42	17	3	1	–
Wichita, Kans.	67	44	17	3	1	10

REPORTING AREA	ALL CAUSES, BY AGE (YEARS)					P&I** TOTAL
	ALL AGES	>65	45-64	25-44	<1	
S. ATLANTIC	1,270	738	339	97	47	36
Atlanta, Ga.	119	69	32	11	1	5
Baltimore, Md.	274	169	70	14	8	–
Charlotte, N.C.	76	37	20	10	4	2
Jacksonville, Fla.	131	64	38	15	8	3
Miami, Fla.	113	70	27	9	1	4
Norfolk, Va.	46	30	11	3	1	3
Richmond, Va.	91	55	27	6	1	7
Savannah, Ga.	30	16	9	4	1	–
St. Petersburg, Fla.	81	64	13	2	–	3
Tampa, Fla.	78	49	17	6	2	2
Washington, D.C.	180	90	62	14	11	4
Wilmington, Del.	51	25	13	3	9	3
E.S. CENTRAL	649	398	157	51	19	29
Birmingham, Ala.	84	46	24	9	1	1
Chattanooga, Tenn.	55	29	16	6	1	–
Knoxville, Tenn.	49	30	13	4	1	1
Louisville, Ky.	120	79	23	6	7	13
Memphis, Tenn.	160	103	38	15	1	5
Mobile, Ala.	49	31	8	6	3	4
Montgomery, Ala.	31	23	5	2	1	3
Nashville, Tenn.	101	57	30	3	4	2
W.S. CENTRAL	1,067	614	285	84	35	29
Austin, Tex.	62	37	12	8	–	5
Baton Rouge, La.	43	25	15	1	1	3
Corpus Christi, Tex.	37	20	13	2	1	–
Dallas, Tex.	162	96	42	12	4	1
El Paso, Tex.	52	29	10	7	2	3
Fort Worth, Tex.	88	54	20	6	6	2
Houston, Tex.	124	69	41	7	1	3
Little Rock, Ark.	53	22	21	5	3	5
New Orleans, La.	171	92	44	18	9	–
San Antonio, Tex.	143	83	31	14	6	3
Shreveport, La.	50	32	15	2	1	1
Tulsa, Okla.	82	55	21	2	1	3
MOUNTAIN	600	358	134	47	28	19
Albuquerque, N. Mex.	61	26	15	9	3	6
Colo. Springs, Colo.	27	18	6	2	1	1
Denver, Colo.	121	76	27	10	3	3
Las Vegas, Nev.	77	38	22	7	2	2
Ogden, Utah	21	15	4	–	1	1
Phoenix, Ariz.	141	91	23	11	11	–
Pueblo, Colo.	21	11	7	–	–	–
Salt Lake City, Utah	45	22	12	5	5	–
Tucson, Ariz.	86	61	18	3	2	
PACIFIC	1,697	1,048	378	129	69	45
Berkeley, Calif.	15	9	5	1	–	–
Fresno, Calif.	72	42	17	5	5	4
Glendale, Calif.	25	21	3	–	–	1
Honolulu, Hawaii	46	27	11	3	2	1
Long Beach, Calif.	80	57	17	3	–	1
Los Angeles, Calif.	491	279	108	52	21	14
Oakland, Calif.	61	40	15	1	5	1
Pasadena, Calif.	20	16	4	–	–	2
Portland, Oreg.	152	91	39	11	8	–
Sacramento, Calif.	52	32	10	6	2	1
San Diego, Calif.	153	98	32	7	10	1
San Francisco, Calif.	164	109	34	11	4	5
San Jose, Calif.	135	71	39	13	3	2
Seattle, Wash.	136	87	28	13	3	0
Spokane, Wash.	55	41	8	1	4	5
Tacoma, Wash.	40	28	8	2	2	1
TOTAL	11,463	6,975	2,774	839	443	380

*Mortality data in this table are voluntarily reported from 121 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 these 4 Pennsylvania cities, these numbers are partial counts for the current week. Complete counts will be available in 4 to 6 weeks.

Epidemiologic Notes and Reports

Staphylococcal Food Poisoning — Delaware

On March 10, 1979, 64 cases of acute gastrointestinal disease occurred among 107 guests at a wedding reception in Sussex County, Delaware.

Symptoms included vomiting (85%), nausea (74%), abdominal cramps (61%), and diarrhea (39%). Thirty-eight of those affected sought emergency room attention, although none were hospitalized. Incubation periods of the illness ranged from 1.6 to 6.5 hours, with a median of 3.5 hours.

Food histories, obtained from 103 of the guests, implicated chicken salad as the food associated with illness. The attack rate among those who ate chicken salad was 76% (62/82), while only 9% (2/21) of those not eating this salad became ill ($p<.001$). Coagulase-positive *Staphylococcus aureus* was subsequently isolated from the chicken salad and the food grinder used to prepare it. No skin lesions were evident on any of the 6 food handlers, but *S. aureus* was cultured from nasal swabs of 3. Phage typing, performed at CDC, demonstrated that the isolates from the chicken salad, the food grinder, and the nasal swab from the chicken salad preparer were all type 95.

The food was mostly prepared in private homes. The chicken for the salad was cooked and deboned on March 8 and refrigerated in a large, plastic washtub. The following day the chicken was ground in a meat grinder with celery and onions, mixed with mayonnaise, and then refrigerated in the same tub. On the day of the reception, the salad was not refrigerated during transport or before or during the reception—a total time period of approximately 7 hours. During serving, it was noted that the chicken salad from the central portion of the container felt warmer than that from the top, indicating uneven refrigeration.

Reported by E Connors, RN, J Tobin, MD, Naticoke Hospital; GE Bender, MD, H Chaski, P Johnson, M Shull, RN, R Tator, D Wasson, Sussex County Health Unit; B Kaza, PhD, ES Tierkel, VMD, State Epidemiologist, MP Verma, PhD, Delaware Dept of Health and Social Services; Bacteriology Div, Bur of Laboratories, Bacterial Diseases Div, Bur of Epidemiology, CDC.

Editorial Note: This classic staphylococcal outbreak underscores the need for continuing public education in proper food handling, particularly with regard to prompt and adequate refrigeration of prepared foods. Staphylococcal food poisoning has been recognized since 1914, when an outbreak in the Philippines, caused by inadequate refrigeration of milk from a cow with a chronic staphylococcal infection, was described (*1*). This type of food poisoning remains a major cause of outbreaks of acute gastrointestinal disease, constituting approximately 25% of all foodborne outbreaks of known etiology reported to CDC between 1972 and 1977.

The illness is caused by the presence of a heat-stable enterotoxin produced by only a few strains of *S. aureus,* often from phage group 3; phage typing alone, however, cannot determine whether a given strain will produce enterotoxin.

The vehicle of transmission in staphylococcal food poisoning is almost always a protein-containing food. Ham is the most common vehicle in the United States, where it is implicated in 28% of outbreaks. Contamination, as in this case, is usually assumed to be from food handlers; use of improper holding temperatures allows multiplication of the staphylococci and elaboration of the toxin. After ingestion, the incubation period may range from 30 minutes to 8 hours, with vomiting the predominant symptom. The illness produced may be quite severe, although short-lived; a few fatal cases have been reported (*2*).

Bacillus cereus may cause a similar clinical syndrome mediated by a heat-stable emetic toxin; the median incubation period is less than 6 hours, with illness characterized by vom-

Food Poisoning – Continued

iting and abdominal cramps (*3*). *B. cereus* is also capable of producing a heat-labile diarrheal toxin, which may mimic *Clostridium perfringens* (*4*).

References

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Current Trends

Surveillance of Childhood Lead Poisoning – United States

In the second quarter of fiscal year 1979, 64 programs reported the screening of 103,230 children; 5,802 of these required additional diagnostic tests for lead toxicity (Table 1). This represents a 17.8% increase over the number screened in the equivalent time period in fiscal year 1978. The number of children identified with lead toxicity increased 41.1%. Of these children, 29.8% were in screening risk classifications III and IV;* this is an increase from the 15.1% reported in the same time period of the last fiscal year. A total of 4,024 children were referred for care for iron deficiency.

During the second quarter 17,602 children were reported to be under pediatric management for lead toxicity. Of these, 18.3% (3,216) were determined to be at reduced risk when compared to the last time they were clinically evaluated; however, 3.2% (557) children who were re-evaluated had increased risk.

Reported by the Environmental Health Services Div, Bur of State Services, CDC.

*Screening Class II and Classes III & IV are defined in CDC Statement "Preventing Lead Poisoning in Young Children," April 1978.

TABLE 1. Results of screening in childhood lead poisoning control projects, United States, second quarter fiscal year 1979 (January 1–March 31, 1979)

Programs	Number of children						Number of dwellings related to children with lead toxicity		
	Screened	With lead toxicity*				Identified with iron deficiency	Inspected	Found with lead	Reduced
		Requiring pediatric management			Receiving pediatric management†				
		Total	Class II	Classes III & IV					
Bridgeport, Conn.	1,165	25	19	6	79	26	26	14	14
Waterbury, Conn.	272	18	13	5	162	46	28	20	10
Boston, Mass.	5,218	136	93	43	1,516	63	51	49	53
Chelsea, Mass.	502	33	33	0	35	24	16	16	6
Lawrence, Mass.	1,350	62	48	14	278	13	58	54	41
Lynn, Mass.	825	30	29	1	145	15	10	10	4
Worcester, Mass.	994	42	26	16	298	35	32	32	24
Rhode Island State	1,322	80	45	35	533	14	53	33	26
REGION I TOTAL	11,648	426	306	120	3,046	236	274	228	178
Cumulative FY 79	22,331	1,204	960	244	–	596	657	533	440
Atlantic City, N.J.	195	20	6	14	64	27	21	11	14
Camden, N.J.	386	41	37	4	381	97	65	40	25
East Orange, N.J.	383	101	59	42	54	40	7	7	3
Jersey City, N.J.	221	48	33	15	167	20	65	52	28
Newark, N.J.	748	175	121	54	844	125	108	88	61
Paterson, N.J.	1,030	81	55	26	580	214	93	67	51
Plainfield, N.J.	248	44	41	3	258	7	34	20	19
N.J. (other local programs)‡	776	80	58	22	NA	NA	NA	NA	NA
Erie Co., N.Y.	1,559	95	79	16	288	20	65	46	35
Monroe Co., N.Y.	1,749	173	157	16	418	160	85	80	41
New York City	21,906§	1,096§	810	286	875	1,360	176	108	103
Onondaga Co., N.Y.	1,276	76	60	16	472	27	101	60	5
Westchester Co., N.Y.	609	30	23	7	130	58	14	3	14
REGION II TOTAL	31,086	2,060	1,539	521	4,531	2,155	824	582	399
Cumulative FY 79	62,828	4,466	3,143	1,323	–	4,572	1,770	1,256	816

Lead Poisoning — Continued

TABLE 1. Results of screening in childhood lead poisoning control projects, United States, second quarter fiscal year 1979 (January 1—March 31, 1979) — Continued

Programs	Number of children						Number of dwellings related to children with lead toxicity		
	Screened	With lead toxicity*			Receiving pediatric management†	Identified with iron deficiency	Inspected	Found with lead	Reduced
		Requiring pediatric management							
		Total	Class II	Classes III & IV					
Delaware State	955	54	39	15	309	41	22	20	5
Washington, D.C.	3,240	85	64	21	225	210	122	24	17
Baltimore, Md.	4,348	112	68	44	279	67	107	88	56
Allentown-Bethlehem, Pa.	0	0	0	0	11	0	0	0	0
Chester, Pa.	719	12	3	9	310	5	14	14	7
Philadelphia, Pa.	4,755	757	560	197	1,295	0	199	194	146
Wilkes-Barre, Pa.	396	19	15	4	109	25	32	9	3
York, Pa.	414	11	10	1	51	33	15	13	13
Lynchburg, Va.	616	29	17	12	41	56	53	34	1
Norfolk, Va.	1,016	22	14	8	289	16	36	23	29
Portsmouth, Va.	619	23	16	7	130	18	24	14	10
Richmond, Va.	1,517	10	9	1	310	31	59	41	17
REGION III TOTAL	18,595	1,134	815	319	3,359	502	683	474	304
Cumulative FY 79	34,705	2,782	1,927	855	—	874	1,676	1,222	665
Augusta, Ga.	749	17	14	3	173	16	8	7	7
Louisville, Ky.	1,883	93	68	25	459	56	128	98	41
South Carolina State	478	46	43	3	347	5	25	19	11
Memphis, Tenn.	666	14	11	3	216	36	43	21	87
REGION IV TOTAL	3,776	170	136	34	1,195	113	204	145	146
Cumulative FY 79	8,605	459	373	86	—	211	468	354	339
Chicago, Ill.	10,212	555	387	168	NA	49	320	123	239
Illinois State	1,728	62	47	15	88	64	19	17	13
Rockford, Ill.	257	3	2	1	583	16	23	21	4
Fort Wayne, Ind.	376	10	5	5	18	0	10	9	4
Detroit, Mich.	2,870	128	75	53	391	9	95	49	163
Grand Rapids, Mich.	421	11	3	8	12	2	1	1	0
Wayne Co., Mich.	435	13	8	5	94	30	7	7	16
Akron, Ohio	1,036	42	37	5	194	110	38	19	19
Cincinnati, Ohio	1,992	64	55	9	948	136	137	21	15
Cleveland, Ohio	3,439	636	330	306	288	135	109	57	55
Kenosha, Wis.	35	1	0	1	7	2	8	8	5
Milwaukee, Wis.	354	26	13	13	231	3	85	62	36
Racine, Wis.	403	8	5	3	43	6	5	1	1
REGION V TOTAL	23,558	1,559	967	592	2,897	562	857	395	570
Cumulative FY 79	49,822	3,661	2,349	1,262	—	1,333	2,431	1,213	1,229
Arkansas State	1,984	34	23	11	198	26	58	52	18
New Orleans, La.	2,764	121	90	31	1,347	94	34	31	19
Houston, Texas	2,062	20	12	8	654	87	107	45	46
REGION VI TOTAL	6,810	175	125	50	2,199	207	199	128	83
Cumulative FY 79	12,594	486	338	148	—	421	378	273	134
Cedar Rapids-Linn Co., Iowa	142	6	4	2	16	6	8	8	1
Davenport-Scott Co., Iowa	369	7	7	0	106	10	27	24	16
Kansas City, Kans.	1,852	7	5	2	29	0	10	6	2
St. Louis, Mo.	2,863	208	141	67	NA	148	477	313	198
Springfield, Mo.‡	3	1	1	0	2	NA	2	2	2
Omaha-Douglas Co., Neb.	588	4	3	1	96	9	16	5	2
REGION VII TOTAL	5,817	233	161	72	249	173	540	358	221
Cumulative FY 79	12,580	762	452	310	—	236	1,263	813	675
Alameda Co., Calif.	749	31	18	13	51	16	8	7	3
Los Angeles, Calif.	1,191	14	7	7	79	60	37	36	39
REGION IX TOTAL	1,940	45	25	20	130	76	45	43	42
Cumulative FY 79	3,405	141	91	50	—	221	94	87	77
U.S. TOTAL	103,230	5,802	4,074	1,728	17,606	4,024	3,626	2,353	1,943
Cumulative FY 79	206,870	13,911	9,633	4,278	—	8,464	8,737	5,751	4,375

*Screening Class II and Classes III & IV are defined in CDC Statement "Preventing Lead Poisoning in Young Children," April 1978.
†Not cumulative.
‡These reporting programs are not receiving Lead Poisoning Prevention grant support.
§Estimated.
NA=Not available.

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